



TOTAL REWARDS PROGRAM

2023



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ELIGIBILITY

You are eligible for Sage's benefit programs on 1st of the month following 60 days of hire, if you are a full-time employee regularly scheduled to work at least 30 hours per week.

The following family members are eligible for medical, dental, vision, life and AD&D coverage:

- Your Legal Spouse and Domestic Partner
- Dependent children up to age 26
- Your unmarried child of any age who is not capable of self-support due to a physical or mental disability, whose disability is continuous and is principally supported by you.

Benefits Enrollment and Qualifying Changes

You have three times to enroll and/or make changes to your benefits:

1. Recent New Hires on the 1st after completing 60 days of employment: 30 days once benefit eligible
2. Qualifying life event: within 30 days of a qualifying life event
3. Open enrollment (for next plan year): February or March for the April 1st plan year

Qualifying Life Event

Outside of your new hire or annual enrollment period, you will not be able to make benefit changes until the next open enrollment period unless you experience a qualifying life event, which may impact your eligibility or dependent's eligibility for benefits. Examples of some qualifying events include the following:

- Change of legal marital status (e.g., marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (e.g., birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (e.g., full-time to part-time, unpaid leave of absence, starts or stops working)
- Change in eligibility status of a covered dependent

If you experience a qualifying life event, you must notify AND submit all applicable forms and supporting documents on our benefit administration system at <https://www.mybensite.com/sagese/> within 30 days of the event date.



HOW TO ENROLL

Make sure you have all of your personal information as well as your dependent's personal information (if applicable) handy. This may include dates of birth, social security numbers and addresses.

Know which benefit coverage you wish to elect. The decisions you make during your enrollment period can have a significant impact on your life and finances, so it is important to weigh your options carefully.

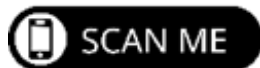
Once you have made your election or waived coverage, you will not be able to make a change until the next open enrollment period unless you have a qualified change in status.

Complete Your Benefit Election Form

When you are ready to elect, change or waive coverage, you must complete your enrollment online on our benefit administration system at <https://www.mybensite.com/sage/se/>.

You must complete and submit your online enrollment by:

- **Recent New Hires on the 1st after completing 60 days of employment:** 30 days once benefit eligible
- **Qualifying event:** within 30 days of the date of the qualifying event
- **Open enrollment (for plan year 4/1/2023 - 3/31/2023):** deadline is **March 24, 2023**





BENEFITS-AT-A-GLANCE

Sage is proud to provide a selection of benefits which is comprehensive and competitive to help protect your health and wellbeing.

Benefit	Eligibility	Who Pays	Carrier
Health Benefits			
Medical and Prescription Drug	1 st of the month following 60 days of hire	You and Sage SE	Aetna
Dental		You and Sage SE	Aetna
Vision		You and Sage SE	Aetna
Health Reimbursement Account (HRA)		Sage SE	PrimePay
Employee Assistance Program (EAP)			
Employee Assistance Program (EAP)	1 st of the month following 60 days of hire	Sage SE	The Hartford
Life and Accidental Death and Dismemberment (AD&D)			
Group Term Life and AD&D Insurance	1 st of the month following 60 days of hire	Sage SE	The Hartford
Optional Life Insurance		You	The Hartford
Disability Programs			
Short Term Disability (STD)	1 st of the month following 60 days of hire	Sage SE	The Hartford
Long Term Disability (LTD)		You	The Hartford
Worksite Offerings - Voluntary Programs			
Accident Coverage	1 st of the month following 60 days of hire	You	Allstate
Critical Illness Coverage		You	Allstate
Hospital Indemnity Coverage		You	Allstate

EMPLOYEE ASSISTANCE PROGRAM



Life presents complex challenges. If the unexpected happens, you should have simple solutions to help cope with the stress and life changes that may result. That's why The Hartford's Ability Assist Counseling Services, offered by ComPsych, can play such an important role. Our straightforward approach takes the complexity out of benefits when life throws you a curve. To take advantage of the Ability Assist program, or for more information: Visit www.GuidanceResources.com or call 800-96-HELPS (800-964-3577).

