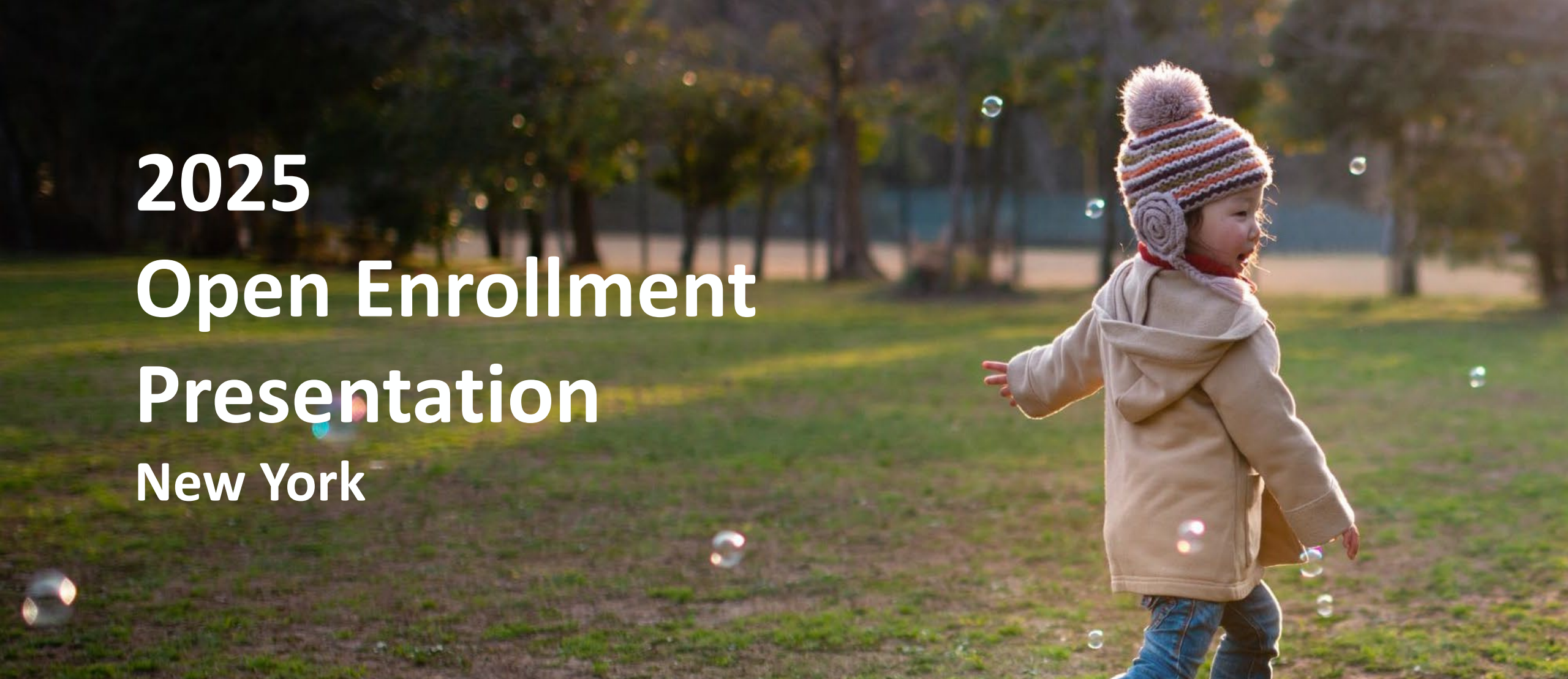


A young child, seen from the side, is running across a grassy park. The child is wearing a light-colored hooded jacket, blue jeans, and a colorful striped knit hat with a pom-pom and earflaps. Several bubbles are floating in the air around the child. The background shows trees and a fence, suggesting a park setting.

2025 Open Enrollment Presentation New York

WRNSSTUDIO

Today's Agenda

1. Open Enrollment Details
2. Benefits Program Overview
3. Resources

Timeline

Open Enrollment Dates

Begins
10/30/2024



Ends
11/15/2024

Benefits Effective

Begins
01/01/2025



Ends
12/31/2025

Eligibility



Who is Eligible?

Employees

Full-time employees who work at least 30 hours per week are eligible for benefits.

Eligibility begins the 1st of the month following the date of hire.

