

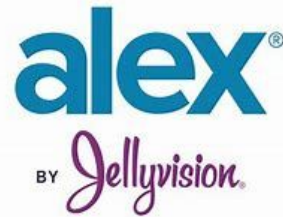
FSG 2025 Annual Open Enrollment



Your 2025 open enrollment includes a new decision support tool:

ALEX is an online tool that will help you select the best benefit plan for you and your family. When you talk to ALEX he'll ask you a few questions about your health care needs, crunch some numbers, and point out what makes the most sense for you. And anything you tell ALEX remains anonymous. You can use the Audio based or Text based version to navigate your options and find the best healthcare plan for your unique needs.

<https://start.myalex.com/facility-solutions-grou>



Life, AD&D, Disability and Voluntary Benefits will be provided by Prudential.

Prudential is offering a one-time true open enrollment for Voluntary Life and AD&D up to \$200,000 for employees and up to \$50,000 for spouses.

You have access to Value added benefits through Prudential including Beneficiary Advocate and Travel Assistance at no cost. In addition, Prudential has set up an FSG dedicated microsite with information about all of the benefits you are offered.

[Click Here for more details including videos, benefit summaries, and rates](#)

Medicare Education and Enrollment Assistance will be provided by Boomer Benefits.

No Cost Will Preparation Services will be provided by Health Advocate.

2025 Open Enrollment Overview



- The 2025 Open Enrollment will be a **Passive Enrollment**. If you do not complete enrollment through Paycom, your current benefits will roll over to 2025. We encourage everyone to complete the annual enrollment so that you understand all of the company-paid benefits available to you, a zero premium medical option, no-cost virtual visits for all employees, spouses, and children, and the voluntary benefits offered.

- Review your current beneficiary assignments, even if you are not making any benefit changes.

- The elections you make during Open Enrollment will be effective January 1, 2025.

- Due to IRS regulations once you have made your choices for the January 1, 2025 - December 31, 2025 plan year you cannot change your benefits until the next enrollment period unless you have a qualifying event or a HIPAA special enrollment event. If you experience an eligible event, you may be able to change your enrollment elections. You have 30 days from the date of the event to notify Human Resources and request changes to your coverages. Your change in coverage must be consistent with your change in status. Examples of qualified events are below:
 - Change in your legal marital status (marriage, divorce or legal separation)
 - Change in the number of your dependents (for example, through birth or adoption, or if a child is no longer an eligible dependent)
 - Change in your spouse's employment status (resulting in loss or gain of coverage)
 - Entitlement to Medicare or Medicaid

Who Is Eligible To Enroll



EMPLOYEES

All regular, full-time employees working 30 or more hours per week are eligible for benefits on the first of the month following 30 days of employment.

SPOUSES/DOMESTIC PARTNERS

You can enroll your legal spouse or same or opposite-sex domestic partner (affidavit required).

CHILDREN

Your married or unmarried natural child or a natural child of your domestic partner, your legally adopted child, stepchild, a child who is your dependent for federal income tax purposes or whose primary residence is your household and to whom you are legal guardian or related by blood or marriage until the end of the calendar month the child reaches age 26. [For Voluntary Life Insurance](#) – Your **unmarried** child until they reach age 26

Teladoc \$0 Virtual Visits



Company paid Virtual Visits for Medical and Mental Health with \$0 cost to you, your spouse/domestic partner and your children. This benefit is separate from the medical plans with UHC. You do not have to be enrolled in a FSG medical plan to use this benefit.

Even if you are enrolled in the HealthSaver or Base HDHP plan and have an HSA Account, you are still able to access the Teladoc Virtual Benefits at no cost.

24/7 Healthcare from the break room, living room or anywhere else. Access your healthcare by phone, video or app.

General Medical (24/7 Care)

Need care for non-urgent and common conditions? Get same-day appointments with a certified clinician from wherever you are. Our clinicians diagnose, treat and even prescribe medicine if needed.

- Allergies
- Bronchitis
- Flu
- COVID-19
- Pink eye
- Rashes
- Sinus infections
- Sore throats
- And more



Teladoc
HEALTH

Mental Health (age 13+)

Find support that works best for you. You can connect with a therapist 7 days a week and get a personalized plan and online content designed for you.

