

2023

# ABILITY ONE BENEFITS Guide





Thank you for deciding to go on this journey with us. We never take for granted that you have many employment choices and you have decided to join our family. Here at Goodwill of Western Missouri and Eastern Kansas (MoKan), our mission is to empower people to discover their potential and seek economic mobility through the power of work. Beginning today you are now an ambassador of MoKan Goodwill. To our communities, shoppers, donors, clients, and partners, **“YOU”** are GOODWILL.

As an ambassador of MoKan Goodwill, you will find the work to be meaningful and lifechanging. Our impact on people and the communities we serve enriches the lives of families and generations to come. Also, as an employee of the MoKan Goodwill Team, we are proud to offer you and your family benefit opportunities such as health, dental, retirement, wellbeing, store discounts and more. Goodwill provides a broad and competitive range of benefits in order to promote the health and general well-being of our workforce. We understand these decisions are important, so this book outlines the benefits options available to you and your family, the details on eligibility requirements, and enrollment instructions.

Our People & Culture Team and Benefits providers are here to help you through this process. On behalf of the Board of Directors and our Leadership team, I want to thank you for your commitment to service and welcome you again to the MoKan Goodwill family.

**Onward!**

Funmi Popoola

President/CEO



Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

### Eligibility

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself.

Eligible family members include:

- Your legally married spouse
- Your children who are your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

### When Coverage Begins

- **New Hires:** You must complete the enrollment process within 10 days of your date of hire. If you enroll on time, coverage is effective on the first of the month following 30 days.

If you fail to enroll on time, you will **NOT** have benefits coverage (except for company-paid benefits).

- **Open Enrollment:** Changes made during Open Enrollment are effective January 1 - December 31, 2023.

### Choose Carefully

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year.

Following are examples of the most common qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse or child
- You lose coverage under your spouse's plan
- You gain access to state coverage under Medicaid or CHIP

### Making Changes

**To make changes to your benefit elections, you must contact Human Resources within 31 days of the qualified life event (including newborns).** Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

**Required Information**—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

## Inside

Medical

Dental

Vision

Employer Paid Benefits

Employee Time Off and

Retirement

Voluntary Benefits

Cost of Benefits

Contact Information

## Enrollment

Visit:

<https://hcm.paycor.com/authentication/signin> and login using your username (first initial and last name) and password.

Contact:

[Benefits@mokangoodwill.org](mailto:Benefits@mokangoodwill.org)

(816) 842-7425 x 300

# Medical

We are proud to offer you a choice of 5 medical plans that provide comprehensive medical and prescription drug coverage. The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

## BlueKC 3000 PPO Broad Plan

### (Preferred Care Blue)

This is a plan design with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **Preferred-Care Blue network**. The calendar-year deductible must be met before certain services are covered.

## BlueKC 3000 PPO Optimized Plan

### (BlueSelect Plus)

This is a plan with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **Blue Select network**. The calendar-year deductible must be met before certain services are covered.

## BlueKC 6500 Value PPO Broad Plan

### (Preferred Care Blue)

This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **Preferred-Care Blue network**. The calendar year deductible must be met before certain services are covered.

## BlueKC 6500 Value PPO Optimized Plan

### (BlueSelect Plus)

This is a plan design with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **BlueSelect Plus network**. The calendar-year deductible must be met before certain services are covered.



## BlueKC 3000 SpiraCare EPO Plan

### (Exclusive Provider Organization)

SpiraCare is built on an Exclusive Provider Organization (EPO) insurance model. While this plan is ideal for members who utilize the no-additional-cost primary and pediatric care at the Care Centers, members still have access to more than 3,000 providers in the **BlueSelect Plus network**. Members will also have the nationwide coverage of the BlueCard network outside of the 32-county Blue KC service area.

### Plan Definitions:

- **Annual Deductible:** You must meet the entire annual deductible before the plan starts to pay for non-preventive medical and prescription drug expenses.
- **Coinsurance:** Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80 percent and you may pay 20 percent.
- **Out-of-Pocket Maximum:** Once your deductible and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100 percent of all eligible covered services for the rest of the calendar year.

# Medical Plans

Following is a high-level overview of the coverage available. For complete coverage details, please refer to certificate or the Summary Plan Description (SPD) located at [www.mokangoodwill.org.benefits](http://www.mokangoodwill.org.benefits).

**Note-Only full-time employees working 30 or more hours per week are eligible to enroll in the medical plans.**

Key Medical Benefits	Preferred Care Blue 3000 PPO Broad Plan	BlueSelect Plus 3000 PPO Optimized Plan	Preferred Care Blue 6500 Value PPO Broad Plan	BlueSelect Plus 6500 Value PPO Optimized Plan	BlueSelect Plus 3000 SpiraCare EPO Plan
	In-Network Only	In-Network Only	In-Network Only	In-Network Only	In-Network Only
Deductible (per calendar year)					
Individual / Family	\$3,000 / \$9,000	\$3,000 / \$9,000	\$6,500 / \$13,000	\$6,500 / \$13,000	\$3,000 / \$9,000
Out-of-Pocket Maximum (per calendar year)					
Individual / Family	\$3,000 / \$9,000	\$3,000 / \$9,000	\$6,500 / \$13,000	\$6,500 / \$13,000	\$3,000 / \$9,000
Covered Services					
Office Visits (physician/specialist)	\$20 / \$60 copay	\$20 / \$60 copay	Deductible	Deductible	Deductible
SpiraCare Visit (physician/ specialist/Urgent Care)	N/A	N/A	N/A	N/A	No charge
Routine Preventive Care	No charge	No charge	No charge	No charge	No charge
Outpatient Diagnostic (lab/X-ray)	Deductible	Deductible	Deductible	Deductible	Deductible
Complex Imaging	Deductible	Deductible	Deductible	Deductible	Deductible
Hi Tech Diagnostic (lab/x-ray)	Deductible	Deductible	Deductible	Deductible	Deductible
Emergency Room	Deductible	Deductible	Deductible	Deductible	Deductible
Urgent Care Facility	\$60 copay	\$60 copay	Deductible	Deductible	Deductible
Inpatient Hospital Stay	Deductible	Deductible	Deductible	Deductible	Deductible
Outpatient Surgery	Deductible	Deductible	Deductible	Deductible	Deductible
Prescription Drugs (Tiers 1 / 2 / 3): Optum Rx					
Retail Pharmacy (34-day supply)	\$5 / \$30 / \$50	\$5 / \$30 / \$50	\$12 / 100% after Deductible Tier 2 & 3	\$12 / 100% after Deductible Tier 2 & 3	\$15 / \$50 / Deductible
Mail Order (102-day supply)	\$12.50 / \$75 / \$125	\$12.50 / \$75 / \$125	\$30 / 100% after Deductible Tier 2 & 3	\$30 / 100% after Deductible Tier 2 & 3	\$15 / \$125 / Deductible

- Out of Pocket Maximum includes deductible, coinsurance and copays
- Coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.
- If you use an out of network provider, you will be responsible for any charges above the maximum allowed amount.
- SpiraCare Enrollment:
  - \* You must live in one of the following counties to be eligible for the SpiraCare plan:  
Kansas (Johnson & Wyandotte) Missouri (Jackson, Clay, Cass, Clinton, DeKalb, Johnson, Lafayette, Ray, Caldwell and Platte).
  - \* Hospitals Include: Children’s Mercy Hospital, Children’s Mercy Hospital-South, Liberty Hospital, North Kansas City Hospital, Olathe Health-Olathe Medical Center, Truman Medical Center-Hospital Hill, Truman Medical Center-Lakewood, Shawnee Mission Medical Center, The University of Kansas Health System.
  - \* SpiraCare Clinic Locations include: Crossroads, Lee’s Summit, Liberty, Olathe, Shawnee, Wyandotte, Tiffany Springs, Overland Park and Independence.

