



Employee Benefits

December - November
2024 - 2025

Full Time Employees

Welcome to Ski and Snowboard Club Vail (“SSCV”)!

This guide provides a summary of your benefit options and is designed to help you make choices and enroll for coverage.

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IMPORTANT INFORMATION

Affordable Care Act & You

Even though the Affordable Care Act (ACA)’s penalty for not having health coverage (known as the individual mandate) has been reduced to zero, if you are a taxpayer in California, you will still be required to have health coverage (unless you qualify for an exemption) or pay a penalty for the tax year. In addition, several other states, including Massachusetts, New Jersey, Rhode Island and Vermont, as well as the District of Columbia, have reinstated an individual mandate requirement, and others are considering doing so.

You may consider these options below to satisfy this requirement:

- Enroll in a medical plan offered by SSCV or another group medical plan meeting the requirements for minimum essential coverage;
- Purchase coverage through a health insurance marketplace;
- Enroll in coverage through a government-sponsored program if eligible.

However, if you choose to purchase coverage through the marketplace, because SSCV’s medical plans are considered affordable and meet minimum value under the Affordable Care Act, you may not be eligible for a subsidy, and you may not see lower premiums or out-of-pocket costs through the marketplace. In addition, employer contributions to your medical benefits will be lost and your portion of medical premiums will no longer be paid via payroll deductions on a pre-tax basis.

Annual Notices

SSCV’s plans are partially arranged by SSCV and governed by its plan rules and documents. Various state and federal laws require that employers provide disclosure and annual notices to their plan participants.

The following is a list of the annual notices:

- Medicare Part D Notice of Creditable Coverage
- Women’s Health and Cancer Rights Act (WHCRA)
- Newborns’ and Mothers’ Health Protection Act
- Special Enrollment Rights
- Medicaid & Children’s Health Insurance Program
- HIPAA Notice of Privacy Practices
- Summary of Benefits and Coverage (SBC)

SSCV distributes annual notices to new-hires, and each year during open enrollment. You may also request a copy by contacting the Human Resources Department or download a copy from the ADP WorkForce Now portal.



For More Information
Go to www.healthcare.gov.

ENROLLMENT INFORMATION

Who May Enroll

If you are a regular full-time employee working at least 30 hours per week for 6 months or more, you and your eligible dependents may participate in SSCV's benefits program. Your eligible dependents include:

- Legally married spouse
- Registered domestic partner
- Children under the age of 26, regardless of student or marital status



When You Can Enroll

As an eligible employee, you may enroll at the following times:

- As a new hire, you may participate in the company's benefits program on the first day of the month following your date of hire
- Each year, during open enrollment
- Within 30 days of a qualifying event as defined by the IRS (see Changes To Enrollment below)

**Benefits Plan Year:
December 1–
November 30**

Paying For Your Coverage

The basic life/AD&D benefits are provided at no cost to you and are paid entirely by SSCV. You and the company share in the cost of the medical benefits you elect. Any dental or vision benefits you elect will be paid by you at discounted group rates. Your medical, dental, and vision contributions are deducted before taxes are withheld, which saves you tax dollars. Paying for benefits before-tax means that your share of the costs are deducted before taxes are determined, resulting in more take-home pay for you. As a result, the IRS requires that your elections remain in effect for the entire year. You cannot drop or change coverage unless you experience a qualifying event.

Changes To Enrollment

Our benefit plans are effective December 1st through November 30th. There is an annual open enrollment period each year, during which you can make new benefit elections for the following December 1st effective date. Once you make your benefit elections, you cannot change them throughout the year unless you experience a qualifying event as defined by the IRS.

Examples include, but are not limited to the following:

- Marriage, divorce, legal separation or annulment
- Birth or adoption of a child
- A qualified medical child support order
- Death of a spouse or child
- A change in your dependent's eligibility status
- Loss of coverage from another health plan
- Change in your residence or workplace (if your benefit options change)
- Loss of coverage through Medicaid or Children's Health Insurance Program (CHIP)
- Becoming eligible for a state's premium assistance program under Medicaid or CHIP

Coverage for a new dependent is not automatic. If you experience a qualifying event, you have 30 days to update your coverage. Please contact the Human Resources Department immediately following a qualifying event to complete the appropriate election forms as needed. If you do not update your coverage within 30 days of the qualifying event, you must wait until the next annual open enrollment period to update your coverage.