Counseling Services

You can access the following services anytime, online or with a toll-free call:

- Emotional or Work-Life Counseling to help address stress, relationship or other personal issues you or your dependents may face (up to three sessions with a counselor per person, per issue, per year).
- Unlimited telephonic assistance if legal uncertainties arise (debt and bankruptcy, guardianship, buying a home, power of attorney, divorce and more). If you require representation, you'll be referred to a qualified attorney in your area with a 25% reduction in customary legal fees thereafter.
- Unlimited telephonic support for complicated financial decisions you or your dependents may face. Speak to a Certified Public Account and Certified Financial Plan on a wide range of financial issues (budgeting, retirement, getting out of debt, tax questions, saving for college and more).

Online Resources

Ability Assist offers a wide range of information and resources that you can research and access on your own just by visiting GuidanceResources.com. You'll find:

- Articles and tutorials
- Streaming videos
- Interactive tools — including financial calculators, budgeting spreadsheets, and a language translator

Ability Assist Counselors

When you call our toll-free line, you'll talk to an experienced professional who will provide counseling, work-life advice, and referrals. All counselors hold master's degrees, with broad-based clinical skills and at least three years of experience in counseling on a variety of issues. For face-to-face meetings, you will be referred to a fully credentialed, state-licensed clinician.

WORKSITE BENEFIT OFFERINGS



Sage offers benefit plans that help you with out-of-pocket expenses. These voluntary plans provide cash payments dependent on your type of incident. These benefits do not coordinate with your benefit plans. They pay separately and directly to you. The cash payment is yours for whatever you may need.

Allstate is the vendor for our voluntary benefit product offerings. The premium is paid by the employee on a per pay period deduction.

Accident Coverage

Accident plans provide you with a cash payment if you incur medical expenses due to an accident (not work-related). Sports injuries, slips on the ice, falls down the stairs, even poison ivy, will be covered. Use the cash payment to pay your medical plan deductible, copays and coinsurance or use the cash for whatever you need! There is a special rider that can pay you for getting a preventative visit. You can make money on this plan.

Critical Illness Plan

Critical Illness plans provide you with a lump sum cash payment if you have a heart attack, stroke, kidney failure, organ transplant, or cancer diagnosis. Cash is paid directly to you to help with medical and non-medical expenses such as deductibles, copays, coinsurance, lost time from work, transportation, personal bills, and medication expenses. You use the cash to help you and your family.

Hospital Indemnity Plan – Enhanced for 2023

Hospital Indemnity coverage provides you with a lump sum cash payment in the event you are hospitalized for any reason. Should you receive inpatient hospital care, you will receive a cash benefit to help off-set the expenses of a scheduled or unexpected hospitalization.

Effective 4/1/2023, this plan has no pre-existing conditions limitations, and also no waiting periods for hospitalization due to a maternity stay.

If you have a scheduled or anticipated surgery, or are expecting a child soon, you may want to consider this plan to assist with out-of-pocket expenses.

For additional information, please see the Allstate benefit brochures.



YOUR ACCIDENT, CRITICAL ILLNESS, AND HOSPITAL INDEMNITY RATES

Below are the bi-weekly premium rates(based on 26 pay periods).