# MEDICAL RATES

## 2023 Goodwill of Western Missouri and Eastern Kansas Ability One EMPLOYEE CONTRIBUTIONS

January 1, 2023- December 31, 2023



Your contributions toward the cost of medical coverage are automatically deducted from your paycheck before taxes.

Ability One Contribution				
Medical: 3000 PPO Broad Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$450.83	\$1,036.94	\$856.59	\$1,262.35
Medical: 3000 Optimized PPO Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$405.75	\$933.24	\$770.93	\$1,136.11
Medical: 6500 Value PPO Broad Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$372.04	\$855.72	\$709.08	\$1,041.74
Medical: 6500 Value PPO Optimized Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$334.84	\$770.15	\$638.17	\$937.57
Medical: 3000 SpiraCare EPO Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$332.09	\$763.84	\$630.99	\$929.89



# BlueSelect Plus Network

## Available exclusively to members who:

### ✓ Live in one of these twelve counties:

**Missouri:** Clay, Jackson, Platte, Cass, Clinton, DeKalb, Johnson, Lafayette, Ray, Caldwell

**Kansas:** Johnson and Wyandotte

### ✓ Seek care in the six-county BlueSelect Plus network:

**Missouri:** Clinton, Clay, Jackson, Platte

**Kansas:** Johnson and Wyandotte

## Hospitals included in the network:

- AdventHealth Shawnee Mission
- Cameron Regional Medical Center
- Children's Mercy (Hospital Hill and South)
- Liberty Hospital
- North Kansas City Hospital
- Olathe Medical Center
- Truman Medical Center (Hospital Hill and Lakewood)
- University of Kansas Hospital



Over 3,600 Providers  
10 Top Hospitals



# Your Plan's Network

Check with your HR department to determine if your company is offering an EPO and/or PPO Spira Care plan.



While your primary care needs can be handled at your Spira Care Center, we recognize that certain circumstances call for outside care — like seeing a specialist, long-term behavioral health support or being admitted to a hospital.

For needs outside of a Care Center, you will have access to your plan's network within the Kansas City metro area and the nationwide BlueCard network for care when traveling outside your service area (applies toward your annual deductible).

It is important to understand if your plan is on an EPO or PPO insurance model. Ask your human resources representative or look on your member ID card.

## EPO

In an Exclusive Provider Organization (EPO) insurance model, members must receive all care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county service area) except for emergency services. Non-emergency services received out-of-network will not be covered.

## PPO

In a Preferred Provider Organization (PPO) insurance model, members are encouraged to receive care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county service area) but have the option to receive care from out-of-network providers at a higher cost.

# Spira Care

## Kansas City Metro Locations

Learn more about these locations, including extended hours and meet the Care Teams, at [SpiraCare.com](https://SpiraCare.com).



**Spira Care Crossroads**  
1916 Grand Boulevard  
Kansas City, MO 64108

**Spira Care Independence**  
(Opening December 2022)  
3717 S Whitney Avenue  
Independence, MO 64055

**Spira Care Lee's Summit**  
760 NW Blue Parkway  
Lee's Summit, MO 64086

**Spira Care Liberty**  
8350 N Church Road  
Kansas City, MO 64158

**Spira Care Olathe**  
15710 W 135th Street, Suite 200  
Olathe, KS 66062

**Spira Care Overland Park**  
7341 W 133rd Street  
Overland Park, KS 66213

**Spira Care Shawnee**  
10824 Shawnee Mission Parkway  
Shawnee, KS 66203

**Spira Care Tiffany Springs**  
8765 N Ambassador Drive  
Kansas City, MO 64154

**Spira Care Wyandotte**  
9800 Troup Avenue  
Kansas City, KS 66111



To learn about the Care Teams at the Care Centers and for hours, visit [SpiraCare.com](https://SpiraCare.com).

Members must receive all care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county Blue KC service area, when traveling or on vacation, for example). If a member is on a Preferred Provider Organization (PPO) insurance plan, they do have out-of-network coverage, meaning higher out-of-pocket costs will apply. Out-of-network benefits are subject to the plan's allowable charge. Out-of-network providers may bill the member for the remaining balance.



# DENTAL COVERAGE

# Dental– Delta Dental of Kansas

Your contributions toward the cost of dental coverage are automatically deducted from your paycheck before taxes.

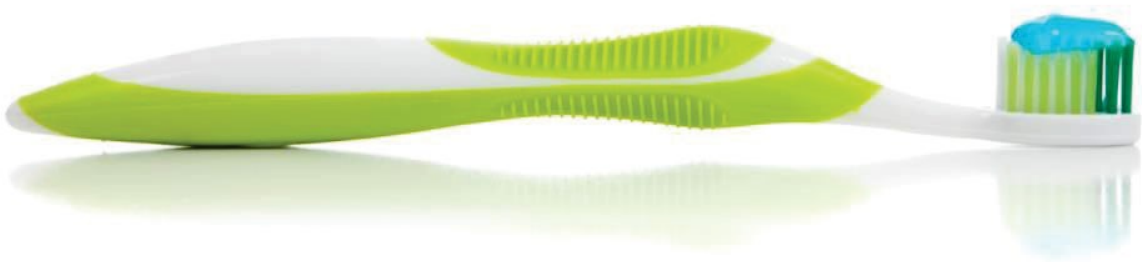
Employee Contribution				
Dental	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$16.32	\$31.79	\$30.42	\$46.39

Key Dental Benefits	Delta Dental DPPO	
	In-Network Only	Out-of-Network <sup>1</sup>
Deductible (per calendar year)		
Individual / Family	\$50 / \$150	\$50 / \$150
Benefit Maximum (per calendar year; Preventive, Basic, and Major Services combined)		
Per Individual	\$1,500	\$1,500
Covered Services		
Preventive Services	No charge	No charge
Basic Services	20%*	20%*
Major Services	50%*	50%*
Orthodontia (Child only)	50%; \$1,000 Max. Benefit	N/A

Coinsurance percentages shown in the above chart represent what the member is responsible for paying.