Online Carrier Resources

Take advantage of the online resources available through our insurance carriers. You can locate network providers, manage your claims, obtain health and wellness information, and much more! Insurance carrier website addresses are located on page 11 of this guide.

BENEFITS

Medical Insurance

Aetna | PPO Medical Plans

The Aetna Preferred Provider Organization (PPO) plan allows you to direct your own care. You are not limited to the physicians within the network and you may self-refer to specialists. If you receive care from a physician who is a member of the Choice POS II (Open Access) network, a greater percentage of the entire cost will be paid by the insurance plan. You may also obtain services using a non-network provider; however, you will be responsible for the difference between the covered amount and the actual charges and you may be responsible for filing claims.

Plan Differences	Aetna PPO Bronze 5000	Aetna PPO Bronze 3500	Aetna PPO Silver 1500	Aetna PPO Gold 500
Employee Premiums	\$	\$	\$\$	\$\$\$
Out-of-Pocket Costs	\$\$\$	\$\$\$	\$\$	\$
Cost Sharing	Contribution, Copay, Deductible, Coinsurance			
Network Size	★★★	★★★	★★★	★★★
In-Network Benefits	✓	✓	✓	✓
Non-Network Benefits	✓	✓	✓	✓
Access to Providers - Primary Care Physician - Referral for Specialist	Managed by You Not Required Not Required			



Finding a Medical Provider

Go to www.aetna.com. Click on "Find a Doctor". You can either log into your Aetna Navigator, or search as a Guest (employer plans). The plans are under "Aetna Open Access Plans" and "Aetna Choice POS II (Open Access)".

Summary of Benefits and Coverage (SBC)

Health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about your health plan's benefits and coverage, referred to as a Summary of Benefits and Coverage (SBC). This guide is designed to help you understand the medical plan options offered to you by SSCV. Please refer to the SBC and carrier contracts provided by Aetna for additional plan details located in the ADP WorkForce Now portal.



Aetna's Mobile App

If you're an Aetna member, consider downloading Aetna's mobile app for instant access to your health plan details. Aetna's mobile app provides secure member information, anytime, anywhere. Use it to search for a doctor, urgent care center, or facility. The app is convenient, easy-to-use, and free.

Download the Aetna mobile app for free on the Apple iTunes App Store or the Android Market. Please note, you must first register as a member at www.aetna.com.

BENEFITS

Medical Insurance

Plan Name	Aetna PPO Bronze 5000		Aetna PPO Bronze 3500		Aetna PPO Silver 1500	
	Choice POS II	Non-Network	Choice POS II	Non-Network	Choice POS II	Non-Network
Health Benefits						
Lifetime Maximum	Unlimited		Unlimited		Unlimited	
Deductible (Annual)						
- Individual	\$5,000	\$15,000	\$3,500	\$10,500	\$1,500	\$3,000
- Family	\$10,000	\$45,000	\$7,000	\$31,500	\$3,000	\$9,000
Out-of-Pocket Maximum						
- Individual	\$8,150	\$30,000	\$7,500	\$20,500	\$5,500	\$13,000
- Family	\$16,300	\$90,000	\$15,000	\$61,500	\$11,000	\$39,000
Office Visit Copay						
- Preventive Care	No Charge	50% after ded	No Charge	50% after ded	No Charge	50% after ded
- Primary Care Physician	\$35 Copay	50% after ded	\$35 Copay	50% after ded	\$25 Copay	50% after ded
- Specialist Office Visit	\$75 after ded	50% after ded	\$75 after ded	50% after ded	\$75 Copay	50% after ded
- Urgent Care	\$75 Copay	50% after ded	\$75 Copay	50% after ded	\$75 Copay	50% after ded
- Teladoc	No Charge	N/A	No Charge	N/A	No Charge	N/A
Hospitalization						
- Inpatient	\$250 Copay, after ded	50% after ded	\$250 Copay after ded	50% after ded	20% after ded	50% after ded
- Outpatient	\$250 Copay after ded	50% after ded	\$250 Copay after ded	50% after ded	20% after ded	50% after ded
Emergency Services <i>Copay waived if admitted</i>	\$500 after deductible		\$500 after deductible		\$300 + 20% after deductible	
Chiropractic	\$75 after ded	50% after ded	\$75 after ded	50% after ded	\$75 after ded	50% after ded
	60 Visits/Year <i>Combined Physical, Occupational, Speech Therapy & Chiropractic</i>		60 Visits/Year <i>Combined Physical, Occupational, Speech Therapy & Chiropractic</i>		60 Visits/Year <i>Combined Physical, Occupational, Speech Therapy & Chiropractic</i>	
Pharmacy Benefits						
Pharmacy Deductible	None		None		None	
Retail Pharmacy						
- Tier 1a	\$3 Copay	50%	\$3 Copay	50%	\$3 Copay	50%
- Tier 1b	\$10 Copay	50%	\$10 Copay	50%	\$10 Copay	50%
- Tier 2	\$50 after ded	50% after ded	\$50 after ded	50% after ded	\$45 Copay	50%
- Tier 3	\$80 after ded	50% after ded	\$80 after ded	50% after ded	\$75 Copay	50%
- Supply Limit	30 Days	30 Days	30 Days	30 Days	30 Days	30 Days
Mail Order Pharmacy						
- Tier 1a	\$6 Copay	Not Covered	\$6 Copay	Not Covered	\$6 Copay	Not Covered
- Tier 1b	\$20 Copay	Not Covered	\$20 Copay	Not Covered	\$20 Copay	Not Covered
- Tier 2	\$100 after ded	Not Covered	\$100 after ded	Not Covered	\$90 Copay	Not Covered
- Tier 3	\$160 after ded	Not Covered	\$160 after ded	Not Covered	\$150 Copay	Not Covered
- Supply Limit	90 Days	N/A	90 Days	N/A	90 Days	N/A

