

TeamSnap Total Rewards



Employee Health Benefits

Provided by ADP Totalsource



Benefits offered by TeamSnap through ADP Totalsource are part of your comprehensive total rewards package. We encourage you to evaluate & elect benefits that best suite you & your eligible dependents needs.



Eligibility



Eligibility

Full time employees scheduled to work at least a minimum of 30 hours per week are eligible for benefits on the first of the month following their date of hire.

Eligible dependents for medical, dental and vision coverage are available for:

- Your legal spouse, civil union partner, domestic partner, or common law spouse (if not legally separated)
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, a foster child, a child of your covered domestic partner, or a child for whom you are the legal guardian)
- Your dependent children of any age who are physically or mentally unable to care for themselves



Enrollment

Plan Effective Year
June 1st, 2021-May 31st, 2022



Enrollment

You can sign up for benefits or change your benefit elections within 30 days of your initial eligibility date (the first of the month following your date of hire), during the annual benefits open enrollment period held in April, or within 30 days of experiencing a qualifying life event.

Qualifying life events include but are not limited to:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Death of your spouse or covered child
- Changes in your child or spouse's eligibility for benefits

If you decide to waive medical benefits TeamSnap will offer a \$400/month allowance. This will be paid out \$200 a paycheck and will ONLY apply if you have waived all medical benefits. Once you waive your benefits please complete [this form](#) to receive paperwork that will set you up for the paycheck allowance.

- You can still enroll in dental and vision and receive the \$400/month allowance.



Qualifying Life Change Events

Here are some helpful tips to guide you through processing your Qualifying Life Events (QLEs) online! Updating your QLEs will help you get the right benefits for your health care needs.

To add a QLE online:

1. Log in to [ADP TotalSource®](#).
2. Find the **Support Tile** on the home page.
3. Click **Report a Life Change** and begin submitting your life event!

What to expect:

- Our online tool will tell you which documents to submit for each life event.
- You'll need to review the legal disclosure and agree to the authorization before completing your submission.
- Once you've completed the submission, you'll be given a confirmation number for future reference.

Things you'll need:

- The date your Life Event took place
- Specific benefits changes you're requesting
- Documentation for proof of the Life Event*
- If applicable, dependent's personal information (ex. Social Security Number or Date of Birth)

**All changes and supporting documentation must be completed within 60 days of the event, or you will have to wait until the next benefits Open Enrollment period to make benefits elections. For further details on Qualifying Life Events, please reference the Summary Plan Description located on the landing page of the QLE online tool.*



Deadlines & Effective Dates

ADP TotalSource Benefits Plan Year		June 1 – May 31
Open Enrollment		Every year in the spring for a June 1 effective date
FSA election period		During Open Enrollment

Calendar Year expenses	
Deductible and Out-of-Pocket Maximums	Jan. 1 – Dec. 31



Medical Insurance Plans



Medical

TeamSnap offers medical insurance plan options through ADP Totalsource accessing the UnitedHealthcare (UHC) network. Locate an UHC network provider [HERE](#).

The following tables summarize the key features of the medical plans offered. Please refer to the official plan documents for additional information on coverage and exclusions.

Crash course on benefits



Deductible

The fixed amount you must pay annually for health care expenses before insurance begins to pay out.



Co-insurance

The portion of health care costs that you will share with the insurance company. For example: the member's co-insurance is 20%, and the insurer's co-insurance is 80%. For most services, the deductible must be paid before co-insurance applies.



Co-payment

Also called "co-pay." The set amount you'll pay when receiving a medical service or a prescribed medication.



Out-of-pocket maximum (OOPM)

The maximum amount/risk you would be responsible for paying in health care expenses annually. OOPM includes deductible + the member's portion of co-insurance and co-pay.

REMINDER: If you decide to waive medical benefits TeamSnap will offer a \$400/month allowance. This will be paid out \$200 a paycheck and will ONLY apply if you have waived all medical benefits. Once you waive your benefits please complete [this form](#) to receive paperwork that will set you up for the paycheck allowance.

- You can still enroll in dental and vision and receive the \$400/month allowance.



Medical Plan 1 : Choice Plus BTUT-1000-80 [\(Link to Full Summary\)](#)

	Current plan	New plan
Plan	UHC-CPUHPD-BTWL-1000-80-CO-FL	UHC-CP-BTUT-1000-80-CO-FL
Deductible (Individual/Family)	\$1,000/\$2,000	\$1,000/\$3,000
Calendar Year Out-of-Pocket Max (Individual/Family)	\$9,500/\$9,000	\$3,500/\$7,000
Primary Care Visit / virtual visit	\$25 Copay / No charge	\$25 Copay / No Charge - Designated Virtual Network
Specialty Visit	\$75/\$50	\$50 Copay
Emergency room / urgent care	\$250 Copay / \$100 Copay	\$250 Copay / \$75 Copay
Hospitalization Inpatient/Outpatient	\$500 Ded+20%/\$250+Ded+20%	Ded then 20%/Ded then 20%
Prescription Co-Pays	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$200/Not applicable	\$10/Sp \$10/\$35/Sp \$100/\$60/Sp \$200/Not Applicable
Diagnostics/Scans/Labs	L&X-\$0;l-20%ad	L&X-\$0;l-20%ad

