



TRIDENT



sitesafe™

2024

Open Enrollment Guide



At **The Purple Card®** we are passionate about serving the patient's best interest – we represent the patient, not the insurance company!

Every member is assigned to a Patient Advocate to serve as a liaison between healthcare providers, insurance carriers and health-related communities. Our Patient Advocates are highly skilled and trained to provide prompt and excellent service to educate and assist members on ways to maximize their healthcare coverage and other available benefits.

Purple Card Assistance

Expected Timeline

Emergency • You've lost your ID card and the provider's office needs to verify benefits •

Immediately – 24 Hours

Enrollment Support & Eligibility • You have questions about benefit information discussed at Open Enrollment meetings • Your dependent is losing coverage and needs to enroll in your plan •

Immediately - 48 Hours

Benefit Assistance & Coverage • You need help filling a prescription at the pharmacy or a carrier drug program • You need to verify coverage for a particular medical procedure or service •

24 - 48 Hours

Physician & Provider Search • You need assistance locating a physician or provider in your area •

Immediately - 24 Hours

Claims & Quality Care • You have a question about how a claim was processed or you're being balance-billed by your provider • You have a quality-of-care question and need to know if you are receiving the right care for your medical condition •

2 Days - 1 Week

Complex Claims • You had a procedure done in which you're receiving multiple bills and you do not understand what your financial responsibilities are for each bill •

1 - 4 Weeks

Your Patient Advocate

Did you know you have a dedicated patient advocate?
If you have any questions about your benefits, contact:



Michelle Washington

Patient Advocate

(E) michelle.Washington@thepurplecard.com

Questions about Your Benefits? Just Pull Out Your Purple Card!



Call
866.788.9118



Email
help@thepurplecard.com



Online
thepurplecard.com



Our family of companies contributes its success to you, our hardworking and dedicated employees! To show our appreciation, we offer a comprehensive benefits package that includes medical, dental, vision, life insurance and supplemental benefits.



The purpose of this guide is to provide you with information about each plan and to help guide you through the different options. We want you to feel empowered to make the best decision for you and your family.

Please **READ THIS GUIDE THOROUGHLY** and **CAREFULLY**. We ask you share it with your family and save it for future reference.

If you have questions, contact The Purple Card team at 866-788-9118.



Corporate Office Administrator

NAME	PHONE	EMAIL
Crystal King (Trident)	940-668-4081	HR@tridentprosystems.com
Christy McLean (all other companies)	940-668-8111	Benefits@core-ps.com

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Who is Eligible for Benefits?

Regular, full-time employees working a minimum of 30 hours per week and their eligible dependents.

Benefits are effective the first of the month following 60 days of full-time employment.

Our employees are our greatest assets. Our goal is to provide high-quality benefit options for you and your family.

About Your Open Enrollment

Annual Benefits Open Enrollment Period

Tuesday, 11/28/2023 through Monday, 12/04/2023

Open Enrollment is your annual opportunity to make changes to your benefits for the new plan year, **effective 01/01/2024**. During Open Enrollment, you can do the following:

- ❖ Change or opt out of offered plans
- ❖ Enroll or remove eligible family members in your offered plans
- ❖ Enroll in plan coverages if eligible, but not currently enrolled

Next Steps and Deadline

- ❑ Your Open Enrollment selections must be submitted to Human Resources before close of business on 12/04/2023 to process your enrollment changes for an effective date of 01/01/2024. **If you do nothing, your current benefits will end on 12/31/2023.**
 - Review, add or update your dependents
 - Add or update your life insurance beneficiaries (if applicable)

Please Note: You may ONLY make election changes during the plan year IF you have a Qualifying Life Event such as getting married or divorced, having a baby, or loss of health coverage. You have 30 days from the date of the event to submit election changes.