BENEFITS

Medical Insurance

Plan Name	Aetna PPO Gold 500	
	Choice POS II	Non-Network
Network Name		
Health Benefits		
Lifetime Maximum	Unlimited	
Deductible (Annual)		
- Individual	\$500	\$2,000
- Family	\$1,000	\$6,000
Out-of-Pocket Maximum		
- Individual	\$4,500	\$12,000
- Family	\$9,000	\$36,000
Office Visit Copay		
- Preventive Care	No Charge	50% after ded
- Primary Care Physician	\$25 Copay	50% after ded
- Specialist Office Visit	\$75 Copay	50% after ded
- Urgent Care	\$75 Copay	50% after ded
- Teladoc	No Charge	N/A
Hospitalization		
- Inpatient	20% after ded	50% after ded
- Outpatient	20% after ded	50% after ded
Emergency Services <i>Copay waived if admitted</i>	\$300 + 20% after deductible	
Chiropractic	\$75 Copay after ded	50% after ded
	60 Visits/Year <i>Combined Physical, Occupational, Speech Therapy & Chiropractic</i>	
Pharmacy Benefits		
Pharmacy Deductible	None	
Retail Pharmacy		
- Tier 1a	\$3 Copay	50%
- Tier 1	\$10 Copay	50%
- Tier 2	\$45 Copay	50%
- Tier 3	\$75 Copay	50%
- Supply Limit	30 Days	30 Days
Mail Order Pharmacy		
- Tier 1a	\$6 Copay	Not Covered
- Tier 1	\$20 Copay	Not Covered
- Tier 2	\$90 Copay	Not Covered
- Tier 3	\$150 Copay	Not Covered
- Supply Limit	90 Days	N/A



Educational Video

Benefits terminology can get confusing. Click here to watch a quick video to learn the basics of how our medical plans work.

Deductibles, Copays, Coinsurance, and Out-of-Pocket Maximums

<http://video.burnhambenefits.com/terms/>

Teladoc: The care you need—when you need it

When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of home to sit in a waiting room. Now you don't have to.

Teladoc let you see and talk to a doctor from your mobile device or computer without an appointment. Most visits take about 10-15 minutes and doctors can write a prescription, if needed, that you can pick up at your local pharmacy. This service is part of your health benefits offered through Aetna.

Costs

- **Free for all plans!**

Good For	Not Good For
<ul style="list-style-type: none"> • Colds, fever, and flu • Allergies • Sore Throat • Headache • Stomach Ache • and more! 	<ul style="list-style-type: none"> • Anything that requires a hands-on exam • Anything requiring a test • Cancer or other complex conditions • Chronic conditions • Sprains, broken bones, or injuries requiring bandaging



Accessing Telemedicine

Register today so you'll be ready to use Teladoc services when you need them.

www.teladoc.com/aetna
(855) 835-2362

BENEFITS

Dental Insurance

Guardian | PPO Dental Plan

With the Guardian Preferred Provider Organization (PPO) dental plan, you may visit a PPO dentist and benefit from the negotiated rate or visit a non-network dentist. When you utilize a PPO dentist, your out-of-pocket expenses will be less. You may also obtain services using a non-network dentist; however, you will be responsible for the difference between the covered amount and the actual charges and you may be responsible for filing claims.