Accident	Plan 1 - Low Plan	Plan 2 - High Plan
Tier	Rate	Rate
Employee Only	\$7.50	\$10.32
Employee + Spouse	\$12.94	\$17.84
Employee + Children	\$15.92	\$22.12
Family	\$21.38	\$29.34

Critical Illness	Plan 1 - Low Plan Non-Tobacco		Plan 1 - Low Plan Tobacco	
Age Band	EE + CH	Family	EE + CH	Family
18 - 29	\$2.44	\$4.02	\$3.12	\$5.04
30 - 39	\$4.72	\$7.54	\$6.48	\$10.18
40 - 49	\$9.10	\$14.30	\$13.48	\$20.84
50 - 59	\$15.90	\$24.74	\$24.06	\$37.00
60 - 64	\$21.80	\$33.76	\$32.94	\$50.48
65+	\$34.72	\$53.38	\$51.88	\$79.10
Critical Illness	Plan 2 - High Plan Non-Tobacco		Plan 2 - High Plan Tobacco	
Age Band	EE + CH	Family	EE + CH	Family
18 - 29	\$4.20	\$6.62	\$5.56	\$8.68
30 - 39	\$8.54	\$13.26	\$12.06	\$18.52
40 - 49	\$16.92	\$26.02	\$25.66	\$39.12
50 - 59	\$30.02	\$45.92	\$46.36	\$70.42
60 - 64	\$41.46	\$63.24	\$63.76	\$96.70
65+	\$66.82	\$101.52	\$101.12	\$152.98

Hospital Indemnity	Plan 1 - Low Plan	Plan 2 - High Plan
Tier	Employee	Employee
Employee Only	\$7.02	\$10.50
Employee + Spouse	\$12.96	\$19.44
Employee + Children	\$9.18	\$13.74
Family	\$15.00	\$22.50



BASIC LIFE AND AD&D INSURANCE

The Hartford is our plan administrator for Life and AD&D insurance.

Sage pays for the full cost of this benefit—meaning you are not responsible for paying any premiums. Log into your bensite account to update your beneficiary information at any time once benefit eligible.

Life and AD&D	Coverage
Life Insurance	\$50,000
Accidental Death and Dismemberment	\$50,000
Living Benefit Option (Accelerated Benefit)	12 months life expectancy, 80% of life benefit
Benefit Reduction Schedule	35% at age 65 60% at age 70 75% at age 75



VOLUNTARY LIFE AND AD&D INSURANCE

You can purchase coverage for yourself in \$10,000 increments or your spouse in \$5,000 increments. The chart below outlines the monthly costs of purchasing additional coverage.

Evidence of Insurability (EOI) may be required if you are increasing your current coverage or if you are requesting an amount above the guaranteed issue.

Life and AD&D	Employee	Spouse	Dependent Child(ren)
Increments	\$10,000 increments up to \$300,000 maximum, not to exceed 5x the employee's annual salary	\$5,000 increments up to \$100,000 maximum, not to exceed 50% of employee's benefit amount	\$10,000
Guarantee Issue Amount	\$100,000	\$25,000	\$10,000
Benefit Reduction Schedule	35% at age 65 50% at age 70	35% at age 65 50% at age 70	From birth to age 14 days - no benefit From age 14 days to 6 months - \$250 From age 6 months to 19 years old (up to 25 years of age, if unmarried & full-time student) - \$10,000



Your Voluntary Life and AD&D Rates

Below are the bi-weekly rates (based on 26 pays).

Voluntary Employee Life and AD&D	
Age Band	Rate
<29	\$0.0000439
30 - 34	\$0.0000623
35 - 39	\$0.0000762
40 - 44	\$0.0000992
45 - 49	\$0.0001454
50 - 54	\$0.0002285
55 - 59	\$0.0004039
60 - 64	\$0.0005608
65 - 69	\$0.0011423
70+	\$0.0017515

Find your age (employee's age) and corresponding Life and AD&D rate above. Multiple your rate by the amount of life coverage you wish to elect. This will determine your estimated bi-weekly premium.

Amount of Coverage		X	_____
Rate (based on Employee's Age)			_____
Bi-weekly Premium		=	_____

Voluntary Dependent Life and AD&D	
Covered Dependent	Rate
Spouse	Same as Voluntary Employee Life and AD&D (above) <i>Based on the age of the employee</i>
Dependent Children	\$0.92 per pay period for \$10,000 for each child <i>Regardless of the number of children</i>



DISABILITY INSURANCE

The Hartford is our plan administrator for short-term disability (STD) and long-term disability (LTD).

