



EMPLOYEE BENEFIT GUIDE





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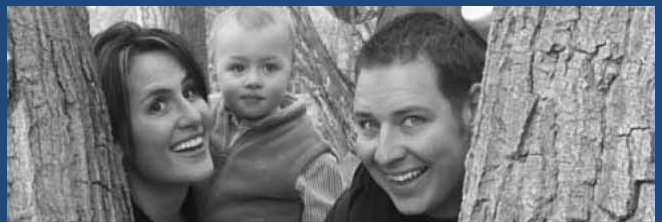
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Welcome



Welcome to the Community Clinic, Inc. Employee Benefit Program.

We are pleased to present to you this pamphlet which highlights the comprehensive coverage available to you as an employee of Community Clinic, Inc.

We have prepared this pamphlet to help you understand all the benefit plans offered to you from Community Clinic, Inc. Our benefits program is designed to offer employees substantial coverage to meet both individual and family needs. Please take the time to review the information in this pamphlet so that you are fully informed of the benefits offered to you. More detailed information is available from Jamilia Williams, Director of Human Resources at : (240) 499-2626 or Crystal Evans, Human Resources Assitant at (240) 499-2634.

This pamphlet also contains information on how to enroll in each benefit plan, and how and when you may change your benefit elections. Please refer to page 2 of this pamphlet and your enrollment instructions for details.

This summary contains highlights only. The specific terms of coverage, exclusions and limitations are contained in the Plan Documents and insurance certificates. All coverage's and the costs for such coverage for all participants are subject to change at any time in the future. If you have any questions about a specific service or treatment, please contact the appropriate insurer or the Human Resources Department.

Eligibility and Enrollment

Who is Eligible

All full-time employees who work at least 20 hours per week, and their eligible dependents as described below, are eligible for the benefits outlined in this pamphlet.

When Coverage Begins for New Employees

If you are a regular full-time and part-time employee of Community Clinic, Inc. scheduled to work at least 20 hours per week, your coverage begins on the first day of the month following date of hire; provided you have completed the enrollment process within 30 days after you begin work. After your initial enrollment, you will have the opportunity to re-enroll in the Benefits Program each year during the Annual Open Enrollment period.

When Coverage Ends

If your employment with Community Clinic, Inc. ends, your coverage will end on the last day of the month you are terminated. Depending upon the circumstances of your termination, you may be able to continue coverage under COBRA for up to 18 months.

Other circumstances which may result in termination of your coverage include:

- Reduction in your regular hours
- Divorce
- Legal separation
- Dependent children who:
 - Reach age 19 and are not full-time students
 - Marry.

Eligible Dependents

Your eligible dependents include:

- Your spouse (unless you are legally separated);
- Your domestic partner; and
- Your unmarried dependent children who are:
 - 25 years of age or under; or
 - full-time students up to age 25.

How to Enroll

Your Initial Enrollment

Enrolling for benefits is easy. Just follow these simple steps:

- Read this pamphlet and the instructions on your enrollment form(s). These contain important information about your benefit options.
- Complete the enrollment form(s) by making your benefit elections and signing the form; and
- Send the enrollment form(s) to Jamilia Williams at (240) 499-2602 (fax) by the enrollment deadline.



What Happens if you Don't Enroll

For Active Employees

If you are an active employee and don't enroll for benefits during the Annual Open Enrollment period, your current benefit elections will automatically carry over to the next plan year. This feature is designed to make the enrollment process as easy as possible for employees who want to keep current coverage for another year.

For New Hires and Newly Eligible Employees

If you are a new hire or become eligible for benefits, and do not enroll when you are first eligible, you must wait until the next Annual Open Enrollment period to enroll for the coverage you want and need.

Changing Benefit Elections/Open Enrollment

During the annual open enrollment period, you can change coverage's for the next plan year. After the annual enrollment period, you generally will only be able to change your coverage if you have a qualifying event. Qualifying events include, but are not limited to:

- change in marital status (marriage, death of spouse, divorce, legal separation);
- change in number of dependents (birth, death, adoption, eligibility status, child support order);
- change in employment status for you or your spouse (commencement, termination, leave of absence, full-time to part-time or vice versa);
- special enrollment rights under HIPAA; or
- you, your spouse or child gains or loses Medicare or Medicaid coverage.

