

2015
2016



Employee Benefit Program

Effective **Oct. 1, 2015- Sept. 30, 2016**

New Employee Enrollment Instructions

As a newly hired employee of Youth Guidance, please make note of when you (and your dependents, including domestic partners and civil unions) will become eligible for participation in our benefit programs.

You will become eligible to participate in our benefit programs on your 31st day of employment.

All applications must be completed and submitted to the proper insurance companies within 30 days of your effective date. Failure to enroll within this time frame will result in you not being eligible to enroll in any of the benefit programs until the open enrollment period. Any employees who enroll during Open Enrollment will be effective on October 1, 2014.

Group Insurance Programs Offered

As a full-time employee of Youth Guidance the following coverages are available to you:

Medical – BlueCross BlueShield Participation is Voluntary, and contributions are deducted from your paychecks on a pre-tax basis.

Dental Insurance – MetLife Participation is voluntary. Contributions are deducted from your paychecks on a pre-tax basis.

Basic Term Life Insurance and Accidental Death & Dismemberment—Principal Financial Group Enrollment is automatic, and is provided free of charge.

Voluntary Life Insurance—Principal Financial Group Participation is voluntary.

Vision Insurance – Vision Service Plan Participation is voluntary. Contributions are deducted from your paychecks on a pre-tax basis.

Flexible Spending Accounts (FSA) – Benefit Advantage Participation is voluntary. Contributions are deducted from your paychecks on a pre-tax basis.

Employee Assistance Program (EAP) – Magellan Health Services Available to all employees and family members free of charge.

Long Term Disability Income Insurance – Principal Financial Group Enrollment is automatic, and is provided free of charge.

Long Term Care—UNUM Enrollment is automatic and is provided free of charge with the option to elect additional coverage.

Please refer to the following pages in this booklet for detailed information about this program. Any questions that you have about the benefit plans offered can be answered by your Employee Advocate, **Donn Slawinski** by phone at **(630) 353-2343** or by email to **dslawinski@affiliatedbc.com**.

Employee enrollment materials and applications can be picked up from Human Resources.

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Open Enrollment Overview

Open Enrollment is designed to allow you to make changes to the plans that you are currently enrolled in, as well as the option to enroll in plans in which you may not yet participate.

All plan changes that are submitted during open enrollment will be effective October 1st, 2015.

Our open enrollment period will take place from September 2nd — September 30th, 2015. You will be able to see your current benefit elections and make changes to your elections on our online benefit portal, Employee Navigator. You will need to login with a user name and password to see your information and the detailed instructions are on page 14.

BlueCross BlueShield

As an employee of Youth Guidance, you are eligible to participate in one of these plans:

BluePrint PPO (NPP82326)

This plan offers the flexibility of a large network of service providers as well as the option to receive care from providers not included in the network at reduced coverage rates. Specialist care is covered without requiring a referral.

BlueChoice PPO (NBP72326)

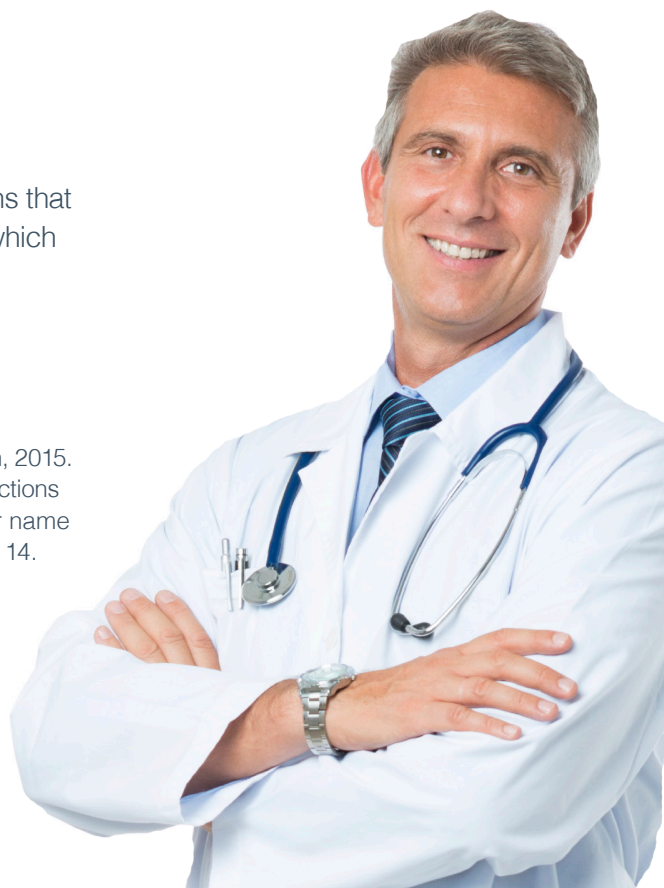
This plan offered a nested network of doctors and hospitals that you can seek medical care from both in and out of network.