Plan	Coverage level	Cost
UHC-CP-BTUT-1000-80-CO-FL	Employee	\$112.43
	Employee + spouse	\$238.68
	Employee + children	\$222.50
	Employee + family	\$345.85

Cost = Total per month



Medical Plan 2 : **Navigate EPO BTWF-1500-90** [\(Link to Full Summary\)](#)

	Current plan	New plan
Plan	UHCNAVEPO-BTWF-1500-90-CO-FL	UHCNAVEPO-BTWF-1500-90-CO-FL
Deductible (Individual/Family)	\$1,500/\$3,000	\$1,500/\$3,000
Calendar Year Out-of-Pocket Max (Individual/Family)	\$4,000/\$8,000	\$4,000/\$8,000
Primary Care Visit / virtual visit	\$25 Copay / No Charge	\$25 Copay / No Charge - Designated Virtual Network
Specialty Visit	\$50 Copay	\$50 Copay
Emergency room / urgent care	\$350 Copay / \$75 Copay	\$350 Copay / \$75 Copay
Hospitalization Inpatient/Outpatient	\$500+Ded+10%/\$500+Ded+10%	\$500+Ded+10%/\$500+Ded+10%
Prescription Co-Pays	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not applicable	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not Applicable
Diagnostics/Scans/Labs	Vary by serv/fac	Vary by serv/fac

****States not eligible for this Navigate EPO Plan are AK, AL, AR, AZ, HI, MN, MS, NC, NM and OK.**

Plan	Coverage level	Cost
UHCNAVEPO-BTWF-1500-90-CO-FL	Employee	\$0.00
	Employee + spouse	\$0.00
	Employee + children	\$0.00
	Employee + family	\$0.00

Cost = Total per month



Medical Plan 3 : Choice Plus BTUU-1500-80 [\(Link to Full Summary\)](#)

	Current plan	New plan
Plan	UHCPCUHPD-BTWM-1500-90-CO-FL	UHC-CP-BTUU-1500-80-CO-FL
Deductible (Individual/Family)	\$1,500/\$3,000	\$1,500/\$4,500
Calendar Year Out-of-Pocket Max (Individual/Family)	\$4,500/\$9,000	\$4,500/\$9,000
Primary Care Visit / virtual visit	\$30 Copay / \$10 Copay per visit	\$25 Copay / No Charge - Designated Virtual Network
Specialty Visit	\$30/\$50	\$50 Copay
Emergency room / urgent care	\$250 Copay / \$75 Copay	\$250 Copay / \$75 Copay
Hospitalization Inpatient/Outpatient	\$500 Ded+10%/\$250+Ded+10%	Ded then 20%/Ded then 20%
Prescription Co-Pays	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not applicable	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not Applicable
Diagnostics/Scans/Labs	L&X-\$0;l-10%ad	L&X-\$0;l-20%ad

Plan	Coverage level	Cost
UHC-CP-BTUU-1500-80-CO-FL	Employee	\$48.87
	Employee + spouse	\$104.59
	Employee + children	\$97.49
	Employee + family	\$151.49

Cost = Total per month



Medical Plan 4 : Choice Plus BTUV-2000-80 [\(Link to Full Summary\)](#)

	Current plan	New plan
Plan	UHC-CPUHPD-BTWP-2000-80-CO-FL	UHC-CP-BTUV-2000-80-CO-FL
Deductible (Individual/Family)	\$2,000/\$4,000	\$2,000/\$6,000
Calendar Year Out-of-Pocket Max (Individual/Family)	\$5,000/\$12,000	\$4,000/\$8,000
Primary Care Visit / virtual visit	\$40 Copay / \$0 copay per visit	\$25 Copay / No Charge - Designated Virtual Network
Specialty Visit	\$40/\$0	\$50 Copay
Emergency room / urgent care	\$250 Copay / \$100 Copay	\$250 Copay / \$75 Copay
Hospitalization Inpatient/Outpatient	\$500+Ded+20%/ \$250+Ded+20%	Ded then 20%/Ded then 20%
Prescription Co-Pays	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not applicable	\$15/Sp \$15/\$45/Sp \$125/\$65/Sp \$250/Not Applicable
Diagnostics/Scans/Labs	L&X-\$0;l-20%ad	L&X-\$0;l-20%ad

Plan	Coverage level	Cost
UHC-CP-BTUV-2000-80-CO-FL	Employee	\$0.00
	Employee + spouse	\$0.00
	Employee + children	\$0.00
	Employee + family	\$0.00

Cost = Total per month



Medical Plan 5 : Choice Plus BTVD-2800 HSA [\(Link to Full Summary\)](#)

