

# Your Guide to **BENEFITS ENROLLMENT**


2023 NFP Health Care Program

UHC Medical Plans and Regional Plans  
(Kaiser, BCBS of VT, Northwell)





Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance




401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance

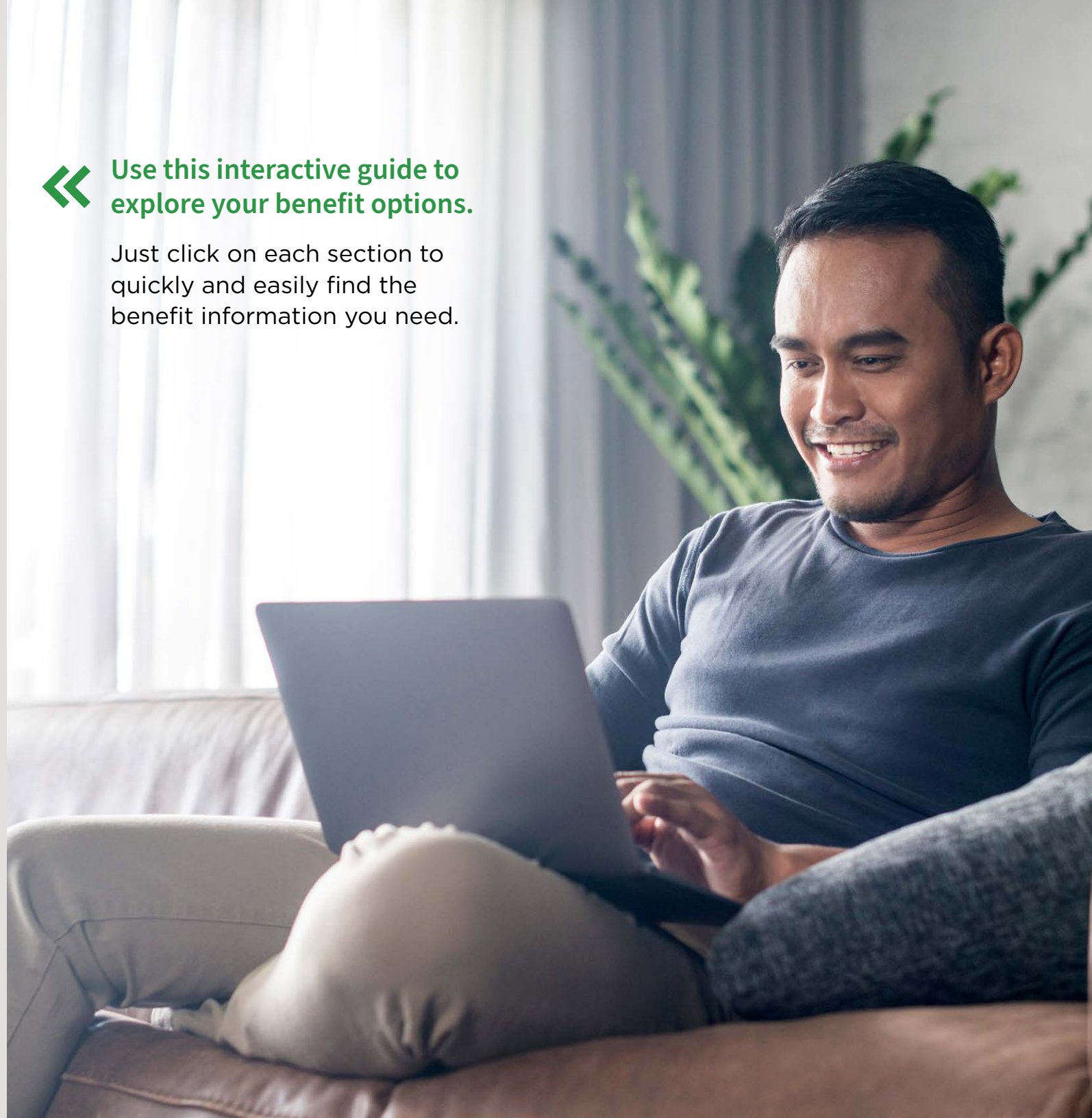


Carrier Contact Information



**Use this interactive guide to explore your benefit options.**

Just click on each section to quickly and easily find the benefit information you need.



# BENEFIT CHANGES FOR 2023



## Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

### REGULATORY CHANGES

#### HSA Contribution Limits

- The HSA contribution limits for 2023 will increase to \$3,850 for individual coverage and \$7,750 for family coverage.

#### Minimum Annual Deductible

- The minimum annual deductible for qualifying High Deductible Health Plans (HDHP) has increased to \$3,000. As a result, the embedded deductible for the UHC HDHP1 plan will increase to \$3,000 individual/\$6,000 family.

#### FSA Contribution Limits

- The annual contribution amount for Healthcare FSA and Limited Purpose FSA has increased to \$3,050. The Dependent Care FSA limit remains unchanged.

#### Adoption Assistance

- The maximum amount an employee may exclude from their gross income under an employer-provided adoption assistance program has increased to \$15,950.

### NEW BENEFIT OFFERINGS

#### Ameritas Vision Plan

- Ameritas Vision Plan will replace the existing VSP Vision Plan. You will have the opportunity to choose between two vision provider networks, both of which are supported by the Ameritas plan.

#### Brella

- Supplemental coverage through Brella provides partial reimbursement for covered conditions to employees enrolled in the UHC and Northwell Direct HDHP plans.

### REGIONAL PLANS

#### Northwell Direct

- A new PPO and a new HDHP plan through Northwell Direct provide access to a comprehensive network of high-quality providers and facilities in metro New York and New Jersey. This plan is available to most employees in New York and New Jersey, eligibility for this plan is driven by firm and zip code. If you are eligible to participate, you will have the opportunity to enroll on the NFP Employee Benefits platform.

Continued >>

# BENEFIT CHANGES FOR 2023



## Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

### WELLNESS OFFERINGS

#### Gympass

- The existing Gympass program will be extended to allow for the addition of up to three dependents.

#### Armadillo

- Armadillo is a subscription-based protection plan for when appliances and major systems break down in your home.

#### Torchlight

- No matter the age, stage, crisis, or concern, Torchlight provides real-time access to strategies and solutions related to the everyday needs and challenges of caring for children and elderly loved ones.

#### Care.com

- Care.com will give you access to the leading online marketplace for finding caregivers – child, senior, pet and home.

#### Rethink Care

- Ongoing mental fitness support will be provided through Rethink Care (formerly Whil).



# YOUR HEALTH CARE PROGRAM CHOICES FOR 2023



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## PLAN CHOICE

### MEDICAL

#### United Healthcare (UHC) Preferred Provider Organization

- One Preferred Provider Organization (PPO)
- High Deductible Health Plan 1 (HDHP1)
- High Deductible Health Plan 2 (HDHP2)

These three plans are administered by United Healthcare (UHC) and are serviced by the national UHC network. The prescription drug coverage program is administered by Express Scripts.

The PPO option offers discounted rates when you obtain medical care within the PPO network. You may use providers outside of the network, but your deductible and coinsurance will be higher.

Your HDHP options offer the most value when combined with the Health Savings Account (HSA). The HDHPs also offer discounted rates when you use the plan's network of providers. You may use providers outside of the network, but your deductible and coinsurance will be higher.

#### Kaiser Health Maintenance Organization

- Kaiser HMO
- Kaiser Deductible HMO

For residents of California, Washington and Oregon, the Kaiser HMO and Kaiser Deductible HMO plans offer coverage for services provided by network providers and facilities only; there are no benefits for out-of-network services, except in emergencies. Kaiser providers are not available in all zip codes and therefore Kaiser coverage may not be available in your zip code. If you are eligible to enroll in a Kaiser plan you will be provided the opportunity on the NFP Employee Benefits platform.

#### Northwell Direct

- Preferred Provider Organization (PPO)
- High Deductible Health Plan (HDHP)

For residents of New York and New Jersey, the Northwell Direct plans offer a PPO option and an HDHP option, with access to a comprehensive network of high-quality providers and facilities in metro New York and New Jersey. Prescription drug coverage is administered by Express Scripts. Northwell providers are not available in all zip codes and therefore Northwell coverage may not be available in your zip code. If you are eligible to enroll in a Northwell plan you will be provided the opportunity on the NFP Employee Benefits platform.

#### BlueCross BlueShield of Vermont

- Consumer Driven Health Plan (CDHP)

For residents of Vermont, the BCBS of VT CDHP plan provides coverage for in-network providers, except in the case of a medical emergency. Prescription drug coverage is provided through Vermont Blue Rx. Eligibility for this plan is driven by firm and zip code. If you are eligible to enroll in this plan you will be provided the opportunity on the NFP Employee Benefits platform.

Continued >>

# YOUR HEALTH CARE PROGRAM CHOICES FOR 2023



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## PLAN CHOICE

### HEALTH SAVINGS ACCOUNT (HSA)

- **Optum Bank Health Savings Account (HSA)**

The HSA allows you to establish an account from which you may pay for eligible out-of-pocket health care costs. Participants in the UHC HDHP1, UHC HDHP2, Northwell HDHP and BCBS of VT CDHP that meet HSA eligibility requirements will be automatically enrolled in an Optum Bank HSA. With this type of account, you are able to:

- Contribute your own pre-tax dollars to your HSA.
- Receive a monthly contribution from your firm into your HSA, whether or not you make contributions yourself.
- Carry over any balance in your HSA from year to year.
- Build a nest egg to help pay for future medical expenses.
- Take your HSA balance with you - it's portable.

### DENTAL

#### Delta Dental Plans

- **Delta Dental Core Plan**
- **Delta Dental Standard Plan**
- **Delta Dental Deluxe Plan**

All three Delta Dental plans cover preventive care at 100% with no deductible. The Standard and Deluxe Plans provide greater coverage for basic services and coverage for major services. The Deluxe Plan covers dental implants (and related services) and orthodontic services.

### VISION

- **Ameritas Vision Plan**

The vision plan is administered by Ameritas Vision and provides coverage under the VSP network and the EyeMed network. The plan provides coverage for an eye exam, lenses, and frames and/or contact lenses. You will have the opportunity to choose between the VSP network and the EyeMed network during enrollment.

### FLEXIBLE SPENDING ACCOUNTS (FSA)

- **Health Care FSA**
- **Dependent Care FSA**
- **Limited Purpose FSA**

Flexible Spending Accounts (FSAs), administered by American Benefits Group, give you the opportunity to set aside pre-tax money to pay out-of-pocket costs for eligible health and dependent care expenses. If you are enrolled in a HDHP, and have an HSA, you are ineligible to participate in a Health Care FSA. However, you may participate in a Limited Purpose Health Care FSA.

Continued >>

# YOUR HEALTH CARE PROGRAM CHOICES FOR 2023



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## PLAN CHOICE

### LIFE INSURANCE

- **Basic Life and AD&D**
- **Supplemental Life Insurance**
- **Dependent Life Insurance**

For most firms, Basic Life and Accidental Death & Dismemberment (AD&D) Insurance is provided by NFP through The Standard. Not all firms participate in the coverage provided through The Standard. If your firm participates, and you are eligible to enroll, you will be provided the opportunity to do so on the NFP Employee Benefits platform. If eligible, you may also purchase Supplemental Life Insurance for yourself and your dependents, subject to certain requirements. If you do not elect to purchase supplemental coverage when first eligible, you may be subject to Evidence of Insurability (EOI) requirements.

### DISABILITY INSURANCE

- **Short-Term Disability**
- **Long-Term Disability**

For most firms, Short-Term Disability and Long-Term Disability is provided by NFP through The Standard. Not all firms participate in the coverage provided through The Standard. If your firm participates, and you are eligible to enroll, you will be provided the opportunity to do so on the NFP Employee Benefits platform.

Short-Term Disability coverage replaces 60% of your benefit base salary up to \$2,500 per week, for the first 26 weeks of a qualifying disability, or until you are certified to return to work. For employees, the benefit base salary includes salary and draw. For Producers, the benefits base salary includes salary, draw and commission.

Long-Term Disability replaces 60% of your Annual Benefits Base Rate up to \$20,000 per month. For employees, Annual Benefits Base Rate includes base salary, cash bonus and draw. For Producers, it includes base salary, cash bonus, draw and commissions.

Since NFP covers 100% of the monthly premium, any disability benefits paid are considered taxable income. Employees may elect, during the enrollment period, to pay the premium themselves on a post-tax basis to ensure any benefits paid are non-taxable.

*\* Social Security and Medicare taxes will still apply.*



# HEALTH AND WELLNESS RESOURCES

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

NFP continues its commitment to helping you and your family be healthy and fit. As a covered member, you and your covered dependents have access to the following benefits and resources. You are encouraged to take advantage of these tools that can help you reach your personal goals for fitness and good health.

## Preventive Care

One of the best ways to stay healthy and mitigate health risks is to follow established guidelines around preventive care, including check-ups, screenings and immunizations.

**Medical:** Your NFP medical plan covers in-network eligible well care visits, screenings and immunizations at no cost for you and your covered family members.\*

**Dental:** The NFP dental plans cover 100% of preventive care services with no deductible for you or your covered family members.

**Vision:** Benefits for routine eye exams are available to you and your covered family members through the NFP Vision Plan (as well as the medical plans).

*\* If you use out-of-network providers, deductibles and coinsurance apply.*

## Find a Doctor Near You

Using in-network providers is the best way to get the most out of your plan and will reduce out-of-pocket responsibility for services.

To locate in-network providers:

### Medical

- United Healthcare (UHC) visit [www.myuhc.com](http://www.myuhc.com)
- Kaiser California visit [www.kp.org](http://www.kp.org)
- Kaiser Washington visit [www.kp.org/wa/find-a-doctor](http://www.kp.org/wa/find-a-doctor)
- Kaiser Oregon visit <https://healthy.kaiserpermanente.org/oregon-washington>
- Northwell visit [www.alliedbenefit.com/ProviderNetworks](http://www.alliedbenefit.com/ProviderNetworks) and select Northwell Direct
- BlueCross BlueShield of Vermont visit [www.bcbsvt.com](http://www.bcbsvt.com)

### Dental

- Delta Dental visit [www.dental dentalins.com](http://www.dental dentalins.com)

### Vision

- Ameritas Vision visit [www.ameritas.com](http://www.ameritas.com)

Continued >>





# HEALTH AND WELLNESS RESOURCES

*(United Healthcare)*

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

These resources coordinate with the UHC medical plans.

## Advocate4Me Elite Member Support • [www.myuhc.com](http://www.myuhc.com) and click call or chat with an Advocate • 1-800-980-7513

Your United Healthcare coverage comes with an enhanced Advocacy program that can help you get the most out of your coverage. Whether connecting one-on-one over the phone with an Advocate or nurse, or through digital resources, they'll assist you with making informed decisions about your care that may help you save money and lead to better health outcomes.

- A single point of contact to help resolve your issue and guide you to the right resources.
- Direct extension and voicemail available for all Advocates, making it easier to connect with your support team.
- Access to highly trained Advocates that specialize in resolving complex claims issues and other complicated challenges.
- Comprehensive support for members who have a child with complex medical needs, to help navigate the system and ease the burden on the family.

## UnitedHealthcare Telemedicine Option

If you have a cold, sore throat, sinus problem or other benign condition, you may be able to skip the doctor's office and receive expert care from the comfort of home. This Virtual Visit benefit allows you to videoconference with a doctor using either your mobile device or computer. If a prescription is needed, your doctor will send the script to the pharmacy of your choice.

Benefits include:

- 24/7 access to medical doctors.
- The same co-insurance and deductibles as your medical plan.
- Fast appointment times.

To learn more about Virtual Visits, login to [www.myuhc.com](http://www.myuhc.com). Here you can select from provider sites and register for a virtual visit when it's needed.

*\* Access to virtual visits and prescription services may not be available in all states.*



**Did you know a telemedicine visit is approximately \$40 whereas in-person visits could add up to much more?**

Continued >>



# HEALTH AND WELLNESS RESOURCES

*(United Healthcare)*

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Included Health (formerly Grand Rounds) • [yourincludedhealth.com](https://yourincludedhealth.com) • 1-800-929-0926

When you enroll in a UHC medical plan, Included Health can help find the best in-network practitioners, provide guidance around new diagnoses and treatment plans, and offer support in deciding if surgery is the best option. The following services are available to you:

- Get an expert second opinion through the Included Health partnership with leading specialists on most conditions.
- Identify the most qualified doctor for your needs, book appointments and prepare for your visit.
- Access services online or over the phone.

## Sword Health • [join.swordhealth.com/nfp](https://join.swordhealth.com/nfp)

Relieve pain from the comfort of home with Sword Health – the new virtual physical therapy program designed to help you overcome your back, joint or muscle pain – at home. Sword Health works with your UHC medical plan and is offered at no cost to you. Combining licensed physical therapists with easy-to-use technology, Sword is convenient and proven to work. How the program works:

- Your dedicated physical therapist designs an exercise program just for you.
- Sword will ship you a tablet and motion sensors to guide you and provide real-time feedback.
- Complete your exercise session at home when it is convenient for you.
- Your physical therapist is there to support you virtually and is available any time.

## Bariatric Resource Services • [myuhc.phs.com/brs](https://myuhc.phs.com/brs) • 1-888-936-7246

Obesity is a growing epidemic and is the cause of many serious conditions including heart disease, diabetes, and arthritis. If you're considering bariatric surgery to lose a significant amount of weight, this program can help. Bariatric Resource Services works with your UHC medical plan and provides you with access to a team of clinical experts who specialize in weight loss and bariatric surgery.

