



BENEFITS OUTLINE 2022 / 2023

New hire benefits are effective date of hire

MEDICAL INSURANCE	PRIORITY HEALTH – PH-TRAD-BASE <small>In-Network Benefits</small>	TRADITIONAL
EMPLOYEE COST / MONTH	FIXED CO-PAYS (*AFTER DEDUCTIBLE)	RX CO-PAYS (*AFTER DEDUCTIBLE)
SINGLE: \$ 168.65	OFFICE VISIT (PCP): \$ 25	GENERIC: \$ 10
DOUBLE: \$ 371.02	SPECIALIST VISIT: \$ 40	PREFERRED BRAND: \$ 30
FAMILY: \$ 463.79	URGENT CARE: \$ 75	NON-PREFERRED BRAND: \$ 60
EMPLOYER COST / MONTH	ER VISIT: \$ 250	PREFERRED SPECIALTY: 20%, MAX \$100
SINGLE: \$ 352.65	AMBULANCE: \$ 150	NON-PREFERRED SPECIALTY: 20%, MAX \$200
DOUBLE: \$ 775.83	HIGH TECH IMAGING: \$ 150	
FAMILY: \$ 969.78	COINSURANCE MAX (plan year)	TOTAL OUT-OF-POCKET MAXIMUM (plan year)
DEDUCTIBLE (plan year)	INDIVIDUAL: \$ 3,000	INDIVIDUAL: \$ 8,550
INDIVIDUAL: \$ 1,000	FAMILY: \$ 6,000	FAMILY: \$ 17,100
FAMILY: \$ 2,000	HOSPITAL COINSURANCE 80%	
SPECIAL FEATURES:	<ul style="list-style-type: none"> WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. OUT-OF-NETWORK BENEFITS: Please see individual plan summaries for details 	

MEDICAL INSURANCE	PRIORITY HEALTH – PH-HMO-BASE <small>In-Network Benefits</small>	HMO
EMPLOYEE COST / MONTH	CO-PAYS (*AFTER DEDUCTIBLE)	RX CO-PAYS (*AFTER DEDUCTIBLE)
SINGLE: \$ 133.23	OFFICE VISIT (PCP): \$25*	GENERIC/GENERIC VALUE: \$ 10*
DOUBLE: \$ 293.10	SPECIALIST VISIT: \$40*	PREFERRED BRAND: \$ 30*
FAMILY: \$ 366.38	URGENT CARE: \$75*	NON-PREFERRED BRAND: \$ 60*
EMPLOYER COST / MONTH	ER VISIT: \$250*	PREFERRED SPECIALTY: 20%, MAX \$100*
SINGLE: \$ 352.65	AMBULANCE: \$150*	NON-PREFERRED SPECIALTY: 20%, MAX \$200*
DOUBLE: \$ 775.83	HIGH TECH IMAGING: \$150*	
FAMILY: \$ 969.78	COINSURANCE MAX (plan year)	TOTAL OUT-OF-POCKET MAXIMUM (plan year)
DEDUCTIBLE (plan year)	INDIVIDUAL: \$ 3,000	INDIVIDUAL: \$ 8,550
INDIVIDUAL: \$ 1,000	FAMILY: \$ 6,000	FAMILY: \$ 17,100
FAMILY: \$ 2,000	HOSPITAL COINSURANCE 80%	
SPECIAL FEATURES:	<ul style="list-style-type: none"> WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. 	

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MEDICAL INSURANCE		PRIORITY HEALTH – PH-HMO-VALUE		HMO	
In-Network Benefits					
EMPLOYEE COST / MONTH		CO-PAYS (*AFTER DEDUCTIBLE)		RX CO-PAYS (*AFTER DEDUCTIBLE)	
SINGLE:	\$ 90.58	OFFICE VISIT (PCP):	\$30*	GENERIC/GENERIC VALUE:	\$ 10*
DOUBLE:	\$ 199.27	SPECIALIST VISIT:	\$45*	PREFERRED BRAND:	\$ 30*
FAMILY:	\$ 249.11	URGENT CARE:	\$75*	NON-PREFERRED BRAND:	\$ 60*
		ER VISIT:	\$250*	PREFERRED SPECIALTY:	20%, MAX \$100*
		AMBULANCE:	\$150*	NON-PREFERRED SPECIALTY:	20%, MAX \$200*
EMPLOYER COST / MONTH		HIGH TECH IMAGING:	\$150*		
SINGLE:	\$ 352.65				
DOUBLE:	\$ 775.83				
FAMILY:	\$ 969.78				
DEDUCTIBLE (plan year)		COINSURANCE MAX (plan year)		TOTAL OUT-OF-POCKET MAXIMUM (plan year)	
INDIVIDUAL:	\$ 2,000	INDIVIDUAL:	\$ 4,000	INDIVIDUAL:	\$ 8,550
FAMILY:	\$ 4,000	FAMILY:	\$ 8,000	FAMILY:	\$ 17,100
		HOSPITAL COINSURANCE	80%		
SPECIAL FEATURES:					
<ul style="list-style-type: none"> • WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines • VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health • ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. 					

