

Caring for you ... for life.

Benefits are a big deal. They help you be well to serve well throughout your life. Your employer has partnered with Concordia Plans to bring you quality benefits for your financial, physical and emotional wellness that you won't find anywhere else.

You have access to quality, affordable health care, including many no-extra-cost wellness programs that are part of the Concordia Health Plan. Focused on improved wellness, the CHP provides preventive solutions that address health concerns early to improve outcomes and reduce long-term healthcare costs.

Financial wellness is a big part of your overall well-being.

When your finances are in order you have less stress and are better able to serve. The financial benefits offered by CPS can help you – no matter where you are on the path to financial wellness. You're eligible for financial wellness benefits that help protect your financial future, as well as disability coverage and basic life coverage with the Concordia Disability & Survivor Plan.

By enrolling in the CHP and other CPS benefits, you're giving yourself – and your family – quality benefits and solutions that you won't find anywhere else. Learn how CPS cares for you – and your family – by visiting ConcordiaPlans.org > Members > International Workers.

» Choose your benefits

Go to **ConcordiaPlans.org**, click on "My Account" and "Member Login," then follow the steps to set up your account. If this is your first time using your updated Member Portal, you must first click "Register" (located in the lower right-hand corner of the log in screen). Questions? Go to **ConcordiaPlans.org/PortalHelp** or email **info@ConcordiaPlans.org**.

Your Member Portal provides an improved, streamlined benefits election experience for you to:

- Choose your benefits.
- Update your beneficiaries.
- Review your dependents' Social Security numbers.
- Explore all the benefits available to you.
- If eligible, contribute more to or enroll in your Concordia Retirement Savings Plan 403(b).

Enjoy the simplicity of choosing your benefits – with peace of mind for enhanced security.

Did you know that with your GeoBlue coverage:

- You and your dependents will receive two ID cards one for use in the U.S. and one for use while outside the U.S. Remember to always show your ID card when you visit a provider for services. Your ID card can be accessed through your GeoBlue app or through their website.
- Using providers in the quality international network, Bupa Global, will allow you to access services without securing a prior Guarantee of Payment from GeoBlue it takes you out of the middle of claims processing.

» To do's before you choose your benefits

- 1. Review this guide so you know about the benefits that are available.
- 2. Determine the dependents you'll be covering and have their birth dates, as well as their Social Security numbers, available.

Medical Benefits	International (General)	International (Czech Republic & Spain)	U.S. Participating Provider	U.S. Non-Participating Provider
Individual Deductible Maximum	\$350	\$0	\$350	\$700
Family Deductible Maximum	\$700	\$0	\$700	\$1,400

Family members meet only their individual deductible and then their claims will be covered under the plan coinsurance; if the family deductible has been met prior to their individual deductible being met, their claims will be paid at the plan coinsurance.

Individual Out-of-Pocket Maximum	n/a	n/a	\$1,750	\$4,650
Family Out-of-Pocket Maximum	n/a	n/a	\$3,500	\$9,300

Family members meet only their individual out-of-pocket and then their claims will be covered at 100%; if the family out-of-pocket has been met prior to their individual out-of-pocket being met, their claims will be paid at 100%.

Office Visit: Primary	100%, No deductible	100%	100%, No deductible, \$25 copay	60%, No deductible
Office Visit: Specialist	100%, No deductible	100%	100%, No deductible, \$25 copay	60%, No deductible
Routine Preventive Care – all ages	100%, Not subject to deductible or copayments	100%, Not subject to deductible or copayments	100%, Not subject to deductible or copayments	60%, No deductible
Immunizations – all ages	100%, Not subject to deductible or copayments	100%, Not subject to deductible or copayments	100%, Not subject to deductible or copayments	60%, No deductible
Inpatient and Outpatient Hospitalization	100%, After deductible	100%	85%, After deductible	60%, After deductible
Emergency Room Visit	100%, After deductible	100%	85%, After deductible	60%, After deductible
Urgent Care	100%, After deductible	100%	85%, After deductible	60%, After deductible
Laboratory	100%, After deductible	100%	85%, After deductible	60%, After deductible
Advanced Imaging	100%, After deductible	100%	85%, After deductible	60%, After deductible

Mental Health/Substance Abuse Benefits	International (General)	International (Czech Republic & Spain)	U.S. Participating Provider	U.S. Non-Participating Provider
Inpatient Care	100%, After deductible	100%	85%, After deductible	60%, After deductible
Outpatient (includes Individual, Group and Intensive Outpatient): Physician's Office Visit	100%, After deductible	100%	100%, No deductible, \$25 copay	60%, No deductible
Outpatient (includes Individual, Group and Intensive Outpatient): Outpatient Facility	100%, After deductible	100%	85%, After deductible	60%, After deductible