Plan Name	Guardian PPO 100% Employee Paid	
	DentalGuard Preferred Network	Non-Network
Network Name		
Dental Benefits		
Calendar Year Maximum	\$2,500	
Deductible (Annual)		
- Individual	\$25	\$25
- Family	\$75	\$75
Preventive (Plan Pays) Exams, X-Rays, Cleanings	100%	100%
Basic Services (Plan Pays) Fillings, Oral Surgery, Endodontics, Periodontics	Deductible, 80%	Deductible, 80%
Major Services (Plan Pays) Crowns, Prosthetics	Deductible, 50%	Deductible, 50%
Orthodontia	Not Covered	



Finding a Dental Provider

Go to www.guardiananytime.com or call (800) 541-7846. Refer to the "PPO DentalGuard Preferred" plan when prompted.

Tips for Using Your Dental Benefits

- 1 Understand your plan.**
 Understanding your dental plan's benefits, including how copays, deductibles, and calendar year maximum benefits work, is key to getting the most value from your plan and avoiding surprises.
- 2 Take advantage of preventive services offered by the plan.**
 The least expensive way to maintain good oral health is to go to your dentist at least twice each year for an exam and cleaning. Regular dentist visits can help prevent serious health problems such as oral diseases and cancers, and going to the dentist is more affordable in the long run for those who are insured and take advantage of every service.
- 3 Ask for a predetermination of benefits.**
 We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300. Predetermination enables you and your dentist to know in advance what the payment will be for any service that may be in question.

BENEFITS

Vision Insurance

Guardian (VSP) | PPO Vision Plan

The Guardian (VSP) vision plan provides professional vision care and high quality lenses and frames through a broad network of optical specialists. You will receive richer benefits if you utilize a network provider. If you utilize a non-network provider, you will be responsible to pay all charges at the time of your appointment and will be required to file an itemized claim with Guardian.

Plan Name	Guardian PPO 100% Employee Paid	
	VSP Network	Non-Network
Vision Benefits		
Copay		
- Examination	\$20 Copay	N/A
- Materials	\$20 Copay	N/A
Examination (Every 12 Months)	100%	\$39 Reimbursement
Lenses (Every 12 Months)		
- Single Vision	No charge after materials copay	\$23 Reimbursement
- Bifocal	No charge after materials copay	\$37 Reimbursement
- Trifocal	No charge after materials copay	\$49 Reimbursement
- Lenticular	No charge after materials copay	\$64 Reimbursement
Frames (Every 24 Months)	\$130 Allowance 20% off remaining balance	\$46 Reimbursement
Contact Lenses (Every 12 Months)	In Lieu of Frames and Lenses	
- Cosmetic / Elective	\$130 Allowance	\$100 Reimbursement
- Medically Necessary	No charge	\$210 Reimbursement
Laser Vision Correction	15% off usual charge 5% off promotional price	Not Covered

Note

VSP has the largest network of private-practice eye care doctors in the industry. VSP's network includes 37,000 access points nationwide. Most of the U.S. population lives within four miles of a VSP provider.



Finding a Vision Provider

Go to www.guardiananytime.com and select the VSP network.

Employee Assistance Program

Guardian | Employee Assistance Program

The Employee Assistance Program (EAP) through Guardian provides you and your household members with free, confidential assistance to help with personal or professional problems that may interfere with work or family responsibilities and obligations. Services are available 24 hours a day, 7 days a week via a toll-free nationwide number. You and your household members can receive up to 3 counseling sessions per person, per problem, per year.



Accessing the EAP

Go to guidanceresources.com (Organization Web ID: Guardian) or you may call (855) 239-0743 to be immediately connected to an EAP counselor.

BENEFITS

Life and AD&D Insurance

Guardian | Basic Life and AD&D Insurance

Life insurance protects your family or other beneficiaries in the event of your death while you are still actively employed with the company. SSCV pays for coverage, offered through Guardian, in the amount of \$15,000. If your death is due to a covered accident or injury, your beneficiary will receive an additional amount through Accidental Death and Dismemberment (AD&D) coverage.



DISCOUNT MARKETPLACE

BenefitHub | Discount Marketplace

Ski & Snowboard Club Vail is pleased to offer you a way to save on a wide range of discounts and perks through our BenefitHub Discount Marketplace. BenefitHub is free, easy-to-use, and offers a full-range of benefits and rewards. Log in to view existing offerings, and watch for additional discounts throughout the year.