\*Benefits with an asterisk ( \* ) require that the deductible be met before the Plan begins to pay.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.



# Vision Coverage



# Vision– Sunlife

Your contributions toward the cost of vision coverage are automatically deducted from your paycheck before taxes.

Employee Contribution				
Vision	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$4.33	\$8.61	\$9.27	\$13.68

Key Vision Benefits	In-Network	Out-of-Network Reimbursement
Exam (once every 12 months)	\$10	\$52
Materials Copay	\$25	N/A
Lenses (once every 12 months)		
Single Vision	No charge after materials copay	Up to \$55
Bifocal		Up to \$75
Trifocal		Up to \$95
Frames (once every 24 months)	Covered up to \$130	Up to \$57
Contact Lenses (once every 12 months; in lieu of glasses)	Covered up to \$130	Up to \$105



# EMPLOYER PAID BENEFITS



# Employee Assistance Program (EAP)

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at NO COST to you through Personal Assistance Program.

**This program can help with the following issues, among others:**

- Mental health
- Relationships or marital conflicts
- Child and eldercare
- Substance abuse
- Grief and loss
- Legal or financial issues

**Personal Assistance Service Benefits:**

- Assistance for you and your household members
- Up to 6 short term sessions with a counselor per issue, per year, per individual
- Unlimited toll-free phone access and online resources using Goodwill code: 0534 or wayforward app code: goodwill moka

# Group Life/AD&D

**Life Insurance** provides your named beneficiary(ies) with a benefit in the event of your death.

**Accidental Death and Dismemberment (AD&D) Insurance** provides specified benefits to you in the event of a covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot, or eye). In the event that your death occurs due to a covered accident, both the Life and the AD&D benefit would be payable.

**Group Life/AD&D (100% Employer-paid)**

This benefit is provided through MetLife for all eligible full-time employees.

Group Life AD&D Benefit Amount	1x annual salary up to \$150,000 maximum
--------------------------------	--

# Valuable Extras



HealthJoy is an all-in-one cost containment and guidance platform that helps employees make better health decisions. The platform brings together medical professionals, advocates, Rx Savings, and artificial-intelligence-powered virtual assistant, and an easy-to-use app.

**Only available for employees who are enrolled in the health plan.**

**We also offer the following additional benefits:**

- Volunteer Time Off
  - Paid Time Off
  - Paid Parental Leave
  - 401 (a) & 403(b) Retirement Plans
- Education Assistance
  - Pet Insurance
  - Helping Hands Fund
  - Discount Opportunities

# Long Term Disability

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

Note: Only full-time employees working 30 or more hours per week are eligible.

Employer Paid Long-Term Disability	
Provided at NO COST to you through MetLife	
Benefit Percentage	60%
Monthly Benefit Maximum	\$6,000
When Benefits Begin	After 90th day of disability
Maximum Benefit Duration	Social Security Retirement Age

# Employee Assistance Program



I can't  
do it

## Your Resource for Life's Questions

Each of us experiences demands for our time and energy, both on and off the job. In addition to our responsibilities at work, we also seek to fulfill our family responsibilities, meet our financial obligations, enjoy personal interests, and maintain a healthy family and social life. The key to balancing it all is having access to the right tools, resources and support.

*Personal Assistance Services (PAS) provides you with a wealth of confidential, professional services that can help you address challenges and strengthen your work and home life.*

*This is a pre-paid benefit funded completely by your employer and free to you and your dependents. The EAP is confidential - PAS does not disclose information to anyone about your participation unless you give your consent to do so (except as required by law).*

### Through PAS you have access to:

- Elder care managers
- Child care specialists
- Certified child development and parenting professionals
- Organization and time management specialists
- Retirement coaches
- Career coaches
- Tobacco cessation coaches
- Fitness coaches
- Master's level licensed counselors
- Registered and licensed dietitians
- Certified financial counselors
- Attorneys
- Life coaches
- Health coaches
- Downloadable resources, financial tools, legal forms and more on the PAS website

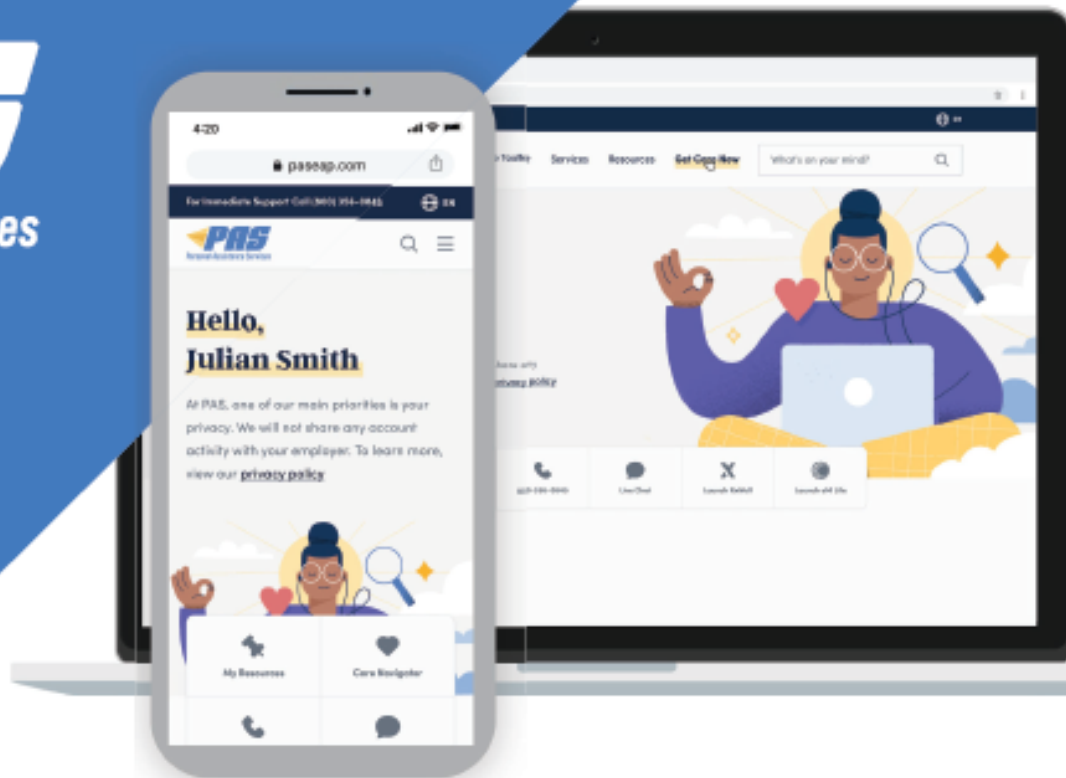


website: <https://www.paseap.com>

To register, use organization code:



# New member portal



New URL: [www.mypaseap.com](http://www.mypaseap.com)

Your organization code is:

goodwill mokan

Please create a user ID and password to access the portal, entering your name, email and phone number, either personal or work. Any eligible family member may have their own account.