Eligible dependents

- Your legal spouse or domestic partner; or
- Your dependent children, including your step-children and legally adopted children up to age 26; or
- A child which includes your natural child, adopted child, child placed with you for adoption, stepchild, domestic partner's child, or a child for whom you, your spouse, or Domestic Partner are the legal guardian; or
- Any dependent child who reaches the age limit and is incapable of self-support because of a mental or physical disability.
- **Note:** Parents, siblings and their children are not eligible dependents.
- Contributions made towards a Domestic Partners' coverage are subject to taxation

How to Enroll

Login to your Employee Navigator
portal at:

<https://www.employeenavigator.com/>

During Open Enrollment

You can elect, change, and/or waive coverage for:

Plan	Elect	Change	Waive
Medical	Y	Y	Y
Dental	Y	Y	Y
Vision	Y	Y	Y
FSA /HSA* / Commuter*	Y	Y	Y
Term Life Insurance w/ Long Term Care	Y	Y	Y

*Contribution changes can be year-round for HSA and Commuter Benefits.

Please note you cannot be enrolled in both the HSA and Health Care FSA plan. You will need to enroll in the Limited Purpose FSA if you enroll in the HDHP.

Benefits Program Summary

Plan	Carrier
Medical	Cigna
Dental	Cigna
Vision	Cigna
Life and AD&D	The Standard
LTD and STD	The Standard
FSA and Commuter	Navia Benefits
HSA Admin	Sterling
Life Ins w/Long Term Care	Chubb

What's new?

- Core Benefit Carriers are staying the same!
- Life and AD&D and Disability (LTD & STD) are moving from back to The Standard from Lincoln Financial Group.
- Per IRS Guidelines, HDHP Individual within a Family Tier is increasing from \$3,200 to \$3,300.
- HSA Contribution Maximum for 2025 calendar year is increasing to \$4,300 for Individual and \$8,550 for Family.
- FSA Contributions are projected to be \$3,300 for Medical with a \$660 maximum rollover limit. Dependent care is projected to stay at \$5,000.
- FSA Commuter Contributions are projected to be \$325 for Parking & Transit.

2025 Employee Monthly Contributions

WRNS Studio will continue to contribute 80% of the premium cost for employees and their dependents for medical, dental (base plan) and vision. If you wish to elect the dental buy-up plan, you will be responsible for the cost difference between the dental base plan and buy-up plan. Please log in to your Employee Navigator portal to view your exact monthly dollar costs.

WRNS Studio will contribute \$1,000 for individual and \$2,000 for family into your HSA account for the 2025 plan year. Please note, you must be enrolled in the groups HDHP to participate in an HSA.

WRNS Studio will pay 100% of the Group Life, STD and LTD for the Employee only. Employees will pay 100% of the premium for the Term Life Plan w/ Long Term Care and all FSA contributions.

Plan Options for 2023	
Medical	FSA
Cigna HSA	Health Care; Limited Purpose Health Care
Cigna OAP PPO	Dependent Care
Dental	Life Ins w/Long Term Care
Cigna (Base and Buy-Up)	Chubb
Vision	
Cigna Vision	
Group Life, STD and LTD	
The Standard	

2025 Employee Monthly Contributions

Plan	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Employee + Family
Medical				
Cigna OAP PPO	\$239.34	\$502.64	\$454.75	\$718.05
Cigna HSA HDHP	\$183.47	\$385.30	\$348.58	\$550.40
Dental				
Cigna Base	\$9.12	\$18.52	\$22.91	\$34.42
Cigna Buy-Up	\$24.16	\$49.06	\$60.71	\$91.21
Vision				
Cigna Vision	\$1.40	\$2.81	\$2.84	\$4.53

Medical Plans



Health Insurance 101

Deductible	Copayment	Co-Insurance	Out-of-Pocket Maximum
This is the amount that you will have to pay before your insurance coverage kicks in. In many plans, doctor's visits and annual testing, such as mammograms, do not apply toward the deductible. Read the plan description carefully to find out more.	This is the amount that you must pay for certain services, such as doctor's visits, lab work, urgent care, or emergency room services.	Coinsurance is the out-of-pocket amount you will pay after your deductible. For example, a plan with 80/20 coinsurance will require you to pay for 20% of all incurred medical costs once your deductible is met. This will continue until you reach the maximum out-of-pocket costs as defined in the plan.	Most plans have an annual out-of-pocket limit, which is the maximum amount you will have to pay during the plan year. Once you reach that limit you will no longer need to pay co-insurance costs.