Dental Services Highlights	
Calendar Year Maximum Combined Benefit for Diagnostic and Preventive Services, Basic Services and Major Services	\$3,000
Orthodontic Lifetime Maximum Limited to Covered Persons under age 19	\$1,500
Per Person Calendar Year Dental Deductible Not applicable to Diagnostic and Preventive Services Family Maximum	\$0 \$0
Per Person Calendar Year Orthodontic Deductible	\$0
Diagnostic and Preventive Services	0%
Basic Services	20%
Major Services	20%
Orthodontic Services Limited to Covered Persons under age 19	50%

Vision Care Highlights	
Examinations	1000/
One Eye Exam every 12 Consecutive months	100% coverage, not subject to any Deductible
Lenses & Frames	100% coverage, not subject to any Deductible, up to a
One pair of glasses or contact lenses per 12 Consecutive months	Maximum Benefit of \$250

Hearing Benefit Highlights	International	U.S. Participating Provider	U.S. Non-Participating Provider
Hearing Benefit One Examination per 12 month period	100%, No deductible	100%, No deductible, \$25 Copay	60%, No deductible
Hearing Aid Benefit Up to \$1,000 per hearing aid unit necessary for each hearing impaired ear every 36 months	100%, After deductible	85%, After deductible	60%, After deductible

Legal Disclaimer

This document is a brief outline of benefits provided by the Concordia Health Plan option referenced above. While every effort has been made to provide accurate information, this summary does not cover every aspect of the plan. You should consult the plan document for more detailed information. The plan documents and additional plan information can be found online at **ConcordiaPlans.org**.

Prescription Drug Benefits Outside of the U.S.		Mail Order Pharmacy Three-month supply
Generic		
Brand-name Formulary	\$10 copayment per prescription or refill, deductible does not apply.	\$30 copayment per prescription or refill, deductible does not apply.
Brand-name Non-Formulary	, dadasa dasa appij.	3333 apply.

Prescription Drug Benefits Inside of the U.S.	Participating Retail Pharmacy One-month supply	Non-Participating Retail Pharmacy One-month supply
Generic	\$10 copayment per prescription or refill, deductible does not apply.	\$10 copayment per prescription or refill, deductible does not apply.
Brand-name Formulary	\$30 copayment per prescription or refill, deductible does not apply.	\$30 copayment per prescription or refill, deductible does not apply.
Brand-name Non-Formulary	30% copayment per prescription or refill, deductible does not apply. The maximum copayment per one-month supply is \$150.	30% copayment per prescription or refill, deductible does not apply. The maximum copayment per one-month supply is \$150.

Mail Order Prescription Drug Benefits Inside of the U.S.	Participating Mail Order Pharmacy Three-month supply	Non-Participating Mail Order Pharmacy Three-month supply
Generic	\$30 copayment per prescription or refill, deductible does not apply.	
Brand-name Formulary	\$90 copayment per prescription or refill, deductible does not apply.	Not Covered
Brand-name Non-Formulary	30% copayment per prescription or refill, deductible does not apply. The maximum copayment per three-month supply is \$450.	

» Use your telehealth benefits

The work you do is important, and to do it well, you need to be healthy and happy. You have easy-to-use benefits – wherever you are in the world, including your telehealth benefits.

Telehealth lets you conveniently access health care and counseling via computer, smartphone or tablet 24/7 and is a good solution to getting a diagnosis and treatment plan for common illnesses, such as:

- Flu.
- Stress, anxiety and other emotional support.
- Skin conditions.
- Allergies.

All telehealth providers are board certified, just like the doctors you see in person. A telehealth doctor can even order prescriptions for you.

Employee Assistance Program

Your benefits also include five Employee Assistance Program sessions per issue per year that you can access via computer, smartphone or tablet. These programs are designed to help you and your family cope with the challenges and demands of your unique life and work. To access your EAP, visit **ConcordiaPlans.org > Members > International Workers**.



To access your telehealth

app to your phone.2. Create a profile.

4. You're good to go!

1. Dowload the Global TeleMD

benefits:

3. Log in.

Click here to learn more about these benefits.