- Anxiety and depression
- Sleep issues
- Relationship conflicts
- Trauma and PTSD
- Medication management

Activate your benefit and schedule your visit today

Visit [TeladocHealth.com](https://www.teladoc.com)

Call (800) 835-2362

Employee Assistance Program (EAP): Health Advocate



Your personal wellbeing is important to us. There are times in all of our lives when we need a little help. No matter what the issue, you can get the confidential support, guidance and resources you need. **This is a company paid benefit and it is available to all full-time employees, your spouse/domestic partner, dependent children, parents and parents-in-law.**
Services are available 24 hours a day, 7 days a week.

You can access up to 5 free counseling sessions per issue each year. You can also call us 24 hours a day for in-the-moment emotional support. Counseling sessions are available face to face, via televideo or chat therapy.
Face-to-face visits are for ages 15+ as allowed by state law.

Life can be hard.
 Getting help shouldn't

Wellbeing Services	Financial	Legal
Anxiety Depression Relationship support Stress management Work/life balance Grief and loss Substance misuse and more 5 free sessions per issue per year Chat therapy	Credit and debt issues College funding Tax and IRS questions and preparation Budgeting Retirement and financial planning Mortgages and refinancing Free telephonic consultation with a financial professional	General law Family law Civil/Criminal law divorce Wills and other documents Real estate transactions Mediation services Free telephonic consultation with a lawyer

TO ACCESS SERVICES:

Click the Link:

799-2728

or Call: (866)

Free Will Prep Services: Health Advocate



Creating a will is an important investment in your future. It specifies how you want your possessions to be distributed after you die. Whether you're single, married, have children, or are a grandparent, your will should be tailored to your life situation.

[That's why it's good you have access to FREE online will preparation services provided by Health Advocate.](#)

EASY, FREE AND SECURE

Health Advocate offers a secure account space that allows you to prepare wills and other legal documents. Create a will that's tailored to your unique needs from the comforts of your own home.

[You have access to the following documents:](#)

- Last Will and Testament
- Power of Attorney
- Healthcare Directive
- Living Trust

HERE'S HOW IT WORKS:

[Log on to Health Advocate Click EAP: Life and Work and select personalized legal center.](#)

Answer the simple questions and watch the customization of your document happen in real time Download, print, and share any document instantly. Don't forget to update your documents with any major life changes, including marriage, divorce and the birth of a child. Make the document legally binding — Check with your state for requirements



Value Added Benefits: Prudential



Travel Assistance: provides 24/7/365 access to pre-travel, personal and emergency assistance with travel-related problems and circumstances if you or a member of your immediate family is traveling 100 or more miles from your home. To access this service and for more information, call (855) 847-2194 (in the US) or (317) 927-6881 from anywhere in the world or email assist@imglobal.com. Benefits include:

- Assistance finding physicians, dentist, and medical facilities.
- Free transportation, when medically necessary, under medical supervision to a hospital/treatment facility or to your place of residence for treatment.
- Arrangement for your traveling companion's return home if previously made arrangements are lost due to your medical emergency.
- Emergency medical evacuation
- Emergency political evacuation and repatriation
- Emergency cash transfer
- Interpretation services
- Telemedicine
- Up to \$25,000 hospital guarantee payment with evacuation services
- Lost luggage or document assistance
- Pre-trip information services

Prudential Beneficiary Advocate: Prudential understands that for those coping with the loss of a loved one, grief counseling can prove invaluable.

Grieving loved ones, however, may require many other forms of assistance, including legal and financial services and funeral and estate planning. This is why we offer Beneficiary Advocate by Prudential, a comprehensive program of beneficiary services to help, no matter what the issue. To access this service and for more information, call (833) 962-0064 or [online guidanceresources.com](https://www.guidanceresources.com). Use company web ID ADVOCATE.

Benefits include:

- Comprehensive beneficiary support
- Emotional support for grief and loss
- Funeral planning services
- Online will preparation services
- Identity theft restoration services
- Financial planning services

Medicare Education and Enrollment: Boomer Benefits



Reaching age 65 is a milestone—it’s when eligibility for Medicare begins. There are many different parts to Medicare, and it can be confusing. Knowing how it all works is important, whether you decide to continue working or retire. As part of your benefits, paid for by your employer, a Boomer Benefits dedicated agent can walk you through Medicare so you can choose what’s right for you.

Understanding the Plan

- Clarify “Original” Medicare. This includes [Part A](#) (covers hospital costs) and [Part B](#) (covers doctor visits, and other “medically necessary” services)
- Educate about Medicare Advantage plans ([Part C](#)), and how they compare to Original Medicare
- Discuss Medicare [Part D](#) prescription drug plans

Circle the Date!

Call us three months before your or your spouse’s 65th birthday or during Medicare’s annual enrollment 10/15-12/7 each year. We can help you review your coverage options, answer any questions, and help you enroll in coverage so you can avoid costly penalties.