PPO Plans - Cigna

A preferred provider organization (PPO) plan is a network of physicians, specialists, and hospitals that contract with an insurance carrier. PPO plans allow for referral-free access to a broader choice of physicians and specialists.

PPO plans allow individuals to seek care from non-contracted providers at a higher cost.

PPO Key Features

- In and out-of-network coverage
- After the deductible is met coinsurance will apply
- The deductible is waived for preventive care
- Nationwide coverage
- Self-refer to specialist

Cigna Medical PPO and HDHP

	Cigna OAP PPO		Cigna HDHP PPO w/ HSA	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible - Single	\$250	\$500	\$2,800	\$5,400
Deductible - Family	\$500	\$1,000	\$5,200 (\$3,300 Ind. Within a Fam)	\$10,400 (\$5,400 Ind. Within a Fam)
Out-of-Pocket Max - Single	\$3,500 per member	\$7,000 per member	\$4,000 per member	\$8,000 per member
Out-of-Pocket Max - Family	\$7,000 per family	\$14,000 per family	\$8,000 (\$4,000 Ind. Within a Fam)	\$16,000 (\$8,000 Ind. Within a Fam)
Office Visit (PCP / Specialist)	\$30 per visit (no deductible)	\$30% coinsurance (after deductible)	20% coinsurance	40% coinsurance
Emergency Visit	\$250 per visit (waived if admitted)		20% coinsurance	
MRI/CT/PET	10% coinsurance	30% coinsurance	20% coinsurance	40% coinsurance
Inpatient Hospital	10% coinsurance	30% coinsurance	20% coinsurance	40% coinsurance
Prescription Drugs				
	Subject to the annual deductibles (single/family)			
30-day supply (Retail) 90-day supply (Mail Order)	Retail / Mail Order	Retail Only	Retail / Mail Order	n/a
Tier 1 - Generic	\$10 / \$25	Copay + 50% coinsurance (no deductible)	\$10 / \$25	Not covered
Tier 2 – Preferred	\$25 / \$63	Copay + 50% coinsurance (no deductible)	\$30 / \$75	Not covered
Tier 3 – Non-preferred Brand	\$45 / \$113	Copay + 50% coinsurance (no deductible)	\$50 / \$125	Not covered

Cigna Resources

Digital Engagement Apps and Activities	myCigna.com Website and App	My Health Assistant
Apps and Activities is a new tool on myCigna.com that puts the power to improve your health right at your fingertips. Get personal recommendations, track your progress, and have fun challenging others. Best of all, you can see and do it all in one place.	• Manage and track claims • View, fax, or email ID card information • Find providers and compare cost and quality information • Review your coverage • Track your account balances and deductibles • Submit receipts for reimbursement • Find pharmacies, view medication cost based on your plan, and choose lower-cost alternatives	Take advantage of our personal services to help you with your personal health needs. A Cigna case manager, trained as a nurse, can work closely with you and your doctor to check on your progress. You can get help with conditions and illnesses, such as cancer and end-stage renal disease, as well as with neonatal care and pain management. Enroll online today. Go to myCigna.com > Wellness > Health Assistant
www.mycigna.com	www.mycigna.com	www.mycigna.com

Cigna Resources

Emotional Well Being Resources	Healthy Rewards Discount Program	MDLive
• iPrevail: Get mental health support with a focus on resilience that includes virtual coaching and peer support • Happify: Improve happiness with evidence-based programs on mindfulness, positive psychology, and cognitive behavioral therapy	• Get discounts on the health products and programs you use every day: • Weight management and nutrition • Fitness • Mind/body • Vision and hearing care • Alternative medicine • Healthy lifestyle • Use your ID card when you pay to get your discount	• Access board-certified doctors, psychiatrists, dermatologists and licensed therapists • Get virtual urgent care 24/7/365 – even on weekends and holidays with MDLIVE • Access virtual primary care for preventive care, routine care and specialist referrals • Access dermatologists⁸ for fast, customized care for skin, hair and nail conditions – no appointment required • Schedule an online virtual behavioral health appointment in minutes through MDLIVE • Have a prescription sent directly to your local pharmacy if appropriate
happify.com/Cigna myCigna.com	800.870.3470	www.mycigna.com 888.726.3171

HSA Overview

An HSA is a savings account that can only be used for qualified healthcare expenses. You must be enrolled in a High Deductible Health Plan to be eligible for an HSA.