	Current plan	New plan
Plan	UHCCPHSA-BTVD-2800-Cpy-CO-FL	UHCCPHSA-BTVD-2800-Cpy-CO-FL
Deductible (Individual/Family)	\$2,800/\$5,600	\$2,800/\$5,600
Calendar Year Out-of-Pocket Max (Individual/Family)	\$6,000/\$12,000	\$6,000/\$12,000
Primary Care Visit / virtual visit	Ded then \$30 / Deductible then \$10 copay per visit	Ded then \$30 / Deductible then \$10 copay per visit - Designated Virtual Network
Specialty Visit	Ded then \$60	Ded then \$60
Emergency room / urgent care	Ded then \$350 / Ded then \$75	Ded then \$350 / Ded then \$75
Hospitalization Inpatient/Outpatient	Ded then \$500/Ded then \$300	Ded then \$500/Ded then \$300
Prescription Co-Pays	Ded+\$10/Sp\$10/Ded+\$35/Sp\$100/Ded+\$60 /Sp\$200/Not applicable	Ded+\$10/Sp\$10/Ded+\$35/Sp\$100/Ded+\$60 /Sp\$200/Not Applicable
Diagnostics/Scans/Labs	L&XDED;l-\$300ad	L&XDED;l-\$300ad
Company HSA contribution	\$1,000.00/\$1,500.00	\$1,000.00/\$1,500.00

Plan	Coverage level	Cost
UHCCPHSA-BTVD-2800-Cpy-CO-FL	Employee	\$0.00
	Employee + spouse	\$0.00
	Employee + children	\$0.00
	Employee + family	\$0.00

Cost = Total per month



Medical Plans with HSA ****Choice Plus BTVD-2800**

- An HSA gives you the choice to use tax-free money for eligible medical expenses OR save your triple-tax-advantaged funds for later.
- Maximum HSA contributions for 2021:
 - \$3,600 individual
 - \$7,200 family
 - Additional \$1,000 "catch up" contribution each year for employees age 55 and older
- You'll pay a maintenance fee of \$1 per month.
- You must have a High Deductible Health Plan (HDHP) to be eligible.
- You must enroll in an HSA separately. You will forfeit any contribution your employer made prior to you opening your HSA.
- Your employer is contributing:
\$1,000 for Employee only & \$1,500 all other tiers annually



Dental Insurance Plan



Dental [\(Link to Full Summary\)](#)

TeamSnap offers one dental insurance plan options through Aetna Dental. The plans offers in and out of network benefits providing you the freedom to choose any provider. Locate a Aetna Dental provider [HERE](#).

	Current plan	New plan
Plan	AET-APPO DEN 5,000-Area 3A	AET-APPO DEN 5,000-Area 3A
Deductible Individual/Family	\$50 /\$150	\$50 /\$150
Annual Benefit Max	\$5,000	\$5,000
Preventative Services	100% (deductible waived)	100% (deductible waived)
Basic Services	90% after deductible	90% after deductible
Major Services	60% after deductible	60% after deductible
Orthodontic Services (Adults and Children)	50% \$2,000 lifetime max	50% \$2,000 lifetime max

Plan	Coverage level	Cost
AET-APPO DEN 5,000-Area 3A	Employee	\$0.00
	Employee + spouse	\$0.00
	Employee + children	\$0.00
	Employee + family	\$0.00



Aetna Dental Contact



Visit aetna.com to access **DocFind®** — the **Network Provider Lookup tool**.

It's important to choose the correct plan when finding your provider's information on DocFind.

DMO members: *Dental Maintenance Organization (DMO)*

PPO members: *Dental PPO/PDN with PPO II Network*



Vision Insurance Plan



Vision [\(Link to Full Summary\)](#)

TeamSnap offers a vision insurance plan through ADP Totalsource utilizing the VSP network. You have the freedom to choose any vision provider. Locate a VSP network provider [HERE](#).

VSP Choice Plan		
Benefit	Co-pay	Frequency
In-network		
Well vision examination	\$10	Once every 12 months within Plan Year
Prescription glasses	\$15	Once every 12 months within Plan Year
Single vision, lined bifocal and lined trifocal	None	Once every 12 months within Plan Year
Retail allowance for frames		\$180 allowance per Plan Year – 20% off amount over your allowance
Contact lenses (instead of glasses)		\$150 allowance per Plan Year – 15% off exams
LASIK		\$150 allowance per Plan Year – 15% off regular price 5% off for promotional price (VSP contracted facility only)
Out-of-network		
All services	N/A	Services are reimbursed up to a maximum amount, depending on service

Plan	Coverage level	Cost
VSP - Vision	Employee	\$0.00
	Employee + spouse	\$0.00
	Employee + children	\$0.00
	Employee + family	\$0.00



VSP Vision Care Contact



Member services: **800-877-7195**

Participating providers can be found at **vsp.com** (VSP Choice Network).



Save on exams, eyeglasses or contact lenses and laser eye surgery.



Benefits vary depending on whether services are provided in- or out-of-network.