- Find high quality Centers of Excellence network providers to make sure your surgery goes as smoothly as possible.
- Learn about surgical option for best possible outcomes.
- Find resources to help you meet your pre-surgical requirements.
- Understand how nutrition and fitness can help you achieve success.
- Adjust to and maintain lifestyle changes and avoid complication after surgery.

Continued >>



# HEALTH AND WELLNESS RESOURCES

*(United Healthcare)*

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Quit For Life • [www.quitnow.net](http://www.quitnow.net) • 1-866-QUIT-4-LIFE, TTY711

The United Healthcare Quit for Life program has helped 4 million members successfully quit smoking, e-cigarettes, vaping, nicotine, and tobacco – and it may be able to help you too. This program is covered at \$0 out-of-pocket cost for United Healthcare members and their covered dependents. If smoking or using tobacco is holding you back, try this proven program designed to take you forward. The program provides:

- Tools and support that can help you quit at your own pace, and live smoke-free.
- A personal, 1-on-1 Quit Coach who will help you create a customized action plan.
- Text2Quit text messages for daily tips, encouragement, and reminders.
- Quit smoking medication to help control and overcome tobacco cravings, such as nicotine gum or patches.

## AbleTo • [www.ableto.com](http://www.ableto.com)

The United Healthcare partnership with AbleTo provides a personalized care experience for high-quality virtual behavioral health. Certified therapists and professional coaches participate in ongoing specialized training to ensure the highest standard of care, and all sessions are private and confidential, with the convenience of virtual care. The expert care provided by this program help to provide you with the tools you need to better manage stress, anxiety and depression.

## Kindbody • 1-855-KND-BODY • [employeebenefits@kindbody.com](mailto:employeebenefits@kindbody.com) • [kindbody.com/nfpbenefits](http://kindbody.com/nfpbenefits) (Access Code: KindNFP)

Kindbody is a fertility and family-building benefit that can work for you whether you are looking to start your family today or preserve your options for the future. Kindbody provides end-to-end fertility services with a dedicated Care Navigation Team to guide you through your journey. In conjunction with your United Healthcare coverage, your Kindbody benefit includes:

- Up to two fertility cycles (i.e. egg freezing, embryo freezing, or IVF).
- Fertility medication.
- Dedicated Care Navigation Team.
- Nutrition and mental health support.
- Personalized patient portal, including 24/7 virtual care and appointment scheduling.

Kindbody also offers third party services for NFP employees regardless of enrollment in a United Healthcare plan. Third party services include adoption, donor, and surrogacy and NFP employees can receive a lifetime maximum reimbursement up to \$20,000 when using these services.

Continued >>



# HEALTH AND WELLNESS RESOURCES

*(United Healthcare)*

**GI Thrive by Vivante Health • [www.welcome.vivantehealth.com](http://www.welcome.vivantehealth.com) • 1-833-33MYGUT (69488) or download the app on The App Store or Google Play**

This virtual digestive health program is available to United Healthcare members and their covered dependents that are 18+ years old. This benefit provides support for your journey towards improved gut health. You can sign up as a member on the GIThrive app or web portal in just a few minutes, and there is no cost to you to use the program. By becoming a member you'll have access to:

- Unlimited phone or video appointments with a Registered Dietitian and a Health Coach.
- Personal food plans tailored to your body (even special diets to manage inflammatory bowel disease and IBS).
- Up-to-date, reliable information about nutrition, gut health, stress management, goal-setting, accountability, mindfulness techniques, creative problem-solving, and even prepping for a doctor's appointment.
- A GutCheck microbiome kit.
- Accessible features on your smartphone or computer, no office visits, co-pays or out-of-pocket fees required.



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information

Continued >>



# HEALTH AND WELLNESS RESOURCES

*(Northwell)*

These resources coordinate with the Northwell medical plans.

## Northwell Allied Member Services • 1-833-918-1379

When you need help, the member services team is ready to answer your questions, including:

- Help submitting claims, or understanding your medical bills.
- Verify your benefits and coverage details directly with your providers.
- Navigate your benefits and tools through your online member portal.

## One : One Care Management Program

Northwell Direct network members get exclusive access to a team of licensed nurses and peer advocates to support your throughout your entire healthcare journey, including:

- Patient outreach.
- Transitional care.
- Chronic condition management.
- Health coaching.

## Teladoc • [www.teladoc.com](http://www.teladoc.com) • 1-800-TELADOC (835-2362)

If you are enrolled in either of the Northwell Direct medical plans, you have access to Teladoc. This program provides you and your covered family members access to virtual care services. Talk to a doctor for non-emergency conditions 24/7 by phone, video, web or app. Teladoc doctors can:

- Provide a diagnosis, treatment and prescription if needed.
- Treat bronchitis, flu, rashes, sinus infections, sore throats, and more.
- Help you avoid the high cost and long waits of the ER or urgent care.

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information





# HEALTH AND WELLNESS RESOURCES

*(Kaiser)*

These resources coordinate with the Kaiser medical plans.

## WELLNESS BENEFITS – *Kaiser California*

### Nurse Health Advice Line • 1-800-464-4000

You may call the Kaiser advice line and speak with a registered nurse any day, any time. Get answers to general health questions, assistance determining the type of care you need, and much more.

### My Health Manager • [www.kp.org/healthmanager](http://www.kp.org/healthmanager)

My Health Manager provides a wealth of resources to help you manage your health. Through My Health Manager, you can email your doctor, find test results, schedule or cancel appointments, refill prescriptions, review benefits and eligibility information, and much more.

## WELLNESS BENEFITS – *Kaiser Washington*

### Consulting Nurse Service • 1-800-297-6877

Talk with a nurse for care advice, or find out if you need immediate medical attention. Get help 24 hours a day, 365 days a year.

### CareClinic • [www.kp.org/wa/getcare](http://www.kp.org/wa/getcare)

CareClinic at Bartell Drugs is staffed by Kaiser Permanente clinicians, and care is available to everyone two and up. Get treated for minor illnesses and injuries, or routine preventive care such as vaccinations.

Visit [www.bartelldrugs.com/careclinic](http://www.bartelldrugs.com/careclinic) for a location near you.

### Wellness Coaching • [www.kp.org/wa/health-wellness](http://www.kp.org/wa/health-wellness)

If you need a little extra support, we offer Wellness Coaching by Phone at no cost for covered members. You'll work one-on-one with your personal coach to make a plan to help you reach your health goals.

### Complimentary Choices • [www.kp.org/wa/alternative-medicine](http://www.kp.org/wa/alternative-medicine)

Receive a 20% discount on a variety of health-related services including acupuncture, massage therapy, chiropractic care, naturopathy and more.

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# HEALTH AND WELLNESS RESOURCES

*(Kaiser)*

## WELLNESS BENEFITS - *Kaiser Oregon*

### 24/7 Nurse Advise • 1-800-813-2000

Connect with a licensed care provider day or night for advice, referrals, prescriptions and more.

### Wellness Coaching • 1-800-813-2000

Connect with a wellness coach over the phone for extra support and guidance to help you reach your health goals.

### E-Visits • [www.kp.org/evisits/nw](http://www.kp.org/evisits/nw)

E-visits powered by SmartExam is convenient care from providers you trust. Get treatment you need, including prescriptions sent to your pharmacy or mailed to your home.

### Video Visits • [www.kp.org/telehealth/nw](http://www.kp.org/telehealth/nw)

Scheduled phone, video and e-visits are convenient alternatives that offer high-quality care, comparable to an inperson visit.

### Care Essentials • [careessentials.org](http://careessentials.org)

Care Essentials can help your get well and stay well. Treatment for common, nonemergency health needs for convenient care.

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

Continued >>



# HEALTH AND WELLNESS RESOURCES

*(BlueCross BlueShield of Vermont)*

These resources coordinate with the BCBS of Vermont medical plan.

## Member Resource Center - [www.bcbsvt.com/login/resource\\_center](http://www.bcbsvt.com/login/resource_center)

Member Resource Center is your secure, online resource for personalized medical plan information and health management resources. Log on to the website and gain access to many useful resources and tools.

- Access benefits plan details.
- Order a new ID card.
- View benefits usage and EOBs.
- Check claim status.
- Explore procedure costs.

## BCBS VT Telemedicine Option

BCBS VT now partners with Amwell to provide you with telemedicine services 24/7, wherever you are.

Download the Amwell App from the Apple App Store or from the Google Play Store. Install the App and register for your virtual visit. Amwell doctors are also available by phone at **1-844-733-3627**.\*

*\* Please note that state law in Vermont prohibits a doctor from writing prescriptions to patients with whom they consult by phone.*

## Wellness Resources on [www.bcbsvt.com](http://www.bcbsvt.com)

- Complete a health assessment and learn about risk factors.
- Use tools that can help you reach your fitness and nutrition goals.
- Track activity, biometrics and other health factors.

Continued >>



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information



# HEALTH AND WELLNESS RESOURCES

*(Not specific to medical plan choice)*

**Kindbody • 1-855-KND-BODY • [employeebenefits@kindbody.com](mailto:employeebenefits@kindbody.com) • [kindbody.com/nfpbenefits](https://kindbody.com/nfpbenefits) (Access Code: KindNFP)**

Kindbody is a family building and fertility benefit that has partnered with NFP to provide third-party benefits to all US based benefits-eligible employees. These services include adoption, donor, and surrogacy and NFP employees can receive a lifetime maximum reimbursement up to \$20,000 when using these services. You do not need to be enrolled in an NFP medical plan to use Kindbody third-party services, you just need to be eligible to enroll in an NFP medical plan. Third-party benefits include:

- **Adoption Assistance** – You will have access to a preferred network of providers, reproductive lawyers, and adoption agencies who can help guide you through every step of your family-building journey.
- **Donor & Surrogacy Benefits** – Kindbody experts will discuss your options regarding surrogacy and gestational carriers, egg or embryo donors, or sperm donation.
- **Concierge Support** – You'll receive a dedicated Care Navigation Team, 24/7 virtual care and appointment scheduling, and a personalized patient portal.

**SupportLinc Employee Assistance Program • 1-888-881-5462 • [www.supportlinc.com](http://www.supportlinc.com)**

At some point in our lives, each of us faces a problem or situation that is difficult to resolve. SupportLinc is a no-cost confidential resource that is available to you and your family to help you deal with life's challenges, and the demands that come with balancing home and work. Staffed by licensed counselors, this benefit provides support, guidance and referrals to local resources 24 hours a day, 365 days a year.

- Emotional wellness concerns such as anxiety, depression, marriage and relationship problems, grief and loss, substance abuse, anger management.
- Legal assistance and consultation.
- Financial wellness services such as financial planning and consultation
- Family assistance consultation such as referrals for dependent care, auto repair, pet care and home improvement services.
- Visit **[www.supportlinc.com](http://www.supportlinc.com)** (Username: NFP).

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# HEALTH AND WELLNESS RESOURCES

*(Not specific to medical plan choice)*

## Care.com • [www.care.com/yourbenefits](http://www.care.com/yourbenefits)

Finding the right care for your family can be hard, especially when you're balancing the demands of work and life. Care.com makes it easier with unlimited access to the world's leading network for finding and managing care for kids, adults, pets, home and more.

- Log in to your account online or through the app.
- Search caregiver profiles, post a job, schedule interviews and request background checks.
- When you're ready to hire, easily schedule and pay your caregiver on Care.com.

## Torchlight • [dxc.torchlight.care](http://dxc.torchlight.care) or download the Torchlight Care app

Torchlight is parenting and caregiving support tool. Torchlight Child provides vast, engaging expert resources to support you and your children, and Torchlight Elder offers curated eldercare resources to support you and your parents/older loved ones.

- Resources include digital eGuides, webinars (live and on demand), podcasts, video and worksheet tools.
- Connect one-on-one with Torchlight Expert Advising and Expert Q&A.

## Real Appeal • [nfp.realappeal.com](http://nfp.realappeal.com)

Real Appeal is an online weight loss program that delivers real results and is fully covered by NFP. Real Appeal is a proven way to help our members lose weight and live healthier lives by providing:

- Ongoing support and guidance with online group sessions, support from coaches, and an enthusiastic community of members rooting for your success.
- Small steps for lifelong change – and makes it easy to chart your daily progress with our nutrition and exercise trackers.
- Resources to keep you motivated throughout your journey. Access the inspiring stories of other members, blog posts and articles to keep you informed, and simple activities to help you stay on track.

Continued >>



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information





# HEALTH AND WELLNESS RESOURCES

*(Not specific to medical plan choice)*

## Virgin Pulse

Virgin Pulse is the heart of NFP's well-being program. If you're a U.S. based NFP employee, jumpstart your health routine with Virgin Pulse. Just look for the Virgin Pulse tile in Microsoft One Access Page to log on, and then get rewarded with PulseCash for the healthy things you do. Redeem PulseCash for prepaid cards, merchant gift cards, tracking devices or even cash through electronic deposit. Sign up for Virgin Pulse for:

- Activity tracking with your choice of device or app.
- Encouragement, feedback and motivation.
- Advice regarding nutrition, sleep, stress and more.
- Social media feeds and community features.
- Personalized content on numerous well-being topics.
- Team challenges and contests.

**PLEASE NOTE:** *The IRS requires that any award or prize given by an employer for wellness program participation be considered as taxable to an employee, and it must be included on their W-2s. Wellness rewards are considered a taxable fringe benefit, and any amount that you redeem in the calendar year will be included in your W-2 form. This will be reflected on your check in both the Earnings and Deductions sections, resulting in a taxable wage adjustment.*

## Rethink Care (formerly Whil)

Rethink Care modules on Virgin Pulse can be found by clicking on Benefits/View All. View modules on improving relationships, mindfulness, yoga basics and more.

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# 2023 ENROLLMENT



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

You must enroll during your election period in order to secure benefits for the plan year. Benefit elections will remain in effect for the entire plan year, unless you have a Qualified Life Event.

### YOU MAY ENROLL ONLINE OR BY PHONE:



From your My Apps page, Click on the **UltiPro** People First Portal tile, and follow the link to the **NFP Employee Benefits Platform**.



### NFP Employee Benefits Service Center:

**1-877-637-0637**

9:00 am - 6:00 pm, ET, weekdays

Continued >>



# 2023 ENROLLMENT

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Eligibility

You are eligible for the full suite of benefits coverage if you are a full-time employee regularly scheduled to work 30 or more hours per week. If you are a part-time employee averaging 30 or more hours per week over a three month measurement period, you may be eligible for medical benefits.

## Coverage Levels

You may choose to enroll in one or all of the benefit offerings, and enrollment in one type of plan is not contingent upon enrollment in another plan. You may choose from the following coverage levels for your medical, dental and vision options:

- Employee
- Employee + spouse/domestic partner/civil union partner
- Employee + child(ren)
- Employee + family

## Eligible Dependents

Your eligible dependents for medical, dental and vision coverage include:

- Your spouse, civil union partner or domestic partner.
- Your dependent child up until the end of the year in which they turn 26, regardless of the following:
  - Their marital, student or employment status.
  - Whether they are your tax dependent.
  - Whether your home is their principal place of residence.

### For this purpose, the term child includes:

- Your natural child.
- Child for whom you are the legally appointed guardian with full financial responsibility.
- Child of a domestic partner or civil union partner.
- Your stepchild.
- Your legally adopted child or child placed with you for adoption.
- Child named in a Qualified Medical Child Support Order.
- Foster child that has been placed with you by an authorized agency, judgment, decree, or other court order.
- The term child includes a dependent 26 or more years old if unmarried, primarily supported by you, and incapable of self-sustaining employment by reason of mental or physical disability.

## Dependent Eligibility

It is important to monitor the eligibility of your dependents for NFP benefits coverage (as detailed in this guide). You may be required at any time to provide proof of your dependent's eligibility.

Continued >>

# 2023 ENROLLMENT



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Domestic Partner Eligibility

- Your eligible domestic partner is a person of the same or different sex with whom you have established a domestic partnership. To be considered domestic partners, certain requirements must be met (as outlined in NFP's **Certification of Family Relationships Form**), which generally include but are not limited to the following:
  - You must not be related by blood or a degree of closeness that would prohibit marriage in the state in which you and your partner reside.
  - You must not be currently married to, or legally separated from, another individual and are not in a domestic partnership with any other individual.
  - You must share the same permanent residence and attest to a significant measure of financial interdependence or dependence.

\*If you choose to cover a civil union or domestic partner (and any of their children), you must complete a Certification of Family Relationships form and submit the required supporting documentation to NFP Employee Benefits within 31 days of the qualifying event date. You can obtain a copy of the policy and the certification form in the Library section of the NFP Employee Benefits Portal or by contacting the NFP Employee Benefits Center at **1-877-637-0637**. Coverage for domestic partners must be approved by NFP Employee Benefits.

**NOTE:** *There are important tax consequences for you to consider with regard to health coverage for a domestic partner or civil union partner (or any of their children) who is not your tax dependent, as outlined in detail in the Policy. In addition, it is important to note that medical expenses incurred by a Domestic Partner or Civil Union Partner (or any of their children) who is not your tax dependent are ineligible for reimbursement under the Health Care FSA or HSA.*





# QUALIFIED LIFE EVENTS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The benefit elections you make during your enrollment period remain in effect for the entire year. If you experience a Qualified Life Event, you may add or drop yourself and applicable dependents to your existing plan. Your change must be consistent with the Qualified Life Event which has occurred. Further information on Qualified Life Events can be found in the Special Notices and Compliance section under HIPAA Notice of Special Enrollment Rights, and on the following chart.

