



*Fusion*

MEDICAL STAFFING

**2019**  
**EMPLOYEE**  
**BENEFITS GUIDE**  
*(External)*

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# FUSION MEDICAL STAFFING

## WELCOME

Thank you for choosing Fusion Medical Staffing! We are excited to have you as part of our Fusion Family and we look forward to assisting you with your benefit needs.

As an employee, we understand the benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your family in the case of illness or injury. Compiled in the pages that follow, you will find information regarding the benefit plans Fusion has to offer.

This benefit guide is intended to serve as a convenient reference to the various employee benefit offerings available to eligible employees. Eligibility in any given benefit plan is subject to the terms and conditions of the plan. For a complete description of each benefit plan, refer to the SPD which is located in ADP under Resources> Company Information> Company Policies. Every effort has been made to ensure the accuracy of the information provided herein; however, in the event of a discrepancy between the information contained in this guide and the related SPD, the provision of the SPD and underlying plan shall be applied. The information in this guide pertains only to the current benefit plan year. SPDs are available in ADP or you may contact the fusion benefits team for a hard copy: [benefits@fusionmedstaff.com](mailto:benefits@fusionmedstaff.com).

To ensure that you fully understand the benefits available to you and your obligations as a plan participant, it is imperative that you familiarize yourself with the information contained within the SPD. If you have any questions, please reach out to the benefits team.

Sincerely,

Fusion Medical Staffing Benefits Department

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# FUSION MEDICAL STAFFING

## QUALIFYING LIFE EVENTS

Employee may elect benefits once a year, during Open Enrollment. Outside of open enrollment, a qualified life event must occur.

The following circumstances are the **ONLY** reasons you may change your benefits during the plan year:

- Marriage, divorce, legal separation or annulment
- Birth, adoption or placement for adoption of an eligible child
- Loss of spouse's job, change in work status where coverage is maintained through the spouse's plan.
- Gain or Loss of other coverage for your adult child
- Death of spouse or dependent
- Loss of dependent status
- Addition or loss of Medicare or Medicaid coverage
- Receiving a Qualified Medical Child Support Order.

These "Qualifying Life Events" will allow you to make plan changes when they occur and

## IMPORTANT REMINDERS

### Plan Year

January 1<sup>st</sup> through December 31<sup>st</sup>.

### Eligibility

Full time employees working 29 hours or more per week are eligible for benefits. Coverage for benefit eligible employees will begin the first of the month following your date of hire.

### Termination of Coverage

Coverage for Health, Dental and Vision Plans end the last day of the month in which you end employment.

For Life & Disability Plans, coverage ends the same day employment ends.

### Dependent Coverage

Dependents, both spouse and children up to age 26, are eligible for coverage under the medical, dental and vision plans.

### Part-Time/ Per Diem

Employees who are working a contract that is **not** considered full time (29 hours a week or more), are not eligible for benefits.

### Making Changes

Outside of Open Enrollment, you must have a qualifying life event to make changes. Please view the Qualifying Life Events section for more information.

### 26 Day Rule for Insurance

Employees that are on assignment with Fusion may take up to 26 days off between assignments with no lapse in coverage if meeting the following requirements:

- Employee has another contract in place at the end of the current contract.
  - No more than a 26-day break occurs between last date of current assignment and start of new assignment.
- Missed premiums will be caught up when employee is back on contract.

# FUSION MEDICAL STAFFING

## 5-week deductions

5-week deductions are taken the 3rd week into the month which benefits start for the traveler. **4 weeks of deductions will be withheld, plus the normal weekly deduction.** If electing more than employee only coverage, the additional deduction, will be spread across two weeks. These deductions are taken to cover the employee's premiums through the end of the month in which their contract ends, but the employee is no longer receiving a check from Fusion. Example: Employees contract end on 5<sup>th</sup> of the month, their benefits will continue through the end of the month.