We Will Give You Guidance

Review all the parts of Medicare. Medicare is not free! Learn about the deductibles, coinsurance, co- pays, and premiums that may apply
Research Medigap plans, which supplement Original Medicare coverage Alert you to enrollment deadlines to avoid penalties
Explain how Medicare works with your employer’s or spouse’s health benefits Locate Medicare-participating physicians

Remember...

Boomer’s agents can answer any of your Medicare questions as well as assist you with enrollment. All employees are eligible as well as your spouses, domestic partners, parents, and friends.

TURN TO US - WE CAN HELP

Ryan Leba, 817.438.7181, **Licensed Insurance Agent in:** AL, CA, CO, DE, FL, GA, ID, IL, IN, KY, ME, MD, MA, MO, NJ, NM, NC, OH, SC, TX, VA.

Gabe Gutierrez, 682.255.0122, **Licensed Insurance Agent in:** AK, AZ, CA, CO, FL, ID, IL, IA, KS, MI, MN, MO, NM, NC, ND, OK, TN, TX, VT, WV.

If you live in a state not listed above, please email: benefits@fsgi.com.

2025 Medical Plans: UnitedHealthcare



Medical Plans	ConvenienceCare Plan	HealthSaver HSA Plan	Base HDHP Plan
Pre-tax Savings Accounts You Can Have With This Plan	Full Purpose Health Care FSA	HSA & Limited Purpose FSA or Full Purpose FSA	HSA & Limited Purpose FSA or Full Purpose FSA
What You Pay			
All of the medical plans offered by FSG are EPO (exclusive Provider Only). There is no coverage if you use a non-network provider			
Virtual Visit UHC	No Cost	20% after deductible	0% after deductible
Primary Care Office Visit	Premium: Children <19 \$0 copay Adult \$30 copay Non-Premium: \$60 copay	Premium: 20% after deductible Non-Premium: 30% after deductible	0% after deductible
Specialty Office Visit	Premium: \$50 copay Non-Premium \$90 copay	Premium: 20% after Deductible Non-Premium: 30% after Deductible	0% after deductible
Preventive Care	No Cost	No Cost	No Cost
Emergency Room	20% after \$400 copay	20% after deductible	0% after deductible
Outpatient Mental Health	\$30 copay	20% after deductible	0% after deductible
Outpatient Diagnostic Labs /X-rays	\$0	0% after deductible	0% after deductible
High-Tech Imaging (CT, MRI, PET)	20% after deductible	20% after deductible	0% after deductible
Inpatient Hospital	20% after deductible	20% after deductible	0% after deductible
All Other Covered Services	20% after deductible	20% after deductible	0% after deductible
Prescription Drug Cost			
All Preventive Drugs	No Cost	No Cost, this plan includes an expanded preventive drug list	No Cost, this plan includes an expanded preventive drug list
Tier 1 (30 day supply)	\$5 copay	20% after deductible	0% after deductible
Tier 2 (30 day supply)	\$25 or 20% whichever is greater	20% after deductible	0% after deductible
Tier 3 (30 day supply)	\$40 or 30% whichever is greater	20% after deductible	0% after deductible
Mail order through OptumRx	2 x Retail Benefit	20% after deductible	0% after deductible
Specialty Medications	Must be Filled Through the UHC/Optum/Brioiva Specialty Program		
FSG HSA Match			
Per Individual	Not Applicable	Up to \$1,000	\$0
Per Family	Not Applicable	Up to \$2,000	\$0
Calendar Year Deductible			
Per Individual	\$1,000	\$3,500	\$7,500
Family Maximum	\$3,000	\$7,000	\$15,000
Calendar Year Maximum Out-of-Pocket			
Per Individual	\$6,850	\$6,550	\$7,500
Family Maximum	\$13,700	\$13,100	\$15,000
Search for a Network Provider	www.myuhc.com		
UHC Network	Choice		