BlueAdvantage HMO (NHHB106)

A managed care health plan. A primary care physician is required by all enrolled employees and dependents. All referred services are covered by specific copayments as outlined in the plan documents.

Benefit summaries are available on the following pages to help you understand the highlights of the plans offered and to help you better choose between the three offered plans.

Disclaimer: This brochure is for illustrative purposes only and provides a brief explanation of the benefits available through Youth Guidance. In the event of a discrepancy between this summary and the Plan Document(s), the Plan Document will prevail. Youth Guidance retains the right to modify or eliminate these or any other benefits at any time, for any reason.



Required Benefit Plans Disclosures

In order to aid in our organization's efforts to creating a green workplace, the required disclosure agreements for our benefit plans are available online. To access these disclosures, please visit: <http://goo.gl/vmx5i>

Your **Medicare Prescription Drug Disclosure** is available upon request by contacting your Employee Advocate:

Donn Slawinski at 630-353-2343
or via e-mail at DSlawinski@affiliatedbc.com.





Our annual open enrollment is your once-a-year opportunity to make changes to your benefits for the upcoming year.

All changes made during open enrollment will be effective for the entire benefit year. Only those employees who experience a qualifying life event have the opportunity to make situation specific changes to their selected benefit plan options.

Please take time to review the options available to you, as a full-time employee, and your dependents including domestic partners and civil unions.

BlueCross BlueShield

Medical Plan Options

	BLUEPRINT PPO PLAN (NPP82326)		BLUECHOICE PPO PLAN (NBP72326)	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK
CALENDAR YEAR DEDUCTIBLE				
Individual	\$1,000	\$2,000	\$500	\$1,000
Family	\$3,000	\$6,000	\$1,500	\$3,000
MAXIMUM OUT OF POCKET <small>(Includes annual deductible)</small>				
Individual	2,000	\$4,000	\$1,500	\$3,000
Family	\$6,000	\$12,000	\$4,500	\$9,000
HOSPITAL CHARGES				
Inpatient Charges* <small>Including mental health & substance abuse services</small>	90% after deductible	70% after deductible and \$300 copay per admission	90% after deductible	80% after deductible and \$300 copay per admission
Outpatient Charges* <small>Including mental health & substance abuse services</small>	90% after deductible	70% after deductible	90% after deductible	60% after deductible
Emergency Room	100% after \$150 copayment		80% after \$150 copayment	
PHYSICIAN CHARGES				
Primary Care Office Visit <small>(Including Family Practice, Internal Medicine, OB/GYN, or Pediatrician)</small>	100% after \$20 copayment	70% after deductible	100% after \$20 copayment	60% after deductible
Specialist Office Visit	100% after \$40 copayment	70% after deductible	100% after \$40 copayment	60% after deductible
Preventive Care Office Visit <small>Routine annual Physicals, well-baby exam, immunizations, and other preventive health services as determined by the USPSTF.</small>	100% deductible does not apply	70% after deductible	100% deductible does not apply	60% after deductible
PRESCRIPTION DRUGS <small>(Drugs purchased at non-contracted pharmacies are covered at 75% of the amount that would have been paid)to the contracting pharmacy minus copayment)</small>				
Generic	\$10 Copayment		\$10 Copayment	
Preferred	\$40 Copayment		\$40 Copayment	
Non-Preferred Brand	\$60 Copayment		\$60 Copayment	
Mail Order (90 day mail supply)	\$20/\$80/\$120		\$20/\$80/\$120	
ADDITIONAL SERVICES				
Therapy Services <small>Speech, Occupational, Physical</small>	90% after deductible	70% after deductible	90% after deductible	60% after deductible
COVERAGE LIMITS				
Plan Lifetime Maximum	Unlimited		Unlimited	
EMPLOYEE CONTRIBUTION AMOUNTS — SEMI-MONTHLY				
Employee	\$124.28		\$103.84	
Employee & Spouse	\$277.88		\$232.18	
Employee & Child(ren)	\$240.35		\$200.82	
Family	\$393.95		\$329.16	

* Pre-certification is required for inpatient hospital services, outpatient mental health and substance abuse services, coordinated home care, skilled nursing facility or private duty nursing services, the member is responsible for contacting BlueCare Connection for preauthorization.

* Dependent coverage is eligible to dependents up to the age of 26, or, in the case of eligible dependents who have served as a member of the active or reserve components of any branch of the United States Armed Forces, up to age 30. Dependents to the age of 26 will be considered eligible for coverage regardless of student status, marital status or employment.

BENEFITS ADMINISTERED BY:



GLOBAL

*Comprehensive strategies.
Individual attention.*

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