2025 HSA Employer Contributions and Administration Fees

WRNS Studio provides eligible employees enrolling in the HDHP medical plan the following contributions:

Health Savings Account Key Features

- \$83.33/month
 - Employee Enrolling Alone (full amount funded in January)
- \$166.67/month
 - Employee Enrolling with Dependents (full amount funded in January)
- Employees are responsible for paying the Sterling HSA administration fees
 - \$2.50 per month

HSA Basics

An HSA is a personal bank account that allows you to use pre-tax dollars to pay for healthcare services and qualified medical expenses. You can use your HSA to save money on healthcare expenses or pay out-of-pocket if you prefer.

Once you have an HSA, the account and any contributions are yours, even if you no longer have HSA-compatible coverage.*

- Annual contributions will roll over into the following plan year
- You can also save your HSA funds and use them for healthcare-related expenses in retirement
- HSA funds earn interest and can be invested in a mutual fund portfolio
- The account is portable
- You can use your HSA account for non-qualified expenses, but funds will be subject to a 20% tax

*You must be enrolled in a High deductible health plan to set up an HSA

HSA Eligibility

You are not eligible to make HSA contributions if:

You have other disqualifying health coverage
(including spouse enrollment in a general-purpose FSA).

*includes if married filing separately

FSA

You are enrolled in Medicare.



You are eligible to be claimed as a dependent on someone else's
current year tax return.



Special rules apply if you have received health benefits from
Veterans Affairs or Indian Health Services.



Advantages of an HSA

[illegible]

2025 HSA Contributions

Annual IRS Limit \$4,300 total		Additional “catch-up” contributions for ages 55-65
Single	Your employer and you can contribute up to \$4,300 per year	
Annual IRS Limit \$8,550 total		\$1,000
Family	Your employer and you can contribute up to \$8,550 per year	

Dental and Vision



Dental Benefit Overview - Cigna

Plan Features	Cigna Base Plan (In-Network)	Cigna Buy-Up Plan (In-Network)
Deductible – Individual / Family	\$50 / \$150	\$25 / \$50
Preventive care	Covered at 100%; No Deductible	Covered at 100%; No Deductible
Basic services	Covered at 80%	Covered at 90%
Major services	Covered at 50%	Covered at 60%
Calendar Year Benefit Maximum	\$1,500	\$5,000
Orthodontia	Covered at 50% (Children Only)	Covered at 50% (Children and Adults)
Orthodontia Lifetime Maximum	\$1,000	\$5,000
UCR Reimbursement Level*	90 th Percentile	95 th Percentile

*Out-of-Network Benefits are available and will be based on the UCR Reimbursement levels. This is the amount paid for a dental service in a geographic area based on what providers in the area usually charge for the same or similar dental service. The UCR amount sometimes is used to determine the allowed amount.

Vision Benefit Overview – Cigna (EyeMed)

Plan Features	Cigna (EyeMed)
Frequency	Exams: Once per 12 months / Lenses: One Pair per 12 months / Frames: One Pair per 24 months
Eye Exam	\$10 copay
Lenses	\$10 copay
Frames	\$200 allowance + 20% discount on the remaining balance
Allowance for elective contacts	\$200 allowance
Allowance for medically necessary contacts	Covered 100%
Extra savings	Glasses and Sunglasses • 20% off any item not covered by the plan, including non-prescription sunglasses, but excluding professional services Frames and Lenses • Up to 40% off additional complete pairs of glasses (frame and lenses)

Out-of-Network Benefits are available. Please review your Benefit Summary for more details.

Digital ID Cards

Enjoy easy, secure access to your ID cards.

No longer worry about misplacing your ID. Simply log in to the myCigna® mobile app or website to view your digital ID card.¹

Getting your digital ID card is easy!

