

HEIFER INTERNATIONAL

US EMPLOYEE BENEFITS GUIDE



HEIFER®
INTERNATIONAL



HUMAN RESOURCES
2017

WELCOME TO HEIFER INTERNATIONAL

Heifer's benefits and compensation packages are designed to attract, reward and retain talented people, as well as reflect Heifer's values. Heifer believes in providing fair, nondiscriminatory, appropriate and lawful benefits and compensation to its workforce.

Benefit Eligibility:

Please consult page 13 of the U.S. Employee Handbook for further information. Additionally, you may also elect coverage for your dependent(s). Eligible dependent(s) may include the following:

- Your Legal Spouse and/or Domestic Partner
- Dependent of you or your spouse; legally adopted children; children for which legal guardianship has been awarded
- Disabled dependent children who are supported primarily by you, and who are incapable of self-sustaining employment by reasons of mental or physical handicap (proof of their condition and dependent must be submitted).

Medical, Dental and Vision—Dependent children are covered until the *end of the month* in which they turn age 26 regardless of financial dependency, residency, student status, employment or marital status.

When Can You Enroll?

You can sign-up for benefits at any of the following times:

- After completing the initial eligibility period
- During the annual open enrollment period
- Within 30 days of a qualified family-status change

*If you do not enroll at one of the above times, you must wait for the next annual open enrollment period.

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Heifer International offers a variety of benefits allowing you the opportunity to customize a **benefits package that meets your personal needs. In the following pages, you'll learn more** about the benefits being offered.

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BENEFITS ENROLLMENT

We have partnered with Explain My Benefits (EMB), a benefit technology/communication vendor, to assist you with completing your benefits enrollment. When you meet with **Heifer's Benefits Coordinator, typically on your first day, they will inform you of the date and time of this meeting.**

Prior to meeting with our Benefits Coordinator please complete the following:

1. Review New Hire Packet
2. Review this document in its entirety
3. Complete the SilkRoad Onboarding Tasks assigned to you (these tasks will be emailed to you)

To complete your benefit enrollment, an EMB benefits counselor will call you at your designated work number or the number you provide during your meeting with our Benefits Coordinator.

For your records, you are scheduled for the following date/time: *fill in during your meeting

Date	Time (CST)
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NOTE: If you need to change this scheduled time, please contact Chasity Knight @ 501-907-6950 or chasity.knight@heifer.org to get this meeting re-scheduled.

Making Changes After Enrollment:

If you have a qualifying life event that requires you to make a change to your existing benefits, please reach out to the Human Resources department as soon as possible. These changes are time sensitive and may require the need to turn in appropriate documentation such as a marriage license, an official divorce decree, birth certificate and social security card for a birth or adoption.

Examples of qualifying life events might include, but is not limited to:

- Marriage
- Divorce or legal separation
- Birth or adoption of eligible child(ren)
- Death of your spouse or covered dependent
- **Change in your spouse's work status that affects his/her benefits**
- Change in your work status that affects your benefits
- **Change in your child's eligibility for benefits**
- Receiving Qualified Medical Child Support Order (QMCSO)

If you experience a life event while employed at Heifer, please contact the Human Resources Benefits Team to get a list of documents that you will need to provide in order to change your benefit elections.

Phone: 501-907-6950

Email: HR@heifer.org

MEDICAL COVERAGE



BlueCross BlueShield of Arkansas is Heifer's Medical provider. For more assistance in deciding which plan is right for you, please reach out to your Compass HealthPro at 800.513.1667 x 5563 or email christina.baddar@compassphs.com