Sage pays for the full cost of the STD benefit—meaning you are not responsible for paying any premiums.

Full-time employees working 30 or more hours per week	Short-term Disability (STD)
Benefits Begin	8 th consecutive day of disability for illness or off-the job accident
Benefits Payable	Up to \$1,500 a week
Percentage of Income Replaced	60% of your weekly earnings
Maximum Benefit	12 weeks

We also give you the option of purchasing Voluntary Long-term Disability coverage. Without disability coverage, you and your family may struggle to get by if you miss work due to an injury or illness.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note that you are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

Full-time employees working 30 or more hours per week	Voluntary Long-term Disability (LTD)
Benefits Begin	Following 90-day elimination period
Benefits Payable	Up to \$7,500 a month
Percentage of Income Replaced	60% of your monthly earnings
Maximum Benefit	Up to 65 years of age or Social Security Normal Retirement Age (SSNRA)



Your Voluntary LTD Rates

Below are the bi-weekly rates (based on 26 pays).

Voluntary Long-Term Disability	
Age Band	Rate
<25	\$0.00034
26 - 29	\$0.00042
30 - 34	\$0.00061
35 - 39	\$0.00120
40 - 44	\$0.00194
45 - 49	\$0.00344
50 - 54	\$0.00299
55 - 59	\$0.00425
60 - 64	\$0.00297
65+	\$0.00324

Your estimated bi-weekly premium is determined by multiplying your monthly salary (up to \$12,500) by your age-range LTD premium rate. If your monthly salary exceeds \$12,500, multiply \$12,500 by your LTD premium rate.

Monthly Salary		X	_____
Rate (based on Employee's Age)			_____
Bi-weekly Premium		=	_____



VISION INSURANCE

Sage's vision plan entitles you to specific eye care benefits. Our policy covers routine eye exams and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

Aetna is our plan administrator for vision coverage.

Get the most out of your vision plan by choosing a vision provider in Aetna's network. Visit www.aetna.com for a list of participating vision providers. Please select the "Aetna Vision Preferred" network.

Services	Aetna Vision (Eyemed)	
	In Network	Out of Network
Routine Eye Exam (once every calendar year)	\$10 copay	Up to \$30 allowance
Lenses (once every calendar year) – Single Vision – Bifocal – Trifocal	\$25 copay	Up to: – \$25 allowance – \$40 allowance – \$55 allowance
Bifocal Lenses	\$25 copay	Up to \$40 allowance
Trifocal Lenses	\$25 copay	Up to \$55 allowance
Factory scratch coating	\$0 copay	No allowance
Polycarbonate and transitions (children under 19 only)	\$0 copay	No allowance
Frames	Up to \$150 allowance	Up to \$75 allowance
Contacts, Non-elective (Medically Necessary)	Covered in full	Up to \$200 allowance
Contacts, Elective (once every calendar year)	Up to \$150 allowance	Up to \$120 allowance



DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

Aetna is our Dental Plan Administrator.

Get the most out of your dental plan by choosing a dental provider in Aetna’s network. Visit www.aetna.com for a list of participating dental providers. Please select the “Dental PPO/PDN with PPO II” network.

Aetna Dental Plan	In Network	Out of Network
Deductible (Individual/Family)	\$50/\$150	\$50/\$150
Annual Maximum Per Covered Person (Basic and Major Services)	\$1,000	\$1,000
Preventive Services (Exams, Cleanings, X-rays)	100%	100%
Basic Services (Fillings, Simple Extractions, Restorations, Endodontics, Oral Surgery Periodontics)	80%	80%
Major Services (Crowns, Bridges, Dentures)	50%	50%
Orthodontics (For children as long as the appliance is placed prior to age 19)	50%	50%
Orthodontia Lifetime Maximum	\$1,000	\$1,000

* Out of network benefits are covered at the same coinsurance as in network. The out of network provider may balance bill you for charges in excess of the allowed amount. This document is for illustrative and comparative purposes only. The information summarizes the coverage, terms, conditions, and exclusions of their underlying policies. In the event of a discrepancy, the carrier’s policies will prevail.