Benefits and tools available include:

Discounts

Receive exclusive discounts on a wide array of top brands in categories such as travel, auto, electronics, apparel, entertainment (movies/events), restaurants, health/wellness, beauty/spa, and much more!

Cash Back

Earn cash back on everything you buy from thousands of brands. Simply make your purchases through BenefitHub, and redeem your cash back. It's easy and a great way to save money.

Insurance

Browse additional insurance coverage options such as Pet Insurance, ID Theft Protection, Legal Plans, Auto & Boat Insurance, Home or Renters Insurance, and much more. If elected, you will own these policies and pay directly to the carriers.

Financial Wellness

Tools are available to help you plan for your future, such as student loan refinancing, personal finance tools, budgeting tools, and money transfers.



To Get Started

Go to www.sscv.benefitHub.com and register with your email address. Refer to code "ROMK1E" when prompted.

Use the mobile app to access BenefitHub on the go. The mobile app is available for free through the Apple App or Google Play Store.

ONLINE ENROLLMENT

ADP | WorkForce Now

With the Online Benefits Enrollment portal through ADP, you can access your benefits information whenever it's convenient, from home or any place where you have internet access. Use the ADP portal to enter your benefit choices, for address changes, to modify your personal information and to add/modify your dependent's information. You'll know the data is accurate, because you entered it. Making your annual benefits election is one important use of ADP. You can also use ADP throughout the year to download benefit forms and view benefit statements. Go to the ADP portal to find the SSCV Annual Notices Packet, Summary of Benefits and Coverages (SBCs), carrier documents, company policies, payroll information, and more!