No ID cards required.



Health Care Wealth Benefit Options



Flexible Spending Account (FSA)

- The current annual contribution limit is \$2,750.
- FSA funds can be used for eligible medical, dental and vision expenses.
- Up to \$550 may be carried over into the coming Plan Year if you finish the current Plan Year with an active FSA.
- If you participate in an HDHP, you will only be able to elect a Limited Plan FSA.
- The Limited Plan FSA will only cover basic dental and vision expenses, so consider contributing less.
- The HDHP is meant to be paired with an HSA. The HSA will cover all qualified medical expenses, and the surplus of dental and vision expenses — so consider contributing more.



Dependent Care FSA

- Use for non-medical dependent expenses
 - Examples: after-school programs, preschools, elderly home care
 - Eligible dependents are children under 13 or elderly family members who live at home.
- Contribute \$50 to \$5,000 for Dependent Care FSAs
 - \$50 to \$2,500 if married and filing separately
 - \$50 to \$2,000 if a Highly Compensated Employee (HCE)
- Use it or lose it! Deadlines for the FSA plan are:
 - May 31, 2022 for incurring claims
 - July 30, 2022 for requesting reimbursement



Online Commuter Benefits (OCB) with Optum

Here's how it works:

Step 1: Head to ADP TotalSource and elect your OCB, which will be funded by your benefits payroll deductions. If you need to make any further changes to your OCB elections, MyLife Advisors will assist you.

Step 2: Purchase a SmartCard with your personal debit/credit card.

Step 3: Get reimbursement from Optum. You can either submit the reimbursement form to optumclaims@prod.sourcehov.com OR choose direct deposit reimbursements at www.optumhealthfinancial.com.



Transit

Up to \$270/month

Pay for eligible bus, train, carpool or vanpool expenses with pre-tax funds.



Parking

Up to \$270/month

Pay for eligible parking expenses with pre-tax funds.



All-in-one Optum Bank Mastercard

Ready. Set. Simplify.

Optum Bank is making it easy to consolidate your accounts and use just one card. If you're enrolled in multiple programs through ADP TotalSource, then your card automatically debits from the right account, depending on what you buy.

Use your debit Mastercard for any of the following:

- Health Care/Limited Purpose FSA
- Dependent Care FSA, if the vendor can accept payment cards
- HSA
- Transportation
- Parking

About your ADP payment card:

- You'll receive two cards.
- You can authorize others to use your card.
- You may request additional cards under your name only.



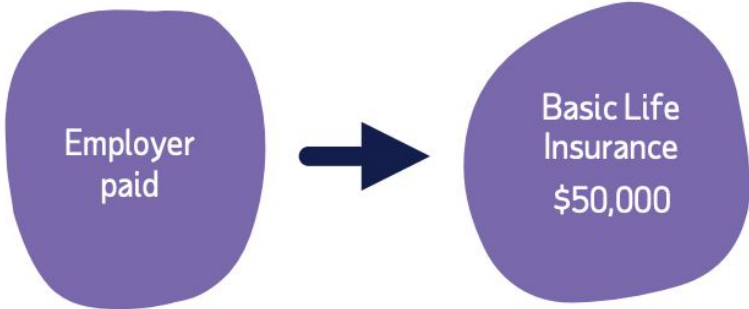
Life & Disability Plan Options



Life, Accidental Death & Personal Loss, and Disability

Life & Disability insurance is an important element of your income protection planning, especially for those who depend on you for financial security. For your peace of mind TeamSnap provides the following through ADP Totalsource for all benefit-eligible employees at no cost.

Basic \$50,000



Offered to all Full-time eligible employees



Long-Term Disability (LTD)

LTD1 60% \$10,000/mo-90

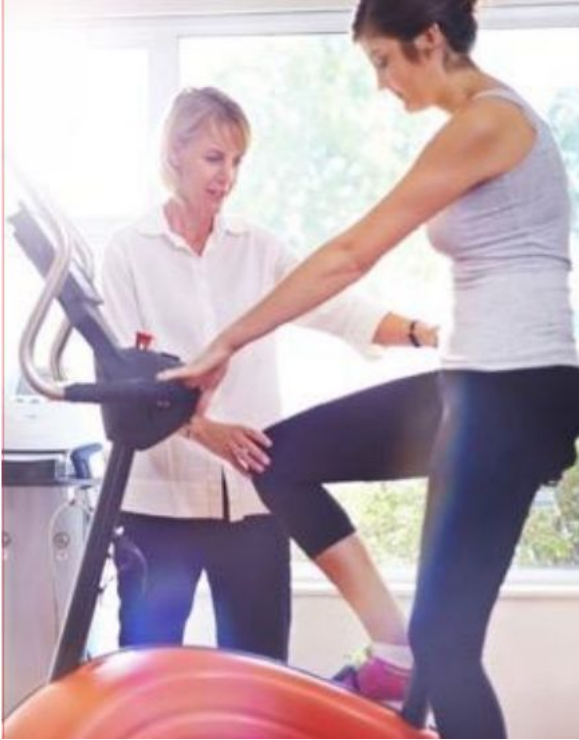


Offered to all Full-time eligible employees



Short-Term Disability (STD)

STD1 60% \$2,500/wk (14/14-13)



Voluntary Benefits + Discounts



Voluntary Benefit Options



Accident insurance

If you're in an accident, medical insurance may not cover all necessary tests and services. Fortunately, the MetLife Group Accident Plan picks up where medical insurance leaves off.