Benefits of choosing Aetna Dental In-Network providers:

- No balance billing
- Negotiated rates, services provided at a deeper discount
- Doctors have been thoroughly screened



HEALTH INSURANCE

Aetna is our Medical Plan Administrator. Get the most out of your medical plan by choosing a medical provider in Aetna’s national network of healthcare providers. Visit www.aetna.com for a list of participating healthcare providers. Please select the “Managed Choice POS (Open Access)” network.

Aetna OAMC 5000 80/50 Super Joe Medical Plan		
Services	In Network	Out of Network
Physician Visit – PCP	\$40 copay \$0 copay CVS Clinics/Hubs	Deductible, then 50%
Virtual visits available through Teladoc at www.Teladoc.com/Aetna subject to a \$40 copay.		
Physician Visit – Specialist	Deductible, then \$50 copay	Deductible, then 50%
Preventive Care	100%	Deductible, then 50%
Deductible (Individual/Family)	\$5,000/\$10,000	\$10,000/\$20,000
Your Out-of-Pocket Maximum	\$6,600/\$13,200	\$20,000/\$40,000
Inpatient Hospital	Deductible, then 80%	Deductible, then 50%
Outpatient Hospital	Deductible, then 80%	Deductible, then 50%
Lab & X-ray	100%, if performed as part of PCP visit (copay) Deductible, then 80%	Deductible, then 50%
Major Diagnostic and Imaging Services (CT, MRI done in Outpatient Hospital, Freestanding Facility)	Deductible, then 80%	Deductible, then 50%
Emergency Room	\$300 copay, deductible, then 80%	Deductible, then 50%
Urgent Care	\$50 copay	Deductible, then 50%
Pharmacy – Retail – Tier 1 – Tier 2 – Tier 3 – Tier 4: Specialty (Preferred) – Tier 5: Specialty (Non-preferred) (Advanced Control Formulary)	Tier 1: \$10 copay, No deductible Tier 2: Deductible, then \$50 copay Tier 3: Deductible, then \$90 copay Tier 4: Deductible, then 30% (up to \$250 max) Tier 5: Deductible, then 40% (up to \$400 max)	Tier 1: \$10 copay, No deductible Tier 2: Deductible, then \$50 copay Tier 3: Deductible, then \$90 copay Tier 4: Deductible, then 30% (up to \$250 max) Tier 5: Deductible, then 40% (up to \$400 max)
Pharmacy – Mail Order – Tier 1 – Tier 2 – Tier 3 – Specialty (Preferred) – Specialty (Non-preferred) (Advanced Control Formulary)	Tier 1: \$25 copay, No deductible Tier 2: Deductible, then \$125 copay Tier 3: Deductible, then \$225 copay Tier 4: N/A Tier 5: N/A	Tier 1: \$25 copay, No deductible Tier 2: Deductible, then \$125 copay Tier 3: Deductible, then \$225 copay Tier 4: N/A Tier 5: N/A



Medical, Dental and Vision Rates

Below are the bi-weekly premium rates (based on 26 pay periods).

