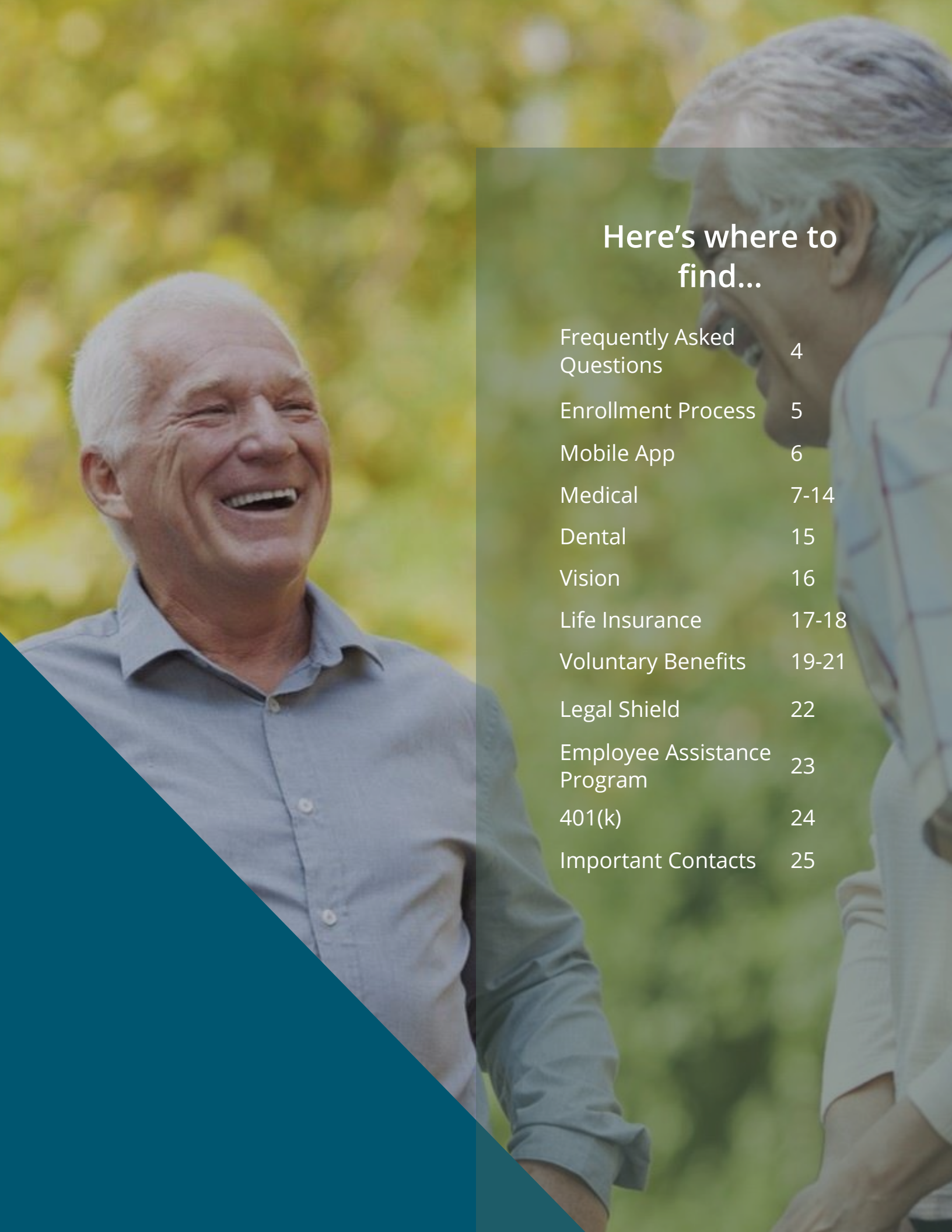




# 2020 Associate Benefit Guide



Plan Year: January 1, 2020 - December 31, 2020



## Here's where to find...

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# Welcome to your Benefit Enrollment!

Welcome to Legend Senior Living®! As an associate of Legend Senior Living, you are eligible for a wide range of valuable benefits designed to:

- Promote the health and wellness of you and your family
- Protect your income while you are working
- Help you balance your personal responsibilities and work life
- Provide education

Legend Senior Living provides you with benefit options enabling you to choose the package that best meets your needs. This guide gives you an overview of the benefits available to you. During this enrollment period, you have the opportunity to choose the benefits that are right for you.

Sincerely,  
Human Resources



# Frequently Asked Questions (FAQ's)

## Who is eligible for benefits?

All **full-time** associates working at least 30 hours per week are eligible for benefits. Coverage may also be elected for dependents, including your legal spouse and dependent children to age 26.

## When do I become eligible for benefits?

The 1st of the month following 60 days of full-time employment.

## When can I make my elections?

You may make benefit elections during your initial enrollment period, during Legend's annual Open Enrollment, or if you experience a qualified life event.

## What is a qualified life event?

**Examples include:** marriage, legal separation, divorce, birth or adoption, death, change in spouse's employment status, and loss/gain of other coverage.

## What if I experience a qualified life event?

To process your qualifying life event, visit [www.LSL-Benefits.com](http://www.LSL-Benefits.com), click on the "Log into Your Benefit System" button or download the mobile app, click on the Update My Benefits button and follow the on-screen instructions to process your qualifying life event. ***Qualifying Life Events must be processed within 30 days of the qualifying life event. Changes in eligibility for Medicare, Medicaid, and CHIP must be processed within 60 days of the qualifying event.***

## What if I make a mistake in my coverage or change my mind?

Once your enrollment period closes, changes cannot be made unless you experience a qualified life event or at Open Enrollment provided by Legend Senior Living. Please be very careful when selecting your coverage.

## Can I cancel my Blue Cross Blue Shield Medical and Dental coverage at any time?

No, Blue Cross Blue Shield coverages are pretax, changes can only be made if you experience a qualified life event.

## For which benefits will I receive an ID card?

If you enroll in Blue Cross Blue Shield Medical and/or Dental coverage, you will receive one card.

## What about Life Insurance?

A MetLife policy is provided at no cost to full-time benefit eligible associates by Legend Senior Living. Each associate will receive \$15,000 of Life Insurance. Please make sure to designate your beneficiaries in the benefit resource website.

## Which medical plan should I choose?

Be an educated health care consumer. Take time to truly evaluate the health care offerings so you can make the best decision possible for you and your family. When selecting a medical plan, review and evaluate the different plan options and consider how you and your family utilize health care. For example, how often do you or your covered family members use your health care benefits? What types of services do you or your covered family members receive? Compare the costs (deductibles, copays and out-of-pocket maximums) to the associate premium (per paycheck cost) for each plan. You can find Blue Cross Blue Shield of Kansas Network Provider options at [www.bcbsks.com](http://www.bcbsks.com).

## If I leave, what benefits are portable (that I can take with me)?

The Basic Life/AD&D with MetLife includes a conversion privilege, meaning the policy can be converted to an individual policy without Evidence of Insurability required. The Voluntary Life/AD&D policy, Critical Illness, Accident and Hospital with MetLife also have portability and conversion included. Please see plan documents for full details.