MEDICAL INSURANCE		PRIORITY HEALTH – PH-HMO-HSA-PREM		HSA	
In-Network Benefits					
EMPLOYEE COST / MONTH		CO-PAYS (*AFTER DEDUCTIBLE)		RX CO-PAYS (*AFTER DEDUCTIBLE)	
SINGLE:	\$ 92.77	OFFICE VISIT (PCP):	20%*	GENERIC/GENERIC VALUE:	\$ 10*
DOUBLE:	\$ 204.09	SPECIALIST VISIT:	20%*	PREFERRED BRAND:	\$ 40*
FAMILY:	\$ 255.12	URGENT CARE:	20%*	NON-PREFERRED BRAND:	\$ 80*
		ER VISIT:	20%*	PREFERRED SPECIALTY:	\$ 20%, MAX \$100*
		AMBULANCE:	20%*	NON-PREFERRED SPECIALTY:	\$ 20%, MAX \$200*
EMPLOYER COST / MONTH		HIGH TECH IMAGING:	20%*		
SINGLE:	\$ 352.65				
DOUBLE:	\$ 775.83				
FAMILY:	\$ 969.78				
DEDUCTIBLE (plan year)		COINSURANCE MAX (plan year)		TOTAL OUT-OF-POCKET MAXIMUM (plan year)	
INDIVIDUAL:	\$ 1,400	INDIVIDUAL:	\$ 600	INDIVIDUAL:	\$ 2,000
FAMILY:	\$ 2,800	FAMILY:	\$ 1,200	FAMILY:	\$ 4,000
		HOSPITAL COINSURANCE	80%		
SPECIAL FEATURES:					
<ul style="list-style-type: none"> • WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines • VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health • ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. • EMPLOYER CONTRIBUTION: Employer contributes \$50/month to all participants enrolled in the HSA plan 					

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MEDICAL INSURANCE		PRIORITY HEALTH – PH-HMO-HSA-BASE		HSA	
In-Network Benefits					
EMPLOYEE COST / MONTH		CO-PAYS (*AFTER DEDUCTIBLE)		RX CO-PAYS (*AFTER DEDUCTIBLE)	
SINGLE:	\$ 0.00	OFFICE VISIT (PCP):	20%*	GENERIC/GENERIC VALUE:	\$ 10*
DOUBLE:	\$ 0.00	SPECIALIST VISIT:	20%*	PREFERRED BRAND:	\$ 40*
FAMILY:	\$ 0.00	URGENT CARE:	20%*	NON-PREFERRED BRAND:	\$ 80*
		ER VISIT:	20%*	PREFERRED SPECIALTY:	\$ 20%, MAX \$100*
		AMBULANCE:	20%*	NON-PREFERRED SPECIALTY:	\$ 20%, MAX \$200*
		HIGH TECH IMAGING:	20%*		
EMPLOYER COST / MONTH		COINSURANCE MAX (plan year)		TOTAL OUT-OF-POCKET MAXIMUM (plan year)	
SINGLE:	\$ 352.65	INDIVIDUAL:	\$ 2,200	INDIVIDUAL:	\$ 5,000
DOUBLE:	\$ 775.83	FAMILY:	\$ 3,400	FAMILY:	\$ 10,000
FAMILY:	\$ 969.78				
DEDUCTIBLE (plan year)		HOSPITAL COINSURANCE			
INDIVIDUAL:	\$ 2,800 [^]		80%		
FAMILY:	\$ 5,600				
SPECIAL FEATURES:					
<ul style="list-style-type: none"> • WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines • VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health • ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. • INDIVIDUAL DEDUCTIBLE: Embedded Individual Deductible can be met before the family deductible • EMPLOYER CONTRIBUTION: Employer contributes \$50/month to all participants enrolled in the HSA plan 					