### Examples of Qualified Life Events include:

- Birth, Adoption, Legal Guardianship, or Placement for Adoption
- Marriage, Civil Union, or Establishment of Domestic Partnership
- Divorce, Annulment, or Dissolution of Domestic Partnership or Civil Union
- Death of a Dependent
- Gain of Other Creditable Coverage
- Loss of Other Creditable Coverage

**Qualified life events and supporting documentation must be submitted within 31 days of the date of your life event.**

**To report a change:** From your Microsoft One Access Page, Click on the **UltiPro** People First Portal tile, and follow the link to **The Employee Benefits Portal** on the left hand side of the home page.

If you experience a Qualified Life Event, log on to The Employee Benefits Portal, accessed through Microsoft One Access Page, to execute the change. You must notify NFP Employee Benefits within 31 days of the date of your life event. If you do not notify NFP Employee Benefits, and provide valid documentation within 31 days, you will have to wait until the next annual enrollment to add or drop yourself or your dependents.

Changes to your elections are governed by NFP's Section 125 Plan. For additional information on Qualified Life Events, please refer to NFP's Section 125 Summary Plan Description, which can be found in the Library section of The Employee Benefits Portal.

**NOTE:** There are IRS regulations regarding coverage for domestic partners and civil union partners (and their children) who are not your federal tax dependents. Please see NFP's Policy Regarding Benefits for Domestic Partners and Civil Union Partners for more information.

Continued >>





# QUALIFIED LIFE EVENTS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

You will be required to furnish documentation of the change to NFP Employee Benefits within 31 days of the event. Supporting documentation must contain the reason for the change, the date of the event, and the family members who are affected by the event.

The *Benefit Effective Date* is calculated based on the *Life Event Date* listed on the required supporting documentation submitted to NFP.

QUALIFIED LIFE EVENT	REQUIRED SUPPORTING DOCUMENTATION	BENEFIT EFFECTIVE DATE IF APPROVED	DEADLINE TO ENROLL
<b>Birth, Adoption, Placement for Adoption, Or Legal Guardianship of a Child</b>	Birth Certificate, Final Adoption Decree, Official Adoption Placement Contract, or Legal Court Decree of Guardianship	1st Day of New NFP Coverage will be the Same Day as the Birth, Adoption, Placement for Adoption, or Legal Guardianship of a Child	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Marriage, Civil Union, or Establishment of Domestic Partnership</b>	Marriage Certificate, Official Civil Union Certificate issued by State, or Declaration of Domestic Partnership (including appropriate back-up docs)	1st Day of New NFP Coverage will be the 1st of the Month Following the Date of the Marriage, Civil Union, or Establishment of Domestic Partnership	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Divorce, Annulment, or the Dissolution of Domestic Partnership</b>	Divorce Decree, Final Court Documents for Annulment, or NFP Statement of Termination of Domestic Partnership	1st Day Without NFP Coverage will be the 1st of the Month Following the Date of the Divorce, Annulment, or Dissolution of Domestic Partnership	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Death of Dependent</b> <i>(Spouse, Child, or Domestic Partner)</i>	Death Certificate	1st Day Without NFP Coverage will be the Day After Death	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Gain of Other Creditable Coverage</b> <i>(including Medicare)</i>	Proof of the Gain of New Creditable Coverage which shows the new effective date, type of coverage, and names of applicable dependents	1st Day Without NFP Coverage will be the 1st of the Month Following the Gain of Other Creditable Coverage Date. (If the effective date of new coverage falls on the 1st of Month, then 1st Day Without Coverage will be the same day.)	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Loss of Other Creditable Coverage</b> <i>(including Medicare)</i>	Proof of the Loss of existing Creditable Coverage which shows the effective date of loss, type of coverage, and names of applicable dependents	1st Day of New NFP Coverage will be the 1st of the Month Following the Date of the Loss of Other Coverage	31 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Gain of CHIP / Medicaid</b> <i>(This event has a 60 day period to make elections)</i>	Official State document with the effective date of CHIP/Medicaid coverage, and the names of applicable dependents	1st Day Without NFP Coverage will be the Day After the Gain of CHIP / Medicaid Coverage Date	60 Days from the QLE Effective Date (QLE Date = Day 1)
<b>Loss of CHIP / Medicaid</b> <i>(This event has a 60 day period to make elections)</i>	Official State document with the date of loss of CHIP/Medicaid coverage, and the names of applicable dependents	1st Day of New NFP Coverage will be the Day After the Last Day of CHIP / Medicaid Coverage	60 Days from the QLE Effective Date (QLE Date = Day 1)



# MEDICAL BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## United Healthcare

You have three UnitedHealthcare (UHC) medical plans to choose from:

- UHC Preferred Provider Organization (PPO)
- UHC High Deductible Health Plan 1 (HDHP 1)
- UHC High Deductible Health Plan 2 (HDHP 2)

## Comparing Your Medical Options

All three UHC medical plan options cover the same services and are administered by United Healthcare. While you have the flexibility to choose in-network or out-of-network providers, the plans offer discounted rates when you obtain care from in-network providers. If you choose an out-of-network provider, you will be responsible for filing your claims, securing pre-authorization for certain treatments, and paying any fees as determined by the outlier cost management program.

**Plan Deductible:** Under the PPO and HDHP plan options, a deductible is required. Once an individual meets his or her individual deductible, benefits are payable for that person. Once the family deductible\* is met, benefits are payable for all covered family members for the rest of the calendar year.

*\* Family deductible applies to all coverage tiers other than "employee" (i.e., employee + spouse/domestic partner, employee + child(ren) and employee + family).*

## Naviguard • [www.naviguard.com](http://www.naviguard.com)

United Healthcare coverage offers access to a large, national network that includes more than one million healthcare providers and six thousand hospitals. You will receive negotiated rates and simplified billing by visiting in-network practitioners. If you choose to visit an out-of-network provider or facility, costs for those services will be managed by Naviguard. To find providers and facilities within your network, call the number on your United Healthcare ID card, download the United Healthcare app, or visit [www.myuhc.com](http://www.myuhc.com).

### Provider Networks

UHC has three provider networks, depending on where you live.

The networks are as follows:

- UnitedHealthcare Choice Plus (most states)
- Harvard Pilgrim Choice Plus (Massachusetts, New Hampshire and Maine)
- UnitedHealthcare Options PPO (Wisconsin)

Continued >>



# MEDICAL BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## *Northwell Direct*

For residents of New York and New Jersey, who are employees of participating firms, you have the choice of two medical plan:

- Northwell Direct HDHP
- Northwell Direct PPO

When you enroll in any one of the Northwell Direct medical plans administered by Allied, you and your family will have:

- Comprehensive coverage for major medical services (unless noted otherwise).
- Free Preventive Care. Your plan pays 100% for certain in-network preventive care services with no out-of-pocket costs to you. Preventive benefits are determined by national guidelines (incl. USPSTF, HRSA, and the CDC) and may differ from what your doctor recommends. Make sure to check your Summary Plan Description for a complete list of covered services.
- Prescription drug benefits through Express Scripts.
- 24/7 access to Allied's member website, so you can manage your benefits at any time from any device.
- Dedicated support. When you have a question or need assistance, Allied's Customer Service team is ready to help.

Both Northwell Direct plan options cover the same services and are administered by Allied. While you have the flexibility to choose in-network or out-of-network providers, the plans offer discounted rates when you obtain care from in-network providers. If you choose an out-of-network provider, you will be responsible for filing your claims, securing pre-authorization for certain treatments, and you may be billed for the difference between the doctor's bill and what the plan will pay.

Continued >>



# MEDICAL BENEFITS

## Kaiser

For residents of California, Washington and Oregon, the Kaiser HMO and Kaiser Deductible HMO options offer coverage for services provided by network providers and facilities only; there are no benefits for out-of-network services, except in emergencies. Kaiser providers are not available in all zip codes and therefore Kaiser coverage may not be available in your zip code. Refer to the NFP Employee Benefits Portal to ascertain eligibility for your zip code.

- Kaiser HMO
- Kaiser Deductible HMO

### Provider Networks

Kaiser has two provider networks in California as follows:

- Northern California Service Area
- Southern California Service Area

Kaiser has one provider network in Washington:

- CORE Network

Kaiser has one provider network in Oregon:

- Northwest Service Area



Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# MEDICAL BENEFITS

## BlueCross BlueShield of Vermont

For residents of Vermont, who are employees of participating firms, you may choose to enroll in:

- BCBS of Vermont CDHP

The CDHP plan is administered by BCBS of VT and includes prescription drug coverage through Vermont Blue Rx. The plan requires that you use in-network providers, except in the case of a medical emergency. If you use out-of-network providers, you will be responsible for the full amount. Out of state care for full time students temporarily residing out of state is possible. If you have a full-time student who temporarily resides outside of the State of Vermont, please notify NFP Employee Benefits at **nfpemployeebenefits@nfp.com**. If you have a dependent who resides out of state, but is not a full time student, coverage is not available. If this is your situation, you will want to elect one of the medical plan choices with out of network coverage.

### Provider Network

*On the BCBS of VT CDHP plan, you must use in-network providers, except in the case of a medical emergency. Visit [www.bcbsvt.com](http://www.bcbsvt.com) to find providers in the plan's network.*



Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# WHICH TYPE OF PLAN IS RIGHT FOR YOU?



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

Carefully review the comparison chart on the following pages to easily see the differences between the PPO and HDHP options.

NFP is offering affordable, minimum essential coverage as required under the employer shared responsibility requirement. If you are already enrolled in one of NFP's medical plans and wish to remain in that plan, you do not need to take action. If you are a new employee and you do not actively enroll in a medical plan option, you will be deemed to have waived coverage and will not be able to enroll in a medical plan until the next annual benefits enrollment period, unless you have a qualified life event. Any full time employee who goes to the exchange will be ineligible for a premium assistance tax credit due to the fact that our plan offers affordable, minimum value coverage.

You may also choose to waive medical coverage. If you do, however, you will not be able to enroll in a medical plan until the next annual enrollment period, unless you have a qualified life event.



Continued >>



# WHICH TYPE OF PLAN IS RIGHT FOR YOU?



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

	HDHP	PPO
<b>Employee premiums</b>	Typically lower	Typically higher
<b>Out-of-pocket expenses</b>	Out-of-pocket expenses are typically higher when you use health care services other than preventive care. Plan members must meet their deductible before any benefits are payable for non-preventive care services. Once the deductible is met, if applicable, the employee pays coinsurance until the out-of-pocket maximum is met.	Out-of-pocket expenses are typically lower for services other than preventive care. Copays (with no deductible) apply to many covered services. The deductibles are lower and apply to a limited number of covered services, such as hospitalization, outpatient surgery and sophisticated diagnostic services (e.g., MRI and CT).
<b>Eligibility for HSA</b>	Yes	No
<b>Eligibility for FSA</b>	No	Yes
<b>Eligibility for Limited Purpose FSA</b>	Yes	No
<b>Preventive care</b>	Eligible in-network preventive care services are covered at 100%; no copay, deductible or coinsurance applies.	
<b>Primary care and specialist office visits</b>	You pay the negotiated cost of all provider care until you meet your deductible. After you meet your deductible, you pay coinsurance for eligible claims up to the annual out-of-pocket maximum.	You pay your copay for office visits.
<b>Prescription benefits</b>	You pay the negotiated cost of all prescriptions until you meet your deductible. After you meet your deductible, you pay a copay for eligible prescriptions up to the annual out-of-pocket maximum.	You pay a copay for covered prescriptions.
<b>Inpatient services and outpatient surgery facilities</b>	You pay coinsurance after you have met your deductible, up to the out-of-pocket maximum.	
<b>Finances</b>	You would rather keep more of your paycheck each month and pay for medical care if and when you need it. You are comfortable absorbing some risk in order to build savings.	You prefer to pay a set fee every time you visit a doctor. You want to keep your cash flow as steady as possible regardless of what medical needs arise. You are willing to pay higher premiums for this predictability. You want the security of a lower deductible.
<b>Tax Savings</b>	You are interested in saving and investing towards your health care on a tax-free basis over many years. You may retire soon and would like to set aside funds to use in your retirement for qualified medical expenses.	You are comfortable with the use-it-or-lose-it aspect of a Flexible Spending Account. You are not interested in deeper tax savings or healthcare investment options.

Continued >>

# MEDICAL OPTIONS – UHC High Deductible Health Plans (HDHPs)



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information

The chart below highlights your costs and covered services under each of the UHC HDHP plans. The deductibles for these plans are embedded, which means that no single individual on a family plan will have to pay a deductible higher than the individual deductible amount. Choosing in-network providers will lower your deductible and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	HDHP 1 <sup>1</sup>		HDHP 2 <sup>1</sup>	
	In-Network	Out-of-Network <sup>2</sup>	In-Network	Out-of-Network <sup>2</sup>
<b>Annual Deductible</b> (Individual/Family)	\$3,000/\$6,000 embedded <sup>4</sup>	\$4,000/\$8,000 embedded <sup>4</sup>	\$5,000/\$10,000 embedded <sup>4</sup>	\$7,500/\$15,000 embedded <sup>4</sup>
<b>Annual Out-of-Pocket Maximum<sup>3</sup></b> (Individual/Family)	\$4,000/\$8,000 embedded <sup>4</sup>	\$6,000/\$12,000 embedded <sup>4</sup>	\$5,000/\$10,000 embedded <sup>4</sup>	\$9,000/\$18,000 embedded <sup>4</sup>
<b>Preventive Services</b>	No charge	40%	No charge	40%
<b>Physician's Office Services</b>	20%	40%	0% after deductible	40%
<b>Lab Tests &amp; X-rays</b>	20%	40%	0% after deductible	40%
<b>Diagnostic Services</b> (Hospital or outpatient facility) Including MRIs, CT & PET scans	20%	40%	0% after deductible	40%
<b>Maternity Services</b>	20% <sup>†</sup>	40% <sup>†</sup>	0% after deductible <sup>†</sup>	40% <sup>†</sup>
<b>Urgent Care Services</b>	20%	40%	0% after deductible	40%
<b>Mental Health and Substance Abuse</b>				
Inpatient	20% <sup>†</sup>	40% <sup>†</sup>	0% after deductible <sup>†</sup>	40% <sup>†</sup>
Outpatient	20%	40%	0% after deductible	40%

<sup>1</sup> Plan will pay benefits after the annual deductible has been satisfied.

<sup>2</sup> Out-of-network benefit cost is determined by Naviguard.

<sup>3</sup> The annual out-of-pocket maximums include the annual deductibles.

<sup>4</sup> The family deductible and out-of-pocket maximum can be met by a combination of family members; however no single individual within the family will be subject to more than the individual deductible or out-of-pocket maximum amount.

<sup>†</sup> Prior notification is required for these services.

Continued >>

# MEDICAL OPTIONS – UHC High Deductible Health Plans (HDHPs)



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The chart below highlights your costs and covered services under each of the UHC HDHP plans. The deductibles for these plans are embedded, which means that no single individual on a family plan will have to pay a deductible higher than the individual deductible amount. Choosing in-network providers will lower your deductible and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	HDHP 1 <sup>1</sup>		HDHP 2 <sup>1</sup>	
	In-Network	Out-of-Network <sup>2</sup>	In-Network	Out-of-Network <sup>2</sup>
<b>Hospital Inpatient</b>	20% <sup>†</sup>	40% <sup>†</sup>	0% after deductible <sup>†</sup>	40% <sup>†</sup>
<b>Outpatient Surgery</b>	20%	40%	0% after deductible	40%
<b>Professional Fees for Surgical/ Medical Services</b>	20%	40%	0% after deductible	40%
<b>Emergency Health Services</b>	20%	Same as in-network benefit	0% after deductible	Same as in-network benefit
<b>Ambulance Services Emergency</b>	20%	Same as in-network benefit	0% after deductible	Same as in-network benefit
<b>Injections</b> (Received in doctor's office)	20% per injection	40% per injection	0% after deductible	40% per injection
<b>Eye Exam</b>	No charge	40%	No charge	40%
<b>Rehabilitation Services - Outpatient</b> (Limited to 40 visits per calendar year - combined in- and out-of-network)	20%	40%	0% after deductible	40%
<b>Spinal Treatment</b> (24 visits per calendar year - combined in- & out-of-network)	20%	40%	0% after deductible	40%
<b>Fertility Benefits</b>	Contact your carrier for coverage, pre-authorization is required.			

<sup>1</sup> Plan will pay benefits after the annual deductible has been satisfied.

<sup>2</sup> Out-of-network benefit cost is determined by Naviguard.

<sup>3</sup> The annual out-of-pocket maximums include the annual deductibles.

<sup>4</sup> The family deductible and out-of-pocket maximum can be met by a combination of family members; however no single individual within the family will be subject to more than the individual deductible or out-of-pocket maximum amount.

<sup>†</sup> Prior notification is required for these services.