# New Hire Benefits Enrollment

## Steps to a Successful Enrollment

1. Download the Benefits Mobile App  
Text emb to 71441 | Enter company code: legend
2. Review your Benefit Options
3. Enroll in your Benefits via 3 convenient methods

### Review Your Benefits

Visit our new benefits website to review your benefits guide, important documents and watch benefit education videos.

[www.LSL-Benefits.com](http://www.LSL-Benefits.com)

### Enroll Online, via the Mobile App or with a Benefit Counselor

Legend Senior Living provides electronic enrollment through Explain My Benefits providing eligible employees the ability to make group insurance benefit elections online during the annual open enrollment, new hire orientation and qualifying events.



#### Self-Service

- Visit [www.LSL-Benefits.com](http://www.LSL-Benefits.com) on any computer, click on the “Log into Your Benefit System” button and move through the enrollment system at your own pace. ***Or, download the new Mobile App on your phone or tablet and move through the enrollment at your own pace.***



#### Benefit Counselor Assisted

Schedule a telephonic enrollment meeting with a benefits counselor from Explain My Benefits. Visit the Benefit Portal and Click the Schedule Enrollment Meeting Button to select the available date and time for a benefit counselor to call you and enroll you in your benefits. [www.LSL-Benefits.com](http://www.LSL-Benefits.com)

### Reminders

- ♦ Be sure to review the Benefit Guide and plan summaries **prior** to going through the enrollment process.
- ♦ Be prepared by gathering dependent and beneficiary information (i.e. Social Security Numbers and Dates of Birth)



# Mobile App

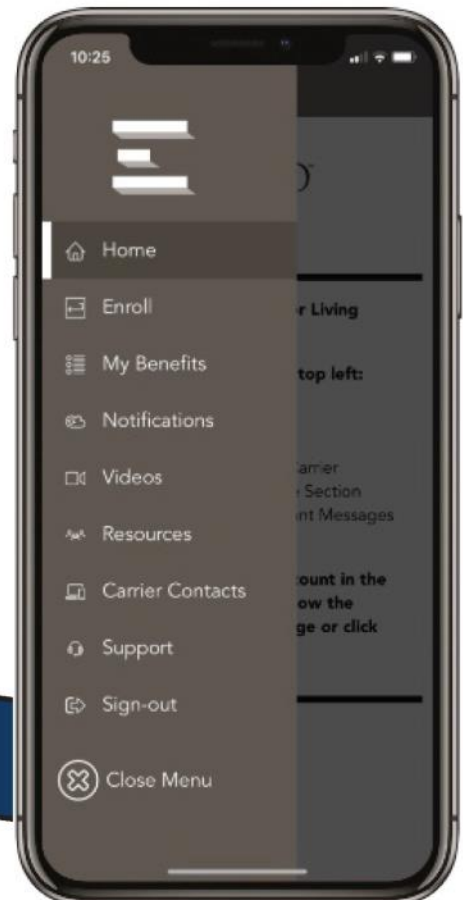


## NEW! BENEFITS ENROLLMENT APP

**Legend Senior Living** has provided you a brand new app to manage your benefits that allows you to:

- ✓ Enroll in your benefits from your phone
- ✓ View your current benefits
- ✓ Watch benefit education videos, review benefit guides and plan summaries
- ✓ Receive important message notifications about your benefits

**Benefits at your fingertips!**



**TO DOWNLOAD:**

- 1. Text emb to 71441**
- 2. Download by clicking the link for ios or android**
- 3. Enter company code: [legend](#)**



# Medical

## Plan Comparison

	Option 1 - Ultra HDHP	Option 2 - HDHP	Option 3 - PPO
	In Network	In Network	In Network
<b>Deductible (Calendar Year)</b>			
<i>Individual</i>	\$12,700	\$6,750	\$3,500
<i>Family</i>	\$25,400	\$13,500	\$7,000
<i>Coinsurance Carrier/Member</i>	100% / 0%	100% / 0%	70% / 30%
<b>Out of Pocket Maximum</b>			
<i>Individual</i>	\$12,700	\$6,750	\$6,350
<i>Family</i>	\$25,400	\$13,500	\$12,700
<b>Preventive Care</b>	100% Covered	100% Covered	100% Covered
<b>Primary Physician Service</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	\$30 Copay, 1st 5 visits, then subject to deductible/coinsurance
<b>Specialist Physician Service</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	\$60 Copay, 1st 5 visits, then subject to deductible/coinsurance
<b>Inpatient Hospitalization</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	Deductible, then plan pays 70%
<b>Outpatient Surgery</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	Deductible, then plan pays 70%
<b>Emergency Room</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	\$300 Copay then subject to deductible / coinsurance
<b>Urgent Care Visit</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	\$30 Copay (5 Visit Max combined with Office Visits), then subject to
<b>Diagnostic Lab, X-Ray, Advanced Imaging</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	Paid at 100% up to \$300 per member per benefit period, then subject to deductible / coinsurance
<b>Prescription Deductible (Individual/Family)</b>	Included in medical deductible	Included in medical deductible	\$100 / \$200
<b>Prescription Drugs</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	Generic: \$15 (Deductible Waived) Preferred Brand: Greater of 40% or \$30 after Rx Deductible Non-Preferred: Greater of 60% or \$50 after Rx Deductible
<b>Mail Order (90 Day Supply)</b>	Subject to deductible, then plan pays 100%	Subject to deductible, then plan pays 100%	2.5 X Retail Copy

# Medical - Option 1

Legend Senior Living will continue to offer you the choice of three medical plans through **Blue Cross Blue Shield of Kansas**. Please see the table below which provides coverage highlights for plan **Option 1**. Plan **Option 1** is an Ultra HDHP (High Deductible Health Plan) that utilizes the PPO **Blue Choice Network**. For a complete benefits summary, please refer to your **Blue Cross Blue Shield of Kansas** plan documents on the benefit resource website at [www.LSL-Benefits.com](http://www.LSL-Benefits.com).

## What is an Ultra HDHP (High Deductible Health Plan)?

An Ultra HDHP or High Deductible Health Plan is a plan with higher deductibles where expenses are subject to deductible rather than copayments (doctor office visits for example). Our Ultra HDHP uses a PPO Plan arrangement, so your use of network providers will determine your deductible amounts. Remember, staying In-Network offers the greatest discounts. While the Ultra HDHP has a higher deductible and different coverage levels than the other options, the Ultra HDHP has the lowest premium cost.