Questions about Benefit Plans?
Please contact **The Purple Card** at **866-788-9118**

Benefit Plan Overview

Plan	2023 Effective 01/01/2023 – 12/31/2023	2024 Effective 01/01/2024 – 12/31/2024
Medical	ABA / Excel with UnitedHealthcare	ABA / Excel with UnitedHealthcare
Health Savings Account (HSA)	Optum	Optum
Telemedicine	Lyric	Lyric
Dental	Guardian	Guardian
Vision	Guardian	Guardian
Basic Life and AD&D	State Farm	State Farm
Short-Term Disability	Guardian	Guardian
Enhanced Benefits	Guardian	Guardian
Air Ambulance	CareFlite	CareFlite

Medical Benefits

Our medical coverage continues with ABA / Excel with the UnitedHealthcare Choice Plus Network. Locate providers at <https://www.abadmin.com/find-a-provider/> or by calling **The Purple Card**.

IN-NETWORK BENEFIT HIGHLIGHTS	HSA-Q PPO	Silver 3000 - PPO
Network	UnitedHealthcare	UnitedHealthcare
Calendar Year Deductible <i>Individual/Family</i>	\$5,000 / \$12,700	\$3,000 / \$9,000
Coinsurance <i>Your share of the bill post deductible</i>	30%	20%
Out-of-Pocket Maximum <i>Individual/Family</i>	\$6,000 / \$12,700	\$6,000 / \$12,000

Covered Services – YOU PAY:

Preventive Care	\$0 copay, Deductible waived (DW)	\$0 copay, Deductible waived (DW)
Primary Care Office Visit	30% after deductible	\$10 copay (DW)
Specialist Office Visit	30% after deductible	\$55 copay (DW)
Diagnostic: X-Rays, Labs	30% after deductible	20% after deductible
Diagnostic: Imaging	30% after deductible	20% after deductible
Urgent Care Center	30% after deductible	\$75 copay (DW)
Emergency Room	30% after deductible	20% after deductible
Outpatient*	30% after deductible	20% after deductible
Inpatient*	30% after deductible	20% after deductible
Prescriptions <i>30 Day Supply (Retail) / 90 Day Supply (Mail Order)</i> Generic Preferred Brand Non-Preferred Brand Specialty	30% after deductible	Generic - \$1 / \$3 (DW) Preferred Brand - \$35 / \$105 (DW) Non-Preferred Brand - \$75 / \$225 (DW) Specialty - \$200 copay

*Benefits for mental health, behavioral health, & substance abuse may vary.
See plan documents for more information

Health Savings Account (HSA)

HSAs are individually-owned, tax-advantaged accounts used to pay for qualified medical expenses. HSAs enable you to build more savings for healthcare expenses or additional retirement savings through self-directed investment options. Enrolling in a qualified high deductible health plan, such as the company’s HSA-Q PPO plan, qualifies you to open an HSA account through Optum. You can make pre-tax contributions to the account via payroll deductions.

Highlights

- **You own your HSA account.** Funds are your money and roll over from year to year. There is no ‘use it or lose it.’ It is a savings account in your name and stays with you if you change jobs or retire.
- **Triple Tax Free** - Your payroll contributions go into the account tax free, grow tax free, and can be withdrawn tax free for qualified expenses.
- **Pay for eligible medical, dental, and vision expenses** for you, your spouse, and your tax dependents. Substantiation may be required if you are audited by the IRS, so keep all receipts.
- **Funds can be invested** and earn interest tax-free once your HSA account balance is \$1,000.
- **Includes a Debit Card** – Only the funds in the account will be available for use.
- **You can change your contributions anytime** (subject to payroll schedule and internal payroll deadlines).
- **Must be enrolled in the HSA-Q PPO Medical Plan** and cannot be covered by another non-qualified plan or enrolled in Medicare.

IRS Maximum Contribution Limits

(Includes Employer Contributions)



	2024
Individual:	\$4,150
Family:	\$8,300
Catch Up (Age 55+)	\$1,000

The company will contribute \$65 per month to your HSA for a total contribution of \$780 for the 2024 plan year .