2025 Medical Plan Highlights



ConvenienceCare Plan	HealthSaver Plan	Base HDHP Plan
<p align="center">Covers in-network providers only/no coverage if you go out-of-network. Verify that your providers are in-network before you receive services.</p>		
<p align="center">\$0 Cost medical and mental health virtual visits through FSG's Company paid Teladoc benefit</p>		
<p align="center">In-network preventive care is covered at 100%, no deductible or copays</p>		
<p>Copays for office visits and prescription drugs, deductible waived</p>	<p align="center">You pay all expenses for medical and prescription drugs until your deductible has been met</p>	
<p>\$0 cost in-network Primary Care office visits for children under age 19</p>	<p align="center">Preventive Medications (Expanded List) covered at 100%, no deductible or copays</p>	
<p>ACA mandated preventive medications covered at 100%, no deductibles or copays</p>	<p align="center">Opportunity to enroll in a Health Savings Account (HSA)</p>	
<p align="center">Highest cost out of your paycheck</p>	<p>FSG HSA match up to \$1,000 employee only and \$2,000 employee plus 1 or more dependents. This is matched each pay period.</p>	<p align="center">No cost for employee only coverage! Lowest cost out of your paycheck if you enroll dependents</p>

2025 Medical Plan Cost



Weekly Non-Tobacco User Premiums			
Weekly	Convenience Care Plan	HealthSaver HSA Plan	Base HDHP Plan
Employee Only	\$69.53	\$29.50	\$0.00
Employee + Spouse	\$154.54	\$108.17	\$86.54
Employee + Children	\$129.95	\$90.96	\$72.77
Employee + Family	\$224.78	\$157.35	\$125.88
Weekly Tobacco User Premiums			
Weekly	Convenience Care Plan	HealthSaver HSA Plan	Base HDHP Plan
Employee Only	\$86.84	\$46.81	\$17.31
Employee + Spouse	\$171.84	\$125.48	\$103.85
Employee + Children	\$147.26	\$108.27	\$90.08
Employee + Family	\$242.09	\$174.65	\$143.18

Semi-Monthly Non-Tobacco User Premiums			
Semi-monthly	Convenience Care Plan	HealthSaver HSA Plan	Base HDHP Plan
Employee Only	\$150.65	\$63.92	\$0.00
Employee + Spouse	\$334.83	\$234.38	\$187.50
Employee + Children	\$281.56	\$197.09	\$157.67
Employee + Family	\$487.03	\$340.91	\$272.73
Semi-Monthly Tobacco User Premiums			
Semi-monthly	Convenience Care Plan	HealthSaver HSA Plan	Base HDHP Plan
Employee Only	\$188.15	\$101.42	\$37.50
Employee + Spouse	\$372.33	\$271.88	\$225.00
Employee + Children	\$319.06	\$234.59	\$195.17
Employee + Family	\$524.53	\$378.41	\$310.23

Medical Resources: UnitedHealthcare



Provider Network and Access

You and your family have access to a comprehensive network of healthcare professionals and hospitals through UnitedHealthcare (UHC). All of FSG's medical plans require that you use in-network providers. There is no coverage if you go out-of-network. Be sure to choose the **Choice** network when searching for providers.



Click on the location icon to go to UHC's Provider Search and select which provider type and the **Choice network**.



ID Cards will be mailed to your home in an unmarked white envelope

UnitedHealthcare Resources (click on icons or QR Code)



Member Website

- Provider locator
- Virtual Visits
- ID cards



Real Appeal - healthy lifestyle and weight management program



Download Mobile App



One Pass Select- single gym membership that gives you access to a nationwide network of fitness locations



Optum Rx Welcome Kit



Quit for Life Smoking Cessation Program

Cancer Resources Services:

<https://myvideo.sundaysky.com/?programId=3513c59d-d0f2-46d3-a5d6f827a0574e11&id=Cancer%20Resource%20Services%20Eligible>



Health Savings Account (HSA)

You are eligible to open an HSA if you are enrolled in the [HealthSaver or Base HDHP medical plan](#).

Why have an HSA?

You own it. The money is yours until you spend it. You keep it, even when you change jobs, health plans or retire.

HSA tax advantages:

Your contributions to your HSA come out of your paycheck before taxes are withheld. That means every dollar that goes toward your HSA reduces your taxable income. A Health Savings Account, or HSA, is a tax-advantaged savings account you can use for healthcare expenses. Along with saving you money on taxes, HSAs can help you grow your nest egg for retirement.

Triple tax savings:

1. You do not pay federal taxes on contributions to your HSA.
2. Earnings from interest and investments are tax-free.
3. Distributions are tax-free when used for qualified medical expenses.

It's Not Just For Doctor Visits:

Once you've contributed to your account, you can use the funds in your HSA to pay for qualified medical expenses such as:

Dental care, including extractions and braces; vision care, including contact lenses, prescription sunglasses and LASIK surgery; prescription medications, COBRA premiums and Medicare premiums (including supplement plans), long-term care and more.

Save for the Future:

Your HSA is a bank account that you own. You never lose the money in your account, until you decide to spend it. Your balance grows from year to year, so you can continue to grow your savings and use it in the future – even into retirement.