Option 1 - Ultra HDHP	
In Network	
<b>Deductible (Calendar Year)</b>	
<i>Individual</i>	\$12,700
<i>Family</i>	\$25,400
<i>Coinsurance Carrier/Member</i>	100% / 0%
<b>Out of Pocket Maximum</b>	
<i>Individual</i>	\$12,700
<i>Family</i>	\$25,400
<b>Preventive Care</b>	100% Covered
<b>Primary Physician Service</b>	Subject to deductible, then plan pays 100%
<b>Specialist Physician Service</b>	Subject to deductible, then plan pays 100%
<b>Inpatient Hospitalization</b>	Subject to deductible, then plan pays 100%
<b>Outpatient Surgery</b>	Subject to deductible, then plan pays 100%
<b>Emergency Room</b>	Subject to deductible, then plan pays 100%
<b>Urgent Care Visit</b>	Subject to deductible, then plan pays 100%
<b>Diagnostic Lab, X-Ray, Advanced Imaging</b>	Subject to deductible, then plan pays 100%
<b>Prescription Deductible</b>	Included in medical deductible
<b>Prescription Drugs</b>	Subject to deductible, then plan pays 100%
<b>Mail Order (90 Day Supply)</b>	Subject to deductible, then plan pays 100%

Medical Premiums Bi-Weekly Deductions (26 x per year)	
<b>Less than \$20,000 in Annual Earnings (Less than \$9.61/hour)</b>	
Associate	\$24
Associate + Spouse	\$218
Associate + Child(ren)	\$213
Associate + Family	\$382
<b>\$20,001 - \$25,000 in Annual Earnings (\$9.62 - \$12.01/hour)</b>	
Associate	\$33
Associate + Spouse	\$225
Associate + Child(ren)	\$221
Associate + Family	\$411
<b>\$25,001 or more in Annual Earnings (\$12.02/hour or more)</b>	
Associate	\$57
Associate + Spouse	\$233
Associate + Child(ren)	\$229
Associate + Family	\$442



# Medical - Option 2

Legend Senior Living will continue to offer you the choice of three medical plans through **Blue Cross Blue Shield of Kansas**. Please see the table below which provides coverage highlights for plan **Option 2**. Plan **Option 2** is an HDHP (High Deductible Health Plan) that utilizes the PPO **Blue Choice Network**. For a complete benefits summary, please refer to your **Blue Cross Blue Shield of Kansas** plan documents on the benefit resource website at [www.LSL-Benefits.com](http://www.LSL-Benefits.com).

## What is a HDHP (High Deductible Health Plan)?

A "HDHP" or High Deductible Health Plan is a plan with higher deductibles where expenses are subject to deductible rather than copayments (doctor office visits for example). Our HDHP uses a PPO Plan arrangement, so your use of network providers will determine your deductible amounts. Remember, staying In-Network offers the greatest discounts. While the HDHP has a higher deductible and different coverage levels than the other options, the HDHP has a lower premium cost.

Option 2 - HDHP	
In Network	
<b>Deductible (Calendar Year)</b>	
<i>Individual</i>	\$6,750
<i>Family</i>	\$13,500
<i>Coinsurance Carrier/Member</i>	100% / 0%
<b>Out of Pocket Maximum</b>	
<i>Individual</i>	\$6,750
<i>Family</i>	\$13,500
<b>Preventive Care</b>	100% Covered
<b>Primary Physician Service</b>	Subject to deductible, then plan pays 100%
<b>Specialist Physician Service</b>	Subject to deductible, then plan pays 100%
<b>Inpatient Hospitalization</b>	Subject to deductible, then plan pays 100%
<b>Outpatient Surgery</b>	Subject to deductible, then plan pays 100%
<b>Emergency Room</b>	Subject to deductible, then plan pays 100%
<b>Urgent Care Visit</b>	Subject to deductible, then plan pays 100%
<b>Diagnostic Lab, X-Ray, Advanced Imaging</b>	Subject to deductible, then plan pays 100%
<b>Prescription Deductible</b>	Included in medical deductible
<b>Prescription Drugs</b>	Subject to deductible, then plan pays 100%
<b>Mail Order (90 Day Supply)</b>	Subject to deductible, then plan pays 100%

Medical Premiums Bi-Weekly Deductions (26 x per year)	
<b>Less than \$20,000 in Annual Earnings (Less than \$9.61/hour)</b>	
Associate	\$47
Associate + Spouse	\$271
Associate + Child(ren)	\$266
Associate + Family	\$439
<b>\$20,001 - \$25,000 in Annual Earnings (\$9.62 - \$12.01/hour)</b>	
Associate	\$56
Associate + Spouse	\$280
Associate + Child(ren)	\$275
Associate + Family	\$476
<b>\$25,001 or more in Annual Earnings (\$12.02/hour or more)</b>	
Associate	\$76
Associate + Spouse	\$289
Associate + Child(ren)	\$284
Associate + Family	\$512

# Medical - Option 3

Legend Senior Living will continue to offer you the choice of three medical plans through **Blue Cross Blue Shield of Kansas**. Please see the table below which provides coverage highlights for plan **Option 3**. Plan **Option 3** is a PPO plan that utilizes the PPO **Blue Choice Network**. For a complete benefits summary, please refer to your **Blue Cross Blue Shield of Kansas** plan documents on the benefit resource website at [www.LSL-Benefits.com](http://www.LSL-Benefits.com).

## What is a PPO Plan?

A “PPO”, sometimes referred to as a participating provider organization or preferred provider option, is a “network” of health care practitioners and facilities who have agreed to provide care at reduced rates to plan participants. You are always free to choose the providers you wish to use. When you use In-Network providers, you have lower copayments and negotiated rates.

Option 3 - PPO Plan	
In Network	
Deductible (Calendar Year)	
Individual	\$3,500
Family	\$7,000
Coinsurance Carrier/Member	70% / 30%
Out of Pocket Maximum	
Individual	\$6,350
Family	\$12,700
Preventive Care	100% Covered
Primary Physician Service	\$30 Copay, 1st 5 visits, then subject to deductible/coinsurance
Specialist Physician Service	\$60 Copay, 1st 5 visits, then subject to deductible/coinsurance
Inpatient Hospitalization	Deductible, then plan pays 70%
Outpatient Surgery	Deductible, then plan pays 70%
Emergency Room	\$300 Copay then subject to deductible / coinsurance
Urgent Care Visit	\$30 Copay (5 Visit Max combined with Office Visits), then subject to deductible/
Diagnostic Lab, X-Ray, Advanced Imaging	Paid at 100% up to \$300 per member per benefit period, then subject to deductible / coinsurance
Prescription Deductible (Individual/Family)	\$100 / \$200
Prescription Drugs	Generic: \$15 (Deductible Waived) Preferred Brand: Greater of 40% or \$30 after Rx Deductible Non-Preferred: Greater of 60% or \$50 after Rx Deductible
Mail Order (90 Day Supply)	2.5 X Retail Copy

Medical Premiums Bi-Weekly Deductions (26 x per year)	
Associate	\$136
Associate + Spouse	\$429
Associate + Child(ren)	\$421
Associate + Family	\$716

# Cost Saving Tips & Tricks

## Ask Your Physician Questions

**Be inquisitive. These are examples of good questions to ask:**

- Is there a generic alternative for this prescription?
- Can this test be performed in your office versus a hospital or independent testing facility?
- Is the lab or advanced imaging facility you are recommending In-Network?
- Are you applying a preventive code, rather than a diagnostic code, to my routine well visit?

## Know a Little About Physician Coding

**Miscoding procedures and visits is the number one reason for billing problems.** If you go to the doctor for any type of preventive care, make sure the office codes it as such. Be aware there could be situations that start off as preventive that turn into diagnostic.