*Any unused deductions will be refunded to the traveler within 45 days of the end of their assignment.*

## MEDICAL/ PRESCRIPTION

Fusion is pleased to offer two medical plan options with prescription drug coverage through Blue Cross and Blue Shield of Nebraska. Please take time to compare these options and find the right plan for you and your lifestyle by utilizing the SBC's.

### BLUE CROSS BLUE SHIELD PPO PLAN

The PPO plan is a comprehensive medical plan that gives employees the flexibility to receive the care from the provider they choose, without the need to obtain referrals for services. Employees are subject to copays for services and must meet their deductibles before coinsurance will begin.

#### PPO PLAN SUMMARY

	IN-NETWORK	OUT-OF-NETWORK
<b>Deductible</b>		
• Individual	\$1,500	\$3,000
• Family (Embedded)	\$3,000	\$6,000
<b>Coinsurance</b>	20%	40%
<b>Out-Of-Pocket Limit</b>		
• Individual	\$3,500	\$7,000
• Family	\$7,000	\$14,000
<b>Office Visits (Co-pays)</b>		
• Primary	\$30	
• Specialist	\$45	
• Allergy Injections/ Telehealth	\$10	Deductible & Coinsurance
• Urgent Care	\$60	
• ER	\$150	

# FUSION MEDICAL STAFFING

	IN-NETWORK	OUT-OF-NETWORK
Preventive Services	Plan Pays 100%	Deductible & coinsurance
Prescription (30-day supply)		
• Generic	\$10	\$10 Copay + 25% Penalty
• Preferred Brand Name	\$30	\$30 Copay + 25% penalty
• Non-preferred Brand Name	\$50	\$50 Copay +25% penalty
• Specialty	\$75	Not covered

## PPO PLAN WEEKLY PREMIUMS

COVERAGE LEVEL	WEEKLY PREMIUM AMOUNT
EMPLOYEE ONLY	\$51.12
EMPLOYEE + SPOUSE	\$118.22
EMPLOYEE + CHILD(REN)	\$99.05
EMPLOYEE + FAMILY	\$172.53

## BCBS HIGH DEDUCTIBLE HEALTH PLAN (HDHP)

The HDHP plan is a comprehensive medical plan that gives employees the flexibility to receive the care from the providers they choose, without the need for referral services. The HDHP Plan offers employees a lower premium cost, with a higher deductible. There are no copays for services or prescriptions and the deductible must be satisfied before this plan will cost share with the employee.

Employees enrolled in the HDHP plan are eligible to deposit pre-tax funds into a Health Savings Account to assist with the cost of health care related expenses. This account is set-up by the employee and is not a plan offered by Fusion Medical Staffing, LLC.

## HIGH DEDUCTIBLE HEALTH PLAN SUMMARY

	IN-NETWORK	OUT-OF-NETWORK
Deductible		
• Individual	\$3,500	\$7,000
Family (Embedded)	\$7,000	\$14,000
Coinsurance	100%	20%
Out-Of-Pocket Limit		
• Individual	\$3,500	\$11,000
Family	\$7,000	\$22,000

# FUSION MEDICAL STAFFING

	IN-NETWORK	OUT-OF-NETWORK
Office Visits		
<ul style="list-style-type: none"> <li>• Primary</li> <li>• Specialist</li> <li>• Allergy Injections</li> <li>• Telehealth</li> <li>• Urgent Care</li> <li>• ER</li> </ul>	Deductible & Coinsurance	Deductible & Coinsurance
Preventive Services	Plan Pays 100%	Deductible & coinsurance
Prescription (30-day supply)		Deductible & Coinsurance + 25% Penalty
<ul style="list-style-type: none"> <li>• Generic</li> <li>• Preferred Brand Name</li> <li>• Non-preferred Brand Name</li> <li>• Specialty</li> </ul>	Deductible & Coinsurance	Not covered (Specialty)

## HDHP PLAN WEEKLY PREMIUMS

COVERAGE LEVEL	WEEKLY PREMIUM AMOUNT
EMPLOYEE ONLY	\$33.39
EMPLOYEE + SPOUSE	\$91.83
EMPLOYEE + CHILD(REN)	\$75.13
EMPLOYEE + FAMILY	\$139.13

# FUSION MEDICAL STAFFING

## DENTAL

### AMERITAS DENTAL

Fusion Medical Staffing is proud to offer Dental Benefits through Ameritas giving employees access to a strong dental provider network. Employees also may access online services such as electronic membership cards, provider directory, and a smartphone app, with the ability to view your claims, deductible amounts and remaining benefits. Your online account will work for ***BOTH*** your dental and vision plans if enrolled in both plans. You will be able to access your ID cards, statements and much more!