Services	Low Deductible Option	High Deductible Option
Annual Deductible		
Individual	\$1,000	\$2,000
Family	\$2,000	\$4,000
Coinsurance (Insurance pays)	80%	80%
Out of Pocket Max (including deductible)		
Individual	\$4,000	\$4,000
Family	\$8,000	\$8,000
Physician Visit		
Primary Care	\$30 Copay	20% after Deductible
Specialist	\$50 Copay	20% after Deductible
Emergency Room Visit	\$250 Copay	20% after Deductible
Urgent Care	\$30 Copay	20% after Deductible
Inpatient Hospital Services	20% after Deductible	20% after Deductible
Outpatient Surgical Services	20% after Deductible	20% after Deductible
Prescription Drugs		
Generic	\$15 Copay	20% after Deductible
Preferred	\$35 Copay	
Non-Preferred	\$75 Copay	
Mail Order Prescription	\$37.50/\$87.50/\$187.50	
*Your Cost Twice per Month		
Employee Only	\$52.05	\$44.66
Employee/Spouse	\$109.30	\$93.79
Employee/Child(ren)	\$96.29	\$82.63
Family	\$150.94	\$129.52

NOTE: Preventative services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations and other screenings, as provided for in the Patient Protection and Affordable Care Act. Examples of these services include (but is not limited to): mammogram, pap smear, prostate antigen test, bone density testing, routine adult physical exam, routine well baby care, child immunizations,. These services are covered at 100% with no out-of-pocket cost to you on both plans.

*Employees who participate in the Move It wellness program in 2017 and meet the 350 points requirement by November 30, 2017 will receive a \$50 monthly medical premium credit in 2018. Learn more on the next page.



Complete your program goal and enjoy a reduction in 2018 on your Medical Premiums!

Join Heifer's Wellness Program today by signing up at www.mooveitwellness.com

**Employees hired after 8/31/2017 will be able to participate in the subsequent program year. **



2017 Viverae Standard Employee Points Program

REQUIRED ACTIVITIES	POINT VALUE	COMPLETE BY DATE	
Member Health Assessment (MHA)	50	Within 90 days of hire date	
Biometric Screening	50		
3 Preventive Care Exams	50		
Additional Ways to Earn Points			
Online Coaching Session	20 each / 100 max	11/30/2017	
Questionnaires	5 each / 45 max		
Targeted Programs	15 each / 45 max		
Online Courses	10 each / 30 max		
Webinars	5 each / 30 max		
Employer Challenges (goal met)	15 each / 45 max		
Peer Challenges (Completed 4 Days)	10 each / 30 max		
250,000 Step Challenge (must have compatible app)	25 each / 75 max		
Healthy Events (Self-Reported – Auto Approved)	5 each / 15 max		
Healthy Events (Self-Reported – Auto Approved)	25 each / 50 max		
HEALTH METRIC BONUS POINTS			
Body Mass Index / Waist Measurement	<u>BMI</u> : Less than 25.0 OR <u>Waist Measurement</u> : Less than 35 inches (females) Less than 40 inches (males)		25
Total Cholesterol	Less than 200 mg/dL		25
Blood Pressure	<u>Systolic</u> : Less than 120 mmHg AND <u>Diastolic</u> : Less than 80 mmHg	25	
Glucose	<u>Fasting</u> : Less than 100 mg/dL OR <u>Non-fasting or unknown</u> : Less than 140 mg/dL	25	
PROGRAM GOAL	350 POINTS		



HEALTHCARE STARTS WITH COMPASS.



YOUR LIFE JUST GOT SIMPLER.

Navigating healthcare these days seems impossible—unless you have Compass on your side. From finding doctors to getting cost estimates to solving billing problems, we’re here to help. Your employer has partnered with us to serve as your personal healthcare advisor. So rely on your Compass Health Pro® consultant to make you an empowered healthcare consumer who takes control of healthcare costs. Our service is simple to use and available to you and your family.



UNDERSTAND INSURANCE BENEFITS

Receive guidance in understanding your benefits throughout the year.



PAY LESS FOR PRESCRIPTIONS

Let Compass compare medication prices and explore lower-cost options for you.



FIND A GREAT DOCTOR

Find highly rated doctors, dentists and eye care professionals in your area who meet your personal preferences and healthcare needs.



GET HELP WITH MEDICAL BILLS

Have your medical bills reviewed to make sure you are not overcharged.