Generally, changes in your coverage elections must be made within 30 days of the qualifying event. You are responsible for notifying Jamilia Williams of any qualifying event and for requesting information on changing your elections.

For further information on eligible qualifying events, please contact Jamilia Williams, Director of Human Resources at : (240) 499-2626 or Crystal Evans, Human Resources Assitant at (240) 499-2634

Medical Coverage

Having access to high quality, affordable health care is a great concern for most people. That's why Community Clinic, Inc. is pleased to offer all regular full-time and part-time eligible employees and their families a selection of two (2) medical plans to choose from through Carefirst BlueCross BlueShield.

How the Plans Work

Both **HMO** plans provides coverage for in-network providers only.

The traditional **HMO** has no annual deductible, with a copayment of \$30 for your Primary Care Physician and \$40 for a Specialist.

The **HMO Open Access** enables members to go see a specialist without needing a referral from their Primary Care Physician. There is no annual deductible, with a copayment of \$10 for your Primary Care Physician and \$20 for a Specialist.

Please note: If a preferred provider refers you for covered services to another provider (such as a lab or specialist), make sure the provider you are referred to is also a participating provider. If the provider you use is not a preferred provider, your out-of-pocket costs will not be covered, even if you are referred by a preferred provider.

Medical Plan Features

- All plans provide a wide range of health care services.
- The HMO Open Access does not require referrals.
- These plans provide coverage only for providers within the network; please visit www.carefirst.com to find an in-network provider.

Learning as much as possible about the plan can help you to make more informed choices regarding your needs and those of your covered dependents. Review the Medical Plan Highlights on the following pages.

Care Coordination Notification Requirements

Carefirst requires advance notice for certain services in order to receive full coverage. This means that you must contact Carefirst by calling the telephone number indicated on your ID card before you receive these services. You and your healthcare provider will then be advised of whether these services are approved under the plan. Failure to comply will result in a reduction in benefits.



Prescription Drugs

When you enroll in any of the medical plans, you automatically receive prescription drug coverage. Coverage is provided through Carefirst for retail prescriptions and Walgreens Mail Service for mail order. Depending on the plans you choose, the deductible There is no annual deductible; at a retail pharmacy you pay \$15 for generic drugs, \$35 for preferred brands, and \$60 for non-preferred brands.

If you have your prescription filled at a participating retail pharmacy, you may purchase up to a 30-day supply of covered drugs. At the participating pharmacy, you will need to present your ID card and make the required copayment. You may obtain information on participating pharmacies by calling 800-241-3371 or visiting www.carefirst.com.

The plan also includes a home delivery order service through Walgreens Mail Service. If you are taking a medication for an extended period of time, you can purchase up to a 90-day supply of covered drugs through Walgreens home delivery service. By using the home delivery program, you are able to get a 90-day, rather than a 30-day, supply. To use the home delivery program ask your doctor to give you a new prescription for up to a 90-day supply of your regular medication, plus refills, if appropriate.

Call Walgreens Mail Service, at 800-745-6285 to obtain the required forms for home delivery service. You will receive forms for refills and future prescription orders each time you receive a prescription from the home delivery service.

How to File a Claim for Benefits

If you don't use a network provider, you will need to complete a CareFirst claim form to be reimbursed for medical expenses. Claim forms are available on the CareFirst website at www.carefirst.com. See the "My Account" section on how to set up your account. Completed claim forms should be mailed to:

**CAREFIRST BLUECROSS BLUESHIELD
MAIL ADMINISTRATOR
P.O. Box 14116
Lexington, KY 40512-4115**

CAREFIRST.COM

Once you are enrolled in a Carefirst plan, you will have access to their secure website. With Carefirst's My Account online system, you can access the following information:

- Find network providers,
- Order and print ID cards,
- Compare hospitals and physicians,
- Check eligibility information and claim status,
- Review your recent claims and claim status,
- Use the drug pricing comparison tool,
- Review health and wellness topics.