## Features of the new member portal include:

- Personalized Member Dashboard with easy access to PAS digital engagement tools
- Quick connect bar to access PAS services from any device using chat, voice and email
- Care Navigator needs assessment with personalized recommendations to PAS resources and services
- Easy access to all PAS resources including calculators, worksheets and micro trainings
- Ability to pin articles and resources for future reference

For questions about the member portal, please email us at:

[pasadmin@paseap.com](mailto:pasadmin@paseap.com)



## A Healthier You™

Take control, get healthier, earn chances to win great prizes.



### WHOLE PERSON HEALTH SUPPORT

The **A Healthier You™** program gives you convenient online and mobile access to wellness tools that you can use to live your healthiest life. Plus, you'll earn points that can be redeemed for chances to win gift cards to some popular retailers.

### WITH EVERY TAP, CREATE A HEALTHIER YOU™



**Take your Health Risk Assessment.**



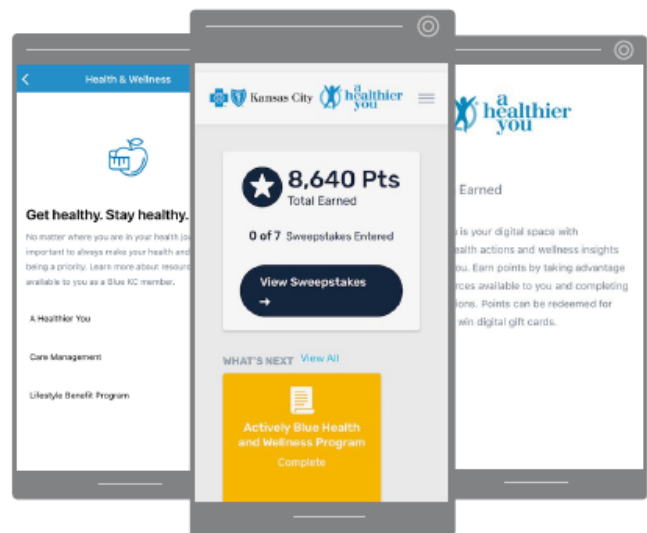
**Connect a device to track your steps, sleep, nutrition and more.**



**Get reminders for actions you can take to help you stay on top of preventive care and chronic conditions.**



**Complete health actions to earn points to enter monthly sweepstakes.**



### Access A Healthier You™.



Visit your **A Healthier You™** portal on **MyBlueKC.com** – your healthy place for wellness support and helpful digital tools. You can also download the **MyBlueKC** mobile app to access **A Healthier You™** anytime, wherever you go. Simply click on the Health & Wellness tab to access **A Healthier You™**.

# EMPLOYEE TIME OFF



## Goodwill Vacation Leave Policy

All Ability One employees are eligible to receive up to 10 vacation days after being employed with the agency for one year. No minimum hours are required. These vacation days do not roll over from year to year, but each employee is paid any remaining vacation hours on their anniversary. Below is the Ability One vacation annual amounts considering years of service. There is no waiting period for holiday pay.

Eligibility	Years of Service	Multiplier times the average hours per week	How and when this is awarded?	What if I don't use all my vacation?	What happens to it if I leave the agency?
No minimum number of hours. All employees are eligible.	1-7	2	Vacation time is awarded on each anniversary date and is pro-rated based on the number of hours worked each week.	Vacation needs to be used within 12 months. If not, remaining vacation will be paid out.	If you leave the Agency, you will be paid any unused vacation time as of the date of separation.
	8-14	3			
	15+	4			
Vacation will be calculated utilizing the following method: The most recent 12 months of pay history (anniversary date to anniversary date) will be used to calculate the average number of hours per week for vacation time. The total of these 26 pay periods will be divided by 52 to get the weekly average. The number will then be calculated by 2,3, or 4 depending on the years of service (see above).					

Vacation may be used if the employee has accrued time available. Employees should submit vacation requests on the approved form and provide two weeks' notice to the supervisor when Vacation is planned. Vacation for unplanned or last-minute requests may be approved at supervisor discretion. Supervisors are to take Agency and business needs into consideration when approving requests.

Hourly staff may use vacation in 1-hour increments; salaried staff follow the agency PTO guidelines. If an employee takes time off and does not have vacation hours to cover the absence, it will be time off without pay. Actual time worked plus vacations hours should not exceed regular work schedule.

Unused Vacation will be paid to an employee upon separation.

Please see handbook for full policy or consult with People and Culture

## **Goodwill Sick Leave Policy**

Sick pay hours are loaded on April 1st of each year and available through March 31st of the following year. Sick Leave hours are determined based on the average hours worked on annualized basis each week. Sick leave hours will be prorated based on the date of hire and remaining weeks in the year.

Full Time employees who average 35-40 hours per week will have 56 hours per year.

Part time employees who average 25-28 hours per week will have 39 hours per year.

Part Time employees who average 18-20 hours per week will have 28 hours per year.

Part Time employees who average 12 hours per week will have 17 hours per year.

## **Use of Paid Sick Leave**

Employees may use paid sick leave in increments as small as one hour. An employee's request to use paid sick leave may be made orally or in writing. A leave request must be made at least 7 calendar days in advance where the need for the leave is foreseeable, and in other cases as soon as is practicable. Certification for absences of three or more consecutive full days is required. The employee must have received notice of the requirement to provide certification or documentation before he or she returns to work.

An employee may use paid sick leave for an absence resulting from: (i) physical or mental illness, injury, or medical condition of the employee; (ii) obtaining diagnosis, care, or preventive care from a health care provider by the employee; (iii) caring for the employee's child, parent, spouse, domestic partner, or any other individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship who has any of the conditions or need for diagnosis, care, or preventive care described in (i) or (ii); or (iv) domestic violence, sexual assault, or stalking, if the time absent from work is for the purposes described in (i) or (ii) or to obtain additional counseling, seek relocation, seek assistance from a victim services organization, take related legal action, or assist an individual related to the employee as described in (iii) in engaging in any of these activities.

Unused sick leave is not payable upon termination.

## **Holidays**

Ability One follows the federal holiday schedule as seen below. If a holiday falls on a Saturday, it will be observed on the previous Friday. If a holiday falls on a Sunday, it will be observed on Monday. There is no waiting period for holiday pay. If the government deems an additional day as a holiday during the year, AO will also receive that holiday (the facility must be closed to receive the time). To qualify for holiday pay, an employee must work the schedule shift before and after a holiday, unless excused. Full-time employees will receive 8 hours of holiday pay and part-time employees will receive 5 hours of holiday pay.

