



*Understanding the changing needs of today's workplace.*

November 30<sup>th</sup> 2017

As you may or may not know, Integrity Staffing's Health Insurance Plan with Anthem, is renewing on January 1, 2018. Approximately sixty (60) days prior to January 1, the current carrier generates a renewal. We have received this renewal and will be offering its benefits during the month of January to ALL eligible employees that wish to purchase it. We will be switching Insurance carriers effective February 1, 2018. If you are currently on the Anthem Plan your benefits will end January 31<sup>st</sup>, 2018. You will need to re-enroll in the plan with the New carrier during the month of January during their open enrollment period.

**Important:** This is your open enrollment period for the Anthem Plan (12/01/17 through 01/01/2018). Coverage will be effective 01/01/18 to 01/31/2018. This enrollment will offer benefits for the month of January only. During Late December and Early January, you will be offered a second enrollment for a new policy which will be in effect for the balance of the 2018 plan year ( policy will be effective beginning February 1, 2018). You will be able to apply for those benefits during the second Open enrollment period in January. If you or a family member is not on the Integrity plan and you wish to be effective January 1, this is the time to enroll. If you wish to be on the new plan effective February 1, 2018, you do not need to enroll now but must enroll in January during the second offering.

Integrity Staffing offers its full time employees health benefit coverage after a 90 day waiting period. If you are eligible and wish to be covered, please contact Debbie Metzger and coverage will begin on your 91<sup>st</sup> day.

If you have any questions regarding the plan or have any service issues, please do not hesitate to contact Debbie Metzger at SS Benefits. Debbie Metzger can be reached at: 216/378-9969 or via e-mail at: [dmetzger@ssben.com](mailto:dmetzger@ssben.com)

If you are not enrolled currently in a healthcare plan with Integrity Staffing and wish to be, it is imperative that you contact Debbie Metzger at the contact information above to get enrolled prior to December 31, 2017 for a January 1 effective date. If you are currently enrolled and wish to stay enrolled you need not do anything until the January offering of the new plan. If you wish to add dependents, you must contact Debbie to have the change made.

Please see the attached for the SUMMARY of Benefits for the Anthem Plan we are offering. This plan meets all the minimum essential coverage requirements of the Affordable Care Act (ACA) and your monthly costs will be deemed affordable by the ACA. Please call our Corporate office for your individual monthly cost at (216) 896-5602.

**Michael Stark | Chief Financial Officer**  
Integrity Staffing Services

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Mayfield Heights | Twinsburg | Lakewood | Medina | Cuyahoga Falls  
216.896.5602 | 330.963.3700 | 216.227.3700 | 330.723.4096 | 330.929.3700



HEALTH PLAN COMPARISON  
Prepared for Integrity Staffing (2018 A)



S&S Benefits  
Egon P. Singerman

(216) 378-9969  
esingerman@ssben.com

	Base Current	Base Renewal
	<b>ANTHEM GROUP BLUE ACCESS D59 (15)</b>	<b>ANTHEM GROUP BLUE ACCESS D59 (15)</b>
ANNUAL DED Network Non-Network	IND FAM \$5,000 \$10,000 \$10,000 \$20,000	IND FAM \$5,000 \$10,000 \$10,000 \$20,000
CO-INSURANCE Network / Non-Network	80% / 60%	80% / 60%
OOP MAX Network Non-Network	IND FAM \$10,000 \$20,000 \$20,000 \$40,000	IND FAM \$10,000 \$20,000 \$20,000 \$40,000
DR VISITS Network Non-Network	\$30 (Spec \$60) N/N ded + 40%	\$30 (Spec \$60) N/N ded + 40%
NETWORK PREVENTIVE CARE	Pays 100%	Pays 100%
EMERGENCY	\$250 + 20%	\$250 + 20%
URGENT CARE Network Non-Network	\$75 N/N ded + 40%	\$75 N/N ded + 40%
RX PLAN Network Retail  Network Mail Order	\$10/\$35/\$70/25%* *\$200 max  \$10/\$88/\$175/25%* *2,500 OPM	\$10/\$35/\$70/25%* *\$200 max  \$10/\$88/\$175/25%* *2,500 OPM
NOTES		
Composite		
EE 28	477.10	609.89
EE/ES 1	1,048.66	1,340.54
EE/EC 4	805.34	1,029.50
Family 2	1,472.79	1,882.74
OTHER FEES	\$0.00	\$0.00