Accidental Death & Dismemberment (AD&D)

Pays benefits to you and your family if you die or become dismembered or blinded due to a covered accident.



Hospital indemnity insurance

Charges mount up when you're in the hospital. The Hospital Indemnity Plan pays you a lump sum every day you are confined. You can use the money for any reason.



Critical illness insurance

Health insurance can leave you with out-of-pocket expenses. A payment from the MetLife Critical Illness Plan can help cover many of those costs.



Term life insurance

Life insurance provides death benefits as well as additional support, planning and protection services.



Short-Term Disability (STD)

Provides you with continuing weekly income during the initial weeks while you are out of work due to an illness or accident.



Legal services

Engage professional, state bar-certified attorneys for a wide range of legal matters.



* Part-time employees working at least 15 hours per week are eligible for voluntary benefits.

* Review policy details for pre-existing terms and conditions.



ADP Discounts by LifeMart

Log in to ADP TotalSource and click on Myself > Benefits > Discounts.

- Electronics/cell phones
- Health and wellness
- Groceries
- Travel
- Entertainment
- Financial services
- Home and auto
- Family
- Child care
- Senior care
- Education
- Pet insurance



Steps to Enroll



Plan Enrollment



Plan enrollment

MYSELF

- Personal Information
- Employment
- Pay
- Time & Attendance
- Time Off
- > Benefits
 - Enrollments**
 - EAP
 - Discounts

SWITCH TO EXPANDED MENU

You can find your benefit enrollment wizard here

HOME RESOURCES MYSELF ★ Search Workforce Now: Q

Enrollments ⓘ ↗ Add to Favorites ☆

Open Enrollment

📅 53 days left to complete this event

ENROLL NOW

Select **ENROLL NOW** to begin your enrollment



Plan Enrollment Continued

Selecting the Plan Name will provide you with a **Summary of Benefits Coverage** and more details about the plan

Click **SELECT PLAN** to enroll

View the cost of the benefit **Per Pay Period, Monthly, or Annually**

VIEW PLAN COMPARISON

SELECT PLAN

WAIVE THIS BENEFIT

VIEW PLAN COMPARISON allows you to compare up to 3 plans side by side

Select **WAIVE THIS BENEFIT** if you are waiving coverage. You will need to provide a waive reason for Medical, Dental, or Vision plans if you are not enrolling in any of these benefits

The screenshot shows a web interface for enrolling in medical benefits. On the left is a sidebar with a list of 'Available Benefits' including 'HEALTH AND WELFARE - MEDICAL', 'HEALTH AND WELFARE - DENTAL', 'HEALTH AND WELFARE - VISION', 'HEALTH AND WELFARE - EMPLOYEE LIFE', 'HEALTH AND WELFARE - VOLUNTARY TERM LIFE', 'INSURANCE - SPOUSE LIFE', 'INSURANCE - CHILD LIFE', 'INSURANCE - LONG TERM DISABILITY', 'INSURANCE - SHORT TERM DISABILITY', 'INSURANCE - VOLUNTARY SHORT TERM DISABILITY', 'INSURANCE - AD&D', and 'CUSTOM - LEGAL'. The main content area is titled 'Medical' and contains the following sections:

- 1. Which plan would you prefer?** This section includes a dropdown menu for 'Per Pay Period' with options for 'Per Pay Period', 'Monthly', and 'Annually'. Below this is a table for 'Currently Enrolled In'.
- Currently Enrolled In** table:

PLAN	PROVIDER	PER PAYCHECK	EMPLOYER COST	EFFECTIVE DATE	
HDHP, All FT Employees	UHC07	\$ [input]	—	November 1, 2020	CURRENTLY ENROLLED
- Other Options** section with two rows:

UHCNAVEPO-BTW-500-90-MI-FL, ALL FT EMPLOYEES	UHC07	\$ [input]	—		SELECT PLAN
					WAIVE THIS BENEFIT
- 2. Who do you want to cover?** This section includes a 'MANAGE DEPENDENTS' link and a 'Need help?' button.

At the bottom left, there is a 'You' icon with a green checkmark.