DENTAL INSURANCE	DELTA DENTAL PPO	VOLUNTARY EMPLOYEE PAID				
EMPLOYEE COST / MONTH	FEATURES	DESCRIPTION (assumes in-network)				
SINGLE:	\$ 7.25	BENEFIT MAX [^] :	\$ 1,000	PREVENTATIVE SERVICES:	NO DEDUCTIBLE APPLIES – COVERED 100%	
DOUBLE:	\$ 15.00	DEDUCTIBLE [^] :	\$ 50	BASIC SERVICES:	COVERED 80% AFTER DEDUCTIBLE	
FAMILY:	\$ 30.00	ORTHO MAX:	\$ 1,000	MAJOR SERVICES:	COVERED 50% AFTER DEDUCTIBLE	
		• Lifetime		ORTHODONIC:	COVERED 50% AFTER DEDUCTIBLE	
				DEPENDENTS:	COVERED TO AGE 26	
EMPLOYER COST / MONTH	SPECIAL FEATURES:					
SINGLE:	\$ 21.75	<ul style="list-style-type: none"> • No ID card required – simply let your provider know you have Delta Dental and they will be able to look you up by your SSN • Delta Dental PPO Network • [^] Benefit Maximum and Deductible are calendar year (January-December) 				
DOUBLE:	\$ 45.00					
FAMILY:	\$ 90.00					

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VISION INSURANCE		EYEMED	VOLUNTARY EMPLOYEE PAID
<u>EMPLOYEE COST / MONTH</u>	<u>FEATURES</u>	<u>DESCRIPTION</u>	
SINGLE: \$ 4.48	EXAMS: ONCE EVERY 12 MONTHS	EXAM CO-PAY: \$ 10	
DOUBLE: \$ 8.75	CONTACTS: ONCE EVERY 12 MONTHS	CONTACT LENSES: \$130 Allowance	
FAMILY: \$ 12.44	FRAMES: ONCE EVERY 24 MONTHS	DEPENDENTS: COVERED TO AGE 26	
<u>EMPLOYER COST / MONTH</u>	<u>SPECIAL FEATURES:</u>		
SINGLE: \$ 4.48	<ul style="list-style-type: none"> No ID card required – simply let your provider know you have EyeMed and they will look you up by your SSN 		
DOUBLE: \$ 8.75	<ul style="list-style-type: none"> Benefit frequency based on date of last visit 		
FAMILY: \$ 12.44			

LIFE INSURANCE		MET LIFE	EMPLOYER PAID
<u>COVERAGE</u>	<u>SPECIAL FEATURES:</u>		
EMPLOYEE: \$ 50,000	<ul style="list-style-type: none"> <u>PlanSmart:</u> PlanSmart is a multifaceted program, offered at no additional cost, which enables you to provide your employees with access to a range of financial and retirement education resources through on-site workshops, with optional personal consultations and decision-support assistance. 		
SPOUSE: \$ 2,000	<ul style="list-style-type: none"> <u>Retirewise:</u> Retirewise is an in-depth program consisting of a four-part series of workshops that deliver objective information covering a broad spectrum of retirement issues from Estate Planning to Tax Planning. Each workshop is delivered by a locally based financial professional. 		
DEPENDENT: \$ 1,000			

SHORT TERM DISABILITY		MET LIFE	EMPLOYER PAID
<u>EMPLOYEE COST / MONTH</u>	<u>COVERAGE</u>		
EMPLOYEE: \$ 0.00	<ul style="list-style-type: none"> 60% of weekly salary up to \$1,000 per week Benefits begin on (Accident) 1st day Benefits begin on (Illness) 8th day Max Duration of Benefits: 26 weeks 		

LONG TERM DISABILITY		MET LIFE - CHARTER	EMPLOYER PAID
<u>EMPLOYEE COST / MONTH</u>	<u>COVERAGE</u>	<u>SPECIAL NOTES:</u>	
EMPLOYEE: \$ 0.00	<ul style="list-style-type: none"> 60% of weekly salary up to \$7,500 /month Elimination Period: 180 days Max Duration of Benefits: till age 65 	<ul style="list-style-type: none"> <u>Pre-Existing Condition:</u> You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under the policy until you have been covered under the policy for 12 months. <u>Benefit Limitations:</u> <ul style="list-style-type: none"> Neuromuscular: 24 months Musculoskeletal: 24 months Soft Tissue Disorder: 24 months Alcohol, Drug or Substance Abuse: No limit 	