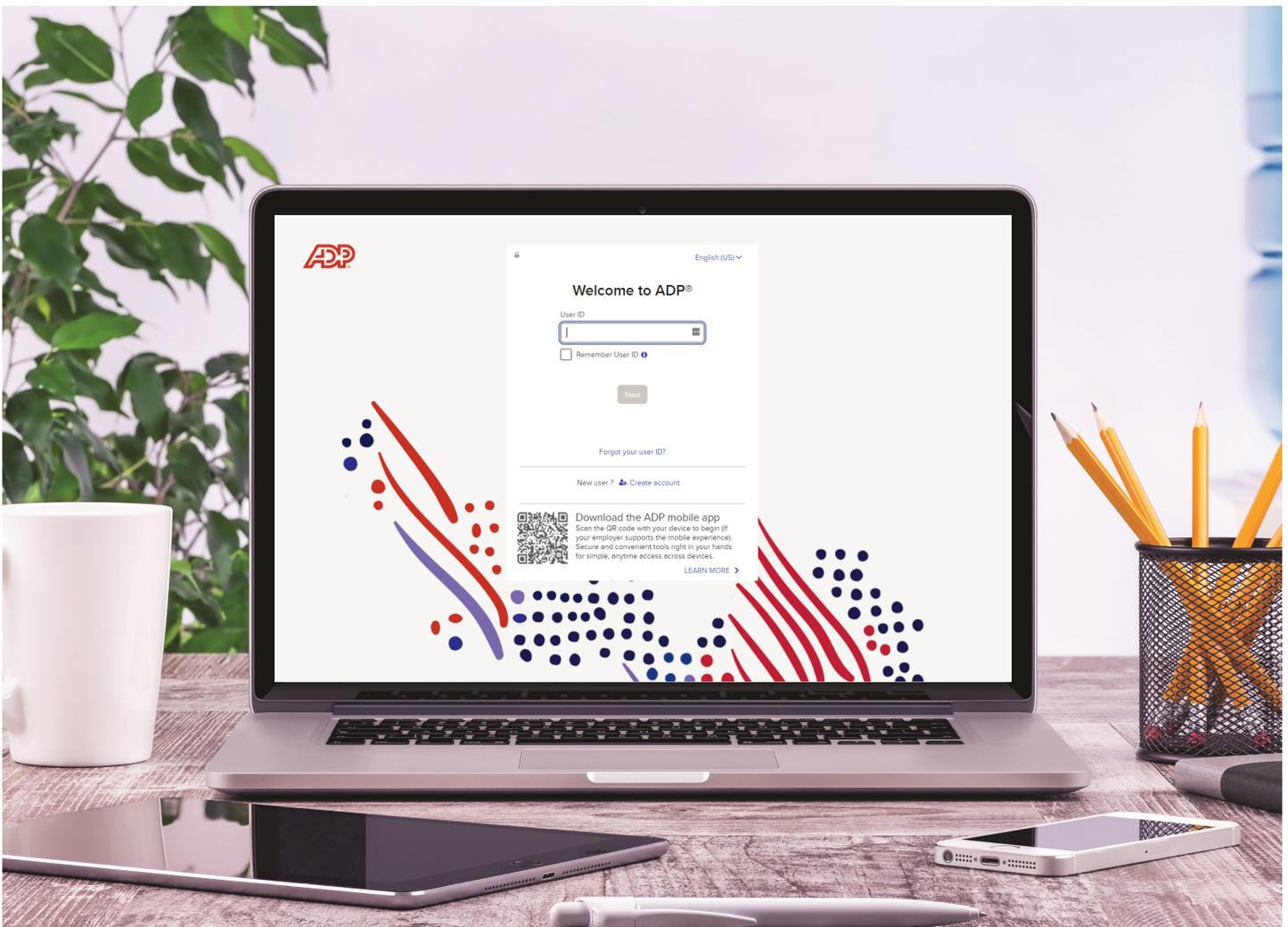


To Enroll or Make Changes to Your Benefits

Log in to www.workforcenow.adp.com. On the home page you'll be asked to enter your User ID and your password.

For first time users, click "Create Account" to register and enter the Registration Code: SSCV-1234

Once you are logged in to the Benefits tab in the ADP portal, follow the prompts for each line of coverage. For a smooth enrollment, be prepared with the date of birth and social security number for each dependent you wish to enroll. Upon completion of your benefit elections, please print out a confirmation statement for your records.



RESOURCES AND CONTACTS

Below is a list of insurance carrier contacts should you require assistance with your benefit questions following open enrollment. If you are unable to resolve your issues or questions with the insurance carriers, please contact Tiffany Hoversten at (970) 790-5127 or thoversten@skiclubvail.org.

Aetna	
Medical	
Member Services	(888) 802-3862
Carrier Website	www.aetna.com
Teladoc	(855) 835-2362
Teladoc Website	www.teladoc.com/aetna
Guardian	
Dental	
Member Services	(800) 541-7846
Carrier Website	www.guardiananytime.com
Vision	
Member Services	(877) 814-8970
Carrier Website	www.guardiananytime.com
Life/AD&D	
Member Services	(800) 627-4200
Carrier Website	www.guardiananytime.com
Employee Assistance Program	
Member Services	(855) 239-0743
Carrier Website	guidanceresources.com <i>Web ID: Guardian</i>

The Burnham Advocate (800) 391-6812

The Burnham Advocate toll-free customer service help-line can provide assistance with insurance related issues when you are unable to resolve them directly with the insurance carriers listed above. With the Burnham Advocate help-line, you will receive fast, skilled assistance with Medical, Dental and Vision provider issues, referral assistance, and claims management.

EMPLOYEE CONTRIBUTIONS

This chart compares the per paycheck contributions for our Employee Benefit plans. Your cost for coverage will vary depending on the option and level of coverage you choose.

SSCV contributes \$375 per month towards all medical plans. For COBRA rates, please refer to the separate COBRA rates flyer.

Medical	Aetna PPO Bronze 5000	Aetna PPO Bronze 3500	Aetna PPO Silver 1500	Aetna PPO Gold 500
Employee Only	\$100.40	\$127.58	\$180.57	\$226.99
Employee + Spouse	\$427.16	\$492.28	\$618.65	\$729.13
Employee + Child(ren)	\$405.65	\$468.28	\$589.81	\$696.07
Employee + Family	\$772.17	\$877.34	\$1,081.18	\$1,259.26

Dental & Vision	Guardian Dental PPO	Guardian VSP Vision
Employee Only	\$25.78	\$4.53
Employee + Spouse	\$52.34	\$7.63
Employee + Child(ren)	\$64.00	\$7.78
Employee + Family	\$96.42	\$12.32

- Basic Life and AD&D are provided to you at no charge and are paid by SSCV.



2211 Michelson Drive, Suite 1200 | Irvine, California 92612
Telephone: (949) 833-2983 | Fax: (949) 833-9549

Learn more at www.burnhambenefits.com

This Employee Benefits Guide provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.

In addition, the plans described in this guide are subject to change without notice. Continuation of any benefit plan or coverage is at the company's discretion and in accordance with federal and state laws. If you need additional information or have any questions about the benefit program, please contact the Human Resources Department.