Add Dependents & Beneficiaries

Available Benefits

- HEALTH AND WELFARE - MEDICAL
- HEALTH AND WELFARE - DENTAL
- HEALTH AND WELFARE - VISION
- INSURANCE - EMPLOYEE LIFE
- INSURANCE - VOLUNTARY TERM LIFE
- INSURANCE - VOLUNTARY SHORT TERM DISABILITY
- INSURANCE - AD&D
- CUSTOM - LEGAL
- CUSTOM - GROUP ACCIDENT
- CUSTOM - HOSPITAL INDEMNITY

Medical

1. Which plan would you prefer? \$ Per Pay Period


Currently Enrolled In


PLAN	PROVIDER	PER PAYCHECK	EMPLOYER COST	EFFECTIVE DATE	
HDHP All ET Employees	UBC07	\$191.01	---	November 1, 2020	SELECT PLAN
	UBC07	\$191.61	---	---	SELECTED

2. Who do you want to cover?

MANAGE DEPENDENTS

Need help?

You 

Daffy Duck Spouse 

Newly Added Dependents & Beneficiaries will show here with a + icon.

Click here to Add or Edit Dependents & Beneficiaries

Select the icon to add the dependent to a plan. The icon will light up Green when they've been added.



You will need a **social security number** and **date of birth** to add a dependent or beneficiary. Adding a dependent will automatically update the **plan cost** based on your coverage level.



Click Forward to Complete Your Elections

Save Your Election

YOU ARE ENROLLING IN
UHCO7: HDHP, All FT Employees

PER PAYCHECK	COSTS
PLAN COST	\$
TOTAL PER PAYCHECK	\$

COVERED INDIVIDUALS

GC [Name] You

PCP IDENTIFIER NUMBER

789

SAVE AND CONTINUE TO NEXT BENEFIT

Select **CONTINUE TO PREVIEW** to review your elections and continue to the next benefit.

Available Benefits

✓ HEALTH AND WELFARE - MEDICAL

✗ HEALTH AND WELFARE - DENTAL

HEALTH AND WELFARE - VISION

The left navigation pane will show your progress as you move through enrollment:

✓ = Enrolled

✗ = Waived Coverage

🚩 = Needs Attention

| = You've viewed this section



Sign Up for Optum HSA

*To open an HSA, enter the amount you want to contribute either per year or per pay period and click **ENROLL**.
*If you are not contributing but your employer is, enter \$0 and **CONTINUE TO PREVIEW**

CONSUMER HEALTH AND SAVINGS ACCOUNTS - HEALTH SAVINGS ACCOUNT

- HEALTH AND WELFARE - DENTAL
- HEALTH AND WELFARE - VISION
- INSURANCE - EMPLOYEE LIFE**
- INSURANCE - VOLUNTARY TERM LIFE
- INSURANCE - SPOUSE LIFE
- INSURANCE - CHILD LIFE
- INSURANCE - LONG TERM DISABILITY
- INSURANCE - SHORT TERM DISABILITY
- INSURANCE - VOLUNTARY SHORT TERM DISABILITY
- INSURANCE - AD&D
- CUSTOM - LEGAL
- CUSTOM - GROUP ACCIDENT
- CUSTOM - HOSPITAL INDEMNITY

1. Which plan would you prefer?

PLAN	PROVIDER	PER PAYCHECK	EMPLOYER COST	EFFECTIVE DATE	
<input checked="" type="checkbox"/> HSA	OPTUM	--	--	--	SELECTED

REMOVE ENROLLMENT

How much would you like to contribute?

Your estimated annual contribution can be any amount from **\$0.00** up to **\$2,750.00**.

For the ENTIRE YEAR, I want to contribute:

Maximum yearly goal

Enter a different amount

Annual

Per Pay Period

TOT Annual CONTRIBUTION **\$0.00**

SAVE FOR LATER

CONTINUE TO PREVIEW

Need Help?



Choose Your Health Care FSA & Contribution Amount

REMINDERS

*Limited FSA only covers basic dental and vision expenses if also enrolled in an HSA.

*Contribution amount will be based on the plan year, not calendar year.

Available Benefits

- HEALTH AND WELFARE - MEDICAL
- HEALTH AND WELFARE - DENTAL
- HEALTH AND WELFARE - VISION
- INSURANCE - EMPLOYEE LIFE
- INSURANCE - VOLUNTARY TERM LIFE
- INSURANCE - SPOUSE LIFE

FSA Health Care

1. Which plan would you prefer?

PLAN	PROVIDER	PER PAYCHECK	EMPLOYER COST	EFFECTIVE DATE	
LPFSA	OPTUM	--	--	--	SELECT PLAN
HCFSA	OPTUM	--	--	--	SELECT PLAN

Select the **Health Care FSA** if **NOT** enrolled in HSA

Select the **Limited Health Care FSA** if enrolled in HSA



Review & Complete Enrollment

Enrollments 🔍 👤 🔖 🌟 Add to Favorites

Welcome to New Client Implementation

📅 53 days left to complete this event

Welcome → Select Benefits → Summary

Please review this summary of your New Client Implementation. Download

⚠️ Your benefit elections will not be processed until you click "SUBMIT ENROLLMENT". You will still be able to make changes until November 30, 2020 11:59 PM EST. SAVE FOR LATER **SUBMIT ENROLLMENT**

Enrollment Summary Per Pay Period

Plan	Effective Date	Coverage	Your Cost
Medical			\$191.61
UHC07: HDHP, All FT Employees	November 1, 2020	You	
Employee Life			\$0.00
METLDT Basic \$10,000, All FT Employees \$10,000.00	November 1, 2020		
Long Term Disability			\$0.00
METLDT LTD Basic 50% \$1,000mo-180, All FT Employees \$0.00	November 1, 2020	You	
Short Term Disability			\$0.00

Need Help? SAVE FOR LATER **SUBMIT ENROLLMENT**

Review then select **SUBMIT ENROLLMENT** to submit your elections



Your Benefit Enrollment is Complete!