Health Savings Account (HSA)

WHO IS ELIGIBLE?

Employees who are enrolled in the HealthSaver or Base HDHP plans can open a Health Savings Account (HSA) through Optum Bank. To have an HSA, you cannot:

- Be enrolled in a traditional PPO plan
- Have a spouse enrolled in a Healthcare FSA plan
- Be enrolled in Medicare (even Part A)
- Have used VA or TriCare benefits in the last 3 months
- Be claimed as a dependent on someone else's tax returns

WHY PARTICIPATE?

The answer is simple: **“tax savings”**. You can direct a portion of your pay to go into an HSA **before taxes are calculated**. You may then pay for qualified medical expenses using this pre-tax account, where the money comes out of your HSA and stays untaxed. In other words, you **never pay taxes** on the money going into or coming out of your HSA if you use it for qualified expenses. **You will pay a penalty and taxes if you use the account for ineligible expenses.**

2025 EMPLOYER CONTRIBUTIONS

If you are enrolled in the **HealthSaver Plan**, FSG will match your HSA per pay period contributions 100% up to \$1,000 for those enrolling in employee-only coverage and \$2,000 for employee plus dependent(s). You will receive 50% of the annual match on January 1, 2025. **There is no employer match for the Base HDHP Plan.**

2025 CONTRIBUTION LIMITS

There are contribution limits set by the Internal Revenue Service (IRS) and adjusted annually. These limits include both employer and employee contributions.

The 2025 contribution limits are:

\$4,300– Single

\$8,550 – Family

You are eligible to contribute an additional \$1,000 if you're 55 or older

A Health Savings Account is a bank account that you own. Just like any other bank account, you can only spend what is in your account.



Flexible Spending Accounts (FSA)

YOU CAN CONTRIBUTE to your Health Care, Limited Purpose or Dependent Care FSA before taxes are withheld from your paycheck. That means you decrease your taxable income. **FSG offers three types of FSAs:**

- **Full Purpose Health Care:** This account is used to pay for eligible out-of-pocket medical, dental, and vision care expenses for you and your eligible dependent(s). **If you are enrolled in the HealthSaver or Base HDHP medical plans, have HSA account and are making contributions to your HSA, you may not elect the full purpose FSA.**
- **Limited Purpose FSA:** This account only reimburses for eligible out-of-pocket dental and vision care expenses for you and your eligible dependent(s). **You may enroll in this plan if you are enrolled in the HealthSaver or Base HDHP medical plans, have HSA account and are making contributions to your HSA.**
- **The Full Purpose Health Care and Limited Purpose FSA accounts are fully funded on January 1, 2025. You can spend up to your full annual election, even if all of the funds have not been deducted from your check yet.**
- **Dependent Care FSA (DCFSA):** used to pay for eligible expenses for the care of a dependent child up to age 13 or a dependent adult. **The DCFSA is not for your dependent healthcare expenses. This account is for day care expenses that allow you to work. This account is *not* pre-loaded, you can only spend what you have contributed.**

2025 FSA Limits	Dependent Care FSA
<ul style="list-style-type: none">• You can contribute up to \$3,300 for eligible expenses not reimbursed by insurance.• These expenses can be for you or your eligible tax dependents, whether or not they are covered on a FSG medical plan. You can pay for expenses using your debit card or submit a claim online and be reimbursed.	<ul style="list-style-type: none">• You can contribute up to \$5,000 (\$2,500 if you are married, but file taxes separately) for eligible expenses that allow you and, if you are married, your spouse to work.• Your dependent child under the age of 13• Your spouse or dependent who is physically or mentally unable to care for him or herself

USE IT OR LOSE IT!

Be conservative in your estimate. The IRS has a “Use It or Lose It” rule in place for FSAs. Funds not spent by the end of a plan year are at risk of being forfeited. **Your annual FSA balance for 2025 can be used for claims incurred from January 1, 2025 through March 15, 2026 of the following calendar year. All expenses must be filed by March 31, 2026. Any unused funds will be forfeited after March 31, 2026 so be sure to carefully estimate the amount you’d like to put aside.**