# Your Summary of Benefits



**Integrity Staffing**  
**Blue Access® Option D59 with Rx Option 8**  
**Effective 01/01/2018**

Covered Benefits	Network	Non-Network
<b>Outpatient Therapy Services</b> <b>(Combined Network &amp; Non-Network limits apply)</b> <ul style="list-style-type: none"> <li>· Physician Home and Office Visits (PCP/SCP)</li> <li>· Other Outpatient Services @ Hospital/Alternative Care Facility</li> </ul> Limits apply to: <ul style="list-style-type: none"> <li>- Physical Medicine Therapy Limits, Outpatient Therapy (Excludes Autism Spectrum Disorder)</li> </ul> (Network and Non-network combined): <ul style="list-style-type: none"> <li>- Cardiac Rehab: 36 visits</li> <li>- Manipulation Therapy: 12 visits</li> <li>- Occupational Therapy: 20 visits</li> <li>- Physical Therapy: 20 visits</li> <li>- Pulmonary Rehab: 20 visits</li> <li>- Speech Therapy: 20 visits</li> </ul> <ul style="list-style-type: none"> <li>- Autism Spectrum Disorder Services Outpatient Therapy Limits under age 14 (Network and Non-network combined):               <ul style="list-style-type: none"> <li>- Occupational Therapy: 20 visits</li> <li>- Speech Therapy: 20 visits</li> <li>- Clinical Therapeutic Intervention services: 20 hours weekly</li> </ul> </li> </ul> Accidental Dental: \$3,000 Limit	\$30 / \$60 20%	40% 40%
<b>Behavioral Health Services:</b> <b>Non Biologically Based Mental Illness and Substance Abuse (2) (limits and maximums apply)</b> <ul style="list-style-type: none"> <li>· Inpatient Facility Services</li> <li>· Physician Home and Office Visits</li> <li>· Other Outpatient Services @ Hospital/Alternative Care Facility</li> </ul> <b>Inpatient: 30 Network days</b> (includes inpatient mental health Non-Network ) <b>Outpatient: 30 Network visits</b> Substance Abuse (non-network) Non-Network limits apply (Substance abuse rehabilitation programs are limited to one per benefit period.)	20% \$60 20%	40% 40% 40%
<b>Human Organ and Tissue Transplants (3)</b> <ul style="list-style-type: none"> <li>· Acquisition and transplant procedures, harvest and storage.</li> </ul>	No Cost Share	50%
<b>Prescription Drugs (National):(4)</b> <b>Network Tier structure equals 1/2/3 (and 4 and 5 if applicable)</b> <ul style="list-style-type: none"> <li>· <b>Network Retail Pharmacies:</b>                (30 day supply)                Includes diabetic test strip</li> <li>· <b>Home Delivery</b>                (90 day supply)                Includes diabetic test strip</li> </ul> 4th Tier per script max- 30 day supply. Specialty medications are limited to a 30 day supply regardless of whether they are retail or home delivery. <ul style="list-style-type: none"> <li>- Member may be responsible for additional cost when not selecting the available generic drug.</li> <li>- Specialty Medications must be obtained via our Specialty Pharmacy network in order to receive network level benefits.</li> </ul>	\$10 / \$35 / \$70 / 25% \$200 max up to \$2,500 \$10 / \$88 / \$175 / 25% \$200 max up to \$2,500	50% , min \$70(5) Not Covered

Anthem Blue Cross and Blue Shield is the trade name of Community Insurance Company  
 An independent licensee of the Blue Cross and Blue Shield Association.  
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