

EMPLOYEE BENEFIT PAMPHLET

for PCA / HHA

Take a look at some of the benefits you will receive while
working as a PCA / HHA with Community Home Care Services



**HELP
OUR
TEAM
GROW**



We recognize employees who exemplify outstanding service through his or her work and exhibiting a positive and supportive attitude, contributing new ideas for improvement, going above and beyond and doing the best job in the following fields:

Attitude and Commitment

Interpersonal Skills

Work Performance

Personal Traits



There
will
be a
of the

CARE GIVER MONTH

WINNER

chosen per satellite office

winner receives

AN AWARD, CASH BONUS
and other exciting prizes

Reach for the stars



Community
homecare

Community Home Care Services
is pleased to announce our new

PARTNERSHIP *with* TICKETS AT WORK

Now you'll have access to exclusive savings on movie tickets, theme parks, hotels, tours and more. Be sure to visit often as new products and discounts are constantly being added.

Company Code: **elitecare**

SIGN UP IN 60 SECONDS AND START SAVING TODAY!
VISIT WWW.TICKETSATWORK.COM

→ **Click** on the "become a member" box at the top of the homepage. You will then be prompted to create an account with your email address and company code.

→ Or, you can place your order **by phone**. Call TicketsatWork customer service at 800-331-6483. Orders are taken 8:30am-12am/7 days a week (holidays included).

HOTEL

 **Community** *with*
homecare

 **TicketsatWork**[®].com
Fun. With benefits.



**NO NEED TO WAIT
FOR YOUR CHECK
IN THE MAIL**



**GET PAID DIRECTLY
ON YOUR RAPID CARD**

EVERY FRIDAY. FREE OF CHARGE

CALL THE PAYROLL
DEPARTMENT TO SIGN UP

929.222.8282



Community Home
Care Services
now offers

Medical Insurance

to all full time* employees



CHOICE OF 4 PLANS:

MEC Basic - This plan excludes out-of-network services and covers only the services listed under our Preventive Care Benefits. Rx program offers discounts up to 80% on most FDA-approved prescription medications. Freshbenies® members have access to physicians via phone or video, with prescriptions sent directly to the member's pharmacy, when medically necessary. **COST - Only \$13.89/WEEK**

COVERED BENEFITS	MEC BASIC
Wellness and Prevention	Covered 100%
RX Discounted Program	Included
VIRTUAL HEALTH BENEFITS	FRESHBENIES®
27/7/365 Telehealth Program	Included
BenieWALLET	Included

Ultra MEC - This plan excludes out-of-network services and covers only the services listed under our Preventive Care Benefits. Claims are reprieved through the MultiPlan PHCS network. Members will be responsible for paying the remaining balance after the network discount is applied. Discounts vary based on provider contracts. Rx benefits are subject to the formulary drug list. Amounts listed are based on a unit quantity of 30 for a 30-day supply. Pricing may vary based on quantity and supply. Virtual Health Benefits are offered through freshbenies. Members have access to 1) physician visits via phone or video, with prescriptions sent directly to the member's pharmacy, when medically necessary and 2) therapist consultations via video at \$50 each (first 3 visits - \$85 after) **COST - Only \$38.40/WEEK**

COVERED BENEFITS	ULTRA MEC
Preventive/Wellness	Covered 100%
Primary Care Visit	\$15 Copay
Specialist Visits	Network Discount
Urgent Care	\$50 Copay
Laboratory Services / X-Rays	Network Discount
Generic Rx	Tier 1: \$10 or less, Tier 2: \$25 or less
VIRTUAL HEALTH BENEFITS	FRESHBENIES®
27/7/365 Telehealth Program	Included
Behavioral Health	\$50 Fee / Max 3 Per Year
BenieWALLET	Included

Ultimate MEC - This plan excludes out-of-network services and covers only the services listed under our Preventive Care Benefits page. Rx benefits are subject to the formulary drug list. Amounts listed are based on a unit quantity of 30 for a 30-day supply. Pricing may vary based on quantity and supply. Virtual Health Benefits are offered through freshbenies. Members have access to 1) physician visits via phone or video, with prescriptions sent directly to the member's pharmacy, when medically necessary and 2) therapist consultations via video at \$50 each (first 3 visits - \$85 after) **COST - Only \$55.01/WEEK**

COVERED BENEFITS	ULTIMATE MEC
Preventive/Wellness	Covered 100%
Primary Care/ Specialist Visits	\$15 Copay
Urgent Care	\$50 Copay
Laboratory Services / X-Rays	\$50 Copay
Generic Rx	Tier 1: \$10 or less, Tier 2: \$25 or less
Preferred Brand Rx	Tier 3: \$50 or less, Tier 4: \$75 or less
VIRTUAL HEALTH BENEFITS	FRESHBENIES®
27/7/365 Telehealth Program	Included
Behavioral Health	\$50 Fee (first 3 visits then \$85 fee after)
BenieWALLET	Included