## Organize Your Health Information

**Create a folder to ensure all your health care information stays together and take that folder with you to all appointments.**

- Include such items as: Summary Plan Descriptions (SPD), Explanation of Benefits (EOB), Bills, and Receipts.

## Emergency Room Vs. Urgent Care Facility

If you have a life threatening emergency, please go to the emergency room. **However, if you have a minor injury or the flu, go to an Urgent Care Facility.** The Urgent Care Facility will save you money and time.

## Shop for Rx Savings

- Order prescription medications through mail order prescription benefit to save on a 90-day supply.
- Ask your physician for samples.
- You may also obtain manufacture coupons for prescription medication by visiting their websites.
- Visit [www.GoodRx.com](http://www.GoodRx.com) or download their smartphone app for cost comparison on your prescription medications with lower cost lists at retailers, such as: Walmart, Target, CVS, and other stores have low-cost Rx programs. Check if your drug is included. When using these vendors, do not use your medical insurance card.

## Utilize In-Network Providers

In-network providers have agreed to accept a determined allowable charge for covered services, and cannot charge you over and above the agreement they have in place with Blue Cross Blue Shield of Kansas. However, you still have member cost sharing responsibilities under the plan including deductible, coinsurance, copayments, shared payment amounts, non-covered services, excess private room charges, and any other amounts in excess of the benefit limitations.

If going to an out-of-network provider you can be balance billed. This means the plan will reimburse at the in-network level, and any amounts the out-of-network provider charges over the allowable in-network charges are your financial responsibility.

How to access an in-network medical provider:

- Visit [www.bcbsks.com](http://www.bcbsks.com)
- Click "Find a Doctor/Hospital" at the top of the page
- From the drop-down select the "Blue Choice Preferred-Care Blue Network"
- Narrow your search by clicking on "Browse by Category" or by keyword search



# Medical - Telehealth

**Telehealth connects you with a doctor anytime, anywhere.**

**Telehealth is a fast, convenient way to see a doctor virtually.**

Associates with Blue Cross Blue Shield of Kansas (BCBSKS) coverage can have a live visit on their computer or mobile device with a doctor at a time that works for them. Blue Cross provides telehealth services through American Well® (Amwell). With Amwell, associates register for FREE, and the cost per visit is less than an emergency room, Urgent Care, or even an in-office doctor visit. It's easy-to-use, affordable, private and secure.

## Why use Amwell?

- Choose Your Own Physician: Associates select a physician for their visit from a list of U.S. board-certified doctor and therapist profiles. All profiles include physician certifications, licenses and online patient ratings
- Available nationwide, 24/7/365
- Convenient Prescriptions: If a medication is prescribed, all prescriptions can be picked up at your local pharmacy.
- Easy Payment: Pay for the visit with credit, debit or HSA/FSA cards.
- Record Storage: A complete record of each visit is securely maintained and can be accessed by the patient.

## How much does Amwell cost?

- The cost of an Amwell doctor or therapist visit depends on the associate's plan type.
  - ⇒ Consultation with a physician
  - ⇒ Consultation with a dietitian
  - ⇒ Consultation with a social worker or masters level behavioral health professional
  - ⇒ Consultation with a behavioral health professional with a PhD/PsyD
  - ⇒ Consultation with a psychiatrist
  - ⇒ Follow-up consultation with a psychiatrist

## When to use Amwell?

As an innovative patient consultation service, telehealth lets you interact with a doctor at your convenience for common conditions such as:

- Cold
- Flu
- Fever
- Rash
- Stomach pain
- Sinus infection
- Pink eye
- Ear infection
- Migraine

Also offering behavioral health and counseling services, known as teletherapy, Amwell's licensed therapists will provide treatment for several conditions including:

- Anxiety
- Stress
- Bereavement
- Panic Attacks
- Depression
- Attention deficit hyperactivity disorder (ADHD)
- Obsessive-compulsive disorder (OCD)
- Trauma/post-traumatic stress disorder

Therapists will be available on demand or by appointment from 7am to 11pm local time, 7 days a week.

## Can my family use Amwell?

If the associate's spouse and/or children are covered under the associate's BCBSKS plan, they are eligible for telehealth services. A spouse should create their own Amwell account, but children or dependents under age 18 can be added to the associate's account and have doctor visits on their behalf. Associates need to register first and then the child or dependent can be added to the account. Children or dependents over the age of 18 must create their own Amwell account.

## How to use Amwell

Associates can easily register for a telehealth visit and connect with a board-certified doctor in their area.

1. Download the Amwell app on any mobile device.
2. On a computer? Sign-up at [amwell.com](http://amwell.com). Simply fill in the contact information and set-up a username and password.

For more information, visit [www.amwell.com](http://www.amwell.com), email [support@amwell.com](mailto:support@amwell.com) or call 844-733-3627.

# Medical - Preventive Services Covered Under the Affordable Care Act

The items listed below are services that some consumers can receive without any cost-sharing, meaning they will not pay deductibles, copays or coinsurance for the preventive services outlined. Preventive services must be provided by an eligible contracting provider as outlined in the member benefit description. Preventive services are subject to change.

## Preventive Services for Adults

- Abdominal aortic aneurysm screening for men of specified ages who have ever smoked
- Alcohol misuse screening and counseling
- Aspirin use to prevent cardiovascular disease for men and women of certain ages
- Blood pressure screening for all adults
- Cholesterol screening for adults of certain ages or at higher risk
- Colorectal cancer screenings for adults 50 to 75
- Depression screening for adults
- Diabetes (Type 2) screening for adults 40 to 70 years who are overweight or obese
- Diet counseling for adults at higher risk for chronic disease
- Hepatitis B screening for people at high risk
- Hepatitis C virus infection screening for adults at higher risk
- HIV screening for everyone ages 15 to 65, and other ages at increased risk
- Immunization vaccines for adults - doses, recommended ages, and recommended populations vary
- Lung cancer screening for adults 55-80 at high risk for lung cancer
- Obesity screening and counseling for all adults
- Sexually transmitted infection (STI) prevention counseling for adults at higher risk
- Statin preventative medication for adults 40 to 75 at high risk
- Syphilis screening for all adults at higher risk
- Tobacco use screening for all adults and cessation interventions for tobacco users
- Tuberculosis screening for certain adults without symptoms at high risk
- Vitamin D for adults 65 years of age and older

## Stay Informed

Covered preventive services are subject to change. Please visit [bcbsks.com/aca](http://bcbsks.com/aca) to get the latest information as it becomes available.