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» Your disability benefits are changing

Disability Benefits are provided by your employer through the Concordia Disability and Survivor Plan. These income replacement benefits may be available to you if you are unable to work because of sickness, injury or due to pregnancy. Disability benefits replace approximately 70% of your monthly income (this estimate does not factor in taxes, benefit withholdings or the elimination period), as well as provides you continued participation in the CDSP, CRP pension, and, if enrolled, the Concordia Health Plan. You can see your projected benefit amount at **ConcordiaPlans.** org/MemberPortal and by viewing your Personal Statement of Benefits.

UPDATE: Beginning Jan. 1, 2024, the disability benefits you are automatically enrolled in will be changing for members with a date of disability that begins on or after Jan. 1, 2024*.

Effective Jan. 1, 2024

Elimination Period – Amount of time between when disability begins and when disability benefit payments begin.

- Short Term disability: Seven calendar days (Payment would begin on the eighth day).
- Long Term disability: Six months.

Healthcare Coverage (for those enrolled in the CHP)

- Members and all enrolled dependents will continue coverage in the CHP with contributions waived beginning at the fourth month.
- Members receive assistance to transition to other health coverage for themselves and dependents beginning the first Jan. 1 following the seventh month of disability (free of charge).
- A stipend of \$1,500 is offered each month the member and dependents are covered under other healthcare up to 30 months.
- Members receive assistance to transition to Medicare at the 30th month of disability. For disabled members who are also enrolled in the CHP, premiums are paid by your employer for the first three months of disability, after which time the CDSP begins making your CHP premium payments instead of your employer.

^{*}Doesn't impact anyone with a date of disability prior to Jan. 1, 2024

» Financial wellness solutions

The foundation for good financial health is preparing for the unexpected, managing and eliminating debt, as well as saving for the future – particularly reaching financial readiness for retirement. Concordia Plans helps by offering retirement options (pension* and 403(b)), disability, life insurance and general financial planning, as well as financial educators to help guide you to better financial health. Learn more about these solutions at **ConcordiaPlans.org**.



Concordia Retirement Plan Pension* benefits are fully funded by your employer and may provide you with a monthly income benefit in retirement for life! The benefit amount is based on your salary, length of service. Visit **ConcordiaPlans.org/Pension**.





Concordia Retirement Savings Plan 403(b)* provides tax advantages to help you take a proactive approach to retirement. Build off your CRP pension income by saving in the CRSP (if eligible). You can also consolidate retirement savings from other employers, so your savings are all in one place. Visit **ConcordiaPlans.org/CRSP**.





Concordia Disability and Survivor Plan benefits may be available to you if you become unable to work because of sickness, injury or due to pregnancy. Disability benefits replace a portion of your lost income. Visit **ConcordiaPlans.org/Disability**.





Basic Life Benefits are provided by your employer and worth at least two times your annual compensation. Visit your Personal Statement of Benefits at **ConcordiaPlans.org/MemberPortal** to see your benefit amount.





Supplemental Life Insurance is available for purchase at discounted rates through Securian. It can be hard to determine how much life insurance will meet your family's needs. Visit our new online tools at **Securian.com/concordiaplans-life-insurance** to calculate the level of coverage you may need and view rates (based on your age as of the beginning of the next calendar year).





Accidental Death and Dismemberment Insurance pays a benefit if you or a covered family member dies or is seriously injured as the result of an accident. These benefits are available through Securian. Visit **Securian.com/concordiaplans-life-insurance**.





Financial Educators are available to help with a variety of financial topics. They can help you create a plan to reach your financial goals. Email **MoneyMatters@ ConcordiaPlans.org** for a free one-on-one consultation.

*If eligible

» 403(b) retirement savings plan

Great news! Your employer wants you to be prepared for retirement, so you have been automatically enrolled in the Concordia Retirement Savings Plan 403(b). In addition, your employer will be matching a portion of your contributions up to 2% of your compensation. The money you are saving in the CRSP will help you cover your expenses in retirement.

Want to learn more about saving for retirement? Email our Financial Wellness Educators at **MoneyMatters@ ConcordiaPlans.org**. They would love to help!

If you want to change your savings amount or opt out of the CRSP 403(b), contact Kathy Milner at **Kathy.Milner@lcms.org** or Jennifer Britton at **Jennifer.Britton@lcms.org**.