Medical Salary < \$75,000 Annually		Aetna Health Medical Plan (\$0/\$5,500)
Tier		Rate
Employee Only		\$55.98
Employee + Spouse		\$123.04
Employee + Children		\$94.49
Family		\$172.81

Medical Salary > \$75,000 Annually		Aetna Health Medical Plan (\$0/\$5,500)
Tier		Rate
Employee Only		\$81.64
Employee + Spouse		\$179.44
Employee + Children		\$137.80
Family		\$252.01

DENTAL		Aetna Dental Plan
Tier		Rate
Employee Only		\$3.89
Employee + Spouse		\$7.76
Employee + Children		\$8.96
Family		\$13.39

VISION		Aetna Vision Plan (Eyemed)
Tier		Rate
Employee Only		\$0.68
Employee + Spouse		\$1.32
Employee + Children		\$1.44
Family		\$2.29



HEALTH REIMBURSEMENT ACCOUNT (HRA)

Sage will continue to support their employees through the benefit of a Health Reimbursement Account (HRA). The Health Reimbursement Account will offer employee's assistance by reimbursing for medical claims that are applied to the medical deductible.

This occurs at the beginning of the deductible (the first \$750 for employee only or \$1,500 for employee plus dependents) and the last \$2,400 for the employee's or \$4,800 for the employee plus dependents' deductible.

The HRA funds will accrue on a bi-weekly basis and are based on your medical coverage election. Only those funds that have been accrued can be reimbursed.

PrimePay is our HRA Plan Administrator.

Health Reimbursement Account Employee Only coverage	
Deductible Fulfilled	Eligibility for Reimbursement - In Network Claims
\$0 - \$750	Funded by Sage through the HRA
\$751 - \$2,600	Responsibility of the employee, not funded by HRA
\$2,601 - \$5,000	Funded by Sage through the HRA
\$5,001 - \$6,600	Employee's Out of Pocket maximum, not funded by HRA (HRA applies to deductible expenses only)

Of the \$5,000 employee deductible, Sage reimburses \$3,150 and the employee is responsible for \$1,850.

Health Reimbursement Account Employee plus Dependent(s) coverage	
Deductible Fulfilled	Eligibility for Reimbursement - In Network Claims
\$0 - \$1,500	Funded by Sage through the HRA
\$1,501 - \$5,200	Responsibility of the employee, not funded by HRA
\$5,201 - \$10,000	Funded by Sage through the HRA
\$10,001 - \$13,200	Employee's Out of Pocket maximum, not funded by HRA (HRA applies to deductible expenses only)

Of the \$10,000 employee plus dependent(s) deductible, Sage reimburses \$6,300 and the employee is responsible for \$3,700.



HRA Claim Reimbursement

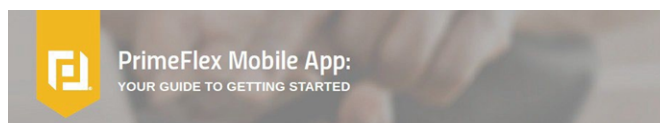
Getting reimbursed for your medical deductible

With PrimePay, you can enroll in PrimePay's Claims Assist program, which reimburses you for your medical deductible from your HRA automatically. You must be enrolled in Aetna's website and complete set-up in PrimePay's portal. Once this is complete, your explanation of benefits will be retrieved and submitted to PrimePay automatically!

How does it work?

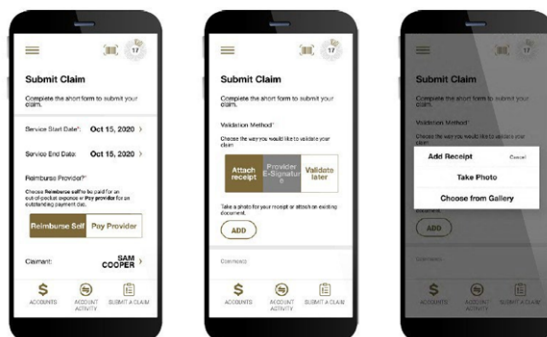


Another option! You can also submit your claim right from your mobile device. You can reimburse yourself or choose to reimburse your provider. You can also check your balance, view recent account activity and view and edit pending claims all from your cell phone in the palm of your hand.