For more information on health care reform and preventive services, please visit <http://healthcare.gov>

# Medical - Preventive Services Covered Under the Affordable Care Act

## Preventive Services for Women including pregnant women

- Anemia screening on a routine basis for pregnant women
- Bacteriuria urinary tract or other infection screening for pregnant women
- Breast cancer genetic test (BRCA) counseling for women at higher risk for breast cancer
- Breast cancer mammography screenings every 1 to 2 years for women over 40
- Breast cancer chemoprevention counseling for women at higher risk and providing of coverage for drugs taken for chemoprevention
- Breastfeeding comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women
- Cervical cancer screening for sexually active women
- Chlamydia infection screening for younger women and other women at higher risk
- Contraception: FDA approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a health care provider
- Diabetes screening for women with a history of gestational diabetes who aren't currently pregnant and who haven't been diagnosed with type 2 diabetes before
- Domestic and interpersonal violence screening and counseling for all women
- Expanded tobacco intervention and counseling for pregnant tobacco users
- Folic acid supplements for women who may become pregnant
- Gestational diabetes screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes
- Gonorrhea screening for all women at higher risk
- Hepatitis B screening for pregnant women at their first prenatal visit
- Human immunodeficiency virus (HIV) screening and counseling for sexually active women
- Human papillomavirus (HPV) DNA test with the combination of a Pap smear every 5 years for women 30 to 65
- Osteoporosis screening for women over age 60 depending on risk factors
- Pap test (also called a Pap smear) every 3 years for women 21 to 65
- Preeclampsia prevention and screening for pregnant women with high blood pressure
- Rh incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Sexually transmitted infections (STI) counseling for sexually active women
- Syphilis screening for all pregnant women or other women at increased risk
- Urinary incontinence screening for women yearly
- Well-woman visits to obtain recommended preventive services for women under 65

## Preventive Services for Children

- Alcohol and drug use assessment for adolescents
- Autism screening for children at 18 and 24 months
- Behavioral assessments for children ages 0 to 17 years
- Bilirubin concentration screening for newborns
- Blood pressure screening for children ages 0 to 17 years
- Blood screening for newborns
- Cervical dysplasia screening for sexually active females
- Congenital hypothyroidism screening for newborns
- Depression screening for adolescents beginning routinely at age 12
- Developmental screening for children under age 3, and surveillance throughout childhood
- Dyslipidemia screening for children at higher risk of lipid disorders
- Fluoride chemoprevention supplements for children without fluoride in their water source
- Fluoride varnish for all infants and children as soon as teeth are present
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns and for children once between 11 and 14 years, 15 and 17 years, and 18 and 21 years
- Height, weight and body mass index (BMI) measurements for children ages 0 to 17 years
- Hematocrit or hemoglobin screening for children
- Hemoglobinopathies or sickle cell screening for newborns
- Hepatitis B screening for adolescents at high risk
- HIV screening for adolescents at higher risk
- Immunization vaccines for children from birth to age 18 - doses, recommended ages, and recommended populations vary
- Iron supplements for children six to 12 months at risk for anemia
- Lead screening for children at risk of exposure
- Maternal depression screening for mothers of infants at 1, 2, 4 and 6 month visits
- Medical history for all children throughout development
- Obesity screening and counseling
- Oral health risk assessment for young children
- Phenylketonuria (PKU) screening for this genetic disorder in newborns
- Sexually transmitted infection (STI) prevention counseling for adolescents at higher risk
- Tuberculin testing for children at higher risk of tuberculosis
- One vision screening for all children under the age of 5



# Dental Insurance

Legend Senior Living will continue to partner with **Blue Cross Blue Shield of Kansas** to provide dental benefits to you and your dependents. This plan utilizes the **BlueChoice** network. Each covered member may visit any dentist they choose, however, there are advantages to receiving care from an In-Network dentist. Out-of-pocket costs tend to be lower In-Network than Out-of-Network.

When you visit an In-Network dentist, payment is based on a negotiated PPO fee. There is always the potential for balance billing with Out-of-Network dentists. Refer to your **Blue Cross Blue Shield of Kansas** plan documents on the benefit resource website [www.LSL-Benefits.com](http://www.LSL-Benefits.com).

Coverage	Dental PPO	
	In-Network	Out-of-Network
<b>Deductible</b> Individual / Family	<i>Calendar Year</i> \$25 / \$75	<i>Calendar Year</i> \$25 / \$75
<b>Maximum Annual Benefit (calendar year)</b>	\$2,000	\$2,000
<b>Preventive:</b> Oral exams, cleanings, bitewing X-rays fluoride treatments (under age of 21)	100%	100%
<b>Basic:</b> Fillings (except gold), simple extractions, periodontics (non-surgical), endodontics, inlays	80%	80%
<b>Major:</b> Bridges, onlays, crowns, dentures	50%	50%
<b>Implant Services Lifetime Max per Arch.</b>	\$1,000	\$1,000
<b>Orthodontia</b>	N/A	N/A

## Using In-Network versus Out-of-Network

Benefits are the same whether In-Network or Out-of-Network, however, you will pay more out-of-pocket when using an Out-of-Network provider. For example:

- In-Network dentists: Payment will be the maximum allowable charge for covered dental services. Payment will be sent directly to the dentist. You will only be responsible for any coinsurance amounts and any charges for non-covered services.
- Out-of-Network dentists: You will be responsible for any difference between the payment allowed by BCBSKS and the dentist's charge, in addition to any deductible and coinsurance amounts and any charges for non-covered services. Payment will be sent directly to you and you will need to pay the provider.

How to access an in-network dental provider:

- Visit [www.bcbsks.com](http://www.bcbsks.com)
- Click "Find a Doctor/Hospital" at the top of the page
- From the drop-down select the "Blue Choice Preferred Network"
- Narrow your search by clicking on "Browse by Category" or by keyword search

Dental Premiums	
Bi-Weekly Deductions (26 x per year)	Dental PPO
Associate	\$11.13
Associate + Spouse	\$23.93
Associate + Child(ren)	\$21.87
Associate + Family	\$34.29



# Vision Insurance

**MetLife**, our new vision carrier, administers vision benefits through participating independent vision providers and retail centers. Visit an In-Network provider to access benefits for annual eye exams, prescription contacts, or lenses and frames. If you visit an out-of-network provider, you may be required to submit a claim form to **MetLife** to access your benefit. Refer to your **MetLife** plan documents on the benefit resource website at [www.LSL-Benefits.com](http://www.LSL-Benefits.com).

## Will I receive an ID card?

No, ID cards are not needed. Your vision provider will locate your insurance coverage by your social security number which you will need to provide at the time of service. Once coverage is effective you will have the option to print a generic ID card from the MetLife portal.