SAVE MONEY ON MEDICAL CARE

Get price comparisons before receiving care. Depending on the doctor, hospital or facility, costs can vary by hundreds or thousands of dollars—even in-network.

answers@compassphs.com
800.513.1667

DENTAL COVERAGE



With Delta Dental you may choose to visit any dentist, but you will always pay less out of pocket when you choose a network dentist. A pre-determination is recommended for any services exceeding \$300.

Dental benefits are available for dependent children up to age 26.



Services	In Network	Out-of-Network
Annual Deductible		
Individual	\$25	\$25
Family	(No More Than 3 per Family)	(No More Than 3 per Family)
Preventative Services		
Cleaning & Exam	100%	90%
X-Rays	(Deductible does NOT apply)	(Deductible does NOT apply)
Fluoride Treatment		
Sealants		
Basic Services		
Extractions	80%	72%
Endodontics (Root Canal)	(After Deductible)	(After Deductible)
Fillings		
Oral Surgery		
Surgical Periodontics (Gum Disease)		
Non-Surgical Periodontics		
Major Services		
Dentures	50%	45%
Crowns	(After Deductible)	(After Deductible)
Bridges		
Implants		
Annual Benefit Maximum	\$1,500	\$1,500
Orthodontics (adults & children)	50% to \$1,000/Lifetime	45% to \$1,000/Lifetime
Your Cost Twice per Month		
Employee Only		\$4.72
Employee/Spouse		\$9.14
Employee/Child(ren)		\$9.33
Family		\$16.26

Max Carry Over Benefit: An annual maximum carryover amount of up to \$375 will be rolled into your Carryover Account at the end of the year as long as you: Submit at least one claim for covered services during the benefit year; AND do not have paid claims that exceed \$749 within that calendar year. You may accumulate a carryover maximum of up to \$1,500



VISION COVERAGE



Heifer International calls for only the best, that's why VSP will serve as your vision care provider. The VSP Member Promise guarantees you will be completely satisfied as doctors are held to the highest quality standards to fulfill your vision care needs.



Services	VSP Preferred Providers	Other Providers
Eye Exam	\$10 Copay Routine retinal screening up to \$39	Reimbursed up to \$50
Lenses (per Pair)		
Single Vision	\$25	Reimbursed up to \$50
Bifocal	\$25	Reimbursed up to \$75
Trifocal	\$25	Reimbursed up to \$100
Lenticular	\$25	Reimbursed up to \$125
Frames	Up to \$130 allowance 20% discount for anything exceeding allowance	Reimbursed up to \$70
Contact Lenses (instead of glasses)		
Elective	Up to \$130 Allowance Covered in Full	Reimbursed up to \$105
Medically Necessary (exam, fitting, follow-up, lenses)		Reimbursed up to \$210
Frequency		
Exams	12 Months	
Lenses (glasses or contacts)	12 Months	
Frames	24 Months	
Your Cost Twice per Month		
Employee Only	\$4.45	
Employee/Spouse	\$7.13	
Employee/Child(ren)	\$7.27	
Family	\$11.73	



Laser VisionCare Program: 15% average discount or 5% off promotional price for PRK, LASIK, and Custom LASIK. Members who've had LVC surgery can use their frame benefit for non-prescription sunglasses.

TruHearing: Hearing aid discount program available to ALL VSP members. Sign up at vsp.truhearing.com

FLEXIBLE SPENDING ACCOUNTS

Consolidated Admin Services (CAS) provides Heifer Employees with HSA and FSA services.

CAS offers:

- A plan Debit Card for you and one family member.
- A website that provides 24/7/365 access to account information.
- A mobile device app that allows you to see available balances anywhere, anytime, as well as to file claims and upload receipts.

Health Savings Account (HSA)

If you enroll in the Heifer International High Deductible Health Plan, you may also enroll in a Health Savings Account and Heifer International will contribute \$300/year for those with single coverage or \$600 per year for family coverage. (NOTE: This amount will be prorated.) Any money you contribute into this account will be withdrawn from your check before taxes are deducted to help pay for eligible medical, dental and vision expenses and any unused money in your HSA will carry forward. Also, your HSA is yours to keep which means that you can take it with you if you change jobs or retire. If you have any money remaining in your HSA after your retirement, you may withdraw the money as cash. Please check with your tax advisor for more information about possible tax implications.