» Supplemental Life Insurance

While the Concordia Disability & Survivor Plan offers workers a life insurance benefit, it may not be enough to meet your – and your family's – needs. To fill the gap between what you have and what you may need, we offer supplemental life insurance through Securian. This coverage is available at low-cost group rates for you – and your family.*

Age	Worker non-nicotine	Worker nicotine user	Spouse non-nicotine	Spouse nicotine user
Under 25	\$0.035	\$0.061	\$0.045	\$0.079
25-29	\$0.042	\$0.074	\$0.054	\$0.095
30-34	\$0.056	\$0.098	\$0.072	\$0.126
35-39	\$0.063	\$0.110	\$0.081	\$0.142
40-44	\$0.070	\$0.123	\$0.090	\$0.158
45-49	\$0.105	\$0.184	\$0.135	\$0.236
50-54	\$0.161	\$0.282	\$0.207	\$0.362
55-59	\$0.301	\$0.527	\$0.387	\$0.677
60-64	\$0.462	\$0.809	\$0.594	\$1.040
65-69	\$0.889	\$1.556	\$1.143	\$2.000
70 & Over	\$1.442	\$2.524	\$1.854	\$3.245

Rates listed are per month, per \$1,000 of coverage.

Coverage for your dependent children is available for a very low monthly cost:

Coverage	Monthly Payment
\$5,000	\$0.50
\$10,000	\$1.00

Supplemental life coverage may be among the benefits you can elect. Monthly premiums will be payroll deducted.

^{*}If eligible

» Accidental Death & Dismemberment

Accidental Death & Dismemberment coverage pays you if you or a covered family member dies or is seriously injured as the result of an accident. You can elect coverage of between \$25,000 and \$100,000 for just yourself or for yourself and your family.

AD&D Benefits		
Type of Loss	Percentage of Benefits Payable	
Life	100%	
Both hands or both feet	100%	
Sight in both eyes	100%	
Speech and hearing	100%	
One hand and one foot	100%	
One foot and sight of one eye	100%	
One hand and sight of one eye	100%	
Quadriplegia	100%	
Paraplegia	75%	
Sight of one eye	50%	
Speech or hearing	50%	
One hand or one foot	50%	
Hemiplegia	50%	

When Family Coverage is elected:

- If there are no dependent children, spouse's coverage is 50% of the amount of coverage selected by the worker.
- If there are dependent children, the spouse's coverage is 40% of the amount of coverage selected by the worker and each child has coverage equal to 10% of the worker's amount.
- If only dependent children are covered, each child has coverage equal to 15% of the worker's amount.

AD&D Monthly Costs		
Amount of Coverage	Individual Coverage	Family Coverage
\$25,000	\$0.65	\$0.95
\$50,000	\$1.30	\$1.90
\$75,000	\$1.95	\$2.85
\$100,000	\$2.60	\$3.80

AD&D coverage will be among the benefits you can elect. Monthly premiums will be payroll deducted.



CONCORDIA PLANS IS HERE FOR YOU!

For assistance with your Member Portal registration or choosing your benefits, contact Customer Care at **info@ConcordiaPlans.org**.

For GeoBlue benefit questions, contact a Health & Wellness representative: Pam Niemeier at Pam.Niemeier@ConcordiaPlans.org, Lekisha Pickens at Lekisha.Pickens@ConcordiaPlans.org, Kelli Eames at Kelli.Eames@ConcordiaPlans.org or Lauren Ross at Lauren.Ross@ConcordiaPlans.org.

» Things you need to know

Summary of Benefits and Coverage

In accordance with the Affordable Care Act, you'll receive an SBC specific to the CHP option offered to you by your employer.



CHIPRA

In accordance with the Children's Health Insurance Program Reauthorization Act of 2009, employers are required to provide notification each year to employees who reside in a state that provides a premium assistance subsidy to low-income children and their families to help pay for employer-sponsored health coverage. A copy of this notice is available at **ConcordiaPlans.org/OpenEnrollment**

HIPAA

The Health Insurance Portability and Accountability Act of 1996 requires that every three years you are informed of the availability of the HIPAA Notice of Privacy Practices. A copy of the HIPAA Notice of Privacy Practices for Concordia Plans can be found at **ConcordiaPlans.org/legal-notices/hipaa-privacy-notice**. You may also request that a copy be mailed to you by calling 888-927-7526.

Women's Health and Cancer Rights Act

The CHP provides coverage for mastectomy-related services, including reconstruction of the breast on which a mastectomy is performed; surgery and reconstruction of the other breast for symmetrical appearance; and prosthesis and treatment of physical complications at all stages of the mastectomy, including lymphedemas. (Annual notification is required by the Women's Health and Cancer Rights Act of 1998.) For more information, call Concordia Plans at 800-927-7526.