New Year's Day

Martin Luther King, Jr. Day

President's Day

Memorial Day

Independence Day

Labor Day

Columbus Day

Veterans Day

Thanksgiving Day

Christmas Day

Please see handbook for full policy or consult with People and Culture

## Goodwill Paid Parental Leave Policy

Goodwill will provide 6 weeks of paid parental leave to employees following the birth of an employee's child or the placement of a child with an employee in connection with adoption. The purpose of paid parental leave is to enable to employee to care for their newborn or newly adopted child. This policy will run concurrently with the Family Medical leave Act (FMLA), as applicable.

### Eligibility

Eligible employees must meet the following criteria:

- Have been employed with the company for at least 12 months
- Have worked at least 1,250 hours during the 12 consecutive months immediately preceding the date the leave would begin.
- Be a full-time, regular employee (temporary employees and interns are not eligible for this benefit).

In addition, employees must meet one of the following criteria:

- Have given birth to a child.
- Be a spouse or committed partner of a woman who has given birth to a child
- Have adopted a child (the child must be age 17 or younger). The adoption of a new spouse's child is excluded from this policy.

### Amount, Time Frame, and Duration of Paid Parental Leave

Eligible employees will receive a maximum of 6 weeks of paid parental leave per birth or adoption of a child/children.

- Employee who has one full year of service qualifies for 50% of their average weekly salary. Employee who has three full years of service qualifies for 100% of their salary. Paid parental leave will be paid on a biweekly basis on regularly scheduled pay dates. A work week cannot exceed 40 hours unless designated by the Agency.
- Employees must take paid parental leave in one continuous period of leave during a three-month period surrounding the birth or adoption of a child. Any unused paid parental leave will be forfeited at the end of the 3-month time frame.
- Upon termination of the individual's employment at the Agency, s/he will not be paid for any unused paid paternity leave for which s/he was eligible.

After the paid parental leave is exhausted, the balance of FMLA leave (if applicable) will be compensated through employee's accrued sick, vacation, or PTO. Upon exhaustion of accrued sick, vacation or PTO, any remaining leave will be unpaid leave. Please refer to the Family and Medical Leave Policy for further guidance on the FMLA.

The Agency will maintain all benefits for employees during the paid parental leave period just as if they were taking any other Agency paid leave such as paid vacation leave, PTO or paid sick leave. If a company holiday occurs while the employee is on paid parental leave, such day will be charged to holiday pay; however, such holiday pay will not extend the total paid parental leave entitlement.

### Requests for Paid Maternity Leave

The employee will provide his or her supervisor and the Human Resources Department with notice of the request for leave at least 30 days prior to the proposed date of the leave (or if the leave was not foreseeable, as soon as possible). The employee must complete the necessary HR forms and provide all documentation as required by the HR department to substantiate the request. As is the case with all company policies, the organization has the exclusive right to interpret this policy.

Please see handbook for full policy or consult with People and Culture

## **Goodwill Volunteer Time Off (VTO) Policy**

Goodwill of Western MO & Eastern KS recognizes the need to volunteer time to our community. Goodwill encourages employees to participate in volunteer activities by providing the benefit of paid time off to volunteer, also referred to as Volunteer Time-Off (VTO). Goodwill's VTO policy is designed to encourage individuals and work teams to conduct volunteer projects that support community needs. Employees may use VTO to contribute their time and talents to recognized charities, causes and not-for-profit organizations that make a positive difference in deepening community connections.

### **Eligibility**

- All FT and PT employees in good standing can use the VTO policy subject to supervisor approval.
- FT employees may take VTO in 4 hour or 8 hour increments not to exceed 2 days in a calendar year.
- Full-time employees can volunteer up to 16 hours per calendar year (one day every 6 months).
- Part-time employees are eligible to take VTO up to 5 hours increments. To qualify as paid VTO the volunteer work must be performed during the employee's scheduled working hours.
- Supervisors have the right to deny a request on account of organizational demands.
- Temporary employees are not eligible to participate.
- The full balance of the VTO hours is available starting on January 1 of every year. Unused hours cannot be accrued or carried over into the following year.
- VTO is never paid out if it is not used. Usage of VTO or lack of usage does not affect the accrual of vacation or any other type of time off.

### **Exceptions**

Employees on leave of absence of any kind may not participate. Employees who have been placed on a Performance Improvement Plan (PIP), have a written attendance warning or have been subject to disciplinary action in the six-month prior are not eligible to participate.

### **Guidelines for Volunteering**

Goodwill employees can use their VTO to support programs and activities encouraging health and well-being in the community and the workplace, as well as human rights.

### **Examples of projects approved for VTO:**

- Donating time at a food bank
- Cleaning up a public area, highway or park
- Collecting items, then filling and distributing back to school packs
- Participating in a Multiple Sclerosis bike-a-thon fundraiser
- Organizing a Cancer walk or run
- Playing in a fundraising tournament
- Volunteering in a classroom or school field trip
- Volunteering at an animal shelter
- Helping with events for a hospital program on health and wellness
- Doing skills-based volunteering at a not-for-profit location

Goodwill's organizational needs take precedence should there be a conflict with scheduling. If any concerns arise, your manager or Human Resources should be contacted.

Please see handbook for full policy or consult with People and Culture

## **Goodwill Education Assistance Policy**

Goodwill of Western MO and Eastern KS provides education assistance to employees to encourage career development through further education. An employee may qualify for up to \$5,000 per calendar year in education assistance. Education assistance is available to employees seeking an Associate Degree, Bachelor's Degree, Master's Degree, or Doctoral Degree. Education assistance is available based on a calendar year and dependent on the financial success of the Agency.

To be eligible for the educational assistance program, an employee must: be an active, regular, full-time employee.

- Have completed one year of full-time employment before the course begins.
- Be in good standing, which means the employee cannot be on any disciplinary action or performance improvement plan at the time of application.
- Education assistance must be approved in advance by the employee's supervisor and Human Resources.

### **Additional guidelines:**

- Employee must submit their application for approval to their supervisor and to the Benefits Manager. The application must be submitted prior to the start of classes.
- Employee must receive the grade of a "C" or above.
- Employee will have 30 days from course completion to submit receipts/course grades.
- Employee who does not meet the requirements of the class or provide required documents as outlined by this policy will be required to pay back funds through a repayment agreement over a 12-month period.
- Eligible expenses include tuition, fees and course materials like textbooks, supplies and equipment.
- Eligible expenses do not include the cost of computer or other supplies that can be retained by the employee after completing the course instruction. Supplies are those considered necessary for a course and stated in syllabus. (HR will make the final decision if an expense will be covered)
- Eligible employee can receive up to \$5,000 per calendar year in reimbursements for tuition, fees and course materials at an accredited institution.
- Assistance should not exceed \$2,500 per semester.
- Maximum assistance will not exceed \$20,000 per employee, over the total course of their employment.
- The employee must agree to stay with the company for one year after completing course work or earning a degree, or they must repay the tuition assistance on a prorated basis.

### **Acceptable Hours:**

Approved course(s) and/or program(s) are not to be taken during regular working hours. Class attendance should not conflict with the employee's job in any way.