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LIFE INSURANCE		MET LIFE - CHARTER	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	COVERAGE		SPECIAL NOTES:
<ul style="list-style-type: none"> Rates are based on employee's age and amount of coverage 	EMPLOYEE: \$10k to \$200k guarantee, Max. 5X Salary or \$500k SPOUSE: \$5k to \$50k guaranteed, Max. \$250k or 50% of Emp. DEPENDENT: \$10k guaranteed		<ul style="list-style-type: none"> You must elect coverage for yourself in order to elect coverage for your spouse and / or child(ren) Any amount elected over the guarantee issue amount will be subject to medical underwriting

FLEX BENEFIT – HEALTH & DEPENDENT CARE		AXIOS HR	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES		
<ul style="list-style-type: none"> You elect how much to contribute annually 	<ul style="list-style-type: none"> Health Care Spending Account Maximum Limit: \$2,850 Annually Dependent Care Spending Account Maximum Limit: \$5,000 Annually (Dependent Care expenses must be from a licensed care provider or program) FSA's give you a way to pay for your health care and / or dependent care expenses with pre-tax dollars. FSA's are voluntary – YOU decide how much to have taken out of your paycheck and put into your Health care and / or Dependent Care Spending Account(s). 		

OFF THE JOB ACCIDENT		MET LIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES		
EMPLOYEE: \$ 8.16 EE + SPOUSE: \$ 15.44 EE + CHILD: \$ 16.84 EE + FAMILY: \$ 21.13	<ul style="list-style-type: none"> This coverage pays you cash benefits that correspond with a variety of covered occurrences, such as dismemberment; dislocation or fracture; hospital confinement; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent and more. Benefits are paid once per accident unless otherwise noted in the schedule of benefits. Guaranteed issue coverage and coverage available for spouse and child(ren). See plan document for more details. 		

CRITICAL ILLNESS		MET LIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES		
<ul style="list-style-type: none"> Rates will vary based on your issue age, who you wish to cover, the amount of coverage and whether or not you use tobacco products 	<ul style="list-style-type: none"> Benefit Coverage options are \$10,000 or \$20,000 This coverage helps offer financial support if you are diagnosed with a covered critical illness. With the expense of treatment often so high, seeking the treatment you need seems like a heavy financial burden. But when a diagnosis occurs (such as cancer, major organ failure, etc.), what you should be focusing on is getting better. With Met Life Benefits, you gain the power to take control of your health when faced with a covered event. <u>How It Works:</u> You select the benefit coverage amount you want based on your individual need and your budget. If you have covered family members, this coverage also provides cash benefits for them. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition. 		

HOSPITAL INDEMNITY		MET LIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES		
EMPLOYEE: \$ 7.67 EE + SPOUSE: \$ 20.15 EE + CHILD: \$ 13.26 EE + FAMILY: \$ 21.84	<ul style="list-style-type: none"> This coverage pays a cash benefit for hospital confinement. This benefit is payable directly to you and can keep you from withdrawing money from your personal bank account or your Health Savings Account (HSA) for hospital-related expenses. Guaranteed issue coverage and coverage available for spouse and child(ren). Coverage can be continued as long as premiums are paid to Met Life Benefits. See plan document for more details. 		

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Legal / ID Protection	ID Shield/Legal Shield	VOLUNTARY EMPLOYEE PAID												
SPECIAL FEATURES														
<ul style="list-style-type: none"> ID Shield membership includes security and privacy monitoring social media monitoring, identity restoration and consolation services. <ul style="list-style-type: none"> If your identity is stolen, ID Shield will fully restore to pre-theft status. LEGAL Shield offers advice, consultation and representation including legal guidance for common issues. <ul style="list-style-type: none"> Membership includes a dedicated law firm, contracts and document review as well as preparation of your end of life documents, 														
<table border="1"> <thead> <tr> <th>Plan</th> <th>Family (per month)</th> <th>Individual (per month)</th> </tr> </thead> <tbody> <tr> <td>LegalShield</td> <td>23.95</td> <td>23.95</td> </tr> <tr> <td>IDShield</td> <td>18.95</td> <td>8.95</td> </tr> <tr> <td>Combined</td> <td>38.90</td> <td>32.90</td> </tr> </tbody> </table>			Plan	Family (per month)	Individual (per month)	LegalShield	23.95	23.95	IDShield	18.95	8.95	Combined	38.90	32.90
Plan	Family (per month)	Individual (per month)												
LegalShield	23.95	23.95												
IDShield	18.95	8.95												
Combined	38.90	32.90												