### AMERITAS DENTAL SUMMARY

#### PLAN BENEFIT

Deductible (waived type 1)	\$50 (single)/\$150 (family)
Type 1 (routine exam, cleaning, x-rays, etc.)	100%
Type 2 (fillings, anesthesia, simple extractions, etc.)	50%
Type 3 (complex extractions, crowns, periodontics, etc.)	25%
Plan Maximum (per person per year)	\$500

#### Dental Rewards program:

Carryover up to \$175 annually with a max of \$500 if benefits do not exceed \$250 in calendar year

### DENTAL PLAN WEEKLY PREMIUMS

COVERAGE LEVEL	WEEKLY PREMIUM AMOUNT
EMPLOYEE ONLY	\$1.66
EMPLOYEE + SPOUSE	\$3.86
EMPLOYEE + CHILD(REN)	\$4.02
EMPLOYEE + FAMILY	\$6.09

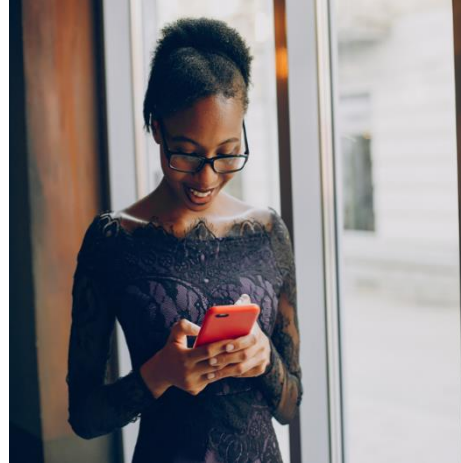


# FUSION MEDICAL STAFFING

## VISION

### AMERITAS VISION

Fusion Medical Staffing offers Vision Benefits through Ameritas VSP, giving employees access to a strong provider network, as well as to services such as electronic membership cards, the ability to locate providers via an online portal and a smartphone app, with the ability to view your claims, deductible amounts and remaining benefits.



### AMERITAS VISION SUMMARY

PLAN BENEFIT	IN-NETWORK
<b>Deductible</b>	
Vision exam	\$10
Eyeglass lenses or Frames	\$10
<b>Annual Eye Exam</b>	Covered in full after deductible
<b>Frames or Contact Allowance</b>	Up to \$130
<b>Frequencies in months, based on date of service</b> (Exams/Lens/Frame)	12/12/24

### VISION PLAN WEEKLY PREMIUMS

COVERAGE LEVEL	WEEKLY PREMIUM AMOUNT
EMPLOYEE ONLY	\$0.71
EMPLOYEE + ONE	\$1.45
EMPLOYEE + FAMILY	\$2.65

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## DISABILITY COVERAGE

### SHORT-TERM DISABILITY

Short Term Disability benefits are offered through Mutual of Omaha.

- Benefits begin on the 15<sup>th</sup> day after a 14-day elimination period. The 14-day elimination period is for both injury/accident and sickness.
- Benefit percentage is 60% of your basic gross taxable wages. (Tax-free per diems are not included)
- Maximum weekly Benefit, \$500
- Maximum period of short term disability payment is 26 weeks.

### Qualifications for Short-Term Disability

- A Short-Term Disability claim can be filed due to employee's own illness or injury that inhibits them from being able to perform at least one of the material duties of his or her regular occupation, and they are unable to generate current earnings which exceed 99% of their weekly earnings in his/her regular job.
- Employee's must be working on an active full-time contract at the time the claim is filed.