Things To Consider When Choosing your Plans



- If I would rather pay more out of my paycheck and less when I need care, I should consider the ConvenienceCare Plan.
- If I elect the HealthSaver or Base HDHP plan, can I afford to pay for all of my medical and prescription expenses until my deductible is met?
- Do I want to save more pre-tax dollars without the risk of losing them at the end of the year? If you answered yes to the question above, consider the HealthSaver or Base HDHP plan.
- If you want to receive employer matching contributions for the HSA, you should consider the HealthSaver plan.
- What is the difference between the HealthSaver and Base HDHP Plan?
 - Both plans are High Deductible plans and allow you to contribute to a Health Savings Account. However, you will only receive the FSG matching HSA contributions if you are enrolled in the HealthSaver Plan.
 - The HealthSaver Plan will cost me more out of my paycheck, but the deductible and total out-of-pocket maximum are lower than the Base HDHP Plan.
 - The Base HDHP Plan is 100% company paid for employee and lower cost out of my paycheck if I enroll dependents, but the deductible and total out-of-pocket maximum are higher than the HealthSaver Plan.

Things To Consider When Choosing your Plans



- What is the difference between HSA and FSA?
 - HSA is only available if I enroll in the HealthSaver or Base HDHP Plan.
 - HSA has no use it or lose it clause, but I can only spend what is in my account.
 - HSA allows me to save more pre-tax dollars each year and once my contributions are in my account, they are mine until I spend them. If I am enrolled in the HealthSaver Plan, FSG matches my contributions. See slide 10 for details.
 - Full Purpose FSA is only available if I do not contribute to an HSA.
 - FSA preloads and I have access to my full annual election on 1/1/25.
 - FSA has a “use it or lose it” clause and only claims incurred 1/1/25-03/15/26 are eligible for reimbursement.

2025 Dental Plans: CIGNA



Dental Plans	PPO	DHMO
	In-Network / Out-of-Network	In-Network Only
	You Pay	
Calendar Year Deductible	\$50 / \$150 Family	\$0
Calendar Year Maximum	\$1,500	\$0
Preventive & Diagnostic	0%, no deductible	See Patient Charge Schedule
Basic Services	20% after deductible	See Patient Charge Schedule
Major Services	50% after deductible	See Patient Charge Schedule
Oral Surgery	20% after deductible	See Patient Charge Schedule
Periodontics	20% after deductible	See Patient Charge Schedule
Endodontics	20% after deductible	See Patient Charge Schedule
Orthodontia Lifetime Maximum	\$2,000	See Patient Charge Schedule
Orthodontia Services (under the age of 19 only)	50%, no deductible	See Patient Charge Schedule
Out-of-Network Benefits	Maximum Allowable Charge	No Coverage
Search for a Network Provider	CIGNA www.cigna.com	
CIGNA Network	Total CIGNA DPPO	CIGNA Dental Care Access Plus

Weekly	PPO	DHMO
Employee Only	\$9.02	\$2.57
Employee + Spouse	\$20.14	\$4.89
Employee + Children	\$20.41	\$5.15
Employee + Family	\$31.71	\$8.36
Semi-Monthly	PPO	DHMO
Employee Only	\$19.54	\$5.57
Employee + Spouse	\$43.65	\$10.59
Employee + Children	\$44.22	\$11.15
Employee + Family	\$68.72	\$18.12

2025 Vision Plan: Eyemed



Vision Plan	Eyemed	
	In-Network	Out-of-Network
Benefit Frequency		
Exam		12 months
Lenses or Contact lenses		12 months
Frames		12 months
Member Costs		
Eye Exam		
	\$20 copay	up to \$40 allowance
Lenses		
Single Vision	\$20 copay	up to \$40 allowance
Bifocal	\$20 copay	up to \$60 allowance
Trifocal	\$20 copay	up to \$80 allowance
Standard Progressive	\$20 copay	up to \$80 allowance
Lenticular	\$20 copay	up to \$80 allowance
Frames		
	\$130 allowance plus 20% off balance over \$130	up to \$45 allowance
Contact Lenses		
Elective (conventional & disposable)	\$20 copay, then 100% up to \$125 15% off balance	up to \$125 allowance
Contact Lens Fitting Exam	\$20 copay	Not covered
Laser Vision Correction		
	Discounts Available	Not Available
Search for a Network Provider	www.eyemed.com	
Vision	Weekly	Semi-monthly
Employee Only	\$1.19	\$2.58
Employee + Spouse	\$2.36	\$5.12
Employee + Children	\$2.31	\$5.01
Employee + Family	\$3.52	\$7.62



Life Insurance: Prudential

Employer paid Life and AD&D Insurance

Life insurance is an important part of your financial wellbeing, especially if others depend on you for support.

FSG provides every full-time employee with \$30,000 of Life & AD&D coverage.