Continued >>

# MEDICAL OPTIONS – UHC Preferred Provider Organization (PPO)



The chart below highlights your costs and covered services under the UHC PPO medical plan. Choosing in-network providers will lower your deductibles and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	PPO	
	In-Network	Out-of-Network <sup>2</sup>
<b>Annual Deductibles<sup>1</sup></b> (Individual/Family)	\$750/\$1,500	\$4,500/\$9,000
<b>Annual Out-of-Pocket Maximums</b> (Individual/Family)	\$6,850 / \$13,700	\$8,000 / \$16,000
	Includes the annual deductible	
<b>Preventive Services</b>	No charge	50%
<b>Office Services</b>		
Physician	\$25 per visit	50%
Specialist	\$50 per visit	50%
<b>Lab Tests &amp; X-rays</b> (Received in doctor's office)	No charge	50%
<b>Diagnostic Services</b> (Hospital or outpatient facility)		
<b>MRIs, CT &amp; PET scans</b>	20%	50%
<b>Other Diagnostic Services</b>	No charge	50%
<b>Maternity Services</b>	Physician copayment applies to first office visit only for prenatal care; 20% for all other related maternity services <sup>†</sup> .	50% <sup>†</sup>
<b>Urgent Care Services</b>	\$50 per visit	50%
<b>Mental Health &amp; Substance Abuse</b>		
<b>Inpatient</b>	20% <sup>†</sup>	50% <sup>†</sup>
<b>Outpatient</b>	\$25 per visit	50%

<sup>1</sup> Copays do not apply toward PPO deductibles or coinsurance.

<sup>2</sup> Out-of-network benefit cost is determined by Naviguard.

<sup>†</sup> Prior notification is required for these services.

Continued >>

- Benefit Changes for 2023
- Program Choices
- Health and Wellness Resources
- 2023 Enrollment
- Qualified Life Events
- Medical Benefits
- Health Savings Account (HSA)
- Prescription Drug Benefits
- Dental Benefits
- Vision Benefits
- Flexible Spending Account (FSA)
- Life Insurance
- Disability Insurance
- 401(k)
- Financial Wellness
- Voluntary Benefits Programs
- Special Notices and Compliance
- Carrier Contact Information

# MEDICAL OPTIONS – UHC Preferred Provider Organization (PPO)



- Benefit Changes for 2023
- Program Choices
- Health and Wellness Resources
- 2023 Enrollment
- Qualified Life Events
- Medical Benefits**
- Health Savings Account (HSA)
- Prescription Drug Benefits
- Dental Benefits
- Vision Benefits
- Flexible Spending Account (FSA)
- Life Insurance
- Disability Insurance
- 401(k)
- Financial Wellness
- Voluntary Benefits Programs
- Special Notices and Compliance
- Carrier Contact Information

The chart below highlights your costs and covered services under the UHC PPO medical plan. Choosing in-network providers will lower your deductibles and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	PPO	
	In-Network	Out-of-Network <sup>2</sup>
<b>Hospital Inpatient</b>	20% <sup>†</sup>	50% <sup>†</sup>
<b>Outpatient Surgery</b>	20%	50%
<b>Professional Fees for Surgical/ Medical Services</b>	20%	50%
<b>Emergency Health Services</b>	\$200 per visit	\$200 per visit
<b>Ambulance Services Emergency</b>	20%	20% of billed charges
<b>Injections</b> (Received in doctor's office)	\$50 per visit	50% per injection
<b>Eye Exam</b>	No charge	50%
<b>Rehabilitation Services - Outpatient</b> (Limited to 40 visits per calendar year - combined in- and out-of- network)	\$50 per visit	50%
<b>Spinal Treatment</b> (24 visits per calendar year - combined in- & out-of-network)	\$50 per visit	50%
<b>Fertility Benefits</b>	Contact your carrier for coverage, pre-authorization is required.	

<sup>1</sup> Copays do not apply toward PPO deductibles or coinsurance.

<sup>2</sup> Out-of-network benefit cost is determined by Naviguard.

<sup>†</sup> Prior notification is required for these services.

Continued >>

# MEDICAL OPTIONS – Northwell Direct HDHP and PPO



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information

The chart below highlights your costs and covered services under each of the Northwell Direct plans. The deductible on the Northwell HDHP plan is un-embedded, which means that an individual that is enrolled in a family plan will need to meet the family deductible before co-insurance applies. Choosing in-network providers will lower your deductible and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	HDHP PLAN		PPO PLAN	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Annual Deductible</b> (Individual/Family)	\$2,500/\$5,000	\$4,000/\$8,000	\$750/\$1,500	\$4,500/\$9,000
<b>Annual Out-of-Pocket Maximum</b> (Individual/Family)	\$4,000/\$8,000	\$6,000/\$12,000	\$6,850/\$13,700	\$8,000/\$16,000
<b>Preventive Care</b>	100%	40% after deductible	100%	50% after deductible
<b>Primary Care / Specialist</b>	20% after deductible		\$25 / \$50 copay	
<b>Diagnostic Labs</b>	20% after deductible		20% after deductible	
<b>X-rays and complex imaging</b>				
<b>Emergency Room</b>		Paid same as in-network	\$200 copay	Paid same as in-network
<b>Hospital Services</b> (Inpatient and outpatient)	20% after deductible	40% after deductible	20% after deductible	50% after deductible
<b>Urgent Care</b>		40% after deductible	\$50 copay	50% after deductible

## Northwell Direct Provider Search

Navigate to [alliedbenefit.com/ProviderNetworks](https://alliedbenefit.com/ProviderNetworks) and select Northwell Direct, which will connect you to their open directory site. On the Northwell Direct page, you have the option to search providers by Provider Last Name or Specialty.

To search facilities, select from the following Locations at a Glance:

- Ambulatory Surgery Centers
- Laboratories
- Hospitals
- Urgent Care
- Imaging

**Note: once you are enrolled in a Northwell plan, you will have access to an enhanced Provider Finder tool through your Allied Member Portal. The Provider Finder will help guide you to make better choices with personalized search results and real-time cost estimates for medical procedures.**

Continued >>





# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in California

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER CALIFORNIA HMO	KAISER CALIFORNIA DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Annual Deductibles<sup>1</sup></b> (Individual/Family)	None	\$1,000 / \$2,000
<b>Annual Out-of-Pocket Maximums</b> (Individual/Family)	\$1,500 / \$3,000	\$3,000 / \$6,000
<b>Lifetime Maximum</b>	Unlimited	Unlimited
<b>Preventive Services</b>	No charge	No charge
<b>Physician's Office Services</b>	\$20 per visit	\$30 per visit
<b>Lab Tests &amp; X-rays</b>	No charge	\$10 per encounter
<b>Diagnostic Services</b> (Hospital or outpatient facility) MRIs, CT & PET scans Other Diagnostic Services	No charge	20% up to \$50/procedure
<b>Maternity Services</b>	No charge	No charge
<b>Urgent Care Services</b>	\$20 per visit	\$30 per visit
<b>Mental Health</b> Inpatient Outpatient Group Outpatient	No charge \$20 per visit \$10 per visit	20% coinsurance after deductible \$30 per visit \$15 per visit
<b>Substance Abuse</b> Inpatient Outpatient Group Outpatient	No charge \$20 per visit \$5 per visit	20% coinsurance after deductible \$30 per visit \$15 per visit

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in California

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER CALIFORNIA HMO	KAISER CALIFORNIA DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Hospital Inpatient</b>	No charge	20% coinsurance after deductible
<b>Outpatient Surgery</b> Facility Physician/Surgeon	\$20 per visit No charge	20% coinsurance after deductible
<b>Professional Fees for Surgical/ Medical Services</b>	\$20 per visit	20%
<b>Emergency Health Services</b>	\$100 per visit (waived if directly admitted to hospital)	20% coinsurance after deductible
<b>Ambulance Services Emergency</b>	\$50 per trip	\$150 per trip
<b>Injections</b>	\$20 per visit	\$30 per visit
<b>Eye Exam</b>	No charge	No charge
<b>Rehabilitation Services</b> Inpatient Outpatient	No charge \$20 per visit	20% coinsurance after deductible \$30 per visit
<b>Chiropractic Care</b>	Not covered	Not covered

## Primary Care Physician

You are encouraged to select a Primary Care Physician (PCP) for you and your covered family members. Your PCP will coordinate your care and make referrals, when appropriate. It's important that you carefully consider your PCP choice because PCPs are affiliated with specific hospitals and other health care facilities, to which they refer their patients. If you do not designate a PCP, the plan will assign one for you.

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in Washington

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER WASHINGTON HMO	KAISER WASHINGTON DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Annual Deductible</b> (Indiv/Fam)	None	\$1,000 / \$2,000
<b>Maximum Out-Of-Pocket</b> (Indiv/Fam)	\$1,500 / \$3,000	\$3,000 / \$6,000
<b>Maximum Lifetime Benefit</b>	Unlimited	Unlimited
<b>Preventive Services</b>	No Charge	No Charge
<b>Hospital Inpatient</b> (Services rendered while hospitalized)	No Charge	20% coinsurance after deductible
<b>Outpatient</b>		
Primary Care	\$20 copay	\$30 copay
Urgent Care	\$20 copay	\$30 copay
Specialist	\$20 copay	\$30 copay
Well-child preventive care visits (23 months & younger)	No Charge	No Charge
Routine prenatal care and first postpartum visit	No Charge	No Charge
Outpatient surgery	\$20 copay	\$30 copay, deductible and coinsurance apply
Most X-rays and Lab tests	No Charge	20% coinsurance after deductible
Ambulance services	20% coinsurance	20% coinsurance
Emergency department visits	\$100 copay per visit	\$50 copay, deductible and coinsurance apply
<b>Mental Health Services</b>		
Inpatient psychiatric care	No Charge	20% coinsurance after deductible
Outpatient individual therapy visits	\$20 copay	\$30 copay
Outpatient group therapy visits		
<b>Chemical Dependency Services</b>		
Inpatient detoxification	No Charge	20% coinsurance after deductible
Outpatient individual therapy visits	\$20 copay	\$30 copay
Outpatient group therapy visits		
Transitional residential recovery services		

Continued >>



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information



# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in Washington

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER WASHINGTON HMO	KAISER WASHINGTON DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Infertility Services</b> Covered services related to the diagnosis and treatment of infertility	50% coinsurance	50% coinsurance after deductible
<b>Additional Benefits</b> Durable Medical Equipment Skilled Nursing Facility (100 days) Home Health Hospice Care Optical eyewear Hearing aids Chiropractic (10 visits per calendar year) Acupuncture (10 visits per calendar year)	20% coinsurance No Charge No Charge No Charge Not Covered Not Covered \$20 copay \$20 copay	20% coinsurance 20% coinsurance after deductible No Charge No Charge Not Covered Not Covered \$30 copay \$30 copay

## Primary Care Physician

You are encouraged to select a Primary Care Physician (PCP) for you and your covered family members. Your PCP will coordinate your care and make referrals, when appropriate. It's important that you carefully consider your PCP choice because PCPs are affiliated with specific hospitals and other health care facilities, to which they refer their patients. If you do not designate a PCP, the plan will assign one for you.

Continued >>

- Benefit Changes for 2023
- Program Choices
- Health and Wellness Resources
- 2023 Enrollment
- Qualified Life Events
- Medical Benefits
- Health Savings Account (HSA)
- Prescription Drug Benefits
- Dental Benefits
- Vision Benefits
- Flexible Spending Account (FSA)
- Life Insurance
- Disability Insurance
- 401(k)
- Financial Wellness
- Voluntary Benefits Programs
- Special Notices and Compliance
- Carrier Contact Information



# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in Oregon

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER OREGON HMO	KAISER OREGON DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Annual Deductible</b> (Individual/Family)	\$0	\$1,000/\$3,000
<b>Maximum Out-Of-Pocket</b> (Individual/Family)	\$1,500/\$3,000	\$3,000/\$9,000
<b>Preventive Services</b>	No Charge	No Charge
<b>Hospital Inpatient</b> (Services rendered while hospitalized)	\$200/day up to \$1,000/admission	20% coinsurance
<b>Outpatient</b>	\$50/visit	\$20/visit
<b>Primary Care</b>	\$20/visit	\$20/visit, deductible does not apply
<b>Urgent Care</b>	\$40/visit	\$20/visit, deductible does not apply
<b>Specialist</b>	\$30/visit	\$20/visit, deductible does not apply
<b>Well-Child Preventative Care Visits</b> (23 months & younger)	No Charge	No Charge
<b>Routine Prenatal Care and First Postpartum Visit</b>	No Charge	No Charge
<b>Outpatient Surgery</b>	\$50/visit	\$20/visit
<b>Most X-rays and Lab tests</b>	\$20/visit	20% coinsurance
<b>Ambulance Services</b>	\$75/trip	20%, deductible does not apply
<b>Emergency Department Visits</b>	\$200/visit	\$200/visit
<b>Mental Health Services</b>		
<b>Inpatient Psychiatric Care</b>	\$200/day up to \$1,000 admission	20% coinsurance
<b>Outpatient Therapy</b>	\$20/visit	\$20/visit, deductible does not apply

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# MEDICAL OPTIONS – Kaiser Health Maintenance Organizations (HMOs) for employees residing in Oregon

The chart below highlights your costs and covered services under the Kaiser HMO and the Kaiser Deductible HMO. Coverage applies to in-network services only. There is no coverage for services at out-of-network providers. If you choose the Deductible HMO your deductible must be met before co-insurance applies.

	KAISER OREGON HMO	KAISER OREGON DEDUCTIBLE HMO
Medical Benefits	In-Network ONLY	In-Network ONLY
<b>Chemical Dependency Services</b>		
<b>Inpatient Detoxification</b>	\$200/day up to \$1,000 admission	20% coinsurance
<b>Outpatient Therapy</b>	\$20/visit	\$20/visit, deductible does not apply
<b>Infertility Services</b>		
<b>Covered Services Related to the Diagnosis and Treatment of Infertility</b>	Not covered	Not covered
<b>Additional Benefits</b>		
<b>Durable Medical Equipment</b>	20% coinsurance	20% coinsurance
<b>Skilled Nursing Facility (100 days)</b>	No Charge	20% coinsurance
<b>Home Health</b>	No Charge	20% coinsurance
<b>Hospice Care</b>	No Charge	No charge, deductible does not apply
<b>Pharmacy</b>		
<b>Generic</b>	\$15 retail / \$30 mail order	\$15 retail / \$30 mail order, deductible does not apply
<b>Preferred Brand</b>	\$30 retail / \$60 mail order	\$30 retail / \$60 mail order, deductible does not apply
<b>Non-Preferred Brand</b>	\$50 retail / \$100 mail order	\$50 retail / \$100 mail order, deductible does not apply
<b>Specialty</b>	\$150 retail	\$150 retail, deductible does not apply

Continued >>



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information



# MEDICAL OPTIONS – BCBS of VT



- Benefit Changes for 2023
- Program Choices
- Health and Wellness Resources
- 2023 Enrollment
- Qualified Life Events
- Medical Benefits**
- Health Savings Account (HSA)
- Prescription Drug Benefits
- Dental Benefits
- Vision Benefits
- Flexible Spending Account (FSA)
- Life Insurance
- Disability Insurance
- 401(k)
- Financial Wellness
- Voluntary Benefits Programs
- Special Notices and Compliance
- Carrier Contact Information

## Consumer Driven Health Plan (CDHP)

The chart below highlights the costs and covered services on the BlueCross BlueShield of Vermont CDHP plan. The deductible on this plan is un-embedded, which means that an individual that is enrolled in a family plan will need to meet the family deductible before co-insurance applies. Choosing in-network providers will lower your deductible and out-of-pocket costs. Deductibles must be met before co-insurance applies.

Medical Benefits	CDHP*
	In-Network
<b>Annual Deductibles**</b> (Individual/Family)	\$2,500/\$5,000
<b>Annual Out-of-Pocket Maximums***</b> (Individual/Family)	\$2,500/\$5,000
<b>Preventive Services</b>	No charge
<b>Office Services</b> Physician Specialist	0% after deductible
<b>Lab Tests &amp; X-rays</b> (received in doctor's office)	0% after deductible
<b>Diagnostic Services</b> (Hospital or outpatient facility) MRIs, CT & PET scans Other Diagnostic Services	0% after deductible
<b>Maternity Services</b>	0% after deductible <sup>†</sup>
<b>Urgent Care Services</b>	0% after deductible
<b>Mental Health &amp; Substance Abuse</b> Inpatient <sup>†</sup> Outpatient	0% after deductible

\* Plan will pay benefits after the annual deductible has been satisfied.

\*\* If you have other family members on the policy, you are subject to the overall family deductible/family out-of-pocket maximum.

\*\*\* The annual out-of-pocket maximums include the annual deductibles.

† Prior notification is required for these services.

Continued >>

# MEDICAL OPTIONS – BCBS of VT



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The chart below highlights your costs and covered services under the BCBS of VT medical plan.

	CDHP*
Medical Benefits	In-Network
<b>Hospital Inpatient</b> <sup>†</sup>	0% after deductible
<b>Outpatient Surgery</b>	0% after deductible
<b>Professional Fees for Surgical/Medical Services</b>	0% after deductible
<b>Emergency Health Services</b>	0% after deductible
<b>Ambulance Services Emergency</b>	0% after deductible
<b>Injections</b> (Received in doctor's office)	0% after deductible
<b>Eye Exam</b>	0% after deductible
<b>Rehabilitation Services - Outpatient</b> (Limited to 40 visits per calendar year - combined in- and out-of-network)	0% after deductible
<b>Spinal Treatment</b> (24 visits per calendar year - combined in- & out-of-network)	0% after deductible

\* Plan will pay benefits after the annual deductible has been satisfied.

† Prior notification is required for these services.

Continued >>



# MEDICAL BENEFITS

## Voluntary Benefits – Supplements to Medical Plan Choices

The following benefit programs are available to you as a compliment to your medical plan choices, or as stand-alone benefits. Most of the programs listed below do not require enrollment in an NFP medical plan. Further information, and guidance on how to enroll, can be found in the Voluntary Benefits Programs and the Financial Wellness section of this guide.