Examples of Qualifying Medical Expenses

Addiction treatment	Fertility enhancement
Ambulance services	Home care
Chiropractor	Hospital services
Childbirth	Prescriptions
Contact lenses	Psychiatric treatment
Dental treatment	Special education
Diagnostic (labs, x-rays, etc.)	Therapy or counseling
Doctor’s fees	Smoking cessation
Hearing aids	Vision care (glasses, contacts)

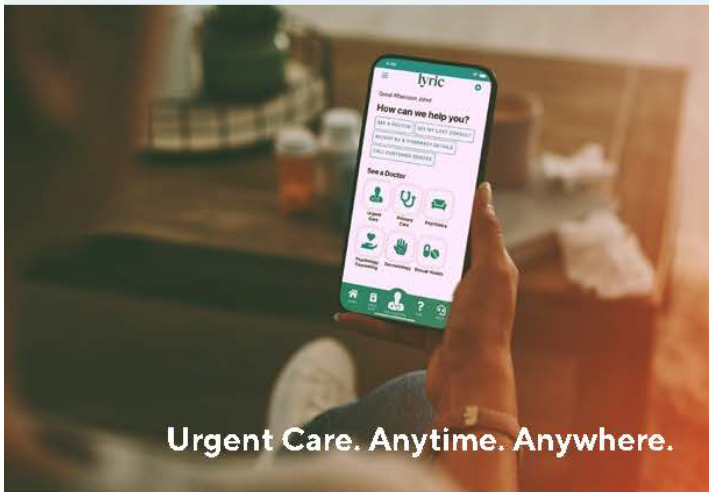
Examples of NON-Qualifying Medical Expenses

Cosmetic surgery	Babysitting
Dancing lessons	Diaper services
Hair transplants	Health club dues
New car	Swim lessons
Teeth whitening	Vacation / Travel

The company provides unlimited 24/7 access to licensed, board-certified physicians through Lyric at no cost to employees enrolled in the ABA / Excel Medical plans. Lyric physicians will consult, diagnose and prescribe medication when appropriate.

lyric

Work / Life **Bundle- All inclusive No Visit Fees**



Urgent Care. Anytime. Anywhere.

Virtual Urgent Care

Use a Virtual Urgent Care for these common conditions:

- Abrasions
- Allergies
- Back and neck pain
- Bronchitis
- Cough, sore throat, COVID-19 or common cold/flu like symptoms
- Diarrhea
- Eye infections (e.g. Pink Eye)
- Head lice
- Headaches/migraines
- Insect bites and stings
- Minor skin conditions or rashes
- Painful urination (e.g. Urinary Tract Infections)
- And more!

Virtual Behavioral Health

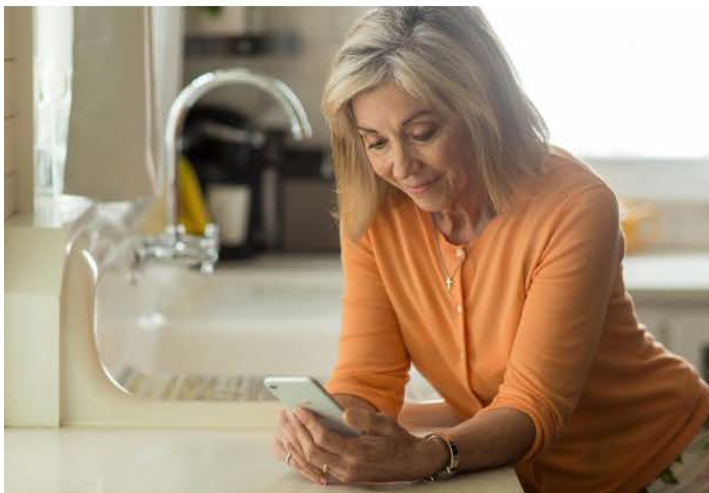
Feeling overwhelmed, experiencing anxiety or depression? Access Virtual Counseling when you need it most.