To register, follow the instructions below:

- Go to www.carefirst.com
- Click on the MYACCOUNT button under the Member & Visitors section
- Select the Register Now option under first time user
- Enter your personal information, including your ID # (Social Security number), Group number BUT3, your first and last name and date of birth
- Create your username and password
- Once you are registered, everything is at your fingertips through www.carefirst.com.

HMO Option 13 Medical Plan Rates	Employee Per Month Contributions
Employee Only	\$41.38
Employee/Spouse	\$221.34
Employee/Child(ren)	\$168.41
Family	\$295.92
HMO OA Option 4 Medical Plan Rates	Employee Per Month Contributions
Employee Only	\$60.26
Employee/Spouse	\$258.41
Employee/Child(ren)	\$200.73
Family	\$346.27

Dental and Vision Coverage

Dental Coverage

Too often people forget about dental care. It's unfortunate, because having healthy teeth is an important part of your overall well-being.

To provide all employees and their families with the most suitable coverage, Community Clinic, Inc. offers two dental plans through Carefirst BlueCross BlueShield.

The plan includes exams, x-rays, cleanings, and fillings. It also includes coverage for major services including crowns and bridges. The plan allows you to see the dentist or specialist of your choice, but you will receive the greatest benefit when you use Carefirst providers who have agreed to accept a negotiated rate as payment. In general, it is not necessary to file claims forms when visiting an in-network provider. The provider will handle all of your paperwork. For more information refer to the plan summary on the next page. To locate a provider visit www.carefirst.com.

Dental Rates DHMO	Employee Per Month Contributions
Employee Only	\$12.95
Employee/Spouse	\$29.75
Employee/Child(ren)	\$23.94
Family	\$36.23

Vision Coverage

Your eyesight is an integral part of your overall health and a key component to safety. Good vision care is essential. Your vision benefits are provided through VSP Vision.

As part of your medical coverage CareFirst BlueCross BlueShield (BCBS) offers a discount vision plan, Plue Vision administered through Davis Vision which offers its vision program through a national network including both private practice and retail chain providers.

VSP makes obtaining vision care quick and easy, giving you immediate access to benefits without any paperwork hassle

To find a provider, call VSP, 24 hours a day, 7 days a week at: 800-877-7195 or visit the website at www.vsp.com

Vision Rates	Employee Per Month Contributions
Employee Only	\$1.58
Employee/Spouse	\$3.64
Employee/Child(ren)	\$2.93
Family	\$4.43

Disability Plans



An illness or injury that keeps you out of work for a long period of time can be financially devastating for you and your family. Our short and long term disability plans are designed to help protect your financial security by providing replacement income if you are ever disabled due to a non-work related injury or illness, including pregnancy.

When you are disabled, your medical insurance generally covers most of your medical expenses, such as doctor visits, physical therapy and prescription drugs. Disability benefits can help you cover your day-to-day living expenses.

Long Term Disability Insurance

Community Clinic, Inc. provides a monthly benefit through UNUM at 60% up to a maximum of \$6,000 for non-exempt employees; and up to \$7,500 for exempt employees during periods of total disability due to injury or illness which extends beyond ninety (90) consecutive days long-term coverage to employees after 30 days of employment. ***Regular full-time and part-time employees that work a minimum of 20 hours per week are eligible. Coverage for this benefit is effective the first of the month, following the successful completion of your 90-day probationary period.***

Short Term Disability Insurance

Community Clinic, Inc. provides a monthly income benefit through UNUM that will replace a percentage of your income if you are disabled for a short period of time because of an injury or sickness. This coverage provides 60% of your weekly earnings to a maximum weekly benefit of \$1,500 after zero (0) days if your disability is due to injury or 7 days if due to a sickness for up to 13 weeks. ***Regular full-time and part-time employees that work a minimum of 20 hours per week are eligible. Coverage for this benefit is effective the first of the month, following the successful completion of your 90-day probationary period.***

COBRA Coverage

Under COBRA, you and your covered dependents may be able to continue your medical and dental coverage if you lose your health care coverage as the result of certain qualifying events for up to 18 months. Contact Jamilia Williams or Crystal Evans for more information.