Please see handbook for full policy or consult with People and Culture

## Goodwill Employee Discounts & Additional Opportunities

### Goodwill Store Discount:



Employee discount of 30% at all the stores.

### Goodwill GED Scholarship Program:



If you have not completed your GED and are interested in attending classes and sitting for the GED exam, we can help with scholarships for approved employees. Please contact your Benefits Specialist for more information.



### Cell Phone Plans and Equipment:

T-Mobile Phone Service: Receive up to 10% discounts on select plans and special promotions on equipment.

### Office Supplies:



Dell Computers: Visit [www.dell.com/mpp/goodwill](http://www.dell.com/mpp/goodwill) for discounts up to 20% all personal purchases, or call (800) 695-8133 and reference Member ID: GS17104034

### Home Care:



Penske Truck Rental: Call (800) 467-3675 and mention "Goodwill" to save 10% on truck rentals.

## Goodwill Fringe Benefit - Health & Welfare - 401(a) Plan

Employees paid through Ability One contracts are eligible for health and welfare benefits per hour for each hour worked up to 40 hours a week. This benefit is paid by the government to allow us, the employer, to assist you in paying for benefits or retirement.

As an employee of Goodwill, you have choices as to how you would like this fringe benefit money spent on your behalf. Your options are shown below. Any remaining funds will be placed into a 401(a) retirement account in your name. \* See plan details on the following page

Important points to remember:

- If there is a change in the number of hours worked per week and your insurance deductions are more than your benefit amount, the amount you owe to us will be automatically deducted from payroll.
- If you elect to use the fringe benefit money to cover insurance premiums, you are required to remain enrolled in the insurance until the next open enrollment, unless you have a change in status (marriage, divorce, new baby, etc.).
- If you choose to pay for insurance premiums through this fringe benefit money, any remaining money will be placed automatically into a 401(a) retirement account in your name. These funds will not be accessible until you have been separated from the Agency for one year, or you are at least 62 years old.

The following worksheet is to estimate you fringe benefit allowance and how you could use it. The hours worked and the corresponding fringe benefit amount for both premiums and the 401(a) account are not guaranteed.		
Current Contract Fringe Benefit amount ----4.23 ---- /hr.	Hours Worked Per Pay Period *-----	Pay Period Fringe Benefit Amount =-----
Insurance Benefit	Pay Period Cost	Remaining Fringe Benefit
Medical		
Dental		
Vision		
Basic Life		
Voluntary life		
Remaining 401(a) deposits		
Remaining Deductions		

Please see handbook for full policy or consult with People and Culture

## **Goodwill Retirement Plan Information 401(a)**

### **Eligibility**

All Ability One contract employees are immediately eligible to participate in this plan.

### **Vesting**

You are 100% vested in the State prevailing wage contributions.

### **Investment options, information and changes**

You are able to direct investment of the retirement account balance by choosing among several investment options. For detailed information on your plan or how to change your elections, please call Principal at 1-800-547-7754 or online at [www.principal.com](http://www.principal.com)

### **When can I begin receiving benefits from the retirement plan?**

Benefits are payable at:

- Retirement (age 62)
- Death
- Disability (must have ceased employment)
- One year following the termination of employment

\*taxes and fees may apply to withdrawals.

A few details to get you started:

401a Retirement Plan #5-24405

Questions about how to enroll?

Contact your benefits manager for full details

Questions about your plan?

Contact Principal Financial at 800-547-7754 or online at

[www.Principal.com](http://www.Principal.com) Questions about investment choices? Contact

Gary Liberty or Grant Ingram at 913-253-1400

## **Goodwill Retirement Plan Info 403(b)**

Goodwill's retirement plan, called a 403b, is available to you now, if you are over the age of 18. All employees are eligible for a 4% match of contributions after one year of employment.

### **Vesting:**

- 50% after one year
- 100% after two years

A few details to get you started:

403b Retirement Plan #7-13400

### **Questions about how to enroll?**

Visit [www.principal.com/enroll](http://www.principal.com/enroll) or go to [www.mokangoodwill.org](http://www.mokangoodwill.org) under Work for Goodwill/Retirement Plan Information.

### **Questions about your plan?**

Contact Principal Financial at 800-547-7754 or online at [www.Principal.com](http://www.Principal.com)

### **Questions about investment choices?**

Contact Gary Liberty or Grant Ingram at 913-253-1400

### **When can I begin receiving benefits from the retirement plan?**

- Retirement (age 59.5)
- Age 59-1/2 and still working
- Qualified reservist
- Death
- Disability
- Termination of Employment

### **What if I need to access the money for an emergency?**

The plan offers financial hardship withdrawals for "immediate and heavy financial need".

The plan also offers the loan option of borrowing up to 50% of the vested account balance.

### **How often can I make changes to the investment options in the retirement plan?**

Anytime



# **VOLUNTARY BENEFITS**

## **EMPLOYEE PAID**



# Flexible Spending Accounts

We provide you with an opportunity to participate in up to two different flexible spending accounts (FSAs) administered through Ameriflex. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

## Health Care FSA

For 2023, you may contribute up to \$3,050 to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. Some qualified expenses include:

- Coinsurance
- Copayments
- Deductibles
- Prescriptions
- Dental treatment
- Orthodontia
- Eye exams/eyeglasses
- Lasik eye surgery

For a complete list of eligible expenses, visit [www.irs.gov/pub/irs-pdf/p502.pdf](http://www.irs.gov/pub/irs-pdf/p502.pdf).

## Dependent Care FSA

For 2023, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). Some qualified expenses include:

- Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit [www.irs.gov/pub/irs-pdf/p503.pdf](http://www.irs.gov/pub/irs-pdf/p503.pdf).

# Disability

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

## Voluntary Short-Term Disability

Provided at an affordable group rate through MetLife

Benefit Percentage	60%
Weekly Benefit Maximum	\$1,000
When Benefits Begin	After 14th day of disability
Maximum Benefit Duration	11 weeks

## USable: Basic Life Premiums

Eligible to all full-time and part-time employees

## USable All Staff Coverage: Voluntary Life and AD&D

\$10,000 of coverage	\$1.60 semi-monthly deduction
----------------------	-------------------------------

# Voluntary Benefits

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It’s true! Our voluntary benefits through SunLife are designed to complement your health care coverage and allow you to customize our benefits to you and your family’s needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents.

You can enroll in these plans during Open Enrollment—they’re completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

## Accident Insurance

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries.

## Critical Illness

Did you know that the average total out-of-pocket cost related to treating a critical illness is over \$7,000? With critical illness insurance, you’ll receive a lump-sum benefit if you are diagnosed with a covered condition that you can use however you would like, including to help pay for: treatment (e.g. experimental), prescriptions, travel, increased living expenses, and more.

# Voluntary Life

## Basic Life/AD&D (100% Employee-paid)

This benefit is provided through USable for all eligible full-time & part-time employees..