VIRTUAL COUNSELING

- No Visit Fee Required
- Short-term problem resolution with referral and crisis intervention services
- Death of Loved One
- Relationship Issues
- Substance Abuse
- Depression
- Stress and Anxiety
- Parenting Issues



Caring for Mind and Body. We're here to help.



Work / Life Solutions

Employee Assistance Support Program Offerings:

- **Legal** - Access to network attorneys, a free 30-minute consultation, and online will preparation self-service templates
- **Finance** - Access to financial counselors for help with saving, budgeting, and debt management
- **Care Giving** - Access to child and elder care consultants, convenience referrals, from pet care to chore services
- **Identity Theft** prevention education and recovery services

Licensed healthcare providers provide clinical services through medical practices affiliated with Lyric and other network providers. Additional or different telehealth requirements may be applicable in certain states; see www.getlyric.com for full terms and conditions.

866.223.8831 | getlyric.com



Visit getlyric.com or download our free app Lyric Health and schedule your doctor appointment today.



Dental Benefits

The company's dental coverage continues with Guardian and provides you and your family affordable options for dental health. Locate providers at www.guardianlife.com or by calling **The Purple Card**.

IN-NETWORK BENEFIT HIGHLIGHTS	Guardian PPO Network Access Plan – PX-10
Network	DentalGuard Preferred
Calendar Year Deductible <i>Individual / Family</i>	\$50 / \$150 (Up to 3 per family)
Annual Benefit Maximum	\$1,500 per person

Covered Services – YOU PAY

Preventive <i>Routine Exams / Cleaning</i>	0%, deductible waived (DW)
Basic <i>Fillings</i>	20% after deductible
Major <i>Crowns, Root Canals, Implants</i>	50% after deductible
Orthodontia <i>Children under 19 only</i>	50% after deductible / \$1,000 Lifetime Benefit Limit

Dental Maximum Benefit Rollover

Rollover Threshold <i>Benefits paid cannot exceed this amount</i>	Maximum Rollover Amount <i>Rewards added to next year's benefit max</i>	Max Rollover Account Limit <i>Maximum possible accumulation of rewards</i>
\$700	\$350	\$1,250

Vision Benefits

The company's vision coverage continues with Guardian and offers comprehensive vision benefits for eye exams, glasses, and contact lenses. Locate providers at www.guardianlife.com or by calling **The Purple Card**.

IN-NETWORK BENEFIT HIGHLIGHTS	Guardian Full Feature - C
Network	VSP - Choice

Covered Services – YOU PAY

Exam	\$10 / Once every 12 months
Lenses	\$25 copay – Single, Bifocal, Trifocal / Once every 12 months <i>See benefit summary for cost of lens enhancements</i>
Frames	\$25 copay; \$150 allowance plus 20% off balance / Once every 12 months
Contact Lenses	\$150 allowance / Once every 12 months in lieu of glasses

Income Protection

Short-Term Disability

You will continue to have access to Short-Term Disability insurance through Guardian. This benefit pays you in the event you cannot work because of a qualified illness or injury*.

BENEFIT	60% of weekly covered earnings
WEEKLY MAXIMUM BENEFIT	\$1,500
ELIMINATION PERIOD	7 days – for disabling injury or illness
MAXIMUM BENEFIT PERIOD	Up to 12 weeks
*PRE-EXISTING CONDITION	3 Month Look Back Period / 12 Month Exclusion Period

Enhanced Benefits

What are Enhanced Benefits?

- ✓ 100% Employee Paid.
- ✓ Are not designed to replace insurance you already have.
- ✓ Allow you the flexibility to choose benefits that meet your personal needs.
- ✓ Can be used to help pay expenses that other insurance plans don't cover.
- ✓ Benefits are paid directly to you!
- ✓ Pricing is age-banded and is included in your enrollment packet.