Claims Submission

The submit claim screen allows you to enter new claims and expenses, as well as view and edit pending ones. If you have a receipt to substantiate your claim, you can take a photo of it with your device and attach it to a pending claim from this section of the app. Below is an example of the submit claim screens and the associated flow of submitting a claim:



You can also submit your claims through the online participant web portal. Visit login.primepay.com and click the WEX Health Participant widget to learn more! And lastly, you can submit claims manually via email, fax or through the mail.



FLEXIBLE SPENDING ACCOUNTS

A Flexible Spending Account (FSA) allows you to set aside pre-tax dollars from your paycheck to cover qualified expenses. We offer two types of Flexible Spending Account programs: Healthcare and Dependent Care. In order to participate in the FSA plan(s), you are required to enroll and make your elections each calendar year. You must enroll annually in December, or within 30 days of hire, to make your flexible spending account(s) election(s) for the calendar year.

What are the benefits of an FSA?

There are a variety of different benefits of using an FSA, including the following:

- It saves you money. Allows you to put aside money tax-free that can be used for qualified medical expenses.
- It's a tax-saver. Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- It is flexible. You can use your FSA funds at any time, even if it's the beginning of the year. You cannot stockpile money in your FSA. If you do not use it, you lose it. You should only contribute the amount of money you expect to pay out of pocket that year.

Healthcare FSA

The Healthcare FSA helps you pay for certain IRS-approved medical care expenses not covered by your insurance plan with pre-tax dollars. The maximum contribution to the Healthcare FSA is \$3,050 per plan year.

Funds you elect to contribute to the Healthcare FSA are available in full on the first day of the plan year. For example, if you elect to contribute \$1,000, that full election is available on day one. You'll continue to pay for the election pre-tax from your paycheck throughout the plan year.

Dependent Care FSA

Unrelated to healthcare expenses, the Dependent Care FSA lets you set aside pre-tax dollars to use toward qualified dependent care expenses such as child-care facility fees or before-school and after-school care. The maximum amount you may contribute to the Dependent Care FSA is \$5,000 (or \$2,500 if married and filing separately) per plan year. Funds you contribute to the Dependent Care FSA function like a debit card in that you need to accumulate the funds before you can use them.



ENHANCED HEALTH & WELLBEING PROGRAMS

Offering you the choice, flexibility and support to take care of you.

As part of your Sage medical plan, Aetna offers you the choice and flexibility you need to support your health and well-being. Below are the programs that are available at no cost to you and your covered dependents.

Aetna Healthy Commitments Wellbeing Programs	
Wellness Incentive Program	Employees and covered spouses/domestic partners can earn a \$50 gift card with the successful completion of the online Health Assessment and one wellness journey.
Aetna Maternity Program and Maternity Support Center	Trusted and reliable information about the maternity journey, including tailored coverage information. Tips for a healthy pregnancy and support for high-risk needs.
Cancer Support Centers	Member resources that give plan-specific coverage information about preventive screenings and the diagnosis, testing and treatment process for certain cancers.
Disease Management Program	Support for more than 35 chronic conditions.
Member Discount Program	Discounts on products and services for nutrition, weight management, fitness, natural therapy and more.

Access your benefits & in-network savings with Aetna's website and App!

On www.aetna.com and through the Aetna app, you can:

- Find in-network doctors and medical services
- Review coverage, manage and track claims
- View, print, fax ID card
- See cost estimates for medical procedures and prescription drugs
- Compare quality-of-care information for doctors and hospitals
- Compare costs for 30-and 90-day medications and see if a lower-cost drug alternative is available
- Find retail pharmacies that offer a 90-day supply
- Access health and wellness tools and resources such as a Health assessment, Apps & Activities
- where you can set and track health goals and digital lifestyle coaching
- Sign up to receive alerts when new plan documents are available



Preventive Care

Our plans cover a wide variety of preventive care services at no out-of-pocket cost to you— no deductible, no copayment and no coinsurance. Members may go to www.aetna.com for more information about the preventive care services covered.