2017 HSA Contribution Limits (Including Employer Amt):

Individual: \$3,400 and Family: \$6,750

Flexible Spending Account (FSA)

For those of you who do NOT enroll in the HSA account, Heifer provides you the opportunity to pay for out-of-pocket medical, dental & vision expenses with pre-tax dollars through the Flexible Spending Account. If you are enrolled in the HSA you may only enroll in a Limited Flexible Spending Account for your dental & vision expenses.

Contributions to your FSA come out of your paycheck before any taxes are taken out just **like the HSA. This means that you don't pay federal income tax, Social Security taxes, or state and local income taxes** on the portion of your paycheck contributed to your FSA. Your elected amount will be divided equally and deducted through your payroll before taxes and will be available to you for eligible expenses whenever you need it. You may carry over up to \$500 in unused health FSA funds to the following year but any additional unused funds will be forfeited; there is NO grace period.

The 2017 FSA Contribution Limit is \$2,600.



- You **MUST** re-enroll each year to continue to participate in the HSA and/or FSA accounts!

Dependent Care FSA

A Dependent Care FSA (DCFSA) is a pre-tax benefit account used to pay for eligible dependent care services, such as preschool, summer day camp, before or after school programs, and child or adult daycare. You may elect a Dependent Care FSA to be reimbursed for expenses related to the care of your eligible dependents, while you and your spouse work.

The maximum you may contribute to the Dependent Care FSA is \$5,000 if you are a single employee or married filing jointly, or \$2,500 if you are married and filing separately.



LIFE/AD&D/DISABILITY INSURANCE



Life and Disability Insurance at NO COST TO YOU!

You will automatically be enrolled in the Basic Life and AD&D as well as the Short Term and Long Term Disability Insurance Plans and Heifer International will pay the full cost of these coverage's for you!

What is Disability Insurance?

Disability Insurance is income protection in the event that you are sick or seriously injured (car accident, cancer, stroke, etc...) and are not able to return to work for an extended period of time.



Life Benefit

\$75,000 and if your death is the result of an accident, your beneficiaries will also receive a \$75,000 Accidental Death & Dismemberment (AD&D) benefit.

AD&D

Also provides a specified benefit for covered accidental bodily injury that directly causes **dismemberment (the loss of a hand, foot, eye, etc...)**

Age Restrictions

Benefits will reduce to 67% at age 70 and an additional 17% at age 75. The benefit terminates at retirement.

Short Term Disability

You will be eligible to receive Short Term Disability benefits after you have been unable to return work for a continuous 10 days due to a covered illness or injury. Your benefits will pay 60% of your weekly earnings to a **maximum of \$2,500 per week** and you may receive this benefit for **up to 25 weeks**.

Long Term Disability

If your injury or illness prevents you from returning to work for **180 days** and you meet benefit qualifications, your Long Term Disability benefits will pay **60%** of your monthly

* It is very important that you check to be sure your beneficiaries are up to date.

salary but **no more than \$6,000 per month**. Your LTD benefits are payable for the period during which you continue to meet the definition of disability and if necessary, may continue to your social security normal retirement age.

Long Term Disability does have a **3/12 Pre Existing Clause** which means no condition that existed 3 months before the policy effective date will be covered until 12 months after the policy effective date.

Would You Like to Purchase Additional Life Insurance?

If you feel like your family needs additional life insurance protection, you have the opportunity to purchase more for yourself, your spouse and your child(ren).

AD&D coverage is included when you purchase additional life insurance for you and your family.

BENEFITS AVAILABLE

Employee

You may purchase in \$10,000 increments with a minimum of \$20,000 up to \$150,000 (guarantee issue without evidence of insurability) or up to \$500,000 after medical review.