<b>Brella</b>	<ul style="list-style-type: none"> <li>Brella is available to members that enroll in the UHC HDHP1, UHC HDHP2 and Northwell Direct HDHP medical plans and provides supplemental coverage and partial reimbursement for covered conditions.</li> </ul>
<b>GI Thrive</b>	<ul style="list-style-type: none"> <li>When you enroll in a United Healthcare plan, you will have access to this virtual digestive health program which includes unlimited phone or video appointments with a registered dietitian, a personal health coach, convenient app and more.</li> </ul>
<b>Genomic Life</b> (Formerly Cancer Guardian)	<ul style="list-style-type: none"> <li>Preventative hereditary risk screening and cancer diagnosis support is available to you and your immediate family members through Cancer Guardian.</li> </ul>
<b>Included Health</b> (Formerly Grand Rounds)	<ul style="list-style-type: none"> <li>When you enroll in a United Healthcare medical plan, you can use Grand Rounds by Included Health to find the best in-network practitioners, receive guidance around new diagnoses and treatment plans, and get support in deciding if surgery is the best option.</li> </ul>
<b>Aflac Critical Illness Insurance</b>	<ul style="list-style-type: none"> <li>Critical Illness coverage can help ease the financial burden of surviving a critical illness by providing financial resources to help with medical costs or ongoing living expenses.</li> </ul>
<b>Aflac Accident Insurance</b>	<ul style="list-style-type: none"> <li>This plan is designed to help cover expenses you may incur as the result of an accident, and can provide financial security so you can focus on recovery.</li> </ul>
<b>Aflac Hospital Indemnity Insurance</b>	<ul style="list-style-type: none"> <li>This coverage provides financial assistance if you are admitted to the hospital due to a covered accident or illness, and can relieve out of pocket expenses that are not covered under your health plan.</li> </ul>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information





# HEALTH SAVINGS ACCOUNT (HSA)



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information

## Focus on HDHP and HSA Options

The HDHP options through United Healthcare and Northwell Direct, and the CDHP option through BCBS of VT, work together with the Health Savings Account (HSA) to offer you special advantages. See below to help determine if this combination is right for you.

### Plan Eligibility

You must enroll in the UHC HDHP1, UHC HDHP2, Northwell Direct HDHP, or the BCBS of VT CDHP to be eligible to participate in the HSA. You will be eligible to contribute to your HSA and receive firm contributions, provided you are enrolled in the plan on the 1 of the month, provided your HSA is active.

#### You are ineligible for an HSA if you:

- Are enrolled in a government health plan, such as Medicare or Medicaid.
- Are claimed as a dependent on someone else's tax return.
- Have other non-high deductible health plan coverage (for example, a health care flexible spending account, a separate prescription drug plan, or a spouse's non-high deductible health plan that covers you.).
- Have a spouse with a health care flexible spending account that could reimburse your medical expenses.

If you enroll in an NFP High Deductible Health Plan, an account will be opened for you. Occasionally the bank will require additional information from you in order to open the account. If you are contacted by Optum Bank, please respond immediately so that your account can be opened in a timely manner. The HSA is a bank account that you own and may take with you regardless of where you work. It enables you to set aside tax-free money to:

- Pay for qualified health care expenses.
- Cover the cost of ongoing out-of-pocket costs.
- Build savings to cover future medical expenses.

When you have a qualified health care expense, you may access your funds using an HSA debit card or online banking and bill payment. Checks may be requested from Optum Bank for no fee.

For a complete listing of qualified health care expenses, check the QME Search Tool by visiting [www.optumbank.com](http://www.optumbank.com) and enter Qualified Medical Expenses in the search window.

**You must actively choose how much you would like to contribute to your HSA each year. If you do not make an HSA election, your contributions will end on December 31. You are not required to contribute individually in order to receive the monthly NFP contributions.**

Continued >>



# HEALTH SAVINGS ACCOUNT (HSA)



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information

## HSA Contributions

When you participate in an NFP HDHP or CDHP, your firm will make a monthly contribution to your HSA for each month that you are enrolled in an HDHP. The amount the firm contributes is based on the medical plan coverage level in effect on the first of each month. You do not need to make HSA contributions yourself to receive your firm's contributions.

You may choose to make pre-tax contributions to your HSA, and the amount you are allowed to contribute is regulated by federal law. If you are age 55 or older, you may make additional pre-tax catch-up contributions of up to \$1,000 a year. Contribution amounts are generally indexed each year for inflation. You can start, stop or change the amount of your HSA contributions anytime during the year.

If you are married and your spouse is enrolled in an HDHP and has an HSA, the combined total of you and your spouse's HSAs cannot exceed the federal maximum for family level coverage.

## HSA Annual Contributions - Plan Year 2023

Coverage Level	Firm Contribution	Your Maximum Contribution*	Maximum Deposit to HSA**
<b>UHC HDHP1 - NORTHWELL DIRECT HDHP - BCBS OF VT CDHP</b>			
<b>Employee Only</b>	\$600	\$3,250	\$3,850
<b>All Other Levels</b>	\$1,200	\$6,550	\$7,750
<b>UHC HDHP 2</b>			
<b>Employee Only</b>	\$1,200	\$2,650	\$3,850
<b>All Other Levels</b>	\$2,400	\$5,350	\$7,750

\* You are not required to contribute to the HSA, however, firm contributions cannot be posted to your account unless your Optum Bank HSA is active.

\*\* These amounts do not reflect additional catch-up contributions for employees age 55 or older.

## Investing Your Account



















Once your account reaches a designated value, known as the investment threshold, you may, if you choose, set up a separate investment account to invest a portion of your savings in mutual funds. There are guidelines for transferring money from your account into the investment account. Please visit [www.optumbank.com](http://www.optumbank.com), or contact Optum Bank for information at **1-866-234-8913**.

**IMPORTANT NOTE:** Only HSA funds in the deposit account may be used to pay health expenses. If you have chosen to invest a portion of your account in mutual funds, you must first liquidate investments and transfer funds into your account. You can do this online through [www.optumbank.com](http://www.optumbank.com).

Continued >>



# HEALTH SAVINGS ACCOUNT (HSA)

-  Benefit Changes for 2023
-  Program Choices
-  Health and Wellness Resources
-  2023 Enrollment
-  Qualified Life Events
-  Medical Benefits
-  **Health Savings Account (HSA)**
-  Prescription Drug Benefits
-  Dental Benefits
-  Vision Benefits
-  Flexible Spending Account (FSA)
-  Life Insurance
-  Disability Insurance
-  401(k)
-  Financial Wellness
-  Voluntary Benefits Programs
-  Special Notices and Compliance
-  Carrier Contact Information

## HSA Reminders

### Establish and Activate an Optum Bank HSA

- In order to receive firm contributions to your HSA, HSAs are automatically opened upon enrollment. Occasionally, Optum Bank will require additional information in order to open your account. If contacted, you must respond to the inquiry before your account will be activated. You cannot receive funds into your account until your account is activated. The firm will not make contributions to an HSA established through another source, and you must have an Optum Bank account set up before firm contributions can begin.
- Expenses incurred before you establish your HSA are not qualified medical expenses.

### Know Your Personal HSA Responsibilities

- By accepting your firm’s HSA contributions and/or making your own contributions, you certify that you meet the HSA eligibility requirements.
- If you no longer meet the HSA eligibility requirements, including Medicare entitlement, it is your responsibility to notify NFP Employee Benefits immediately.
- You are solely responsible for ensuring that you do not contribute amounts above the federally mandated limits. If you do, you may be subject to adverse tax consequences.

## Tips for HSA Tax Reporting

Following are some tips to help you fulfill the tax reporting requirements for your HSA:

- Keep your receipts for expenses you pay from your HSA, in case you need to provide this information to the IRS.
- Review IRS Form 1099-SA, provided by Optum Bank, which states the distributions made from your HSA during the tax year.
- Review IRS Form 5498-SA, also provided by Optum Bank, which states your contribution amount for the tax year.
- Complete the HSA contribution IRS Form 8889 and attach it to your federal income tax return.
- Consult your tax advisor for more information about HSA tax requirements.

## Avoid Paying Unexpected Fees and Taxes

While the HSA offers important tax savings and other advantages, if you don’t use your account properly, you could be assessed fees. Here’s how to avoid this:

- Check online for your available HSA balance before you withdraw funds or use your HSA debit card.
- Use your HSA debit card at the point of service.
- Issue a check to yourself and/or provider through online bill pay.
- Contribute no more than the IRS mandated annual HSA limits.

Continued >>





# HEALTH SAVINGS ACCOUNT (HSA)



## Advantages of the HDHP and HSA

- Generally pay lower monthly premiums.
- Receive tax-free monthly contributions from your firm to your HSA, even if you don't make your own contributions to the account.
- Make tax-free contributions to your HSA through convenient payroll deductions, and change your contribution amount at any time throughout the plan year.
- Grow your HSA balance tax-free—any investment earnings are free from taxes.
- Carry over your HSA balance from year to year.
- Use your HSA balance to pay for qualified medical expenses—now and into the future—and, in most cases, pay no state or federal taxes on the money you take out, as long as you use it to pay for qualified health care expenses.
- Take your HSA balance with you—it's portable.

### First-time HDHP participants:

If you have a balance in the health care Flexible Spending Account on January 1 (including pending claims that have not cleared your account by December 31), you cannot begin your own HSA contributions until April 1. You will lose the firm contribution for January, February and March. This is a legal requirement under the HSA regulations.



Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

# HEALTH SAVINGS ACCOUNT (HSA)



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Qualified Life Events and Your HSA

- If you have a qualified life event, and as a result enroll in an HDHP plan, you will be eligible to contribute to an HSA and receive a contribution from your firm the first of the month coinciding with or following the day your HDHP coverage begins, as long as you have established and activated an Optum Bank HSA.
- If your medical plan coverage level changes as a result of a qualified life event (e.g., you move from family to single coverage), your firm's HSA contribution will change accordingly.
- If you become HSA-eligible after January and remain HSA-eligible on December 1 of the current year, then the last-month rule applies that permits you to contribute the greater of (1) the amount determined under the general monthly contribution rule or (2) the amount determined under the last-month rule based upon your tier of coverage (i.e., self-only or family) on December 1 of the current year. The last-month rule permits you to be treated as though you were HSA-eligible on January 1 with the same level of coverage as you have on December 1. However, if you rely upon this rule, you must remain HSA-eligible during the subsequent 13-month testing period to avoid an adverse tax consequence.

For more comprehensive information and instructions regarding HSAs and the amount you may contribute each year, refer to IRS Publication 969, including form 8889, found on **The Employee Benefits Portal**, accessed through Microsoft One Access Page. If you have questions regarding taxes in relation to HSAs, you may wish to consult your tax advisor or accountant.





# PRESCRIPTION DRUG BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

Employee who have elected medical coverage through UHC and Northwell Direct receive prescription drug coverage through Express Scripts pharmacy program.

When you fill your prescription at a participating retail pharmacy, you may purchase up to a 31-day supply of covered drugs. At the pharmacy, you will need to present your ID card and make the required copayment.

If you use a maintenance drug, such as blood pressure medicine for a heart condition, you may use the mail order program to receive a 90-day supply at a reduced cost to you. You will pay a copayment based on the schedule below.

	RETAIL PHARMACY 31-day supply	MAIL ORDER PROGRAM 90-day supply
<b>Copays</b>		
Generic	\$7	\$17.50
Plan Preferred Brand	\$35	\$87.50
Plan Non-Preferred	\$60	\$150
<b>Brand</b>		
Specialty	20% Coinsurance	20% Coinsurance
<b>Drug Tiers</b>	For more information about the Express Scripts formulary list and the tier of your medication, go to <a href="http://www.express-scripts.com">www.express-scripts.com</a> or visit the Library on <b>The Employee Benefits Portal</b> , accessed through Microsoft One Access Page.	
<b>HDHP1 Participants</b>	Copays apply once you satisfy your annual plan deductible. However, many drugs (generic and brand) are discounted at or below copays based on where the drug is purchased.	

## Use the Mail Order Program for Maintenance Drugs

### Lower cost, greater convenience

Smart90 Program allows members to purchase up to a 90-day supply of your long-term maintenance medication (those drugs you take regularly for ongoing conditions) at any Walgreens retail pharmacy.

Home Delivery Members can purchase 90-day long-term/maintenance medications through the Express Scripts home delivery service. The programs offers:

- Free standard shipping.
- Up to a 90-day supply of your long-term medicines delivered to your home.
- 24/7 access to a pharmacist from the privacy of your home.
- 25% less than retail pharmacies on average.
- Ability to order your refills online or on the phone.

Continued >>



# PRESCRIPTION DRUG BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

**Prescription Drug Benefits**

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Specialty Pharmacy Program

With a rare or complex medical condition (e.g., cancer, hepatitis, hemophilia, rheumatoid arthritis or HIV), the appropriate use of specialty medications can be critical to maintaining or improving a patient’s health and quality of life. The Express Scripts Specialty Pharmacy, Accredo, makes these medications accessible and cost effective for plan members. It provides focused, specialized support to individuals with complex medical conditions that often require multiple specialty medication therapies.

Any day, any time, log on to **www.express-scripts.com** or call the NFP Rx Solutions Pharmacy team at **1-888-201-9175** for additional information about the program, to find a specialty pharmacy and take advantage of additional resources to help you manage your condition.

## Rx Solutions

The goal of the NFP pharmacy plan is to offer employees and their family members a high-quality, cost-effective benefit. In the past few years, specialty drugs have exploded onto the pharmacy landscape. These drugs can often cost thousands of dollars per month and managing these costs while maintaining high levels of coverage can be a challenge. NFP has partnered with NFP RX Solutions, a consulting firm in the pharmacy management field, to oversee the pharmacy cost of the plan and help its employees and their family members to find financial assistance to cover most, if not all, of the cost of the coinsurance. NFP members will work with a trained clinical pharmacist to obtain any rebates, coupons or other prescription assistance arrangements that are available.

If you or a family member takes a specialty medication, contact Rx Solutions at **1-888-201-9175**.

## Smoking Cessation Medications

Smoking cessation medications prescribed by a physician are covered under the NFP prescription drug plan. Over-the-counter medications are not covered; however, discounts are available for smoking cessation kits and other products.



Continued >>



# PRESCRIPTION DRUG BENEFITS

## Kaiser

Employees who have elected medical coverage through Kaiser receive prescription drug coverage through Kaiser. When you fill your prescription at a participating retail pharmacy, you will need to present your Kaiser medical card. Prescriptions are based on formulary guidelines. You will pay a copayment based on the schedule below.

## Retail Pharmacy

	HMO	DHMO*
<b>KAISER CALIFORNIA</b>		
<b>Generic drugs</b>	\$10/prescription	\$10/prescription, deductible does not apply
<b>Preferred brand drugs</b>	\$20/prescription	\$30/prescription, after drug deductible
<b>Non-preferred brand drugs</b>	Same as preferred brand drugs when approved through exception process	
<b>Specialty drugs</b>	\$20/prescription	\$30/prescription, after drug deductible

\*There is a \$250 pharmacy deductible for brand and specialty drugs on the California DHMO plan.

<b>KAISER WASHINGTON</b>		
<b>Preferred generic drugs</b>	\$10/prescription	\$10/prescription, deductible does not apply
<b>Preferred brand drugs</b>	\$20/prescription	\$30/prescription, deductible does not apply
<b>Non-preferred generic/ brand drugs</b>	Not covered	
<b>Specialty drugs</b>	Applicable preferred generic, preferred brand, or non-preferred generic/brand cost shares may apply. Subject to formulary guidelines.	Applicable preferred generic, preferred brand, or non-preferred generic/brand cost shares may apply. Deductible does not apply.
<b>KAISER OREGON</b>		
<b>Generic drugs</b>	\$15/prescription	\$15/prescription, deductible does not apply
<b>Preferred brand drugs</b>	\$30/prescription	\$30/prescription, deductible does not apply
<b>Non-preferred brand drugs</b>	\$50/prescription	\$50/prescription, deductible does not apply

## Mail Order Program

If you use a maintenance drug, such as blood pressure medicine for a heart condition, you may use the mail order program to receive a longer supply at a reduced cost to you. To initiate a mail order prescription and/or refill for Kaiser California, log on to [www.kp.org](http://www.kp.org) or call **1-800-464-4000**. To initiate a mail order prescription and/or refill for Kaiser Washington, log on to [www.kp.org/wa](http://www.kp.org/wa) or call **1-888-844-4607**. To initiate a mail order prescription and/or refill for Kaiser Oregon, visit [www.kp.org](http://www.kp.org) or call **1-800-548-9809**.

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# PRESCRIPTION DRUG BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## BCBS of Vermont

Employees who have elected medical coverage through BCBS of Vermont receive prescription drug coverage through Vermont Blue Rx. The program is provided for retail prescriptions and mail order. You will need to satisfy the annual medical deductible before the prescription drug plan pays benefits. When you fill your prescription at a participating retail pharmacy, you may purchase up to a 30-day supply of covered drugs. Information on your prescription benefits can be found on the Vermont Blue Rx resource center at [www.bcbsvt.com/vermontbluerx](http://www.bcbsvt.com/vermontbluerx) where you can also:

- Locate a participating pharmacy.
- Order prescriptions online.
- View further details on your pharmacy benefits.
- Identify the drug tier for your prescription.

Prescription Drug Coverage	
Generic drugs	0% after deductible
Preferred brand drugs	0% after deductible
Non-preferred brand drugs	0% after deductible
Wellness drugs	0% after deductible

## Home Delivery Service for Maintenance Drugs

If you use a maintenance drug, such as blood pressure medication for a heart condition, you may use the Vermont Blue Rx home delivery program to receive a 90-day supply at a reduced cost to you. To start, ask your doctor to provide a prescription for a 90-day supply of your medication, plus refills, if appropriate. Prescriptions are typically mailed to your home within 10 business days. For more information on the mail order program, call the pharmacy number on the back of your ID card, or visit [www.bcbsvt.com/vermontbluerx](http://www.bcbsvt.com/vermontbluerx).