Critical Illness

You will continue to have access to Critical Illness insurance through Guardian. This plan gives peace of mind by helping minimize the financial burden and stress associated with a critical illness. This coverage pays a lump-sum benefit payment upon diagnosis of cancer, (internal or invasive) heart attack, stroke, end-stage renal failure, major organ failure, coma, loss of speech/sight/hearing, ALS, etc.

Accident insurance

You may choose to elect Accidental coverage; 100% employee paid through Guardian. This plan pays benefits for a wide range of accidental injuries and can help offset expenses for hospital or care-related services. This coverage can also help with lost wages, satisfy deductibles, and help pay co-pays, meals, lodging, and other out-of-pocket expenses.

Group Benefits



- ❖ CareFlite offers its members and their families' peace of mind from financial concerns by covering the difference between health care insurance coverage and the cost of an ambulance transport. Whatever a member's insurance pays, CareFlite will accept that as full and final payment on behalf of the member and the Caring-Heart Membership Program will absorb the remainder of the cost.
- ❖ CareFlite Helicopter EMS service is available to members who live within 150 miles of DFW.
- ❖ All listed family members living at your residence are covered under one membership.
- ❖ Another added benefit is CareFlite's fixed wing air ambulance for emergency transport needing a higher level of care, further than 150 miles from DFW and up to 500 miles.
- ❖ As an added benefit, CareFlite's ground ambulance will be available to members when they are within its service area, these benefits will follow the same rules and guidelines as air rules.
- ❖ CareFlite will complete all necessary paperwork, file claims, and comply as deemed necessary with your insurance company. If you have no insurance, or your insurance denies your claim, you will receive a 50% membership discount off CareFlite's standard charges.
- ❖ CareFlite's Membership # is 1-877-339-2273
- ❖ This is an employer paid benefit at **no cost to you** (for those who are eligible).



The company provides \$50,000 in Basic Life Insurance. Please review your Beneficiary Designation to ensure it is accurate and notify your Human Resource Department with any changes. Anyone can be a life insurance beneficiary, including family members, friends, or trusts.

Payroll Deductions



TRIDENT

YOUR COST PER PAY PERIOD (26 PAY PERIODS)

	HSA-Q PPO	Silver 3000 - PPO
Employee Only	\$0.00	\$18.65
Employee + Spouse	\$171.90	\$220.27
Employee + Child(ren)	\$99.74	\$135.78
Employee + Family	\$228.93	\$287.43

	Dental	Vision	Accident
Employee Only	\$12.97	\$3.96	\$4.99
Employee + Spouse	\$26.34	\$7.49	\$7.94
Employee + Child(ren)	\$36.90	\$7.87	\$8.51
Employee + Family	\$53.95	\$10.91	\$11.45

VOLUNTARY SHORT-TERM DISABILITY & CRITICAL ILLNESS:
 Age-based rates for these benefits will be found within your enrollment packet.

Payroll Deductions



YOUR COST PER PAY PERIOD (52 PAY PERIODS)

	HSA-Q PPO	Silver 3000 - PPO
Employee Only	\$0.00	\$9.33
Employee + Spouse	\$85.95	\$110.14
Employee + Child(ren)	\$49.87	\$67.89
Employee + Family	\$114.47	\$143.72

	Dental	Vision	Accident
Employee Only	\$6.49	\$1.98	\$2.50
Employee + Spouse	\$13.17	\$3.74	\$3.97
Employee + Child(ren)	\$18.45	\$3.94	\$4.25
Employee + Family	\$26.97	\$5.45	\$5.73

VOLUNTARY SHORT-TERM DISABILITY & CRITICAL ILLNESS:
 Age-based rates for these benefits will be found within your enrollment packet.

Reminders!

As we do our part to provide you with comprehensive and affordable coverage, below are some ways you can help counter rising medical costs for next year.

QUESTIONS & ANSWERS

Can I enroll anytime?