*\*Premium is calculated on annual base salary and can vary, below listed premium is the maximum amount.*

### SHORT-TERM DISABILITY WEEKLY PREMIUM

EMPLOYEE ONLY

\$1.66

# FUSION MEDICAL STAFFING

## LIFE INSURANCE

### BASIC LIFE AND AD&D COVERAGE

Basic Life and Accidental Death & Dismemberment benefits are offered through Mutual of Omaha and would be payable to a beneficiary of your choice, in the event of death.

- Benefits amount is \$25,000.
- Benefits are reduced by 50% beginning at age 65 and would terminate at retirement.

### Accidental Death and Dismemberment (AD&D)

- Benefits provided are for specified coverage of accidental bodily injury that directly causes death or dismemberment (e.g., the loss of a hand, foot or eye), this is subject to policy limitations.

### BASIC LIFE & AD&D WEEKLY PREMIUM

EMPLOYEE ONLY

\$0.28

## 401(K) PLAN

Fusion Medical Staffing offers a retirement plan through Empower Retirement. Employees are eligible to begin contributing to the plan after 30 days of employment with Fusion.

Employees will receive plan information from Empower Retirement to the W-2/Payroll address we have on file for you. You will utilize this information to gain access to your account and elect your contribution levels. After one

year of employment and 1,000 hours of service, Fusion's Safe Harbor match will begin. The Matching contributions are calculated as at 100% on the first 3% and 50% of the next 2% of employee contributions. An example of this is shown as follows:



# FUSION MEDICAL STAFFING

Employee Contribution	Employer Safe Harbor Match
1%	1%
2%	2%
3%	3%
4%	3.5%
5% +	4%

You are always vested in your contributions and once the Employer Safe Harbor Match begins, these contributions vest 100% immediately.

## REQUIRED NOTICES

### [Women's Health and Cancer Rights Act](#)

Under the Federal Women's Health and Cancer Rights Act of 1998, you are entitled to the following:

- Reconstruction of the breast on which the mastectomy was performed.
- Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- Prosthesis and treatment for physical complication during all stages of mastectomy, including swelling of the lymph glands (lymphedema).



Services are provided in a manner determined in consultation with the physician and patient. Coverage is provided on the same basis as any other illness; deductible and coinsurance will apply.

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## HIPAA

The Health Insurance Portability & Accountability Act of 1997 (HIPAA) imposes requirements on group health plans. HIPAA is intended to help protect families from losing their health insurance coverage when a family member changes or loses his/her job. It also restricts the use of provisions which limit coverage for pre-existing conditions.

Please refer to your Summary Plan Descriptions for details.

## Benefits Guide and Summaries

Employees may locate the Summary Plan Descriptions, Summary of Benefits Coverages and other required notices on ADP. These documents will provide you with important information on how the plan works, claims procedures, etc. Please review these documents carefully.

## CONTACTS

Vendor	Plan	Phone	Address (Email, Physical, and/or Web)
Fusion Benefits Team			<a href="mailto:benefits@fusionmedstaff.com">benefits@fusionmedstaff.com</a>
Ameritas	Dental and Vision	1-800-487-5553	<a href="http://Ameritas.com">Ameritas.com</a>
Blue Cross Blue Shield	Medical	1-888-592-8961	<a href="http://Nebraskablue.com">Nebraskablue.com</a>
American Well (Amwell)	Telehealth	1-844-733-3627	<a href="http://Nebraskablue.com/telehealth">Nebraskablue.com/telehealth</a> <a href="http://Amwell.com">Amwell.com</a>
Empower	401(k)	1-800-338-4015	<a href="http://www.empower-retirement.com/participant">www.empower-retirement.com/participant</a>
Mutual of Omaha	Life, STD		<b>Web:</b> <a href="http://Mutualofomaha.com">Mutualofomaha.com</a> <b>Online EOI:</b> <a href="https://www3.mutualofomaha.com/eoi/#/home">https://www3.mutualofomaha.com/eoi/#/home</a>