## Smoking Cessation Medications

Smoking cessation medications are covered under the NFP medical plans. The medications must be prescribed by a physician and are subject to the copay tiers listed above. Over-the-counter medications are not covered.





# DENTAL BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

**Dental Benefits**

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

You have three Delta Dental plans to choose from:

- Delta Dental Core Plan
- Delta Dental Standard Plan
- Delta Dental Deluxe Plan

You may also choose to waive dental coverage. If you do, however, you will not be able to enroll in a dental plan until the next annual enrollment period, unless you have a qualified life event.

## Comparing Your Dental Options

All three dental plans give you the flexibility to use both in-network and out-of-network providers. When you use an out-of-network provider, however, you will be responsible for filing claims and for paying any charges that exceed the plan's usual and customary charges.

All of the plans cover 100% of the cost or preventive care, with no deductible, and the cost of preventive care does not count towards your annual maximum. Coverage for other types of services varies by plan.

The chart below highlights your costs and covered services under each dental plan.

Dental Plan	CORE PLAN	STANDARD PLAN	DELUXE PLAN
<b>Annual Deductible</b>	\$25 per person	\$50 per person/\$150 per family	
<b>Preventive Care</b> Exams and cleanings, X-rays and sealants	No charge, no deductible		
<b>Basic Services</b>			
Fillings	40%	20%	20%
Endodontics, periodontics* and surgery	50%	20%	20%
<b>Major Services</b>			
Crowns, inlays, onlays, cast restorations and bridges	50%	50%	50%
Implants and related services	50%	50%	50%
<b>Orthodontic Services</b>	No coverage	No coverage	50%
<b>Temporomandibular Joint (TMJ) Services</b>	\$500, included in annual benefit max	\$1,000 lifetime max (not included in annual benefit max)	\$1,000 lifetime max (not included in annual benefit max)
<b>Annual Benefit Maximum</b>	\$500 per person	\$1,500 per person	\$2,000 per person
<b>Lifetime Orthodontic Maximum</b>	N/A	N/A	\$2,000 per person

**NOTE:** All out-of-network benefits are based on usual and customary charges.

\*Enhanced periodontal maintenance cleanings to allow up to two (2) additional Perio services D4346 or D4910, over and beyond the current two (2) cleanings per year.

**Continued >>**





# DENTAL BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

**Dental Benefits**

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Easy access to dental information

Delta Dental provides you easy access to your dental information when you visit [www.deltadentalins.com](http://www.deltadentalins.com) or download the app.

- Print an ID card.
- Find a network dentist.
- Verify plan eligibility and view benefit plan coverage.
- Estimate the average cost of dental procedures using Fee Finder.
- View claims information and status.

## Smile Direct Club

Smile Direct Club offers exclusive discounts to NFP employees and their families, regardless of your enrollment in an NFP dental plan. Further information, and guidance on how to enroll, can be found in the Voluntary Benefits Programs section of this guide.

## VISION BENEFITS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The Vision Plan is administered by Ameritas Vision and pays benefits for both in-network and out-of-network services. When you visit an in-network provider, benefits are greater and there are no claim forms to file. Plan participants also receive access to discounted Lasik eye surgery from in-network providers. When you use an out-of-network provider, you will be responsible for filing claims and reimbursed at the scheduled amounts listed in the chart below.

The Ameritas Vision plan utilizes both the VSP network and the EyeMed network. You will have the opportunity to select a vision care network upon enrollment in the vision plan.

You may also choose to waive vision coverage. If you do, however, you will not be able to enroll in the Vision Plan until the next annual enrollment period, unless you have a qualified life event.

**The chart below provides an overview of covered services and benefits under the Vision Plan.**

	IN-NETWORK*	OUT-OF-NETWORK
<b>Deductibles</b>	\$10 Exam \$25 Eye Glass Lenses or Frames*	\$10 Exam \$25 Eye Glass Lenses or Frames
<b>Annual Eye Exam</b> (Every 12 months)	Covered in full	Up to \$40
<b>Retinal Imaging</b>	\$39	No benefit
<b>Lenses (per pair)</b> (Every 12 months)		
Single Vision	Covered in full	Up to \$40
Bifocal	Covered in full	Up to \$60
Trifocal	Covered in full	Up to \$80
Lenticular	Covered in full	Up to \$80
Progressive	Standard progressives covered in full. Premium and Custom progressives are covered up to provider's contracted fee for Lined Bifocal Lenses. The patient is responsible for the difference between the base lens and the Progressive Lens charge.	Up to \$60
<b>Contacts</b>		
Fit & Follow Up Exams	Member cost up to \$60	No benefit
Elective	Up to \$215	Up to \$200
Medically Necessary	Covered in full	Up to \$250
<b>Frame Allowance</b> (Every 24 months)	\$200**	Up to \$45

\*Deductible applies to a complete pair of glasses or to frames, whichever is selected.

\*\*The Costco and Walmart allowance will be the wholesale equivalent.



# FLEXIBLE SPENDING ACCOUNTS (FSA)

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

You have the opportunity to save money in taxes by participating in the health care, limited purpose and/or dependent care Flexible Spending Accounts (FSA). You need to plan carefully before you participate in an FSA, because you forfeit any unused funds at the end of the claims period (see below), as legally required under the “use it or lose it” rule. If you have a qualified life event that permits the change, you may increase your FSA election during the year. FSA elections are governed by NFP’s Section 125 Plan, and cannot be decreased or waived during the plan year.

## Health Care FSA

You may make pre-tax, payroll-deducted contributions to the health care FSA to pay for eligible medical, dental, vision and other health care expenses that you incur during the year as follows:

HEALTH CARE FSA	
<b>2023 Annual Contributions</b>	\$100 to \$3,050
<b>Eligible Expenses*</b>	<ul style="list-style-type: none"> <li>• Out-of-pocket medical, dental and vision costs, such as deductibles and copayments.</li> <li>• Prescription drug copayments.</li> <li>• Over-the-counter medicine (prescribed by your provider)*.</li> <li>• Non-covered medical, dental, vision and hearing care expenses.</li> </ul>
<b>Claims Period</b> (Includes 2-1/2 month grace period)	Expenses must be incurred from January 1, 2023 through March 15, 2024.
<b>Claims Deadline</b>	Claims must be submitted by March 31, 2024.

\* Some exceptions apply, such as insulin.

### American Benefits Group administers the Flexible Spending Account Plan.

To track your health care and/or dependent care FSA and download forms, log on to [www.nfpflex.com](http://www.nfpflex.com).

### Please Note:

You must actively enroll each year to choose how much you want to contribute to a Flexible Spending Account (FSA). If you do not enroll, your contributions and enrollment will end on December 31.

Continued >>



# FLEXIBLE SPENDING ACCOUNTS (FSA)

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Paying Eligible Expenses

You may pay for eligible health care expenses in one of two ways, using a debit card or filing a manual claim.

### Health Care FSA Debit Card

Use the debit card to pay for eligible health care expenses at any health care provider or approved merchant. Funds will be taken directly from your health care FSA. There is a \$2,000 daily charge limit on your debit card.

Over-the-counter medicines may only be reimbursed through an FSA if they are prescribed by a physician. There are some exceptions. Insulin and certain other eligible over-the-counter equipment, supplies and diagnostic devices do not require a prescription. As a result, you may not use your debit card for over-the-counter expenses. You will need to use another form of payment and then file for reimbursement.

### FSA Claim Form

If you are not able to pay your provider using your FSA debit card, you can submit a claim online, via fax or by mail. You will need your receipts, and for over-the-counter expenses, you must include your prescription. The FSA claim form is available by logging on to [www.nfpflex.com](http://www.nfpflex.com) or by calling **1-800-499-3539**, ext. 2.

### HDHP Participants (Limited Purpose Health Care FSA)

A limited purpose health care FSA is available if you have HDHP coverage through NFP or coverage through another HDHP. The limited purpose health care FSA works just like the regular health care FSA, but reimbursable expenses differ.

Eligible expenses include:

- Dental expenses
- Vision expenses
- Out-of-pocket medical expenses after you reach the federally qualified HDHP annual deductible (\$1,500 for single coverage, \$3,000 for family coverage). You will need to submit an Explanation of Benefits (EOB) from your medical carrier that shows you have reached the federal deductible that applies to you.

#### First-time HDHP participants:

If you have a balance in the health care Flexible Spending Account on January 1 (including pending claims that have not cleared your account by December 31), you cannot begin your own HSA contributions until April 1. You will lose the firm contribution for January, February and March while your FSA account is being cleared. This is a legal requirement under the HSA regulations.

Continued >>

# WAYS TO SAVE—FSA AND HSA



This chart shows the features of the health care FSAs and the Health Savings Account (HSA) and compares the limited purpose health care FSA to the traditional health care FSA.

	HSA	LIMITED PURPOSE HEALTH CARE FSA <sup>1</sup>	HEALTH CARE FSA <sup>2</sup>
<b>Available if you select these plans</b>	UHC HDHP1 or 2 Northwell Direct HDHP BCBS of VT CDHP	UHC HDHP1 or 2 Northwell Direct HDHP BCBS of VT CDHP Or another HDHP	PPO or another non-HDHP
<b>How much you may contribute</b>	\$3,850 (employee only coverage) \$7,750 (all other coverage levels), less your firm contribution. Catch-up contributions of up to \$1,000 per year may so be permitted if you are age 55 or older.	\$100 to \$3,050 for plan year	
<b>Expenses you may pay from your account</b>	Out-of-pocket <ul style="list-style-type: none"> <li>• Medical</li> <li>• Prescription drug</li> <li>• Dental</li> <li>• Vision</li> <li>• Long-Term Care premiums</li> </ul>	Out-of-pocket expenses incurred during the current calendar year (including the grace period): <ul style="list-style-type: none"> <li>• Dental</li> <li>• Vision</li> <li>• Medical care and prescription drugs after you reach the federally qualified annual HDHP deductible<sup>3</sup></li> </ul>	Out-of-pocket expenses incurred during the current calendar year (including the grace period): <ul style="list-style-type: none"> <li>• Medical</li> <li>• Prescription drugs</li> <li>• Dental</li> <li>• Vision</li> </ul>
<b>Account balance available to reimburse expenses</b>	Current account balance	Entire contribution amount elected for the plan year.	
<b>Time limits for using your account balance</b>	No limit	Must use 2023 account balance for expenses incurred through March 15, 2024; claims must be filed by March 31, 2024.	
<b>If you don't use all your account balance each year</b>	Any account balance carries over from year to year.	You must submit claims by March 31, 2024 for all expenses incurred through March 15, 2024. Any remaining funds will be forfeited.	
<b>How it saves you money</b>	<ul style="list-style-type: none"> <li>• Your contributions are tax-free, which reduces your taxable income.</li> <li>• Any investment or interest earnings on your account balance is tax-free.</li> <li>• Distributions are tax-free if used for qualified health care expenses.</li> </ul>	<ul style="list-style-type: none"> <li>• Your contributions are tax-free, which reduces your taxable income and increases your take-home pay.</li> <li>• You pay for health care expenses with pre-tax dollars.</li> </ul>	



<sup>1</sup> The limited purpose FSA is available to employees who enroll in an NFP or other HDHP. HDHP members may not enroll in the health care FSA, unless you are ineligible to participate in the HSA.

<sup>2</sup> You don't have to participate in a NFP medical plan to enroll in a health care FSA.

<sup>3</sup> For 2023, the federally qualified annual HDHP deductible is \$1,500 for single coverage and \$3,000 for family coverage.

Continued >>



Benefit Changes for 2023



Program Choices



Health and Wellness Resources



2023 Enrollment



Qualified Life Events



Medical Benefits



Health Savings Account (HSA)



Prescription Drug Benefits



Dental Benefits



Vision Benefits



Flexible Spending Account (FSA)



Life Insurance



Disability Insurance



401(k)



Financial Wellness



Voluntary Benefits Programs



Special Notices and Compliance



Carrier Contact Information



# FLEXIBLE SPENDING ACCOUNTS (FSA)

## FSA Claim Forms

To obtain claim forms, visit [www.nfpflex.com](http://www.nfpflex.com) or call **1-800-499-3539**, ext. 2.

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Dependent Care FSA

If you require dependent care to enable you or you and your spouse to work, look for work or attend school full-time, you may make pre-tax, payroll-deducted contributions to the dependent care FSA to pay for eligible dependent care expenses.

### Eligible Dependents

To be eligible, expenses must be for care provided to:

- Your dependent child(ren) up to age 13, or;
- Any dependent who is physically or mentally unable to care for himself or herself who spends at least eight hours a day in your home and whom you claim as a dependent on your federal income tax return.

DEPENDENT CARE FSA	
<b>2023 Annual Contributions</b>	\$100 to \$5,000* Married, filing separate returns: \$2,500 <b>NOTE:</b> You may not contribute more than your income or your spouse's income, whichever is lower.
<b>Eligible Expenses*</b>	<ul style="list-style-type: none"> <li>• Preschool or nursery school expenses</li> <li>• Expenses for a babysitter in your home</li> <li>• Day care center</li> <li>• Summer day camp</li> <li>• After-school care</li> <li>• Adult day care center or in-home care for an adult dependent</li> </ul>
<b>Claims Period</b>	Expenses must be incurred from January 1, 2023 through March 15, 2024.
<b>Claims Deadline</b>	Claims must be submitted by March 31, 2024.

**\* Highly compensated employees (as determined by NFP through "discrimination testing") may contribute only up to a capped amount to their dependent care FSA. The capped amount is determined annually and subject to change.**

**\*\* As defined by the IRS in Publication 503—Child and Dependent Care Expenses.**

### Paying Eligible Expenses

You should pay your dependent care provider directly and then file a claim for reimbursement. Complete an FSA claim form and submit it by mail or fax along with your receipts. You can also set up automatic reimbursements on a per pay period basis. Make sure the receipts include service dates and your provider's tax payer identification number. The forms are available by logging on to [www.nfpflex.com](http://www.nfpflex.com) or by calling **1-800-499-3539**, ext. 2.



# LIFE INSURANCE

The life and accident insurance plans provide financial security to your dependents if you die or are severely injured in an accident. However, not all NFP firms participate in the life and accident insurance coverage. If your firm participates, you will have the opportunity to enroll on the NFP Employee Benefits platform. For participating firms, NFP automatically provides a certain level of coverage to you and gives you the opportunity to purchase additional life coverage for yourself and your dependents. The plans are administered by The Standard.

## Basic Life and AD&D Insurance

NFP provides eligible employees with \$100,000 of basic life Insurance at no cost to you. An equal amount of accidental death and dismemberment (AD&D) Insurance is provided with your life insurance coverage. AD&D Insurance protects you in case of accidental death or injury—if you lose a limb, eyesight or hearing. In the event of your death, the life plan pays a benefit to your beneficiary.

*The cost of coverage for basic life insurance exceeding \$50,000 will be automatically imputed as income for tax purposes, in accordance with IRS requirements. This will be listed as GTL (Group Term Life) in the Earnings section of your check.*

## Beneficiary Designation

Upon enrolling, you will be required to designate a beneficiary. Your beneficiary is the person or estate that will receive the benefit payment from your coverage in the event of your death. You may update your beneficiary(ies) at any time on the NFP Employee Benefits website on **The Employee Benefits Platform**, accessed through Microsoft One Access Page, or by calling the NFP Employee Benefits Enrollment Center at **1-877-637-0637**.



Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information





# LIFE INSURANCE

## Supplemental Life Insurance

You may elect to purchase additional life insurance coverage in increments of \$10,000, not to exceed \$1,000,000 (minimum \$10,000). The amount of your life insurance may not exceed 5 times your Annual Benefits Base Rate (ABBR). ABBR is your base salary as of November 1, plus cash bonus, draw and commissions for a 12-month period (November 1 - October 31).

As a new hire or newly eligible employee, your available coverages are based on your base salary as of your date of hire. Each January, your available coverages will also include any eligible cash bonus, draw and commissions you receive. For Producers, available coverages are based on your previous year's W-2 or total earnings for the last 12 months.

The guaranteed issue amount for this plan is \$1,000,000, but certain restrictions apply. You are not required to provide evidence of good health if you enroll when you are first eligible. If you did not enroll when first eligible, the evidence of good health will be required when you request new or additional coverage of more than \$10,000 during a subsequent enrollment period. Although evidence of good health may be required, changes to life insurance coverages can be made at any time throughout the year.

The cost of coverage depends on your age as of January 1 each year and the amount of coverage you elect. Contributions will be taken through payroll deductions on a post-tax basis. Rates are listed in the chart to the right.

AGE	MONTHLY PREMIUM Per \$1,000 of coverage
<b>Under 30</b>	\$.05
<b>30-34</b>	\$.07
<b>35-39</b>	\$.09
<b>40-44</b>	\$.10
<b>45-49</b>	\$.15
<b>50-54</b>	\$.23
<b>55-59</b>	\$.43
<b>60-64</b>	\$.66
<b>65-69</b>	\$1.26
<b>70-74</b>	\$2.04
<b>75-79</b>	\$3.31
<b>80 and over</b>	\$5.36



Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

**Life Insurance**

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information



# LIFE INSURANCE

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

**Life Insurance**

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Life Insurance for Your Dependents

If you purchase supplemental life insurance for yourself, you may also purchase coverage for your spouse, civil union partner, or domestic partner and eligible dependent children, including eligible children of your partner. In order to obtain this coverage for a domestic partner, or civil union partner, you must complete a Declaration of Domestic Partnership for Dependent Life Insurance and upload it to the employee benefits portal.