Coverage	MetLife Vision	
	In-Network	Out-of-Network
Eye Examination (1 per 12 months)	\$10 Copay	Reimbursed up to \$45
Retinal Imaging (1 per 12 months)	Up to \$39 Copay	Applied to exam allowance
Eyeglass Lenses (1 per 12 months) Single Vision Lined Bifocal Lined Trifocal Lenticular	\$25 Copay	Reimbursed up to: Single Vision: \$30 Lined Bifocal: \$50 Lined Trifocal: \$65 Lenticular: \$100
Eyeglass Frames (1 per 24 months) (Costco)	\$130 Retail Allowance + 20% of Balance (\$70 Allowance)	Reimbursed up to \$70
Contact Fitting and Evaluation (1 per 12 months)	Up to \$60 Copay	Applied to contact lens allowance
Contact Lenses (1 per 12 months)	Elective: \$130 Allowance Medically Necessary: Covered in Full	Reimbursed up to: Elective: \$105 Medically Necessary: \$210
Laser Vision Correction	Discount Available	N/A

How to access an in-network vision provider:

- Visit [www.metlife.com](http://www.metlife.com)
- Select "Find a Vision Provider"
- Select "MetLife Vision PPO"
- Enter your zip code
- Select "Find a Vision Provider"

Vision Premiums	
Bi-Weekly Deductions (26 x per year)	MetLife Vision
Associate	\$3.18
Associate + Spouse	\$5.52
Associate + Child(ren)	\$5.52
Associate + Family	\$9.19



# Term Life Insurance

## Basic Group Term Life and Accidental Death & Dismemberment (AD&D) Insurance

Legend Senior Living provides all benefit eligible associates with Basic Group Term Life and Accidental Death & Dismemberment (AD&D) policy in the amount of **\$15,000** through **MetLife**. **Please remember to keep an updated beneficiary on file.**

### Voluntary Term Life and AD&D Insurance

Voluntary Term Life and AD&D Insurance is available for purchase for yourself, your spouse, and your child(ren). Please note: associates will need to elect coverage on themselves in order to elect coverage on their dependents when electing Voluntary Life and AD&D Insurance. Deductions for associate and spouse are based on the associates age and the coverage amount selected, and will be payroll deducted.

#### Associate:

You may purchase in \$10,000 increments up to a maximum of \$500,000. Evidence of Insurability (EOI) form required above \$100,000 applies to new elections only. Current elections over \$100,000 do not require EOI.

#### Spouse:

You may purchase for your spouse up to 50% of your elected amount in \$5,000 increments up to a maximum of \$100,000. Evidence of Insurability (EOI) form required above \$25,000 applies to new elections only. Current elections over \$25,000 do not require EOI.

#### Child(ren):

You may purchase for your child(ren) in \$1,000 increments up to a maximum of \$10,000, not to exceed 50% of your elected amount. (Children under 15 days of age are limited to \$100).

Bi-Weekly Rates*			
Policy Election Cost per Age Bracket			
Associate			
Age	\$10,000	\$50,000	\$100,000
<30	\$0.39	\$1.94	\$3.88
30-34	\$0.46	\$2.31	\$4.62
35-39	\$0.55	\$2.75	\$5.49
40-44	\$0.72	\$3.62	\$7.25
45-49	\$1.14	\$5.70	\$11.40
50-54	\$2.15	\$10.75	\$21.51
55-59	\$3.42	\$17.12	\$34.25
60-64	\$4.13	\$20.63	\$41.26
65-69	\$7.04	\$17.12	\$70.43
70+	\$16.54	\$82.71	\$165.42

Spouse/Domestic Partner			
Age	\$5,000	\$10,000	\$25,000
<30	\$0.19	\$0.39	\$0.97
30-34	\$0.23	\$0.46	\$1.15
35-39	\$0.27	\$0.55	\$1.37
40-44	\$0.36	\$0.72	\$1.81
45-49	\$0.57	\$1.14	\$2.85
50-54	\$1.08	\$2.15	\$5.38
55-59	\$1.71	\$3.42	\$8.56
60-64	\$2.06	\$4.13	\$10.32
65-69	\$3.52	\$7.04	\$17.61
70+	\$8.27	\$16.54	\$41.35

Child(ren) up to age 26			
Age	\$1,000	\$5,000	\$10,000
	\$0.09	\$0.45	\$0.90

\*Your specific rates will be calculated for you in EMB Enroll.





# Permanent Life Insurance



Chubb LifeTime Benefit Term provides valuable life insurance protection through age 120!

- Life base insurance premiums are guaranteed never to increase through age 100.
- No medical exams required.
- Fully portable - you own it and take it with you when you leave your employment.
- Spouse and child coverage is available.
- Associate must enroll in order to cover spouse and/or children.
- Spouse and child coverage cannot exceed 50% of associate coverage.
- Provides an Accelerated Death Benefit for Long Term Care with Extension of Benefits.
- The Accelerated Death Benefit for Long Term Care is a benefit that pays 4% of the current death benefit amount payable each month for up to 25 months.
- The Extension of Benefits extends the monthly long term care benefit for up to an additional 25 months.

**Guaranteed Issue**  
**\$100,000 Associate Only**

Sample Bi-Weekly Non-Tobacco Rates*				
Age	\$25,000	\$50,000	\$75,000	\$100,000
25	N/A	\$11.73	\$17.59	\$23.46
35	\$8.64	\$17.29	\$25.93	\$34.57
45	\$14.58	\$29.15	\$43.73	\$58.31
55	\$27.39	\$54.78	\$82.18	\$109.57
65	\$59.68	\$119.36	\$179.04	\$238.72

Sample Bi-Weekly Tobacco Rates*				
Age	\$25,000	\$50,000	\$75,000	\$100,000
25	\$7.78	\$15.56	\$23.34	\$31.11
35	\$11.41	\$22.83	\$34.24	\$45.65
45	\$19.72	\$39.44	\$59.16	\$78.88
55	\$37.42	\$74.84	\$112.26	\$149.69
65	\$79.98	\$159.96	\$239.93	\$319.91

**Rates:** This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. **\*Your specific rates will be calculated for you in EMB Enroll.**

## Hospital Insurance

Hospital Indemnity through **MetLife**, is a policy that pays a specified amount for initial hospital admission and each day a covered person is confined to a hospital.

Admission Benefit	1 time per calendar year	Admission	\$500
		ICU Supplemental Admission (Benefit paid concurrently with the Admission benefit when a Covered Person is admitted to ICU)	\$500
Confinement Benefit	15 days per year ICU Supplemental Confinement will pay an additional benefit for 15 of those days	Confinement	\$100
		ICU Supplemental Confinement (Benefit paid with the Confinement benefit when a Covered Person is admitted to ICU)	\$100

Bi-Weekly Rates	Associate	Associate + Spouse	Associate + Children	Family
	\$5.72	\$10.06	\$9.18	\$13.54

## Accident Insurance



A plan through **MetLife** that helps pay for the unexpected expenses that result from an accident.

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

Just a few examples of benefits included in the plan:

- Emergency Treatment - \$150
- Hospitalization - \$1,000 admission benefit, \$200 per day benefit
- ICU Benefit—\$2,000 admission benefit, \$400 per day benefit
- Fractures - up to \$8,000
- Dislocations - up to \$8,000
- Torn Knee Cartilage - up to \$750
- Lacerations - up to \$400
- Major Diagnostic Exam (CT, MRI, etc.) - \$150
- See brochure for a complete list of benefits.

Coverage Tier	Bi-Weekly Rates
Associate Only	\$6.00
Associate & Spouse	\$9.20
Associate & Children*	\$9.04
Family*	\$12.42

\*Dependents up to age 26 can be covered.

