

## 2017-2018 BENEFIT SUMMARY

Effective Date: 12/1/2017-11/30/2018

### Health Insurance Eligibility: All Active Full-Time Employees (Working at least 30 hours per week)

#### **Health Insurance: Eligible 1<sup>st</sup> of the month following hire date**

- High Deductible Plan  
 Dec 1, 2017 – Nov 30, 2018
- \$1,000 Deductible** for single, **\$2,000 Deductible** for Family  
 Co-pay plan effective **after** above deductible is met (see MVP summary)  
 Prescription co-pays: \$10 Tier 1, \$40 Tier 2, & \$60 Tier 3 **after** above deductible is met  
 Maximum out of pocket cost: \$4,500 for single, \$9,000 for Family
- 100% of Deductible pre-funded by Conifer** - through a Health Reimbursement Account (HRA) with MVP Healthcare.

**Spousal Coverage:** *If your spouse works and is eligible for health coverage from their own employer – regardless of whether they are actually enrolled in that coverage – and you wish to cover them on your insurance through Conifer Realty, there will be an additional charge in premiums (spousal surcharge). In accordance with these guidelines, any employee that wishes to add their spouse to the Conifer Realty, LLC group health plan must submit an Attestation Form at the time of enrollment.*

The Company will fund an HRA with up to \$400 (pro-rated based on date enrollment form received) for any eligible employee opting out of health insurance, providing they show proof of health care coverage by another source and complete an enrollment form (see Benefit Guide for more details).

### Ancillary Benefit Eligibility: All Active Full-Time Employees (Working at least 32 hours per week)

#### **Dental Insurance:** (Employee Paid) **Eligible 1<sup>st</sup> of the month following hire date**

- Benefit Maximum: \$1,000 per person, per policy year
- Type I Prevent (LOW and HIGH Plans) Paid 100%; include routine oral exams (once every 12 mos.), cleanings (2 x/yr)
- Type II Basic (LOW and HIGH Plans) Paid 80%; (refer to benefits guide for details)
- Type III Major (HIGH Plan Only) Paid 50%; (refer to benefits guide for details)
- Deductible \$50 per person, per policy year (waived for preventative)

#### **Vision Plan:** (Employee Paid) **Eligible 1<sup>st</sup> of the month following hire date**

- Eye Exam \$10 In-Network Copay (\$55 allowance for contact lens fitting)
- Frames \$130 allowance, 20% off balance over \$130
- Standard Lenses \$10 Copay (Premium Progressive lenses \$75 copay)
- Contact Lenses \$130 allowance

#### **Flexible Spending Plan:** (Employee Paid) **Eligibility is the 1<sup>st</sup> of the month following 90 days of service**

- Medical maximum \$2,600
- Dependent Care maximum \$5,000 (if single, married and filing jointly or head of household)
- Dependent Care maximum \$2,500 (if married and filing separately)

#### **Group Short Term Disability:** (Employer Paid) **Eligible 1<sup>st</sup> of the month following 30 days of employment**

- Benefit: *NYS Employee's receive statutory benefits immediately.*  
**NY, PA & MD Employees:** Non-occupational coverage that pays 60% of your weekly salary to a maximum of \$350 per week. (NY employees' first \$170 of benefit paid by NYS mandated plan).  
**NJ Employees:** State mandated plan that pays 66.67% of weekly salary to a maximum of \$615.00 per week.
- Benefit Begins: After 8 days of a non-occupational disability.
- Maximum Benefit Period: While disabled to 26 weeks.

**Group Long Term Disability:** (Employee/Employer Paid\*) **Eligible 1<sup>st</sup> of the month following 30 days of employment**

- Benefit: 60% of your monthly earnings to a maximum benefit of \$5,000 per month.
- Benefit Begins: After 180 days of disability.
- Maximum Benefit Period: While disabled to Age 65.
- Benefit Reductions: Offset by all Social Security benefits.
- Definition of Disability: Based on your Own Occupation for 24 months; thereafter any occupation to the end of the benefit period.