Voluntary group Life and AD&D Insurance

You may also purchase additional life insurance for you, your spouse and your children. **REMINDER:** Whether you enroll in or waive benefits in www.paycom.com during Open Enrollment, be sure to confirm your life insurance beneficiaries are up to date!

Voluntary Life Insurance	
Benefits	
Employee	\$10,000 increments, up to the lesser of 5 times annual earnings or \$500,000 Guarantee Issue: the lesser of 5 times annual earnings or \$200,000
Spouse	\$5,000 increments, up to the lesser of \$250,000 or 100% of employee coverage Guarantee Issue: \$50,000
Child(ren)	Live Birth to age 26: \$1,000 increments up to \$10,000 with a minimum of \$2,000 Guarantee Issue: \$10,000. You pay one rate, regardless of the number of children
Important Terms and Features	
Guarantee Issue	This is the maximum amount of coverage you are eligible for without answering health questions
Age Reduction	Life insurance benefits will automatically reduce to 65% when you reach age 65; to 45% at age 70; to 30% at age 75 and to 20% at age 80.
Accelerated Death Benefit (Employee Only)	If you are terminally ill, you may be eligible to receive a portion of your life insurance benefits before you die. Your Dr. must provide a statement verifying that you have 12 months or less to live.

ONE-TIME TRUE ANNUAL ENROLLMENT!

Didn't sign up for voluntary life and wish you had? Prudential will allow you to enroll or increase coverage for you, your spouse or your children up to the guaranteed issue amounts listed above, with no evidence of insurability forms for coverage effective 1/1/25. If you do not enroll during this annual enrollment and want to increase at a later annual enrollment, you will have to apply for coverage.

Disability Insurance: Prudential

Voluntary Disability

Serious illness or injury often causes a loss of income when health problems keep you from working. FSG offers a voluntary Short-Term and Long-Term Disability plan to all full-time associates. You pay the cost for this benefit if you choose to elect it. You pay premiums with after-tax deductions which makes your benefit tax-free. If you did not enroll in the disability plan(s) when first eligible, you must complete an EOI form and be approved by Prudential.

Voluntary Short Term Disability Insurance	
Benefits	
Weekly Benefit	60% of weekly salary up to \$2,500 per week Salary includes base salary without commission, overtime or bonus
Waiting Period Before Benefits Begin	14 days
Maximum Duration	24 weeks
Pre-existing Condition Limitation	3/6

Voluntary Long Term Disability	
Benefits	
Monthly Benefit	60% of monthly salary up to \$10,000 per month Salary includes base salary without commission, overtime or bonus
Waiting Period Before Benefits Begin	180 days
Maximum Duration	SSNRA
Pre-existing Condition Limitation	3/12

Pre-existing Condition Limitations

There are pre-existing limitations associated with the disability plans. A pre-existing condition is a condition that existed before your coverage began. If were diagnosed with a condition, had a doctor's consultation, filled a prescription and/or are currently receiving treatment due to an illness or injury in the 3 months prior to your coverage effective date; the plan will not cover that condition for the first 12 months that you are enrolled in the plan.

Voluntary Insurance: Prudential

How Much Insurance Is Enough?

Even if you have the best health insurance plan, it will not cover 100% of medical expenses. You also need to consider other expenses associated with the recovery process – time off work, travel to treatment centers, home modifications – that may quickly deplete your savings. FSG is proud to offer 3 voluntary plans that can help bridge the gap. As an active employee of Facility Solutions Group, Inc., you may purchase these coverages for yourself and your eligible family members, and premiums can be deducted from your paycheck. It's a simple and affordable way for your family to receive added financial protection.

Critical Illness

As an active employee of FSG, you can give your family the extra security they need to lessen the financial impact of a serious illness by purchasing Critical Illness Insurance through Prudential. A critical illness insurance policy provides a lump-sum cash benefit upon diagnosis of a critical illness like a heart attack, stroke or cancer. The benefit can be used to pay out-of-pocket expenses or to supplement your daily cost of living.

Accident

Don't let an accident catch you off guard. Protect your family's finances with Accident Insurance from Prudential. An accident insurance policy supplements your medical coverage and provides a cash benefit for injuries you or an insured family member sustain from an accident. This benefit can be used to pay out-of-pocket medical expenses, help supplement your daily living expenses and cover unpaid time off work.

Hospital Indemnity

When you are hospitalized, expenses can add up quickly. Hospital stays can be stressful and having to worry about the high costs of a hospitalization should not be part of the recovery plan. Hospital Indemnity insurance helps to ease your mind about handling hospitalization costs – even if they are not hospital bills.