# Short Term Disability Insurance

Voluntary Short Term Disability (STD) provides income protection should you become disabled due to a non-work related illness or injury. Deductions are based on your age and salary, and will be payroll deducted. MetLife is allowing a true open enrollment meaning you can enroll in the STD plan without submitting an evidence of insurability (EOI) form. If you do not enroll during this open enrollment (or when first eligible) an EOI form will need to be submitted. An EOI form will also apply to increases in coverage after this open enrollment or after your initial eligibility period.

Coverage	Short Term Disability
Maximum Benefit	60% of Associate Earnings
Weekly Benefit	\$100-\$1,000
Benefits Begin	15th day following injury/illness
Maximum Benefit Period	26 Weeks
Pre-Existing Conditions	3 Months look back; 12 months insured

		Bi-Weekly Deductions							
Weekly Benefit	Minimum Annual Salary Required	<30	30-34	35-39	40-44	45-49	50-54	55-59	60+
\$100	\$8,667	\$6.96	\$9.73	\$6.73	\$4.31	\$4.22	\$4.66	\$5.37	\$6.36
\$200	\$17,333	\$13.92	\$19.46	\$13.46	\$8.61	\$8.45	\$9.32	\$10.74	\$12.72
\$300	\$26,000	\$20.88	\$29.19	\$20.19	\$12.92	\$12.67	\$13.99	\$16.10	\$19.08
\$400	\$34,667	\$27.84	\$38.92	\$26.92	\$17.23	\$16.89	\$18.65	\$21.47	\$25.44
\$500	\$43,333	\$34.80	\$48.65	\$33.65	\$21.53	\$21.12	\$23.31	\$26.84	\$31.80
\$600	\$52,000	\$41.76	\$58.38	\$40.38	\$25.84	\$25.34	\$27.97	\$32.21	\$38.16
\$700	\$60,667	\$48.72	\$68.11	\$47.11	\$30.14	\$29.56	\$32.63	\$37.57	\$44.52
\$800	\$69,333	\$55.68	\$77.83	\$53.83	\$34.45	\$33.79	\$37.29	\$42.94	\$50.88
\$900	\$78,000	\$62.64	\$87.56	\$60.56	\$38.76	\$38.01	\$41.95	\$48.31	\$57.24
\$1,000	\$86,667	\$69.60	\$97.29	\$67.29	\$43.06	\$42.23	\$46.62	\$53.68	\$63.60





# Critical Illness

Critical Illness through **MetLife**, 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 first diagnosis of a covered condition to help you with associated costs and beyond.

**Guaranteed Issue**  
**\$50,000 associate / \$25,000 spouse / \$25,000 children**

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

## Examples of covered conditions:

Alzheimer's Disease, Coronary Artery Bypass Graft, Full Benefit Cancer, Heart Attack, Kidney Failure, Major Organ Transplant, Stroke, Partial Benefit Cancer (25%)

**Recurrence Benefit:** MetLife will pay 50% of the original covered amount for Coronary Artery Bypass Graft, Full Benefit Cancer, Heart Attack or Stroke and 12.5% of the original covered amount for Partial Benefit Cancer if an insured has a subsequent diagnosis.

**An Annual Health Screening Benefit is included in your policy and MetLife pays \$50 for each insured.** Each covered person will get one health screening benefit per calendar year.

## Examples of Health Screening Tests

- Physical Exam
- PSA Test
- Total Cholesterol Blood Test
- HPV Vaccine
- Mammogram
- Chest X-ray











Bi-Weekly Associate Only Premiums*						Bi-Weekly Associate Only Premiums*					
Non-Tobacco						Tobacco					
Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000
<25-29	\$2.80	\$5.60	\$8.40	\$11.20	\$14.00	<25-29	\$4.40	\$8.80	\$13.20	\$17.60	\$22.00
30-34	\$3.60	\$7.20	\$10.80	\$14.40	\$18.00	30-34	\$5.80	\$11.60	\$17.40	\$23.20	\$29.00
35-39	\$4.00	\$8.00	\$12.00	\$16.00	\$20.00	35-39	\$6.80	\$13.60	\$20.40	\$27.20	\$34.00
40-44	\$5.40	\$10.80	\$16.20	\$21.60	\$27.00	40-44	\$9.00	\$18.00	\$27.00	\$36.00	\$45.00
45-49	\$7.60	\$15.20	\$22.80	\$30.40	\$38.00	45-49	\$12.80	\$25.60	\$38.40	\$51.20	\$64.00
50-54	\$10.20	\$20.40	\$30.60	\$40.80	\$51.00	50-54	\$17.40	\$34.80	\$52.20	\$69.60	\$87.00
55-59	\$13.40	\$26.80	\$40.20	\$53.60	\$67.00	55-59	\$23.00	\$46.00	\$69.00	\$92.00	\$115.00
60-64	\$17.80	\$35.60	\$53.40	\$71.20	\$89.00	60-64	\$30.20	\$60.40	\$90.60	\$120.80	\$151.00
65-69	\$23.40	\$46.80	\$70.20	\$93.60	\$117.00	65-69	\$40.00	\$80.00	\$120.00	\$160.00	\$200.00
70+	\$33.60	\$67.20	\$100.80	\$134.40	\$168.00	70+	\$57.80	\$115.60	\$173.40	\$231.20	\$289.00

**Rates:** This benefit is customized by each associate so rates vary, but can start as little as a few dollars per week. **\*Your specific rates will be calculated for you in EMB Enroll.**

# LegalShield

## HAVE YOU EVER?

- ◆ Needed your Will prepared or updated
- ◆ Been overcharged for a repair or paid an unfair bill
- ◆ Had trouble with a warranty or defective product
- ◆ Signed a contract
- ◆ Received a moving traffic violation
- ◆ Had concerns regarding child support
- ◆ Worried about being a victim of Identity Theft
- ◆ Been concerned about your child's identity
- ◆ Lost your wallet
- ◆ Worried about entering personal information online
- ◆ Feared the security of your medical information
- ◆ Been pursued by a collection agency

THE LEGALSHIELD MEMBERSHIP INCLUDES:	THE IDSHIELD MEMBERSHIP INCLUDES:
 <b>Dedicated Law Firm Legal Advice/Consultation</b> on unlimited personal issues	 <b>Social Media Monitoring</b> Allows you to monitor multiple social media accounts and content feeds for privacy and reputational risks.
 <b>Letters/Calls</b> made on your behalf <b>Contracts/Documents Reviewed</b> up to 15 pages <b>Residential Loan Document Assistance</b> <b>Lawyers prepare your Will/Living Will/Health Care Power of Attorney/Financial Power of Attorney</b>	 <b>Privacy and Security Monitoring</b> Internet monitoring of your name, date of birth, SSN, email address, phone numbers, and more. Monthly credit score tracking. With the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18 for no additional cost.
 <b>Speeding Ticket Assistance</b> <b>IRS Audit Assistance</b> <b>Trial Defense</b> (if named defendant/respondent in a covered civil action suit)	 <b>Consultation</b> Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications and lost wallet protection.
 <b>Adoption and/or Name Change Representation</b> (available 90 days after enrollment) <b>25% Preferred Member Discount</b> (bankruptcy, criminal charges, DUI, personal injury, etc.)	 <b>Full Identity Restoration</b> Complete Identity recovery services by Kroll Licensed Private Investigators to its pre-theft status.
 <b>24/7 Emergency Access</b> for covered situations	 <b>Unlimited Service Guarantee</b> We'll do whatever it takes for as long as it takes to help recover and restore your identity.