Enrollments 🔍 Add to Favorites

- Open Enrollment**
📅 53 days left to make changes
[ENROLL NOW](#)
- Year Round Enrollment**
📅 Make changes anytime
[ENROLL NOW](#)
- Your Benefits**
📋 Review your current benefits, your previous year's benefits, or any changes due to a life event.
[VIEW BENEFITS](#)

Make additional changes to your enrollment during the enrollment period

View or Download your benefits statement for your records

Update or Enroll in Year Round benefits such as HSA

Your Benefits

This information is your benefits coverage as of the date below. Select a different date to view other coverage.

11/15/2021 📅 Download

Enrollment Summary Per Pay Period

Plan	Effective Date	Coverage	View Cost
Medical			
UNICEF HDHP ARTT Employees	November 1, 2021	Yes	\$0/0.00
Employee Life			
WELTID Ben-315000-All FT Employees	November 1, 2021		\$0/0.00
Long Term Disability			
WELTID LTD Ben-22631-200000-All FT Employees	November 1, 2021	Yes	\$0/0.00
Short Term Disability			
WELTID STD Ben-2000000-200000-All FT Employees	November 1, 2021	Yes	\$0/0.00

Selected Benefits

Volition	Make Selections on your account page
Choice	Make Selections on your account page



Important Contact Information



Pre Member Support Line with UHC



Questions about our health plans? We have answers.

The Pre-Member Assist Line through ADP TotalSource is available year-round to help answer your questions about UnitedHealthcare products and services.

The Pre-Member Assist Line can help you:

- Get answers about medical benefits and coverage policies.
- Find out about prescription drug coverage.¹
- Locate participating network providers.²

When you call:

- 1 Please let us know you're a "pre-member" seeking benefits through ADP TotalSource.
- 2 Have the plan code available (UnitedHealthcare example: UHC-CP-BITD-3000-KY-FL; Neighborhood Health Partnership example: UHCNH-IP-HSA-BTWJ-4000-Copay-SFL³). You can get this information directly from ADP TotalSource.

³Note: In the examples above, the plan code is underlined.



Call our Pre-Member
Assist Line today

1-866-480-2957, Monday through Friday, 7 a.m. to 8 p.m. CT. TTY users can dial 711.



Health Advocate

If you're enrolled in an ADP TotalSource medical benefits plan, we've got great news. You and your family are automatically eligible for Health Advocate.

Health Advocate can help you:

- Find the right doctors and hospitals
- Schedule tests and appointments
- Learn more about health conditions and treatments
- Resolve billing and claims issues

Lower your bills with medical bill saver:

- Give Health Advocate your medical and dental bills of \$400 or more.
- They'll contact your provider to negotiate a discount.
- If they're successful, they'll share in 25% of the savings. If they're unsuccessful, you'll pay nothing!
- Once an agreement is made, Health Advocate will obtain provider sign-off on payment terms and conditions.
- You'll get an easy-to-read savings statement of the outcome and payment terms.

Please note that some states may have restrictions in place that impact Health Advocate's ability to negotiate medical bills. These rules are subject to change by state. Negotiation of fees related to Medicaid or Medicare are prohibited by federal law.

The screenshot shows the Health Advocate website. At the top, there's a navigation bar with the ADP logo and links for HEALTH and FINANCE. Below that is a 'Quick Links' section with a red arrow icon. The main content area features a large image of a hand holding a red heart. Below the image is a 'Welcome!' message. A yellow banner below the image contains a 'NEWS' section and a promotion: 'Enter to win a Fitbit Charge 3! Deadline to enter: December 31, 2019. Click here to enter.' Below this are three main content blocks. The first is 'Health' with a blue background and a stethoscope icon, containing the text 'Use our Health resources to find a doctor, clarify your treatment options, and manage your health and well-being.' and a 'BROWSE HEALTH' button. The second is 'Make your Thanksgiving more meaningful' with a white background and a fork and knife icon, containing the text 'Here's how to take the focus off the food.' and a 'READ NOW' button. The third is 'Stay current with your preventive care' with a white background and a calendar icon, containing the text 'Get started now.' and a 'READ NOW' button. Below these are two more blocks. The first is 'Finance' with a green background and a gear icon, containing the text 'Get us help you manage your' and a 'READ NOW' button. The second is 'Got junk?' with a white background and a trash can icon, containing the text 'Here's how to turn your trash into treasure.' and a 'READ NOW' button. The third is 'Get serious about planning for retirement' with a white background and a bar chart icon, containing the text 'There's time now to plan' and a 'READ NOW' button.