Spouse

You may purchase for your spouse no more than 100% of your elected amount in \$5,000 increments up to \$50,000 (without evidence of insurability) or up to \$250,000 after medical review. NOTE: Reliance Standard does not allow for Domestic Partner coverage.

Child(ren)

Dependent children between the ages of 14 days and 6 months old, the benefit is \$250, for children ages 6 months to 26 years old you may purchase a benefit of either \$1,000, \$5,000 or \$10,000.



Visit
Reliance
Standard
Website

How much does voluntary Life Insurance cost?

Your Cost Twice Per Month

Age	Benefit Amount For Employee and Spouse								
	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
To 29	\$1.30	\$1.95	\$2.60	\$3.25	\$3.90	\$4.55	\$5.20	\$5.85	\$6.50
30-34	\$1.70	\$2.55	\$3.40	\$4.25	\$5.10	\$5.95	\$6.80	\$7.65	\$8.50
35-39	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00	\$7.00	\$8.00	\$9.00	\$10.00
40-44	\$2.40	\$3.60	\$4.80	\$6.00	\$7.20	\$8.40	\$9.60	\$10.80	\$12.00
45-49	\$3.40	\$5.10	\$6.80	\$8.50	\$10.20	\$11.90	\$13.60	\$15.30	\$17.00
50-54	\$5.60	\$8.40	\$11.20	\$14.00	\$16.80	\$19.60	\$22.40	\$25.20	\$28.00
55-59	\$9.40	\$14.10	\$18.80	\$23.50	\$28.20	\$32.90	\$37.60	\$42.30	\$47.00
60-64	13.70	\$20.55	\$27.40	\$34.25	\$41.10	\$47.95	\$54.80	\$61.65	\$68.50
65-69	\$20.40	\$30.60	\$40.80	\$51.00	\$61.20	\$71.40	\$81.60	\$91.80	\$102.00
70-74	\$36.10	\$54.15	\$72.20	\$90.25	\$108.30	\$126.35	\$144.40	\$162.45	\$180.50
75-79	\$82.46	\$123.69	\$164.92	\$206.15	\$247.38	\$288.61	\$329.84	\$371.07	\$412.30
80-85	\$143.66	\$215.49	\$287.32	\$359.15	\$430.98	\$502.81	\$574.64	\$646.47	\$718.30

Child Benefit Amount		
\$1,000	\$5,000	\$10,000
\$0.10	\$0.52	\$1.03

*One premium covers all dependent children

NOTE: Age reductions apply, please see your benefit certificate for details

VOLUNTARY BENEFITS



Voluntary Benefits, offered through Transamerica, are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

The Voluntary Benefits offered through Transamerica are Accident, Critical Illness and Hospital Indemnity. These benefits are:

- Fully portable and belong to you if you leave your employer, same price and same plan
- Payroll deducted
- *Paid directly to you, not to a hospital or to a doctor*
- *Paid regardless of any other coverage you may have*
- Level premiums - Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

Accident Plan

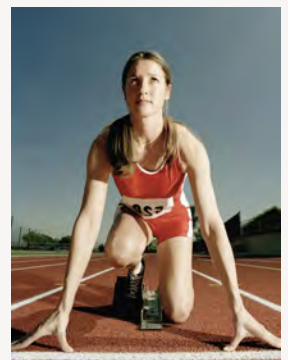
This plan that helps pay for the unexpected expenses that result from an accident:

- On and off the job coverage = 24 hours per day, 7 days per week
- Family coverage available
- Sports related injuries covered as well

Just a few examples of benefits included in the plan:

- Initial Accident Treatment - \$125
- Hospitalization - \$1,500 admission benefit, \$250 per day benefit
- Fractures - up to \$5,000
- Dislocations - up to \$4,000
- Wellness Benefit - \$60 per insured per year

**See brochure for a complete list of benefits*



Accident Plan Pricing

*Dependents through age 25 can be covered regardless of student status.