A hospital indemnity insurance policy supplements your medical coverage and provides a cash benefits for hospital related fees you or an insured family member sustains as a result of being hospitalized. This benefits can be used to pay out-of-pockets medical expenses, help supplement your daily living expenses and unpaid time off work. **This plan is not health insurance.**

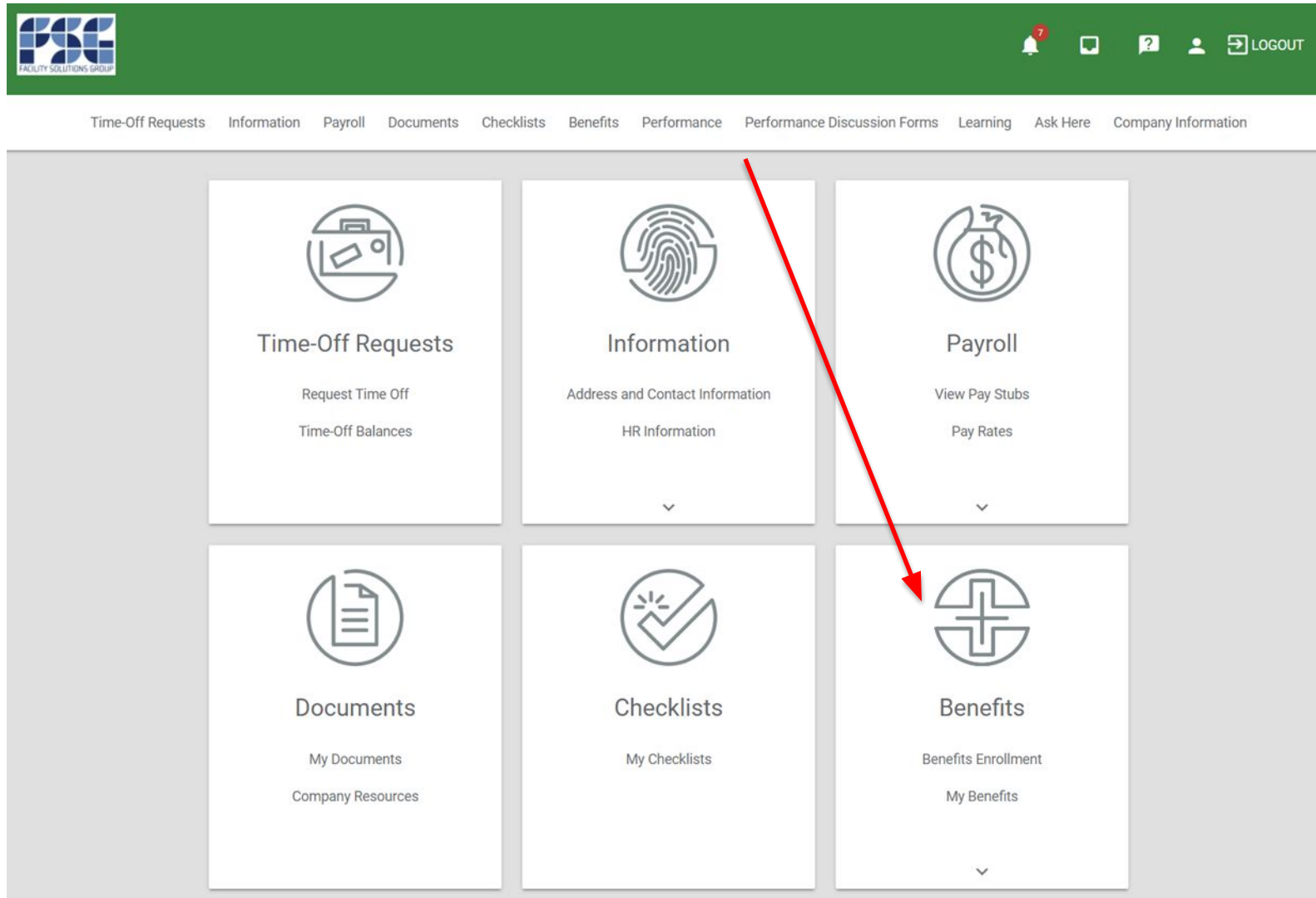
[For details on benefits and rates, use the QR code below:](#)



How to Complete Enrollment



You will be able to access your Paycom self-service account at www.paycom.com and click the enrollment link under Benefits to enroll once you have received the qualifying event email.





Questions

If you have any questions regarding your benefits or need assistance in enrolling, please reach out to your human resources representative or send an email to your Benefits Team at benefits@fsgi.com.