Spouse/partner coverage is available in increments of \$5,000 up to \$500,000. The spouse/partner coverage may not exceed 100% of your supplemental coverage amount up to the plan maximum of \$500,000.

As a new hire or newly eligible employee enrolling for spouse/partner coverage during the initial enrollment period, your spouse/partner will be required to provide evidence of good health if requesting more than \$50,000 of coverage. If you are enrolling for spouse/partner coverage after your initial enrollment period, or increasing your amount of coverage, your spouse/partner will be required to provide evidence of insurability if requesting more than \$10,000 of coverage. During subsequent enrollment periods, you may increase your coverage by \$10,000 without providing evidence of good health.

The cost of coverage is based on your age (not the age of your spouse/partner), as of January 1 of each year and the amount of coverage elected. Rates are listed in the chart to the right. Coverage continues through the end of the year in which your spouse/partner turns age 70.

**NOTE:** As a new hire or newly eligible employee, if your spouse/partner is age 70 or older at the time you are first eligible for benefits, life insurance is not available.

For your eligible dependent children, you may elect coverage in the amount of \$10,000 per child. Children are covered for the full benefit and are not required to provide evidence of good health. Dependent children must meet the requirements listed in the eligibility section. In addition, for Dependent Life Insurance, your child must also be dependent on you for support and maintenance.

## Spouse/Domestic Partner Life Insurance

AGE (based on employee age)	MONTHLY PREMIUM Per \$1,000 of coverage
Under 24	\$.04
25-29	\$.05
30-34	\$.07
35-39	\$.08
40-44	\$.10
45-49	\$.14
50-54	\$.26
55-59	\$.41
60-64	\$.73
65-69	\$1.26
70 and over	\$1.99

## Child Life Insurance

BENEFIT	MONTHLY PREMIUM
\$10,000	\$.85



# DISABILITY INSURANCE OPTIONS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

**Disability Insurance**

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The short- and long-term disability benefits provide financial security in the event you become disabled due to a non-work related injury or illness. However, not all NFP firms participate in the short- and long-term disability benefits. If your firm participates, you will have the opportunity to enroll on the NFP Employee Benefits platform. NFP pays the cost of this coverage, or you can elect to pay the premiums yourself through payroll deduction on a post-tax basis, to ensure any benefits paid are non-taxable (Social Security and Medicare taxes still apply). The plans are administered by The Standard.

## Short-Term Disability (STD)

After you have been disabled for five consecutive business days, STD pays benefits equal to 60% of your benefit base salary, up to \$2,500 per week. For employees, the benefit base salary includes salary and draw. For Producers, the benefits base salary includes salary, draw and commission. Benefits are paid for 26 weeks or until you are certified to return to work, whichever occurs first. To receive benefits, your claim must be approved by The Standard.

## Long-Term Disability (LTD)

In the event you become disabled and are unable to perform the material and substantial duties of your job, LTD will pay benefits equal to 60% of your Annual Benefits Base Rate (ABBR), up to a maximum of \$20,000 per month. ABBR is based on the most recent 12-month measurement period and is generally calculated once per year. Your premium and benefits may be adjusted at that time to reflect any changes in compensation for the most recent 12-month period. For employees, ABBR includes base salary, cash bonus and draw. For Producers, ABBR includes base salary, cash bonus, draw and commissions.

## Benefit Reduction

LTD benefits will be reduced by any other income you are eligible to receive, such as Social Security or State Disability. Benefits begin after 180 days of continuous disability (the "elimination period").

## Taxability of STD and LTD

Since NFP pays 100% of the monthly premium, any disability benefits from the plan are considered taxable income. However, during the enrollment period, employees may elect to pay the premium themselves through payroll deductions on a post-tax basis, to ensure any benefits paid are non-taxable.

*\* Social Security and Medicare taxes still apply.*

Continued >>



# DISABILITY INSURANCE OPTIONS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## When LTD Benefits End

You can continue to receive benefits if you are unable to perform with reasonable continuity the material duties of your own occupation or suffering a loss of at least 20% your predisability earnings. You may work in another occupation while disabled. However, you will no longer be considered disabled, with regards to disability earnings, when your earnings from another occupation meet or exceed 80% of your predisability earnings.

If you become disabled before age 60, LTD benefits may continue until age 65, to Social Security Normal Retirement Age (SSNRA), or 5 years, whichever is longest. If you become disabled at age 60 or older, the benefit duration is determined according to an age graded schedule.

LTD benefits end automatically on the earliest of:

- The date you are no longer certified disabled.
- The date your maximum benefit period ends.
- The date of your death.
- The date benefits become payable under any other LTD disability insurance plan under which you become insured through employment during a period of temporary recovery.
- The date you fail to provide proof of continued disability and entitlement to benefits.

## Reporting a Leave of Absence

To report an absence to The Standard, contact the **Absence Management Service Center at 1-844-250-5235** Monday – Friday 7:00am to 8:00pm ET. **STD Policy #753371-A / LTD Policy #753370-B**

You should report an absence to The Standard if you are absent from work or know you will be absent from work for any of the following reasons:

- Your own serious health condition (including pregnancy)
- To care for your newborn child
- The placement of your adopted or foster child
- To provide care for a qualifying family member with a serious health condition
- To care for a covered service member who becomes injured or ill in the line of duty
- For a qualifying reason related to military activities



# 401(K)

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

The NFP Corp. 401(k) Plan (the “Plan”) can be a helpful part of your retirement planning process. The Plan lets you save and defer taxes on the amount of your savings and on any potential investment earnings on your savings. In addition, you will receive tax-deferred company matching contributions as an incentive for you to accumulate savings for use in your retirement years. The following describes some of the Plan’s features.

## Eligibility

You are eligible to participate in the Plan if you are at least 21 years old and have completed 3 months of service. Part-time employees are eligible upon completion of 1,000 hours of service during the first 12 months from hire or any subsequent Plan year.

## Register and Enroll

You can register and enroll in the Plan at any time through the Plan’s website, **workplace.schwab.com**, or by calling Participant Services at **1-800-724-7526**. Your enrollment will be effective as soon as administratively feasible after you meet the eligibility requirements.

***Access to electronic services may be limited or unavailable during periods of peak demand, market volatility, systems upgrades, maintenance, or for other reasons.***

## Your Contributions

Pay yourself first. You determine how much to contribute to the Plan from each paycheck. The Plan allows pre-tax, Roth 401(k), and catch-up contributions.

### Pre-Tax Contributions

You may contribute any whole percentage from 1% to 100% of your eligible compensation for each payroll period to the Plan on a pre-tax basis, up to \$22,500 (2023 Internal Revenue Service limit) or any other applicable IRS limitations, whichever is less. There is a combined limit of 100% for pre-tax and Roth 401(k) contributions.

### Roth 401(k) Contributions

You may contribute any whole percentage from 1% to 100% of your eligible compensation for each payroll period to the Plan on a Roth 401(k) basis. There is a combined limit of 100% for pre-tax and Roth 401(k) contributions. The maximum 2023 IRS contribution limit of \$22,500 will apply to the combined amount of pre-tax and Roth 401(k) contributions.

### Catch-Up Contributions

If you contribute the annual pre-tax and/or Roth 401(k) limit of \$22,500 and are age 50 or older by the end of the calendar year, you may make additional deferral contributions to the Plan, subject to limitations imposed by the Plan or the IRS. For 2023, you may defer an additional amount up to \$7,500 (or as adjusted by the IRS) on a pre-tax and/or Roth 401(k) basis. There is a combined limit of \$7,500 for pre-tax and Roth 401(k) catch-up contributions. Catch-up contributions are not eligible for company matching contributions.

Continued >>



# 401(K)

## Changing Your Contributions

You may change your contribution percentage at any time. This change will be effective as soon as administratively feasible. You can also stop your contributions at any time. You may restart them, effective as soon as administratively feasible.

## Employer Contributions

As an added bonus to enrolling, NFP will match 50% on the first 6% of compensation, both pretax and Roth 401(k), that you contribute to the Plan. Catch-up contributions are not eligible for company matching contributions.

***The employer contribution is paid on a pre-tax basis and may be taxable at withdrawal.***

## Vesting of Contributions

Ownership, or vesting, refers to the amount of your Plan account that you could take with you if employment is terminated. You are always fully vested in your own pretax, Roth 401(k), and catch-up contributions, as well as any earnings on that money and any rollover amounts you may have in the Plan. However, you vest in company matching contributions, including any earnings, as shown on the following page.

Years of Service	LESS THAN 1	1	2	3+
Company contributions and any earnings	0%	33%	67%	100%
Your contributions	<b>Always 100%</b>			

You are immediately 100% vested if, while employed by NFP, you reach normal retirement age of 65 or early retirement age of 55, become totally disabled, or die.

If you previously participated in a qualified plan with an NFP affiliate, different vesting schedules may apply. In such cases, you will be notified by the Plan Administrator.

## Rollovers

If you have assets in a qualified retirement plan with a previous employer, there may be several options available to help you manage an additional retirement account. For more information, call Participant Services at **1-800-724-7526** or go to **workplace.schwab.com**.

Continued >>

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information





# 401(K)

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Access to Your Account Funds

The road toward fulfilling your retirement goals may not always be a straight one. Although the primary intention of the Plan is to help you save for your retirement years, there may be times when you need access to the funds in your account.

### Plan Loans

- You can have 2 outstanding loans.
- The minimum loan amount is \$1,000.
- Subject to IRS limitations, you may borrow up to \$50,000, or 50% of your vested balance, whichever is less.
- The \$50,000 limit is reduced by the highest outstanding balance on any Plan loan during the 12-month period ending on the date the loan is made.
- Loans will be charged Prime rate + 1%, fixed for the term of the loan. The interest will be paid to your account.
- General purpose loans must be paid within 5 years.
- Residential loans must be paid within 30 years.
- There will be a one-time \$75 loan initiation fee deducted from your account for each new loan.

### In-Service Withdrawals

- You may withdraw money anytime after you reach age 59 ½ (vested balance).
- You may request all or a portion of your rollovers at any time.
- If you experience a financial hardship, you may withdraw money from your account.

### Other Withdrawals Available

You may also take a distribution upon attainment of normal retirement at age 65 or early retirement at age 55, or if you become totally and permanently disabled. In addition, your beneficiary(ies) must take a distribution upon your death.

***Certain withdrawals are subject to ordinary income taxes. They may also be subject to a 10% non-deductible tax penalty if you are under the age of 59½. It is in your best interest to consult a tax advisor with any decision that may have tax implications.***

## Plan Investments

Through the Plan, you can build your own individual model using the available investment options, if you feel comfortable doing so, or you can select one of the target date retirement funds for a single-fund strategy. The Plan also offers a self-directed brokerage account option.





# FINANCIAL WELLNESS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

NFP is committed to the health and wellness of our employees, and in addition to your physical health, we are also invested in your financial wellness. Stress around your economic life can be consuming and difficult to manage. The programs in this section are intended to assist you in reducing your financial stress by helping you to effectively manage your finances and increase your sense of financial security and financial freedom.

## Armadillo Home Warranty • [www.armadillo.one](http://www.armadillo.one) • 1-844-471-1800

Armadillo is a subscription-based protection plan for when appliances and major systems break down in your home. From kitchen and laundry appliances to heating/cooling, plumbing, and electric, Armadillo cover the cost of repairs or replacements, coordinates service appointments, and ensures it's all done swiftly and hassle-free.

- 24/7 Support: Request service in less than 2 minutes at any time.
- Access to our network of qualified and reputable technicians.
- Quick reimbursement if you choose to use your own technicians.
- Replacements when appliances or systems cannot be repaired.

To enroll, visit the Employee Benefits platform, accessed through the UltiPro homepage, or call the NFP Employee Benefits Service Center at **1-877-637-0637**.

## NFP 401(k) Plan

The NFP 401(k) plan can be a helpful part of your retirement planning. Visit the 401(k) section of this guide for eligibility requirements, enrollment details and ways you can contribute to your retirement success. Visit **workplace.schwab.com** to see their extensive financial planning and financial wellness resources.



## HSA Investment Options

If you are eligible to open an HSA through NFP, and your account balance reaches the investment threshold, you can set up a separate investment account and invest a portion of your savings in mutual bonds. Visit **www.optumbank.com** and the Health Savings Account section of this guide for more details.



Continued >>

# FINANCIAL WELLNESS



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## IDShield Identity Theft Services

Working with government agencies, financial institutions, credit bureaus, creditors, collection agencies and more, IDShield's investigators will restore the participant's identity to its pre-theft status, including pre-existing identity theft matters. A few of the services include:

- Direct access to a dedicated investigator throughout the identity restoration process.
- Industry-leading \$5 Million Service Guarantee and \$1 million Identity Fraud Reimbursement.
- Auto-monitoring on credit, public records, court records, high risk applications and more.
- Comprehensive Dark Web monitoring of the participant's personally identifiable information (PII) across a series of black market websites where criminals purchase PII.
- Monthly credit score tracker is automatically updated on the IDShield mobile app and participant dashboard.

For more information, please call **1-888-807-0407**, or to enroll visit **The Employee Benefits Portal**, accessed through Microsoft One Access Page, or call **1-877-637-0637**.

## LegalShield Legal Services

This service will provide advice and representation on any matter covered by the plan, or provide consultation on the best course of action if the matter is not covered by the plan. Some of the services provided by this plan include:

- Demand letters and phone calls to a third party on behalf of the participant.
- Unlimited telephone consultations on any covered personal legal subject matter.
- Consultation, preparation, document review and representation at a civil proceeding.
- Adoption legal services, including representation in court for a contested or uncontested domestic adoption.
- Representation when a participant is seeking protection by a Victim Protection Order.

For more information, please call **1-800-654-7757**, or to enroll visit **The Employee Benefits Portal**, accessed through Microsoft One Access Page, or call **1-877-637-0637**.

## Virgin Pulse

You may already be familiar with Virgin Pulse programs for your physical and mental well being, and they also offer a range of information and programs for financial wellness. Details on this program are in the Health and Wellness Resources section of this guide.



Continued >>



# FINANCIAL WELLNESS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Long-Term Care through Trustmark

Long-Term Care (LTC) planning is an important aspect of a personal financial plan. LTC services are services that are not covered by your health insurance, disability insurance or Medicare. Trustmark's LTC benefits help protect your retirement savings, ease the burden of caregiving by your loved ones, and allows you to choose the setting where you receive care. New employees will be given the opportunity to enroll during your first year of employment.

- This program offers both life insurance protection and long-term care protection if you happen to need care.
- Benefits are payable as long as your coverage is active.
- You can access 4% of your elected life insurance benefit per month if you need covered LTC services.
- The LTC benefit keeps paying up to two times the life insurance benefit if you continue to need care.

For more information, visit [www.getltci.com/nfpltc](http://www.getltci.com/nfpltc) or call **1-855-650-9818**.

## Student Loan Refinancing

SoFi can help you save money on your student loan debt through loan consolidation and lower interest rates. All NFP employees and their eligible family members who sign up through [www.sofi.com/NFP](http://www.sofi.com/NFP) will receive an additional 0.125% interest rate deduction as part of their group benefit.

Benefits include:

- The ability to consolidate federal and private student loans.
- Rates starting at 1.90% (variable) and 3.50% (fixed).
- No fees or prepayment penalties.
- Unemployment protection.

For more information, or to enroll, contact SoFi at **1-855-456-7634** or [www.sofi.com/NFP](http://www.sofi.com/NFP).

## SupportLinc Employee Assistance Program

This program offers emotional wellness support and so much more. Visit [www.supportlinc.com](http://www.supportlinc.com) (username: NFP) for legal assistance, financial planning and consultation, assistance and referrals for dependent care, auto repair and home improvement services. Details on this program are in the Health and Wellness Resources section of this guide.



Continued >>



# FINANCIAL WELLNESS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Guaranteed Rate

Guaranteed Rate is dedicated to offering you a low price and superior customer service, with perks that are not available to the average customer. Take advantage of:

- A fast and seamless digital mortgage experience.
- Competitively low rates.
- Closing cost credits, for eligible applications.

For more information, or to apply through Guaranteed Rate, visit [www.rate.com/NFP](http://www.rate.com/NFP), call **1-773-435-0654** or email [dan@rate.com](mailto:dan@rate.com).

## Quicken Loans

Quicken Loans offers a fast, online application process that allows you to set your own timeline for closing and gives you the ability to manage your mortgage from your home.

Benefits include:

- In order to assist in evaluating your options, Quicken has calculators for mortgages, affordability, rent vs. buy, refinancing and amortization.
- Access a wealth of information for first-time home buyers, buying a vacation home, refinancing and real estate investing.

To access Quicken Loan services, visit <https://VIP.QuickenLoans.com/NFP> or call **1-800-447-3180**.

## Flexible Spending Accounts

We offer a General Purpose FSA, a Limited Purpose FSA and a Dependent Care FSA that all allow you to set aside pre-tax funds to cover eligible expenses. Further details, including the type of expenses that are covered under each account, are outlined in the Flexible Spending Account section of this guide and at [www.nfpflex.com](http://www.nfpflex.com).