Your Cost Twice per Month	Employee	Employee & Spouse	Employee & Children*	Family*
	\$11.40	\$17.79	\$14.43	\$21.33

Critical Illness/Cancer

Critical Illness/Cancer is a benefit that will pay you a lump sum of money if you are diagnosed with a critical illness, heart attack, internal cancer or stroke. The cash benefit is provided upon the first diagnosis of a covered condition to help you with associated costs and beyond.

Regardless of other coverage in force the benefit is paid out in a full lump sum.

Examples of covered conditions: Heart Attack, Stroke, Major Organ Transplant, End-Stage Renal Failure, Coma, Loss of Sight, Speech and/or Hearing, paralysis (not due to stroke), Invasive Cancer, Bone Marrow Transplant, Carcinoma in situ (25% benefit), Coronary Bypass Surgery (25% benefit), and others.

A Wellness Benefit is included in your Critical Illness/Cancer Policy and pays \$50 for each insured.

Each covered person will get one screening test per calendar year. Also included is a Recurrent benefit that provides a second cash payment in the event a covered person is diagnosed with the same condition. Pays an additional 50% of the original benefit.

Rates: This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. Please speak to a Benefit Counselor to customize your plan and rates. *See brochure for more details.

Examples of Wellness Benefit Screenings

- Low dose mammography
- Stress Test
- Serum Cholesterol
- Bone Marrow
- Pap Smear
- Colonoscopy
- Prostate Specific Antigen
- Chest X-ray

Hospital Indemnity

The Hospital Indemnity Plan can help offset your out-of-pocket expenses including deductibles, co-insurance and services not covered in your group health coverage for Hospitalization and Outpatient surgery.

Daily In-Hospital Benefit - Pays each day a covered person is confined to a hospital (but not an ER, outpatient stay or stay in an observation unit)	\$150	Max. 31 days per confinement
Intensive Care Benefit - Pays each day a covered person is confined to an intensive care unit	\$150 Calendar Year	Max. 10 days
Hospital Confinement Benefit - Pays each day a covered person is confined to a hospital (but not an ER, outpatient stay or stay in an observation unit) lasting a minimum of 24 continuous hours from time of admission	\$1,000	Max. 1 day per confinement/1 day per calendar year

Your Cost Twice per Month	Employee	Employee & Spouse	Employee & Children*	Family*
	\$11.12	\$23.86	\$16.43	\$27.04

ADDITIONAL BENEFITS



Southwest Employee Assistance Program (EAP)

Your (EAP) counseling program offers a confidential service is designed to help Heifer employees and their families with personal or work related problems. Southwest EAP provides assessment, short-term counseling, problem-solving assistance, referral if needed and follow-up services. Basically, you and your family have access to free, confidential and professional counseling.

Assessment means a counselor will help you identify the problems you are experiencing and recommend the most appropriate steps you can take to resolve your problems successfully. These steps may involve either a referral and/or short-term counseling. Southwest EAP can help in such areas as:

- Stress Management
- Emotional Issues
- Depression & Anxiety
- Eating Disorders
- Marriage/Relationship Issues
- Family Problems
- Financial Literacy

Using EAP is easy. Simply give them a call at : 501-663-1797 or 1-800-777-1797. *Their services are at no cost to you as a Heifer Employee and the services are strictly anonymous.*

A circular button with a teal background and a white border. Inside the circle, the text "Visit EAP Website" is written in white, sans-serif font. A white arrow points from the left towards the button.

Visit
EAP Website



Personal Legal Planning

LegalShield Legal Protection Plan provides you with the ability to talk to an attorney about any personal legal issues. Benefits include: Advice on an unlimited number of topics such as family or financial matters, auto, home or estate issues. Other services include letters and phone calls on your behalf, legal document review, will preparation and much more.

Identity Theft Plan

These days, you can never be too cautious. The Identity Theft Plan will provide benefits that include:

- Credit reporting
- Personal credit score analysis
- Continuous credit monitoring with safety alerts
- Identity consultation and restoration services
- Safeguard for minors

You may purchase either as a separate plan, or purchase both the Legal and the Identity plans and enjoy package savings.