401(k)	EMPOWER (FORMERLY MASS MUTUAL)	RETIREMENT PLAN
	SERVICE LENGTH	AGE
ELIGIBILITY REQUIREMENTS:	<ul style="list-style-type: none"> 6 Months 	<ul style="list-style-type: none"> 21 Years
		ENTRY DATE
SPECIAL FEATURES:	<ul style="list-style-type: none"> Enrollment in the 401k, or any contribution or beneficiary changes to your existing 401k, can be done on Empower's (formerly MassMutual) website, www.retiresmart.com. Employer Contribution: Non-elective discretionary profit share: 4% 	

PET INSURANCE	PET'S BEST	VOLUNTARY EMPLOYEE PAID
<i>Pet insurance reimburses you for vet bills when your pet is sick or injured, to help take the financial worry out of vet visits.</i>		
<ul style="list-style-type: none"> Fast claims processing and payment – receive reimbursement via direct deposit or direct vet pay options available Use any veterinarian in the U.S. – including specialty and emergency clinics Access to a 24/7 pet helpline powered by whiskerDocs Exclusive Axios HR employee discount on a BestBenefit Plan 		
<p>The Pet Insurance benefit through Pet's Best is not run through payroll. If interested, employees can obtain plan information and enroll in the plan at www.petsbest.com/axios. Employees will pay premiums directly to Pet's Best.</p>		

FINANCIAL WELLNESS	FINFIT	FREE USE OF SITE WITH REGISTRATION
SPECIAL FEATURES		<i>Access via the Axios HR Employee Portal under 'Axios Perks'</i>
<ul style="list-style-type: none"> Assess your Personal Financial Health Budget Building Tools Financial Calculators Life Planning 	<ul style="list-style-type: none"> Financial Education information Online tracking of your bank accounts 24/7 Financial Wellness provided online Short-Term Loan Assistance* 	
<small>* Fee Based Service, subject to credit approval</small>		

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ASSISTANCE FOR CAREGIVERS CARALLEL – MyCareDesk FREE USE OF SITE WITH REGISTRATION

SPECIAL FEATURES

Access via the Axios HR Employee Portal under 'Axios Perks'

- ORGANIZE – Keep track of important documents, coordinate tasks and manage bill payment.
- COLLABORATE – Create your own care team and then share information, tasks and decision making.
- CONSULT – Speak with trusted and experienced Care Advocates through our full-service concierge.
- LEARN – Access tools and resources on topics like health, wealth, lifestyle, senior living and in-home care.

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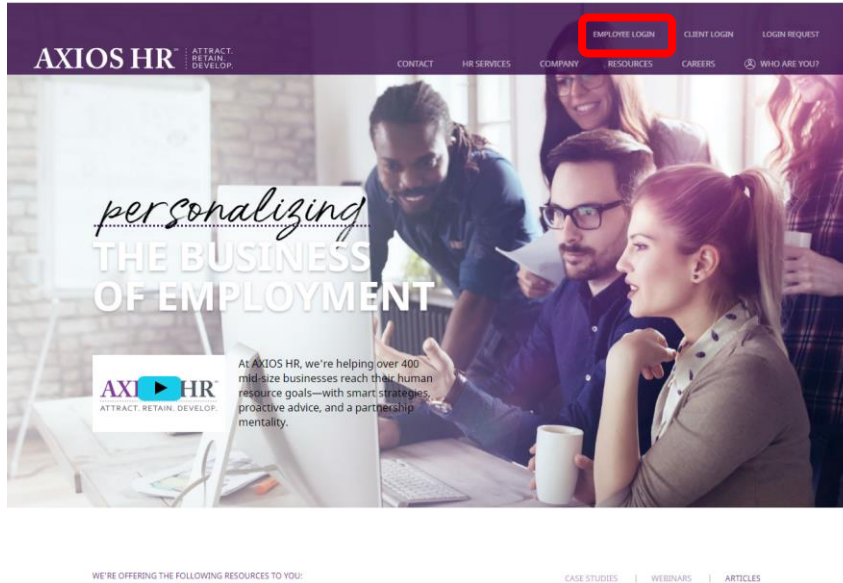
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HOW TO COMPLETE ENROLLMENT – NAVIGATION INSTRUCTIONS

To elect your benefits for the 2022-2023 plan year, please follow these simple instructions. Please note that it is highly recommended that you use Google Chrome to complete your enrollment.