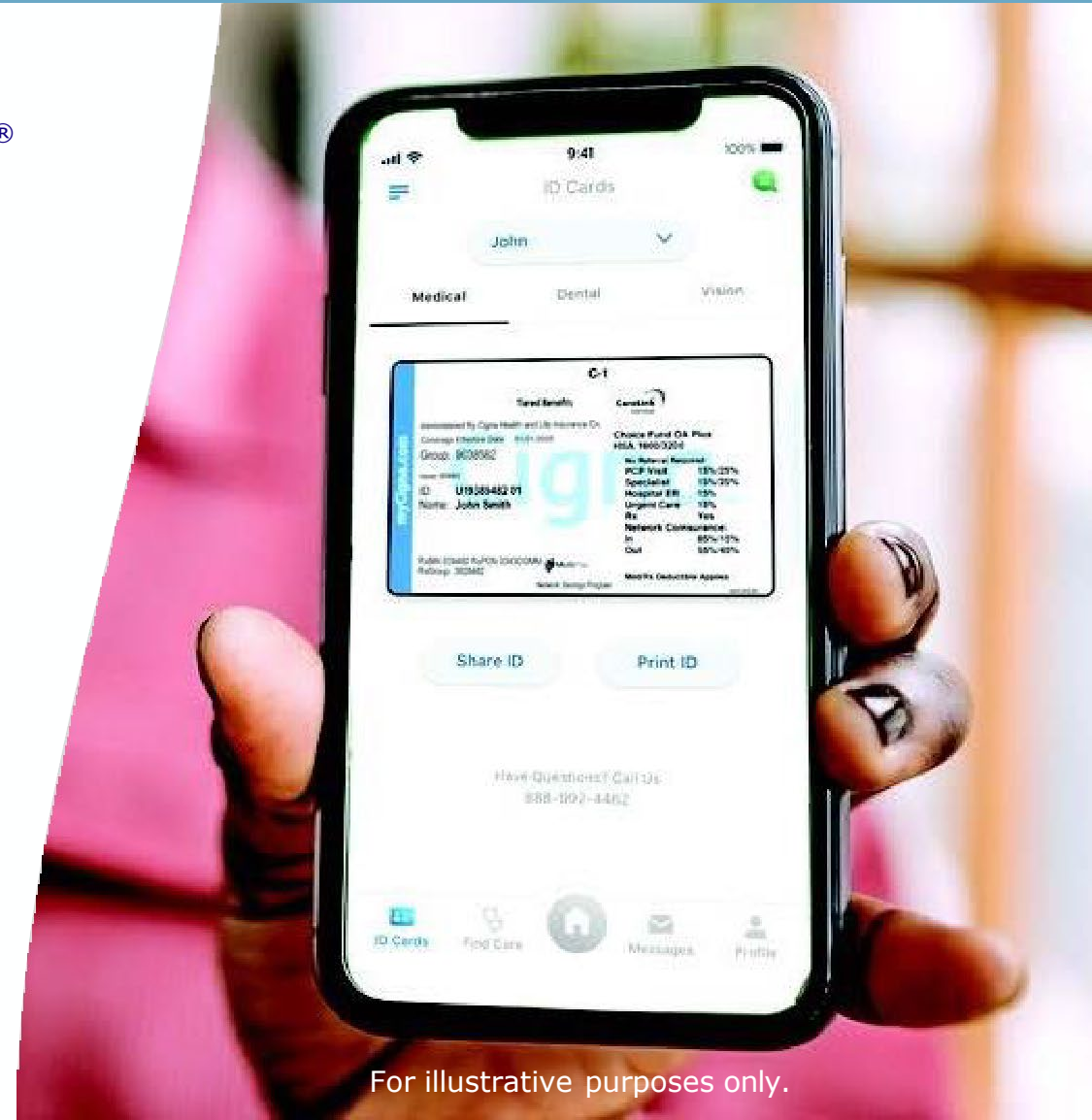
- Log in to myCigna® website or app.
- Click or tap “ID Cards.”
- View your card(s) and the cards of any dependents.²

You can **show** your digital ID card on your phone screen, **print** it or **email** it to your doctor’s office.

1. The transition to digital ID cards does not apply to the following: all insured medical clients situated in Texas, New York, Florida, and Colorado (ASO will be included); all medical clients situated in Minnesota regardless of funding type; all D-HMO plans situated in Texas; all D-HMO and D-PPO plans situated in Georgia and Minnesota; all vision plans situated in Georgia, Minnesota, and Texas. Clients with situs in Texas, North Carolina, New York, Tennessee, Colorado, Georgia, and Florida will transition beginning with 7/1/2023 new and renewal effective dates unless prohibited by a state mandate.
2. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.