Continued >>



# FINANCIAL WELLNESS

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Liberty Mutual Insurance

As an NFP employee, you receive discounted rates on auto and home insurance through Liberty Mutual. Take advantage of a number of superior benefits such as:

- 24 hour claims assistance for extra peace of mind.
- Multi-car and multi-policy discounts can help you save even more.
- 12 month rate guarantee locks in your rate for the entire year.
- Accident forgiveness ensures your premium won't go up due to your first accident.
- Employee parking guard gives your car additional coverage whenever you park at work.

For a free quote, call **1-800-699-4378 (client #122627)** or visit **[www.libertymutual.com/NFP](http://www.libertymutual.com/NFP)**.

## Farmers Group Select Home & Auto

Purchase your auto or home insurance through Farmers Group Select and receive the cost savings of a group discount, combined with the convenience of payroll deduction. Benefits include:

- Discounts for claim-free driving.
- Payroll deduction and years of service discounts.
- Multi-policy discounts.
- Towing/Roadside Assistance.
- Home replacement costs on both rebuilding and contents.

Coverage is also available for boats, RVs, mobile homes, renter's insurance, condo insurance and more.

For a free quote, call **1-800-438-6381** and tell the representative you're an NFP employee or visit **[www.myautohome.farmers.com](http://www.myautohome.farmers.com)**.

## Benefit Hub

This benefit is a comprehensive discount marketplace, providing exclusive discounts from many of the most desired brands. Some of the services offered through Benefit Hub will allow you to:

- Take advantage of hundreds of deals, with new offers being added daily.
- Discover savings from merchants in your neighborhood.
- Post reviews of vendors and services.

For more information, visit **[mynfp.benefithub.com](http://mynfp.benefithub.com)** and enter referral code **1SMDDP** or call **1-866-664-4621**.



# VOLUNTARY BENEFITS PROGRAM

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

NFP is committed to providing employees with a comprehensive benefits program as a way of recognizing and rewarding the hard work they bring to our company each day. As a supplement to the benefits you already receive, NFP has added voluntary benefits for eligible employees.

## Genomic Life (formerly Cancer Guardian) • [www.genomiclife.com](http://www.genomiclife.com) • 1-844-MYGENOME

Genomic Life members access the Genetic Health Screen to gain insights that inform their healthcare decisions. The non-invasive genomic test examines 147 genes for variants that are clear indicators of a significantly increased risk of developing hereditary cancers, cardiovascular diseases, and other medically actionable conditions.

Program Features include:

- Preventative hereditary risk screening gives you insight into your genetic risk for hereditary cancers.
- Cancer Information Line is available to you and your immediate family members at any time.
- Dedicated Cancer Support Specialist to support you through your cancer journey and enhance your healthcare literacy.
- A secure and HIPAA compliant medical records platform to organize and manage your medical data.

For information or to enroll, visit the Employee Benefits Portal or call **1-877-637-0637**.

## Aflac Critical Illness

Critical Illness coverage can help ease the financial burden of surviving a critical illness by providing financial resources to help with medical costs or ongoing living expenses. This plan can help you focus on recovery instead of the distraction of out-of-pocket costs. Some of the benefits of the Aflac Critical Illness coverage include:

- Annual benefit for completing certain preventative/wellness screenings.
- Once approved, benefit payments are sent directly to the enrollee.
- Coverage for such illnesses as cancer, heart attack, stroke, kidney failure and more.
- Coverage is available for you, your spouse and dependent children.

For more information, please call **1-800-433-3036**, or to enroll visit **The Employee Benefits Portal**, accessed through Microsoft One Access Page, or call **1-877-637-0637**.

Continued >>



# VOLUNTARY BENEFITS PROGRAM

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Aflac Accident Insurance

This plan is designed to help cover expenses you may incur as the result of an accident, and provide financial security so that you can focus on recovery. A few benefits of this coverage are:

- Payments made directly to the enrollee for approved accident claims.
- Reimbursements for ambulance transportation, prescriptions, major diagnostic testing and more.
- Coverage is guarantee-issue, and benefits are paid regardless of other medical insurance.

For more information, please call **1-800-433-3036**, or to enroll visit **The Employee Benefits Portal**, accessed through Microsoft One Access Page, or call **1-877-637-0637**.

## Aflac Hospital Indemnity

Even a small trip to the hospital can have a major impact on your finances. This coverage provides financial assistance, relieving you from out of pocket expenses not covered by your health care insurance. A few of the benefits include:

- Hospital Admission Benefit, one payment per illness/accident, when an enrollee is admitted to a hospital due to a covered accident or illness.
- Hospital Confinement Benefit for each day an enrollee is confined as an in-patient due to a covered accident or illness.
- Hospital Intensive Care Benefit for each day an enrollee confined to Intensive Care Unit due to a covered accident or illness.

For more information, please call **1-800-433-3036**, or to enroll visit **The Employee Benefits Portal**, accessed through Microsoft One Access Page, or call **1-877-637-0637**.

## Total Brain

Total Brain is a unique brain assessment and training app using the latest developments in neuroscience to measure the 12 brain capacities that define your mental health, and help you understand your brain performance. You can use the Total Brain app to:

- Understand and improve your brain performance to overcome daily challenges.
- Start a custom program with digital brain exercises, breathing and medication.
- Monitor the impact of mental health fitness programs and treatments.

For more information, visit [www.totalbrain.com/nfp](http://www.totalbrain.com/nfp) or contact [support@totalbrain.com](mailto:support@totalbrain.com).

Continued >>





# VOLUNTARY BENEFITS PROGRAM

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Smile Direct Club

Smile Direct Club offers exclusive discounts to NFP employees and their families for invisible aligner treatment.

- Free 3D scan of your teeth to build your new smile.
- Can straighten most smiles in six months, on average.
- Receive a premium whitening kit.

For more information, visit [www.smiledirectclub.com/NFP](http://www.smiledirectclub.com/NFP) and use code NFP200.

## Pets Best Pet Health Insurance • 1-888-984-8700 • [www.petsbest.com/nfpets](http://www.petsbest.com/nfpets)

Reference Discount Code: NFPSETS

With multiple coverage levels, Pets Best plan can be customized to meet the future medical needs of your four-legged family. Pet insurance can partially reimburse you for vet bills when your pet is sick or injured, but as with all pet insurance policies, pre-existing conditions are not covered.

- Get treatment from any licensed veterinarian.
- Optional coverage for routine care.
- Fast claims processing and payment.
- Mobile app and online filing for claims.
- Access to a 24/7 pet helpline.

## My Pet Protection Health Insurance • 1-877-738-7874 • [www.petinsurance.com/NFP](http://www.petinsurance.com/NFP)

NFP username: NFP

My Pet Protection is offered exclusively to employees and gives your pet protection from four-legged friends to exotic pets. Pet insurance can partially reimburse you for vet bills when your pet is sick or injured, but as with all pet insurance policies, pre-existing conditions are not covered.

- Same premium price for pets of all ages.
- Wellness plan option that includes spay/neuter, vaccinations and more.
- Coverage for accidents, including poisonings and allergic reactions.
- Extra features such as emergency boarding assistance, lost pet advertising and more.
- Access to a veterinary professional 24/7.



# SPECIAL NOTICES AND COMPLIANCE

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Summary of Material Modifications

The NFP Guide to Benefits Enrollment constitutes a Summary of Material Modifications (“SMM”) which describes changes to your health care program effective January 1, 2023.

This SMM is a summary of the changes made to the program and the partial terms of NFP’s medical, dental, vision, flexible spending accounts, health savings account, life and accident insurance and disability plans. This SMM should be retained with your other benefits information.

NFP reserves the right to change, amend, or cease these benefits at any time.

## HIPAA Notice of Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents’ other coverage). However, you must request enrollment within 31 days after your or your dependents’ other coverage ends (or after the employer stops contributing toward the other coverage).

If you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children’s health insurance program is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within 60 days after your or your dependents’ coverage ends under Medicaid or a state children’s health insurance program.

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children’s health insurance program with respect to coverage under this plan, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 60 days after your or your dependents’ determination of eligibility for such assistance.

**To request special enrollment contact the NFP Employee Benefits Center at 1-877-637-0637 or go to The Employee Benefits Portal, accessed through Microsoft One Access Page. To obtain additional information, you may contact NFP Employee Benefits at 1-512-697-6920 or by email at [nfpemployeebenefits@nfp.com](mailto:nfpemployeebenefits@nfp.com).**

Continued >>



# SPECIAL NOTICES AND COMPLIANCE

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

## Women’s Health and Cancer Rights Act

Do you know that your plan, as required by the Women’s Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema?

Call your plan administrator at **1-512-697-6920** for more information.

## Termination of Health Coverage for Cause, Including Fraud or Intentional Misrepresentation

When a covered employee and/or dependents are determined to be ineligible for coverage under the plan, the health care coverage will be terminated based on the terms of the plan. If the employee or covered individual commits fraud, or an intentional misrepresentation of fraud, may result in retroactive termination of coverage. An example may include intentionally presenting an individual as a spouse for the purpose of obtaining coverage and the individual is in fact a sibling or other non-eligible individual.



Continued >>



# NOTICE REGARDING WELLNESS PROGRAM

Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

NFP’s wellness program is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a biometric screening, which will include a fingerstick non-fasting blood test for total cholesterol, HDL, TC/HDL cardiac ratio, glucose, blood pressure and body composition (including height, weight, age, gender, BMI and body fat percentage). You are not required to complete the HRA or to participate in the blood test or other medical examinations.

The results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as programs through UnitedHealthcare or other PeopleFirst Well-Being programs. You also are encouraged to share your results or concerns with your own doctor.

## Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and NFP may use aggregate information it collects to design a program based on identified health risks in the workplace, NFP will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact NFP Human Resources at [humanresources@nfp.com](mailto:humanresources@nfp.com).

# CONTACT INFORMATION



Benefit Changes for 2023

Program Choices

Health and Wellness Resources

2023 Enrollment

Qualified Life Events

Medical Benefits

Health Savings Account (HSA)

Prescription Drug Benefits

Dental Benefits

Vision Benefits

Flexible Spending Account (FSA)

Life Insurance

Disability Insurance

401(k)

Financial Wellness

Voluntary Benefits Programs

Special Notices and Compliance

Carrier Contact Information

For information about...	GO TO...	TO...
<b>Your Benefits</b>	<b>NFP Employee Benefits Center</b> 1-877-637-0637 9:00 am to 6:00 pm, ET, weekdays	<ul style="list-style-type: none"> <li>View your benefits</li> <li>Make benefit elections and life event changes</li> <li>Designate or update beneficiaries</li> <li>Obtain Summary Plan Descriptions, forms, and other plan information</li> </ul>
<b>Medical Plans</b> Preferred Provider Organization & High Deductible Health Plan	<b>UnitedHealthcare Policy #711573</b> 1-800-980-7513 8:00 am to 8:00 pm, ET, weekdays www.myuhc.com	<ul style="list-style-type: none"> <li>Talk with a representative about your medical plan</li> <li>Learn about your coverage</li> <li>Find providers</li> <li>Determine the costs for treatments</li> <li>Order ID cards</li> <li>Access your medical claims</li> </ul>
<b>Medical Plans</b> Preferred Provider Organization & High Deductible Health Plan	<b>Northwell Direct administered by Allied Policy # A23103</b> 1-833-918-1379 Mon - Thurs 8:30am - 8:00pm ET Friday 9:00am - 6:00pm ET Saturday 10:00am - 1:00pm ET www.alliedbenefit.com	<ul style="list-style-type: none"> <li>Access your ID card</li> <li>Look up claims and deductible progress</li> <li>Review your benefits, copays, &amp; coinsurance amounts</li> <li>Find in-network providers and procedure cost estimates</li> </ul>
<b>Medical Plans</b> Consumer Driven Health Plan	<b>BlueCross BlueShield (BCBS) of VT</b> 1-800-255-4550 www.bcbsvt.com/login/resource_center To view certificate of coverage: www.bcbsvt.com/bluecare_cert	<ul style="list-style-type: none"> <li>Talk with a representative about your medical plan</li> <li>Learn about your coverage</li> <li>Find providers</li> <li>Determine the costs for treatments</li> <li>Order ID cards</li> <li>Access your medical claims</li> </ul>
<b>Prescription Drugs</b> for UHC & Northwell Direct Plans	<b>Express Scripts</b> Member Services: 1-855-315-3410 www.express-scripts.com	<ul style="list-style-type: none"> <li>Talk with a representative about your prescription drug coverage</li> <li>Get general information</li> </ul>
<b>Prescription Drugs</b> for Kaiser plans	<b>Kaiser California</b> 1-800-464-4000 • www.kp.org <b>Kaiser Washington</b> 1-888-844-4607 • www.kp.org/wa <b>Kaiser Oregon</b> 1-800-548-9809 • www.kp.org	<ul style="list-style-type: none"> <li>Talk with a representative about your prescription drug coverage</li> <li>Refill prescriptions</li> <li>Enroll in mail-order services</li> </ul>

Continued >>

# CONTACT INFORMATION











- Benefit Changes for 2023
- Program Choices
- Health and Wellness Resources
- 2023 Enrollment
- Qualified Life Events
- Medical Benefits
- Health Savings Account (HSA)
- Prescription Drug Benefits
- Dental Benefits
- Vision Benefits
- Flexible Spending Account (FSA)
- Life Insurance
- Disability Insurance
- 401(k)
- Financial Wellness
- Voluntary Benefits Programs
- Special Notices and Compliance
- Carrier Contact Information

For information about...	GO TO...	TO...
<b>Prescription Drugs</b> for the BCBS of VT Plan	<b>BlueCross BlueShield (BCBS) of VT Vermont Blue Rx</b>  www.bcbsvt.com/vermontbluerx 1-877-493-1947	<ul style="list-style-type: none"> <li>• Talk with a representative about your prescription drug coverage</li> <li>• Get general information</li> </ul>
<b>Dental Plans</b>	<b>Delta Dental</b> <b>Policy #s: Employees – 16124 Principals – 16123</b>  1-800-932-0783 8:00 am to 8:00 pm, ET, weekdays www.deltadentalins.com	<ul style="list-style-type: none"> <li>• Learn about your dental benefits</li> <li>• Find providers</li> <li>• View dental claim status</li> <li>• Access estimated costs using the Fee Finder</li> <li>• Print an ID card</li> </ul>
<b>Vision Plan</b>	<b>Ameritas Vision</b>  VSP Network 1-800-877-7195 EyeMed Network 1-866-289-0614 https://explore.ameritas.com/nfp	<ul style="list-style-type: none"> <li>• Learn about your coverage</li> <li>• Find in-network providers</li> <li>• Access your vision claims</li> <li>• Print an ID card</li> </ul>
<b>Health Savings Account</b>	<b>Optum Bank</b> <b>UHC plan Policy #711573 Northwell Direct and BCBS of VT plans Policy #1901195</b>  1-866-234-8913 8:00 am to 7:00 pm, ET, weekdays www.optumbank.com	<p>Get information about:</p> <ul style="list-style-type: none"> <li>• Your HSA balance and transactions</li> <li>• Fund transfers</li> <li>• Online bill payments</li> </ul>
<b>Flexible Spending Accounts</b>	<b>American Benefits Group</b>  1-800-499-3539 ext. 2 Fax: 1-877-723-0147 8:30 am to 5:00 pm, ET, weekdays www.nfpflex.com	<ul style="list-style-type: none"> <li>• Access your account information</li> <li>• Download claim forms</li> <li>• Submit claims for reimbursement</li> <li>• View claims status</li> </ul>

Continued >>

# CONTACT INFORMATION



-  Benefit Changes for 2023
-  Program Choices
-  Health and Wellness Resources
-  2023 Enrollment
-  Qualified Life Events
-  Medical Benefits
-  Health Savings Account (HSA)
-  Prescription Drug Benefits
-  Dental Benefits
-  Vision Benefits
-  Flexible Spending Account (FSA)
-  Life Insurance
-  Disability Insurance
-  401(k)
-  Financial Wellness
-  Voluntary Benefits Programs
-  Special Notices and Compliance
-  Carrier Contact Information

For information about...	GO TO...	TO...
<b>Life &amp; Disability Insurance</b>	<p><b>The Standard</b>  <b>Policy #s: STD - 753371-A • LTD - 753370-B • Life - 753370-A</b></p> <p>1-844-250-5235                      8:00 am to 8:00 pm, ET, Monday - Thursday; 8:00 am to 6:00 pm, ET, Friday</p>	<ul style="list-style-type: none"> <li>• Speak with a representative regarding a claim</li> <li>• File a claim for short term disability</li> <li>• Check the status of an existing claim</li> <li>• Speak with a representative regarding a claim</li> </ul>
<b>Employee Assistance Program</b>	<p><b>SupportLinc</b></p> <p>1-888-881-LINC (5462)                      24 hours a day/365 days a year  <a href="http://www.supportlinc.com">www.supportlinc.com</a>                      Username: NFP</p>	<ul style="list-style-type: none"> <li>• Confidential, no-cost professional referrals</li> <li>• Call or live chat with a licensed counselor</li> <li>• Receive guidance and referrals to expert resources</li> </ul>
<b>Claims Advocacy Assistance</b>	<p><b>Health Advocate</b></p> <p>1-866-695-8622  <a href="http://HealthAdvocate.com/members">HealthAdvocate.com/members</a>  <a href="mailto:answers@HealthAdvocate.com">answers@HealthAdvocate.com</a></p>	<ul style="list-style-type: none"> <li>• Speak with a Health Advocate representative</li> <li>• Get help finding practitioner, hospitals or specialists</li> <li>• Understand your benefits choices</li> <li>• Resolve claims issues</li> </ul>





UHC Medical Plans and Regional Plans  
(Kaiser, BCBS of VT, Northwell)