HIPAA Regulations Help to Protect Your Privacy

The privacy provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) help to ensure that your health care-related information stays private. New employees will receive a Privacy Practice Notice which outlines the ways in which the medical plan may use and disclose protected health information (PHI). The notice also describes your rights. For more information, contact Jamilia Williams or Crystal Evans for more information.

[For more information contact](#)



Life & AD&D Insurance

Basic Life Insurance

Community Clinic, Inc. provides life insurance coverage for all regular full-time and part-time eligible employees' with a Life insurance benefit equal to (1) times your annual salary up to \$150,000 through UNUM.

Coverage for this benefit is effective the first of the month following the successful completion of your 90-day probationary period.

Age Reductions

In the event of your death, the Life and Accidental Death & Dismemberment (AD&D) plans pay benefits to your beneficiary. Life and AD&D coverage amounts are reduced to 67% at age 65, and 50% at age 75.

Basic Accidental Death and Dismemberment (AD&D) Insurance

To provide you and your family with additional financial protection, Community Clinic, Inc. offers an Accidental Death and Dismemberment (AD&D) Insurance at no cost to you. Basic AD&D Insurance provides a benefit to your beneficiary if you die because 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.

The AD&D insurance would pay an additional benefit, up to the amount of your Life benefit, if you suffer a covered loss due to an accident.

**For more information contact
UNUM at: 866-679-3054**

Work / Life Balance

Paid Time Off (PTO)

Vacation Time

All employees begin accruing annual leave as of their first day of employment. If you start in the middle of the week, your accrual is prorated. Employees must complete six months of continuous employment before becoming eligible to use Annual Leave. **Annual leave accrual rates vary depending on what “Class” you fall under as an employee (i.e., Sr. Staff, Physician, NP, etc.). Part-time Employees rates are prorated based on the number of hours worked per week ratio.**

Employees may carry over a total of 240 hours of annual leave.

Sick Time

All employees begin accruing sick leave from the first day of employment. If you start in the middle of the week, your accrual is prorated. Employees are eligible to use sick leave following the successful completion of their 90-day introductory (probationary) period. **Sick leave accrual rates vary depending on what “Class” you fall under as an employee (i.e., Sr. Staff, Physician, NP, etc.). Part-time Employees rates are prorated based on the number of hours worked per week ratio.**

An employee may carry over 120 hours of sick leave.

Personal Leave

As an added benefit, CCI has developed a Sick Leave Incentive Program. The way this program works, is four (4) hours of Personal Leave is credited for every Quarter that Sick Leave isn't used.

All full-time and part-time benefits eligible employees qualify, after having successfully completed six (6) months of employment with the Organization.

Employee Assistance Program (EAP) Thru UNUM:

When you have questions, concerns or emotional issues surrounding either your personal or work life, there are resources that can help you. Through your employer's work-life balance employee assistance program, you have unlimited access to consultants by telephone, resources and tools online and up to three face-to-face visits with counselors for help with a short-term problem.

You have unlimited website access to more information at www.lifebalance.net.

Additional Information

403(b) Tax Deferred Annuity Plan

Principal Financial Group (The Principle) is committed to providing you with the tools necessary to help you make confident decisions that you'll feel good about now, and in retirement. Currently there is not a company match; however, you may begin making salary deferral contributions immediately.

Contact Information

CARRIER/PLAN	PHONE	WEBSITE/EMAIL
Carefirst BCBS © Customer Service Medical © Customer Service Dental © Customer Service Vision © Argus Pharmacy	800-321-3497 866-891-2802 800-783-5602 800-241-3371	www.carefirst.com www.carefirst.com www.carefirst.com www.carefirst.com
UNUM © Customer Service	800-800-1212	www.unum.com
Principal © Customer Service	703-287-1547	www.principal.com
Broker © Golden & Cohen	301-330-5300	www.golden-cohen.com

Appendix