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For illustrative purposes only.

Life & AD&D and Disability



Life and AD&D – The Standard

- Basic Life: 1x annual salary (\$250,000 maximum)
- AD&D: 1x annual salary (\$250,000 maximum)
- Age reductions apply
- 100% employer-paid benefit

Disability Insurance – The Standard

Help protect your income & family

100% employer-paid benefit

	SHORT TERM DISABILITY (STD)	LONGTERM DISABILITY (LTD)
Waiting Period	7 days	180 days
Maximum Benefit Duration	173 days	Reducing Benefit Duration (SSNRA)*
Benefit Percentage	60%	60%
Max Benefit	\$2,769 / week	\$12,000 / month

*See benefit summary for full details

Term Life Insurance w/ Long Term Care - Chubb

Employees:

- \$50,000 Guarantee Issue Underwriting (for new hires)
- \$100,000 Conditional Guarantee Issue underwriting
- Long Term Care Benefit would be 4% of the death benefit, per month, for up to 75 months

Spouses:

- \$50,000 Conditional Guarantee Issue underwriting
 - 3 health underwriting questions
- Long Term Care Benefit would be 4% of the death benefit, per month, for up to 75 months

Long Term Care Benefit - Chubb

Benefits:

- Term Life protection to age 121
- Guaranteed Portability & Continuation of Coverage
- Base Life insurance premium guaranteed level for life

LTC Benefits include:

Home Health Care, Assisted Living, Adult Day Care, Nursing Home Care, Acceleration for Terminal Illness

Employees:

- \$50,000 Guarantee Issue Underwriting (for new hires)
- \$100,000 Conditional Guarantee Issue Underwriting

Spouses:

- \$50,000 Conditional Guarantee Issue Underwriting
 - 3 health underwriting questions

Child Coverage: Age 15 days through 25 years

- Up to \$25,000 Guaranteed Issue

Issue Age 71-80:

- Employee up to \$50,000 simplified issue underwriting

FSA & Commuter Tax-Advantaged Benefits



Flexible Spending Accounts (FSA) – Navia Benefit Solutions

An FSA is an IRS Code Section 125 benefit that allows employees to set aside a specific pre-tax dollar amount for unreimbursed medical, dental, vision, and dependent care expenses.

FSA plan year

- January 1, 2025 – December 31, 2025
- You may roll \$660* or less over to the next plan year
- Rollover amounts do not count towards the following year's contribution limit
- Claim Submission: You have until March 31, 2026 (or 90 days following the end of the calendar year) to submit expenses for reimbursement that were incurred during your plan year
- Healthcare FSA Annual Limit: \$3,300*
- Limited Purpose FSA Annual Limit: \$3,300*
- Dependent Care FSA Annual Limit: \$5,000 per household

**Estimated amount; the IRS will announce actual amount in Nov. 2024.*

FSA Eligible Expenses

Healthcare FSA	Dependent Care FSA
• Acupuncture • Chiropractic services • Bandages • Coinsurance and copays • Corrective/laser eye surgery • Deductibles • Eye exams • Flu vaccine • Glasses (prescription) • Orthodontia • Massage therapy • Prescription medication • Over the counter drugs and medications and menstrual supplies • PPE	• Au pair • Babysitter • Before and after school care • Day camps • Elder care (letter of medical necessity may be needed) • Nanny • Overnight care • Preschool, nursery school/pre-Kindergarten

Non-Eligible Expenses

Healthcare FSA

- Cosmetic surgery and procedures, including teeth whitening
- Hers, vitamins, and supplements used for general health
- Insurance premiums
- Family or marriage counseling
- Personal use items such as toothpaste, shaving cream, and makeup
- Prescription drugs imported from another country

Dependent Care FSA

- Education or tuition fees
- Expenses for children ages 13 and older
- Late payment fees
- Overnight camps
- Virtual camps
- Payment for services not yet provided (advance payments)
- Field trips, clothing, and food
- Transportation to and from the dependent care provider
- Money paid to your spouse, your child under 19, a parent of your child who is not your spouse, or a dependent where you or your spouse are receiving a personal tax exemption

Commuter FSA Benefits – Navia Benefit Solutions

A Commuter Account is a pre-tax benefit account used to pay for public transit and parking as part of your daily commute to work.