Have you Visited the Doctor This Year?

Visiting your primary care doctor at least once a year is essential to keeping your health on the right track. In fact, those who take preventive care seriously tend to be healthier and lead more productive lives. Take a look at the following three ways you can benefit from scheduling your annual checkup:

1. Control Chronic Disease

Visiting your doctor for an annual checkup can help you detect and receive treatment for chronic conditions before they cause serious health problems.

2. Establish a Baseline

If you schedule annual checkups, your doctor will likely be more familiar with your personal health history. This knowledge will help create a health baseline, allowing your doctor to detect any unusual or abnormal health concerns before they become a more serious issue.






3. Form a Relationship

Research shows that patients who have a good relationship with their doctor receive better care and are happier with the care they receive. Going to your annual checkup will help strengthen the relationship between the two of you, increasing your trust and comfort in the care you receive.



WHERE TO FIND CARE

With many options for receiving care, how do you choose? This chart will help you understand the differences between your options and how you can save money.

Where To Get Care	What It Is	Type of Care	Cost
Virtual Visit 	A virtual visit lets you see a doctor via your smartphone, tablet, or computer. Sign in to www.Teladoc.com/Aetna and choose from provider sites where you can register for a virtual visit.	<ul style="list-style-type: none">• Allergies• Pink eye• Bladder infections• Rashes• Bronchitis• Seasonal flu• Coughs/colds• Sore throats• Diarrhea• Stomach aches• Fever	\$
Convenience Care Clinics 	Visit a convenience care clinic when you can't see your doctor and your health issue isn't urgent. These clinics are often in stores.	<ul style="list-style-type: none">• Common infections• Minor skin conditions• Vaccinations• Pregnancy tests• Minor injuries• Earaches	\$\$
Primary Care Physician 	Go to a doctor's office when you need preventive or routine care. Your primary doctor can access your medical records, manage your medications, and refer you to specialists, if needed.	<ul style="list-style-type: none">• Checkups• Preventive services• Minor skin conditions• Vaccinations• General health management	\$\$
Urgent Care 	Urgent care is ideal for when you need care quickly, but it's not an emergency (and your doctor isn't available). Urgent care centers treat issues which aren't life threatening.	<ul style="list-style-type: none">• Sprains• Strains• Small cuts which may need a few stitches• Minor burns/infections/broken bones	\$\$\$
Emergency Room 	The ER is for life- threatening or very serious conditions which require immediate care. This is also when to call 911.	<ul style="list-style-type: none">• Heavy bleeding• Large open wounds• Sudden change in vision• Chest pain• Sudden weakness or trouble talking• Major burns• Spinal injuries• Severe head injury• Breathing difficulty• Major broken bones	\$\$\$\$



CARRIER CONTACT INFORMATION

Employee Assistance Program Ability Assist (ComPsych)

1-800-964-3577

www.GuidanceResources.com

Organization WebID: HLF902

Company Name: ABILI

Select: Ability Assist Program

Medical – Aetna

1-800-238-6716

www.aetna.com

HRA – PrimePay

1-833-968-6288

www.login.primepay.com

WEX Health Participant Widget

Dental – Aetna

Dental – Aetna

1-877-238-6200

www.aetna.com

Vision – Aetna (EyeMed)

1-877-973-3238

www.aetna.com

Life & Disability – The Hartford

1-888-523-2233

www.thehartford.com

Benefit Administration – Optavise

1-888-404-9901

<https://www.mybensite.com/sage/se/>

Huntington Claims Unit

1-844-847-4757

EBClientServiceTeam@Huntington.com

Huntington WorksiteTeam – Allstate Benefits

1-330-262-8689

Worksite@Huntington.com

This guide is only intended to highlight some of the major benefit provisions of the Company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan's Summary Plan Descriptions for further detail. Should this training differ from the Summary Plan Descriptions, the Summary Plan Descriptions prevail.