MV 6500 - This is a benefit highlight representing a brief description of the coverage available. Additional covered services, exclusions and limitations exist. Specific services including inpatient hospital, maternity and outpatient surgery are subject to precertification. The out-of-pocket maximum refers to covered services only. Specific services, including emergency and hospital services, are subject to reference based pricing and patients may be billed beyond the out-of-pocket maximum for these services. Reference-based pricing reimburses providers using a percentage of Medicare coverage as the reference point for the reimbursement total. The MV 6500 plan pays up to 125% of the Medicare allowable coverage for applicable services. Patients will be responsible for paying any remaining balance beyond the provider reimbursement total. **COST - Only \$148.94/WEEK**

COVERED BENEFITS	MINIMUM VALUE 6500
Annual Deductible	\$6,500 individual / \$13,000 family
Out-of-Pocket Max (for covered services)	\$6,500 individual / \$13,000 family
Preventive/Wellness	Covered 100%
Primary Care/ Specialist Visit	\$50 Copay
Urgent Care	Covered 100% after deductible is met
Emergency Services (excludes ambulance)	Reference-Based Pricing after deductible is met
Diagnostic Services / X-Rays	Covered 100% after deductible is met
Inpatient Hospital Services incl. Physician Fees	Reference-Based Pricing after deductible is met
Outpatient Hospital Services	Not Covered
All Additional Covered Services	Covered 100% after deductible is met
Telemedicine	Included
VIRTUAL HEALTH BENEFITS	FRESHBENIES®
Generic Prescription Drugs	Covered 100% after deductible is met
Preferred Brand Prescription Drugs	Covered 100% after deductible is met
Non-Preferred, Specialty and Self-Injectable Prescription Drugs	Not Covered

*Full time employees define as working 30+ hrs p/week, (or 130 hrs/month).

A full time employee will qualify for insurance after working 12 consecutive weeks with full time hours.

You will become eligible for medical insurance coverage on the first day of the calendar month after you have worked full time for at least 12 weeks.

DEPENDANT COVERAGE AVAILABLE. ASK US ABOUT IT.

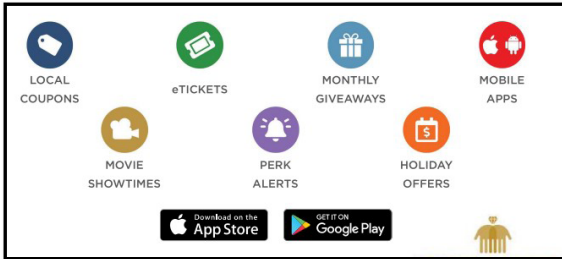
If you have questions or need assistance enrolling, please contact CEM ENROLLMENTS at (845) 2-ENROLL or via email Info@CEMenroll.com

ADDITIONAL BENEFITS GEM OFFERS

PRESCRIPTION SAVINGS PROGRAM

Our prescription savings program lowers the retail cost of prescription medications by providing exclusive discounts and savings at participating pharmacies

EMPLOYEE PERKS Coupons, Monthly Giveaways, eTickets and more!



DOCTEGRITY

Board certified primary care physicians and licensed mental health therapists available to you 24/7/365, nationwide (Telemedicine and Teletherapy)

DOGTEGRITY

24/7/365 days a year unlimited access to a dedicated team of licensed Veterinarians (Virtual Veterinary Services and Pet Drug Savings Card)

VOLUNTARY BENEFITS THROUGH COLONIAL LIFE

Voluntary benefits are designed to complement your health insurance and help provide extra financial protection:

- ✓ **Accident Insurance**
- ✓ **Cancer Insurance**
- ✓ **Critical Illness Insurance**
- ✓ **Disability Insurance**
- ✓ **Hospital Confinement Indemnity Insurance**
- ✓ **Life Insurance**

If you have questions or need assistance enrolling, please contact GEM ENROLLMENTS at **(845) 2-ENROLL** or via email **info@GEMenroll.com**



Sick Time Off for Caregivers



For **every 30 hours** worked at a case,
you will accrue **1 hour of 'sick time'**.

You can accrue up to **56 hours** of sick time per calendar year.

On December 31 each year, you can carry over **up to 56 unused accrued sick hours** to the next calendar year.

USING SICK TIME

You may use sick time, at minimum, in 4-hour increments.

You must contact your coordinator in the event that you are sick.

You will be paid for your sick time at your hourly rate.

You will be paid for the requested sick time during the next regular payroll period beginning after the sick time was used.

Upon termination or resignation of employment, accrued sick time will not be paid out and will be lost.

AS A PCA/HHA YOU'LL BE MAILED A

scrub top

Additional scrubs can be purchased at
a discounted price by calling HR.