Commuter Key Features

- Month-to-month benefit: opt in or out at any time
- Balance rolls over at the end of each month
- **Transit:** train, subway, light rail, bus, ferry, LyftLine and UberPool
- **Parking:** parking at or near your place of work or at a location near where you take public transportation to get to work

Monthly Limits

Transit Monthly Limit –
up to \$325*

Parking Monthly Limit –
up to \$325*

**Estimated amount; the IRS will announce actual amount in Nov. 2024.*

Support for Mental Health and Wellness

Help is available when you need it most.

You deserve care that supports your total health—mind, body, and spirit. If you struggle with depression, anxiety, addiction, or other mental or emotional issues that interfere with your daily life, you can get help through your medical plan.



Employee Assistance Program – The Standard

WRNS Studio commitment doesn't end when your workday does. Maintaining a healthy balance between work and the rest of your life can make a big difference for your overall well-being. Your benefits investment includes plenty of options to help. Support is available 24/7!

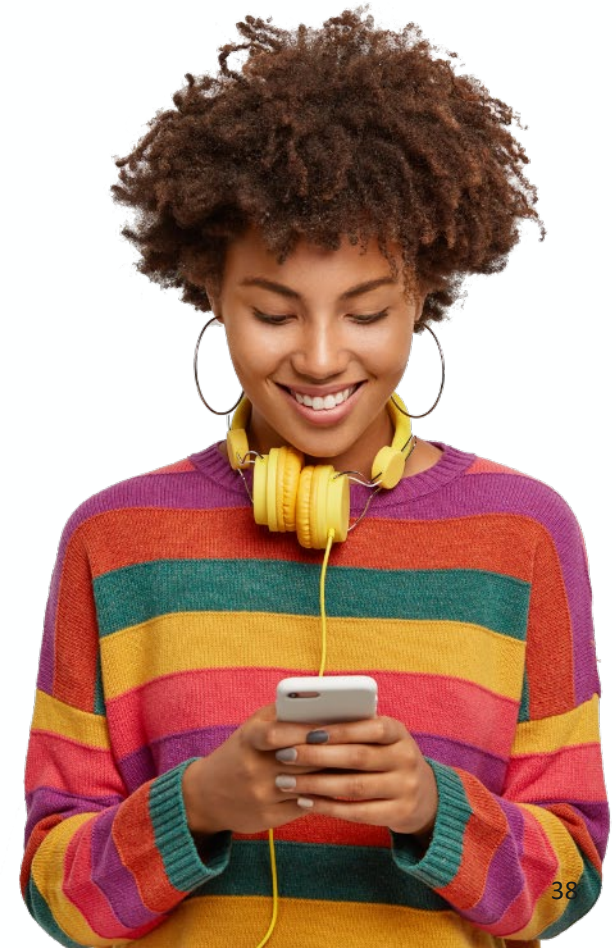
When going through a difficult time, having someone to talk to can make a big difference in your state of mind. You and your loved ones have access to confidential counseling from trained counselors for:

- Family; Parenting; Addictions; Emotional Support; Legal; Financial; Relationships; and Stress, Depression, grief, loss, and emotional well-being

Benefit: You and your loved ones can connect with trained counselors. Sessions are confidential.

Financial services, legal services, and work-life services are available 24 hours a day, 7 days a week.

- Call 888-293-6948
- Access online at: healthadvocate.com/standard3



Newfront Answers

We're here when you need us

Newfront Answers gives you and your enrolled dependents access to a dedicated team of individuals to answer your benefits-related questions. Our highly-trained team is ready to guide you through your enrollment process, answer any questions, assist with life events, and more!

We can help with:

- Benefits plan reviews
- Claims review and eligibility
- Prescription assistance
- Qualifying life events
- Expedited enrollment
- Provider search
- HSA



5 am – 8 pm PST M-F

866.653.4190

wrns@answers.newfront.com

Takeaways

- Open Enrollment starts November 1, 2023, and ends November 15, 2023.
- Log in to your Employee Navigator portal for full plan details and payroll deduction amounts
- Open enrollment is Passive, except for FSA and HSA enrollments
- New coverage starts on January 1, 2024
- Contact shaun.dubrow@newfront.com or patrick.hennon@newfront.com for questions

Questions?