This plan covers one household (you, your spouse and children to age 26).

Your Cost Twice per Month	Legal Plan	ID Theft Protection	Legal/IDT Combo
	\$9.48	\$7.48	\$16.43



ENROLLMENT RIGHTS

Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA)

COBRA requires most employers sponsoring group medical plans to offer employees and their eligible family members the opportunity for a temporary extension of medical and/or **dental coverage called “continuation coverage.” In certain instances where coverage** under the plan is lost (referred to as a qualifying event), this coverage is offered at 102% of group rates.

Depending on the qualifying event and the eligible participant, coverage can extend up to 18 or 29 months for employees, or 36 months for dependents; 29 months may be granted when the participant is social security disabled at the time of initial COBRA eligibility or within the first 60 days of the COBRA period (additional paperwork required).

If you are covered by the group medical or dental plan, you have the right to choose continuation coverage if coverage is lost for the following reasons: resignation, termination (except for gross misconduct), or reduction of hours. If your spouse or dependent child is covered by your group plan, he or she has the right to choose continuation coverage if coverage is lost for the following reasons: your death, your termination, your reduction of hours, divorce, you become entitled to Medicare or your child loses dependent status due to age or marriage.

Health Insurance Portability & Accountability Act of 1996 (HIPAA)

The legislation of HIPAA is great in scope but its focus is to improve portability of health coverage, reduce health care costs by standardizing the processing of health care transactions, increase the security and privacy of health care information, limit exclusions for preexisting conditions, and allow a special opportunity to enroll in a new plan in **certain circumstances. We encourage employees to further educate themselves on HIPAA’s** portability rules, privacy mandates and special enrollment rights.

Additional information is available at www.dol.gov or by contacting the U.S. Department of Labor at 1-866-275-7922.



IMPORTANT CONTACTS

Plan	Carrier	Phone Number	Website
Medical	Arkansas BlueCross	800-238-8379	www.arkansasbluecross.com
Nurse 24	Arkansas BlueCross	800-318-2384	www.arkansasbluecross.com
Dental	Delta Dental	800-462-5410	www.deltadentalar.com
Vision	VSP	800-877-7195	www.vsp.com
Life & AD&D	Reliance Standard	800-351-7500	www.reliancestandard.com
Short & Long Term Disability	Reliance Standard	800-351-7500	www.reliancestandard.com
Cafeteria Plan - FSA/HSA	Consolidated Admin Services (CAS)	877-941-5956	www.consolidatedadmin.com
Voluntary Benefits	Transamerica	888-763-7474	www.transamericaemployeebenefits.com
Wellness	Viverae	888-848-3723	www.mooveitwellness.com
Healthcare Tools	Compass	800-513-1667	www.compassphs.com/getconnected
Legal Services	Legal Shield	800-654-7757	www.legalshield.com
Transamerica Claims Help	Explain My Benefits	888-734-6937 Option 2	Email: service@explainmybenefits.biz

Other Contacts

You may contact Stephens Insurance if you have any questions regarding your insurance benefits, have claims issues or need assistance enrolling.

JoAnne Edmondson: 1-800-852-5053 or Direct: 501-377-8412 Email: jedmondson@stephens.com

Laura Humphrey: 1-800-852-5053 or Direct: 501-377-8213 Email: laura.humphrey@stephens.com

COMPASS HealthCare Pro Professional: Christina Baddar Direct: 800-513-1667 x5563

Email: Christina.Baddar@compassphs.com

HUMAN RESOURCES

Diane Souza: 501-907-2885 or diane.souza@heifer.org

Chasity Knight: 501-907-6950 or chasity.knight@heifer.org

Arisha Hogan: 501-907-2627 or arisha.hogan@heifer.org

DISCLAIMER: This is not a summary plan description (SPD) and does not guarantee benefits or payment. This document provides a brief summary of benefits that are available to you. Please refer to your coverage booklets and policies for complete details regarding covered charges, exclusions and plan payments or contact your benefits provider at the numbers located.