866.695.8622

Email: answers@HealthAdvocate.com

Web: HealthAdvocate.com/ADPTotalSource

Download the app today!



Employee Assistance Program (EAP)



The Employee Assistance Program (EAP) is a confidential service designed to help employees with a variety of personal concerns, including:

- Mental and emotional health
- Parenting, childcare and education
- Senior caregiving services
- Physical wellness and nutrition
- Legal and financial issues

Learn more about the EAP on **MyLife.adp.com**. Log in to My TotalSource® and click on Myself > Benefits Program > Life Management > EAP Portal.

1-866-574-7256



LifeCare.



ALL Important Contact Information

MyLife Advisors @ 844-448-0325 or MyLifeAdvisor@adp.com

- Monday-Friday, 8:00 AM – 11:30 PM (EST)
- Real people ready to help guide you through all ADP questions and beyond
 - Ex: Password Resets, Benefits Enrollment/Questions, Navigating Total Source

Health Advocate @ 866-695-8622 (Download the Mobile App) or <http://www.healthadvocate.com>

- Takes health care and benefits problems off your hands and into trained professionals
- Available to all employees enrolled in any company medical plan
- Spouses, children, parents, and parents-in-law may use this service as well
- Please mention your affiliation to ADP TotalSource

[Employee Assistance Program \(EAP\)](#) @ 866-574-7256 or log in to ADP TotalSource© select **Myself→**Benefits**→**EAP**.**

- A confidential service designed to help employees with a variety of personal problems
- Please mention your affiliation to ADP TotalSource •

Benefit Offerings Overall

- **Medical Coverage** is with United Healthcare (Download the Mobile App) or www.myuhc.com
 - UHC Pre-member assist line 1-866-480-2957
 - Please note callers must identify that they are calling from ADP and are a pre-member.
 - Callers also must have the 4-character UnitedHealthcare plan code and plan state.
 - I.E UHCCP-UHPD AHFI-2000-80-CO-FL
- **Dental Coverage** is with Aetna Dental (Download the Mobile App) or www.aetna.com
- **Vision Coverage** is with VSP (Download the Mobile App) or <http://www.vsp.com/>
 - *No ID Cards Required*



Parental Leave



Parental Leave

Birth Parents

- 8 weeks paid leave
- 6-8 weeks disability

Non-Birth Parents

- 8 weeks paid leave

All New Parents (Birth & Non-Birth Parents)

- Flexibility for appointments & pre-birth adoption activities
- Ease back plan of
 - 20 hrs at full pay for 2 weeks
 - 30 hrs at full pay for 2 weeks

Check out our full parental leave policy in our [TeamSnap Playbook!](#)



Retirement



401k Plan with Slavic401k

A 401(k) retirement plan is available after a 3-month waiting period. TeamSnap pays all plan management fees!

You'll receive an email from Slavic401k on the 1st of your month following your 90 day mark at TeamSnap and enroll [here](#). You can view the 401k Compliance Information packet [here](#).

Please keep in mind that however you setup your 401k account the deduction % or deduction amount will come out of EVERY paycheck including paychecks with bonus payments in them (like commissions & quarterly bonuses.)



Time Off at TeamSnap



Time Off at TeamSnap

We want every employee to take the time they need now and again!

- Unlimited Personal Time Off (PTO)
- 13 Paid Holidays: New Years, Memorial Day, Martin Luther King Day, Juneteenth, Independence Day, Labor Day, Thanksgiving, the day after Thanksgiving, Christmas Eve, Christmas Day and New Years Eve plus 1 additional holidays of your choosing
- 10 days Paid Sick Leave
- 8 Weeks Paid Parental Leave
 - Available for employees after 6 months of service to TeamSnap



The Extra Perks



The Extra Perks!

- Flexible work hours and location
- Comfortable office environment – leave your suit at home!
- TeamSnap App Discounts!
 - 100% off any individual team you or your family participates in.
 - 50% off any clubs/leagues/tournament organizers that you or your family participates in when they become a new customer to TeamSnap.
 - 20% on any clubs/leagues/tournament organizers that you or your family participates in if they are a current TeamSnap customer. The discount will show up on the next renewal.
 - Want the deepest discount of them all? You can self-provision and operate any club/league/tournaments account for personal use, as long as you are the commissioner and there are no sales/support requirements (you get to be sales & CX on this one!).
- \$1,500/year education and training allowance
- \$50/month wellness allowance for a gym membership, yoga classes or anything else that gets you moving
- \$150 SWAG credit to www.teamsnapshop.com upon starting and a \$100 credit on every work anniversary thereafter
- Travel to fun locations for the annual all company meeting once per year



Additional Questions reach out to the
People Experience Team at

px@teamsnap.com