\*Employee after-tax payment is encouraged and Conifer will provide a LTD premium reimbursement (which is taxable) to employees who elect to pay for the premium with after-tax dollars. Employee payment of premium with after-tax dollars allows the LTD benefit received to be tax-free. If employees elect to have Conifer pay the premium, the LTD benefit received will be taxable.

**Basic Group Life Insurance:** (Employer Paid) **Eligible 1<sup>st</sup> of the month following 30 days of employment**

- Benefit: 1X annual salary up to a maximum benefit of \$50,000.
- Age Reductions: Benefits reduce by 33% at age 65 & 33% at 70

**Paid Time Off (PTO):**

**Eligibility is 60 days after hire** (employees hired or transferred to a qualifying status on or after June 1, 2011)

Immediately upon hire or the transfer to a Level I, II or III position, you begin accruing hours of PTO each week worked based on your normal weekly scheduled hours, up to a maximum of 2 weeks.

Accrual rate: (scheduled hours per week X 2) ÷ 52 = hrs earned per week

Accrual rate: (scheduled hours per week X 2) ÷ 24 = hrs earned semi monthly

After the completion of 5 calendar years as a Level I, II or III employee, you begin to accrue hours of PTO each week worked based on your normal weekly scheduled hours, up to a maximum of 3 weeks.

Accrual rate: (scheduled hours per week X 3) ÷ 52 = hrs earned per week

Accrual rate: (scheduled hours per week X 3) ÷ 24 = hrs earned semi monthly

After the completion of 15 calendar years as a Level I, II or III employee, you begin to accrue hours of PTO each week worked based on your normal weekly scheduled hours, up to a maximum of 4 weeks.

Accrual rate: (scheduled hours per week X 4) ÷ 52 = hrs earned per week

Accrual rate: (scheduled hours per week X 4) ÷ 24 = hrs earned semi monthly

**Sick Time:**

**Eligibility upon hire** (employees hired or transferred to a qualifying status on or after June 1, 2011 and prorated first year of employment)

Up through the completion of 10 years of employment - 5 days of Sick Time.

At the beginning of your 11<sup>th</sup> year of employment and thereafter you will receive 8 days of Sick Time.

**401(k):**

**Eligibility is the 1<sup>st</sup> of the month after 30 days from hire date or having reached the age of 21**

**Upon obtaining eligibility to participate in the 401(k) plan, employees will be automatically enrolled in the plan at a 4% deduction from pay. Employees may increase, decrease or eliminate employee contributions to the plan by contacting Fidelity at 800-294-4015 or on-line at [www.netbenefits.com](http://www.netbenefits.com)**

**The deduction will be taken from the employee's paycheck before taxes and invested in the Fidelity Advisor Stable Value Fund**

***Changes to the default investment elections can be made via the telephone or the on-line.***

Company matches \$.75 of every \$1.00 contributed by the employee up through 4% of salary. You must be employed for one year, have completed at least 1,000 hours of service during the Plan Year and be employed as of the last day of the Contribution Period to be eligible to receive any matching contributions that may be made for that Plan Year. Match vesting schedule enclosed.

**Holidays:**

**9 days** (see annual schedule for designated days)

**EAP:**

(Employer Paid) **Eligibility is immediately upon hire**

Employee and their dependents Assistance Program.  
24 hours/7 day no-charge telephone professional counseling service  
3 no-charge face-to-face counseling sessions

**AFLAC Insurance:**

(Employee Paid) **Eligibility is the 1<sup>st</sup> of the month following 90 days of service**

Available plans: Personal Accident, Personal Illness, Cancer Protection and Term Life

*This is a brief benefit summary and is subject to change. It is not a Certificate of Coverage. Please refer to the respective Summary Plan Description or insurance certificate of coverage for more information on your benefits. In the event of a conflict between this summary and/or the Summary Plan Description, with the certificate of coverage (where applicable) and the Plan Document, then the insurance certificate and the Plan Document will control.*

**\*\*Eligibility is the first of the month following your date of hire or during the company open enrollment as determined by the company each year. Enrollment changes can only be made at these times or as a result of a qualifying event. Please refer to the “Important Notice Concerning Your Health Care Options” for the “Special Enrollment Rules”.**

Rev. 1/18