No, but you can elect coverage during Open Enrollment or within 30 days of a Family Status Change such as a marriage, divorce, birth, adoption of a child, or if your spouse loses health coverage.

How long are my children covered?

Dependent children are eligible up to age 26. However, if your child has a physical or intellectual disability and is dependent on you for support, the limiting age will not apply.

If I leave, can I continue coverage?

Yes, you may continue your health, dental and vision under circumstances such as termination of employment. You will have 60 days from the date you are notified to elect Cobra coverage. You will be responsible for the premiums and will be notified in writing of the cost to continue coverage.

What if I have coverage through the company as well as my spouse's plan?

The company's plan will be primary, and your spouse's plan will be secondary.

What if I lose my insurance card?

You can request a replacement card from The Purple Card.

Take advantage of your preventative care benefit.

Choose in-network providers. They accept discounted rates for services, which saves money for both you and the company. Visit: <https://www.abadmin.com/find-a-provider/> and search UnitedHealthcare Choice Plus for contracted providers.

Request your doctor to send lab work to QuestSelect for a \$0 copay.

Pay less for your prescriptions by using Script Sourcing. Mitigate specialty, maintenance, and name brand drug spend with \$0 copay program.

Ask your doctor for lower-cost generic prescription options.

Pay less with Diathrive Health \$0 cost share on diabetes supplies:

- Blue Tooth Glucose Meter
- Blood Glucose Test Strips
- Pen Needles (Various Sizes)
- Lancets
- Lancing Devices
- DexcomG6 (Sensors, Transmitters, and Receivers)
- FreeStyle Libre (Sensors and Receivers)

Remember to reach out to The Purple Card for assistance on locating facilities, where you will pay \$0 for durable medical equipment, prescriptions, certain imaging, outpatient, and inpatient procedures.

Learn the difference between emergency care and urgent care. The Emergency Room (ER) costs more than an Urgent Care Center. In a life-threatening situation the ER is the place to go!

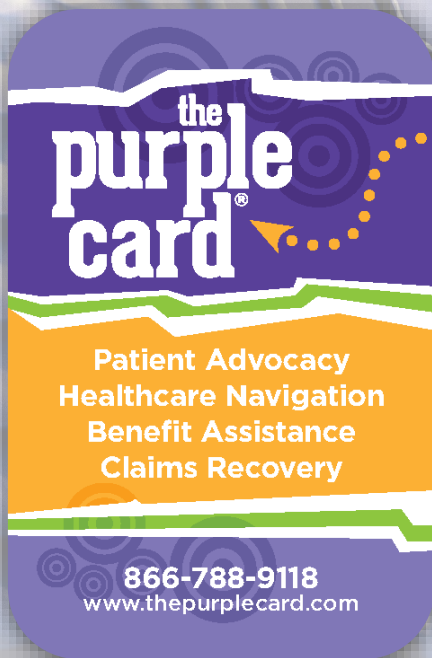
Use Lyric to call a Doctor 24/7 via email, phone, or video for yourself or family members, to treat common acute symptoms. This is a \$0 copayment visit for medical and behavioral health services. Add up to 7 from your household to also receive unlimited telemedicine visits for \$0!

Questions About Your Benefit Offerings?

Just Pull Out Your Purple Card and Call

866.788.9118

8:30am - 5:30pm | Monday - Friday



The family of companies continues to partner with Brinson Benefits. Brinson's team will ensure that you fully understand and get the most out of your employee benefit plans. You can contact The Purple Card with questions or concerns about any of your benefit plans.

Just pull out The Purple Card and call (866) 788-9118

This benefits brochure is a brief outline of certain benefits available to the family of companies and their employees. The details of these plans and policies are contained in the official plan and policy documents, including some insurance contracts. If there is ever a question about one of these plans and policies, or if there is a conflict between information in this booklet and the formal language of the plan or policy documents, the formal wording in the plan or policy documents will govern. Also, please note that the benefits described in this booklet may be changed at any time and does not represent a contractual obligation on the part of the companies.