## Supplemental Life/AD&D (100% Employee-paid)

This benefit is provided through MetLife for all full-time eligible employees. If you determine you need more than the basic coverage, you may purchase additional coverage through MetLife for yourself and your eligible family members.

Benefit Option		Guaranteed Issue <sup>1</sup>
Employee	Up to 5x base salary to a maximum of \$500,000; \$10,000 increments	\$150,000
Spouse	Up to \$250,000 (not to exceed 50% of your additional life coverage); \$5,000 increments	\$50,000
Child(ren)	\$1,000 / \$5,000 / \$10,000	

1. During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

## MetLife: Short Term Disability Premiums

All eligible full-time employees are allowed to increase their coverage benefit amount by \$50 at open enrollment if you were already enrolled up to 60% of your salary. If you did not elect short-term disability when you were initially hired, you can only elect \$100 coverage amount at open enrollment with completing an Evidence of Insurability (EOI) form.

Maximum Weekly Benefit	Age Scale With Semi-Monthly Deduction				
Benefit	0-44	45-49	50-54	55-59	60+
\$100	2.70	2.55	2.90	3.80	4.15
\$150	4.05	3.83	4.35	5.70	6.23
\$200	5.40	5.10	5.80	7.60	8.30
\$250	6.75	6.38	7.25	9.50	10.38
\$300	8.10	7.65	8.70	11.40	12.45
\$350	9.45	8.93	10.15	13.30	14.53
\$400	10.80	10.20	11.60	15.20	16.60
\$450	12.15	11.48	13.05	17.10	18.68
\$500	13.50	12.75	14.50	19.00	20.75
\$550	14.85	14.03	15.95	20.90	22.83
\$600	16.20	15.30	17.40	22.80	24.90
\$650	17.55	16.58	18.85	24.70	26.98
\$700	18.90	17.85	20.30	26.60	29.05
\$750	20.25	19.13	21.75	28.50	31.13
\$800	21.60	20.40	23.20	30.40	33.20
\$850	22.95	21.68	24.65	32.30	35.28
\$900	24.30	22.95	26.10	34.20	37.35
\$950	25.65	24.23	27.55	36.10	39.43
\$1,000	27.00	25.50	29.00	38.00	41.50

Coverage available up to 60% of your weekly income. Coverage is rounded to the nearest \$50.



# Sunlife: Critical Illness Premium

How much does critical illness cost?

Your cost depends on your age as of the effective date and whether or not you use tobacco. Because issue age rating applies, your premium will not increase due to age changes.

You may elect coverage for yourself up to \$10,000. Your benefit is subject to a 50% reduction, rounded to the next higher \$1,000, when you turn age 70.

Employee Critical Illness Insurance Monthly Premiums												
Non-Tobacco User							Tobacco User					
Issue Age	<30	30-39	40-49	50-59	60-64	65+	<30	30-39	40-49	50-59	60-64	65+
\$10,000	8.40	13.60	21.80	41.60	60.30	70.60	12.30	22.70	38.50	76.80	102.90	108.80

If you elect coverage for yourself, you can elect coverage for your eligible family members. You may purchase for your spouse in the amount of \$5,000.

If your dependents first became eligible for this coverage within the last 90 days, you can enroll your spouse for the amount of \$5,000 and \$5,000 for each child without answering health questions. You will need to complete a simple health questionnaire if your dependent became eligible more than 90 days ago. Once approved, the pre-existing condition limitations will apply.

Eligible family members include your spouse and children from live birth to less than 26. See your certificate of group insurance policy for additional eligibility details.

Spouse Critical Illness Insurance Monthly Premiums												
Non-Tobacco User							Tobacco User					
Issue Age	<30	30-39	40-49	50-59	60-64	65+	<30	30-39	40-49	50-59	60-64	65+
\$5,000	4.55	7.00	10.90	20.30	29.10	34.10	6.45	11.35	19.00	37.35	49.90	52.65

Child Critical Illness Insurance Monthly Premiums												
\$5,000	\$0.85											

One premium covers all of your dependent children

# Sunlife: Accident Premiums

Semi-Monthly Accident Premiums	
Employee Only	\$7.94
Employee & Spouse	\$10.40
Employee & Child(ren)	\$12.29
Family	\$14.75

# MetLife: Voluntary Life and AD&D Premiums

Deductions for voluntary Life/AD&D are taken from your paycheck after taxes.

All eligible full-time employees working 30 or more hours per week are allowed to increase their benefit amount by 1 increment (not to exceed the Guarantee Issue amount) without completing an Evidence of Insurability (EOI) form during open enrollment.

Employee / Spouse Life And AD&D Semi-Monthly Premiums Premium are based on the employee's age on each policy anniversary										
Benefit	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$20	1.24	1.44	1.74	2.14	3.34	5.14	8.54	14.24	26.84	43.34
\$30	1.86	2.16	2.61	3.21	5.01	7.71	12.81	21.36	40.26	65.01
\$40	2.48	2.88	3.48	4.28	6.68	10.28	17.08	28.48	53.68	86.68
\$50	3.10	3.60	4.35	5.35	8.35	12.85	21.35	35.60	67.10	108.35
\$60	3.72	4.32	5.22	6.42	10.02	15.42	25.62	42.72	80.52	130.02
\$70	4.34	5.04	6.09	7.49	11.69	17.99	29.89	49.84	93.94	151.69
\$80	4.96	5.76	6.96	8.56	13.36	20.56	34.16	56.96	107.36	173.36
\$90	5.58	6.48	7.83	9.63	15.03	23.13	38.43	64.08	120.78	195.03
\$100	6.20	7.20	8.70	10.70	16.70	25.70	42.70	71.20	134.20	216.70
\$110	6.82	7.92	9.57	11.77	18.37	28.27	46.97	78.32	147.62	238.37
\$120	7.44	8.64	10.44	12.84	20.04	30.84	51.24	85.44	161.04	260.04
\$130	8.06	9.36	11.31	13.91	21.71	33.41	55.51	92.56	174.46	281.71
\$140	8.68	10.08	12.18	14.98	23.38	35.98	59.78	99.68	187.88	303.38
\$150	9.30	10.80	13.05	16.05	25.05	38.55	64.05	106.80	201.30	325.05

Coverage available up to \$500,000 depending on employee salary. To calculate rate, multiply available rate by your desired election amount or contact Human Resources. AD&D cost required in all available Life Insurance policies.