Go to <https://axioshr.com/>, and click on the 'Employee Login' link at the top right of the screen:



Enter your employee credentials and click the blue 'Log In' button:



If you have forgotten your username or password, you may use the 'Forgot Username?' or 'Forgot Password?' links on the login screen for assistance retrieving or resetting your credentials. You may also contact Axios HR for assistance at 616-949-2525, or by e-mailing service@axioshr.com. The Axios HR Employee Care Team is available to assist you Monday-Friday from 8am-5pm.

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Once you are logged in to the Employee Portal, navigate to the Benefits Enrollment tool by clicking on 'Benefits' in the side menu and then on 'Benefits Enrollment'.

AXIOS HR

Dashboard

Personal

Benefits

- Summary
- Flexible Spending
- Retirement Summary
- Dependents/Beneficiaries
- Benefits Enrollment**
- Employee Assistance Center
- Flex Spending - Omega Benefit Strat...

Pay

Paid Time Off

New Messages

Most Recent Pay Statements

04/10/2019
03/27/2019
03/13/2019

Planned Taken Available

0 Hours	72 Hours	2.46 Hours
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Benefits

Aetna HSA Value 100% 6350
EMPLOYEE + 1
Effective 07/01/2018

AXERLIFE-LGH-25k
25000.00
Effective 07/01/2018

AXERSTD-1-8-26-500-LGH
450.00
Effective 01/01/2019

The Axios HR Employee Care Team is here to assist you if you have any questions, or have any trouble making or submitting your benefit elections for the 2022-2023 benefit plan year. You can reach the Axios HR Employee Care Team by phone at 616-949-2525 (1-844-442-9467) or by e-mailing service@axioshr.com.

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Access Your HR and Payroll Information on the Go with the New Mobile App

Your HR and payroll information is always at your fingertips with the new PrismHR Employee Portal App. It's free and easy to set up on your smartphone or tablet.

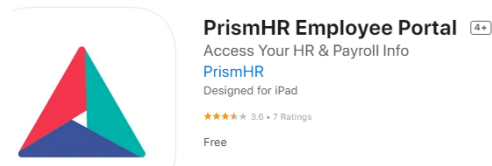
Anything you can do in Employee Portal you can do in the mobile app:

- Pay stubs and history
- Benefits summary
- Personal contact information
- Document management
- HR support contacts
- Enroll in benefits
- W-2 forms
- Change tax withholdings

The app is available now for Apple and Android devices.



In the App Store/Google Play, search for PrismHR Employee Portal:



Once the app is installed, the first time you launch it will require you to complete a one-time setup to access your account. Please select '**Access Code**' and enter the access code of **285**.

Once this is complete, it will bring you to the login screen (blue bridge in the background) and you'll be able to log in as normal.

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AXIOS HR™ : ATTRACT.
: RETAIN.
: DEVELOP.

Have questions? We're here to help!

The Axios HR Employee Care Team is available Monday-Friday from 8am-5pm to answer any questions and resolve any issues as quickly as possible. Our Employee Care Team is made up of four HR professionals – Tiffany (Care Team Lead), Casey (HR Coordinator), Kayla (HR Coordinator), and Lauren (HR Coordinator).

Our Employee Care Team can assist with many items including (but not limited to):

- New hire onboarding
- Username/password assistance
- Contact information changes
- Tax withholding/W2 questions
- Retrieving pay stubs
- Benefits enrollment assistance
- Benefits questions
- FMLA/Disability paperwork
- Timeclock assistance
- Payroll questions
- Verification of Employment documents
- HR/employment concerns

No matter what your need is, the Employee Care Team is your primary point of contact with Axios HR. If your inquiry requires the attention of an HR Specialist, the Care Team will put you in direct contact with one of our team's HR Specialists for resolution.

In addition to our Employee Care Team, the Axios HR Employee Portal is very robust and gives you 24/7 access to your personal information. On the Employee Portal, you can view/download/print your paystubs or W-2, view or make changes to your contact information like address, phone number or e-mail, as well as view or make changes to your direct deposit account information. To visit the employee portal, go to **AxiosHR.com** and click on "EMPLOYEE LOGIN" in the upper right-hand corner.

To contact our Employee Care Team, please call us at 616-949-2525 or email service@axioshr.com.



AXIOS HR™ : ATTRACT.
: RETAIN.
: DEVELOP. **CARE TEAM**

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A : POWERED BY AXIOS HR