Spouse Life and AD&D Semi-Monthly Premiums Premiums are based on the employee's age on each policy anniversary										
Benefit	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5	.31	.36	.44	.54	.84	1.29	2.14	3.56	6.71	10.84
\$10	.62	.72	.87	1.07	1.67	2.57	4.27	7.12	13.42	21.67
\$15	.93	1.08	1.31	1.61	2.51	3.86	6.41	10.68	20.13	32.51
\$20	1.24	1.44	1.74	2.14	3.34	5.14	8.54	14.24	26.84	43.34
\$25	1.55	1.80	2.18	2.68	4.18	6.43	10.68	17.80	33.55	54.18
\$30	1.86	2.16	2.61	3.21	5.01	7.71	12.81	21.36	40.26	65.01
\$35	2.17	2.52	3.05	3.75	5.85	9.00	14.95	24.92	46.97	75.85
\$40	2.48	2.88	3.48	4.28	6.68	10.28	17.08	28.48	53.68	86.68
\$45	2.79	3.24	3.92	4.82	7.52	11.57	19.22	32.04	60.39	97.52
\$50	3.10	3.60	4.35	5.35	8.35	12.85	21.35	35.60	67.10	108.35

Coverage available up to 50% of employee elected amount. To calculate rate, multiply available rate by your desired election amount or contact Human Resources. AD&D cost required in all available Life Insurance policies

Child Amount for Voluntary Life	\$1,000	\$5,000	\$10,000
Child Life and AD&D Premium	0.145	0.73	1.46

Employee must also be enrolled in coverage to elect for Child Life and AD&D

# Nationwide®pet insurance

## My Pet Protection®plan summary

Nationwide pet insurance helps you cover veterinary expenses so you can provide your pets with the best care possible without worrying about the cost.



### My Pet Protection coverage highlights

We offer a choice of reimbursement options so you can find coverage that fits your budget. All plans have a \$250 annual deductible and \$7,500 maximum annual benefit. Coverage includes\*:

- Accidents
- Illnesses
- Hereditary and congenital conditions
- Cancer
- Dental diseases
- Behavioral treatments
- Rx therapeutic diets and supplements
- And more

Plus, every My Pet Protection policy includes these additional benefits to maximize your value:

- Lost pet advertising and reward expense
- Emergency boarding
- Loss due to theft
- Mortality benefit



### Included with every policy

#### vethelpline®

- 24/7 access to veterinary experts (\$110 value)
- Available via phone, chat and email
- Unlimited help for everything from general pet questions to identifying urgent care needs

#### PetRxExpress<sup>SM</sup>

- Save time and money by filling pet prescriptions at participating in-store retail pharmacies across the U.S.
- Rx claims submitted directly to Nationwide
- More than 4,700 pharmacy locations



### Additional highlights

- Exclusive product for employer groups only
- Preferred pricing for employees
- Multiple-pet discounts
- Guaranteed issuance

Get a fast, no-obligation quote today.

**PetsNationwide.com • 877-738-7874**

\*Some exclusions may apply. Certain coverages may be excluded due to pre-existing conditions. See policy documents for a complete list of exclusions. Products underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH; National Casualty Company (all other states), Columbus, OH. Agency of Record: DVM Insurance Agency. All are subsidiaries of Nationwide Mutual Insurance Company. Subject to underwriting guidelines, review and approval. Products and discounts not available to all persons in all states. Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Nationwide, the Nationwide N and Eagle, vethelpline, and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. ©2021 Nationwide. 2PMC8302E\_GRP



**Nationwide®**

### Looking for an opportunity to pay it forward?

Goodwill has a program to help you or your coworker when they are in need of financial assistance!

The Employee Emergency Needs Fund (The Helping Hand Fund) was created by the Agency to aid employees who need financial assistance in significant hardship situations. A committee composed of employees representing each division administers the fund. The committee establishes the eligibility requirements, the procedures for the distribution of funds and determines whether the requests meet the established guidelines.

**If you would like to become a contributor to the Employee Emergency Fund, please contact the Human Resources Department or complete this election form. Contributions to the Fund are made via payroll deductions and employees may contribute any amount between \$1.00 and \$10.00 per paycheck. *Contributions are not tax deductible.***

**Contributing employees will be allowed a 35% discount at any local Goodwill store.**

### Helping Hand Fund Contribution Election Form

I understand contributions to the fund are voluntary and will be automatically deducted from my paycheck until I request otherwise, in writing. *Please return this to your manager or HR.*

**Employee Name:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**I would like to donate** \_\_\_\_\_ **per paycheck.**

*Contributions are not tax deductible and will not be returned upon separation from the Agency.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

For information on applying to receive assistance from the fund, please visit [www.mokangoodwill.org/benefits](http://www.mokangoodwill.org/benefits).

**Please return to Human Resources via fax (816-842-7616) or scan to [benefits@mokangoodwill.org](mailto:benefits@mokangoodwill.org)**



# Cost of Benefits

Your contributions toward the cost of benefits are automatically deducted from your pay check before taxes. The amount will depend upon the plan you select and if you choose to cover eligible family members.

## Contact Information

Coverage	Carrier	Customer Service Phone #	Website/Email
Medical	BCBS of KC SpiraCare	(816) 395-2950 (913) 297-7472	<a href="http://www.bluekc.com">www.bluekc.com</a> <a href="http://www.spiracare.com">www.spiracare.com</a>
Dental	Delta Dental of KS	(800) 733-5823	<a href="http://www.deltadentalks.com">www.deltadentalks.com</a>
Vision & Voluntary Benefits	SunLife	(800) 733-7879	<a href="http://www.sunlife.com">www.sunlife.com</a>
Flexible Spending Accounts (FSAs)	Ameriflex	(888) 868-3539	<a href="http://www.myameriflex.com">www.myameriflex.com</a>
Basic Life/AD&D	USABLE	(800) 370-5856	<a href="http://www.usable.com">www.usable.com</a>
Voluntary Life / AD&D & Disability	MetLife	(800) 638-5433	<a href="http://www.metlife.com">www.metlife.com</a>
Employee Assistance Program (EAP)	Personal Assistance Service	(800) 356-0845	<a href="http://www.paseap.com">www.paseap.com</a> / Code 0534
HealthJoy	HealthJoy	(877) 500-3112	<a href="mailto:www.groups@healthjoy.com">www.groups@healthjoy.com</a>
Pet Insurance	Nationwide	(877) 263-6008	<a href="http://Www.petinsurance.com">Www.petinsurance.com</a>

Our benefits website

**[www.mokangoodwill.org/work-for-goodwill/your-benefits.com](http://www.mokangoodwill.org/work-for-goodwill/your-benefits.com)** can be accessed anytime you want additional information on our benefit programs or you can call (816) 842-7425 x 300

### Questions?

If you have additional questions, you may also contact:

Madeleine Nicklaus: Account Administrator  
(816) 708-4668  
[madeleine.nicklaus@hubinternational.com](mailto:madeleine.nicklaus@hubinternational.com)

Jessica Gamblin: Account Manager  
(816) 708-4681  
[jessica.gamblin@hubinternational.com](mailto:jessica.gamblin@hubinternational.com)

Claims Advocacy  
(833) 604-1439  
[Hubmid-america.ebclaims@hubinternational.com](mailto:Hubmid-america.ebclaims@hubinternational.com)



**DISCLAIMER:** The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern. **Annual Notices:** ERISA and various other state and federal laws require that employers provide disclosure and annual notices to