Put your law firm in the palm of your hand with the LegalShield mobile app



Put Identity Theft Protection in the palm of your hand with the IDShield mobile app



Bi-Weekly Premiums			
	Legal Only	IDShield 3B	Combined
Employee	\$7.27	\$4.13	\$10.80
Family*	\$7.27	\$7.82	\$13.94

\*Never married dependent children under age 26 living at home or if a full-time college student.

# Employee Assistance Program (EAP)

Offered through **MetLife**, The EAP provides professional support and guidance to you and your family. Life doesn't always go as planned. And while you can't always avoid the twists and turns, you can get help to keep moving forward. The program provides you with easy-to-use services to help with the everyday challenges of life — at no cost to you.

## Expert advice for work, life, and your well-being

The program's experienced counselors provided through LifeWorks — one of the nation's premier providers of Employee Assistance Program services — can talk to you about anything going on in your life, including:

- **Family:** Going through a divorce, caring for an elderly family member, returning to work after having a baby
- **Work:** Job relocation, building relationships with co-workers and managers, navigating through reorganization
- **Money:** Budgeting, financial guidance, retirement planning, buying or selling a home, tax issues
- **Legal Services:** Issues relating to civil, personal and family law, financial matters, real estate and estate planning
- **Identity Theft Recovery:** ID theft prevention tips and help from a financial counselor if you are victimized
- **Health:** Coping with anxiety or depression, getting the proper amount of sleep, how to kick a bad habit like smoking
- **Everyday life:** Moving and adjusting to a new community, grieving over the loss of a loved one, military family matters, training a new pet

## Consultations with licensed counselors

Your program includes up to 5 in person, phone or video consultations with licensed counselors for you and your eligible household members, per issue, per calendar year. You can call **1-800-319-7819** to speak with a counselor or schedule an appointment, 24/7/365.

When you call, just select "Employee Assistance Program" when prompted. You'll immediately be connected to a counselor.

## Simply looking for information?

The program offers easy to use educational tools and resources, online and through a mobile app. There is a chat feature so you can talk with a consultant to guide you to the information you are looking for or help you schedule an appointment with a counselor.

## Does the program have any limitations?

While the program offers a broad range of services, it may not cover all services you may need. Your Employee Assistance Program does not provide:

- Inpatient or outpatient treatment for any medically treated illness
- Prescription drugs
- Treatment or services for intellectual disability or autism
- Counseling services beyond the number of sessions covered or requiring long term intervention
- Services by counselors who are not LifeWork providers
- Counseling required by law or a court, or paid for by Workers' Compensation

When you need some support,  
we're here to help.



Phone

1-888-319-7819



Web

[metlifeeap.lifeworks.com](http://metlifeeap.lifeworks.com)

user name: metlifeeap  
and password: eap



Mobile App - Search "LifeWorks"

user name: metlifeeap  
and password: eap

# 401(k)

There are many benefits to participating in the Legend Senior Living 401(k) Plan. One of the primary benefits is that you will receive help reaching your financial goals for retirement. If you haven't already, enrolling in the plan is the right step toward a more secure retirement. It's easy to join the plan and make the next great investment in yourself and your future.

When am I eligible?	Associate Contributions: Attain Age 18, Complete 6 months of service  Company Match: Attain Age 18, Complete 12 months with 1000 hours of service										
When can I enroll in the Plan?	January 1 and July 1 of each plan year.										
How much can I contribute?	1% to 75% of eligible compensation, inclusive of pretax and/or Roth deferrals (IRS limit \$19,500 for 2020).										
Can I make a catch up contribution?	If you are age 50 or over by the end of the taxable year and have reached the annual IRS limit or Plan's maximum contribution limit for the year, you may make additional salary deferral, pre-tax contributions to the plan up to the IRS Catch Up Provision Limit (\$6,500 for 2020).										
How often can I change my contribution?	At the beginning of a Payroll Period.										
How much does the company match?	Legend may make a discretionary pretax contribution to your account. The amount would be equal to a percentage determined annually by the Board of Directors' Resolution.										
When am I Vested?	Associate Contributions: 100% vested immediately  Company Match: <table><tr><td>Less than 1 year</td><td>0%</td></tr><tr><td>1 year</td><td>25%</td></tr><tr><td>2 year</td><td>50%</td></tr><tr><td>3 year</td><td>75%</td></tr><tr><td>4 year</td><td>100%</td></tr></table>	Less than 1 year	0%	1 year	25%	2 year	50%	3 year	75%	4 year	100%
Less than 1 year	0%										
1 year	25%										
2 year	50%										
3 year	75%										
4 year	100%										
Can I take out a loan?	Although your plan account is intended for the future, you may take a loan from your account. Contact Fidelity Investments for more information on loans.										
Can I take a withdrawal?	Withdrawals from the Plan are generally permitted in the event of termination of employment, retirement, death or a qualified hardship. Contact Fidelity Investments for more information on Hardship Withdrawals.										

## How to Enroll in the 401(k) plan:

- Go to Fidelity NetBenefits at [www.401k.com](http://www.401k.com)
- Next, set up your password. If you're already a Fidelity customer, you can use your existing password. Please note, you will be prompted to enter your email address
- Finally, click on the link to enroll
- If you have questions or need help call Fidelity Investments at 1-800-835-5097



# Important Contacts

Vendor	Phone	Website/Email
<b>Medical Insurance</b> Blue Cross Blue Shield of Kansas	800-432-3990	<a href="http://www.bcbsks.com">www.bcbsks.com</a>
<b>Dental Insurance</b> Blue Cross Blue Shield of Kansas	800-432-3990	<a href="http://www.bcbsks.com">www.bcbsks.com</a>
<b>Vision Insurance</b> MetLife	855-638-3931	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Basic &amp; Term Life Insurance</b> MetLife	866-492-6983	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Permanent Life Insurance</b> CHUBB	866-445-8874	<a href="http://www.chubbworkplacebenefits.com">www.chubbworkplacebenefits.com</a>
<b>Short Term Disability Insurance</b> MetLife	800-858-6506	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Hospital Insurance</b> MetLife	800-638-5000	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Accident Insurance</b> MetLife	800-638-5000	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Critical Illness Insurance</b> MetLife	800-638-5000	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Legal Services</b> LegalShield	800-654-7757	<a href="http://www.legalshield.com">www.legalshield.com</a>
<b>Employee Assistance Program (EAP)</b> MetLife	888-319-7819	<a href="http://www.metlifeeap.lifeworks.com">www.metlifeeap.lifeworks.com</a> User name: metlifeeap Password: eap
<b>401(k)</b> Fidelity Investments	800-835-5097	<a href="http://www.401k.com">www.401k.com</a>
<b>MetLife &amp; Chubb VB Claims Help</b> Explain My Benefits	321-296-8060, Option 2	<a href="mailto:service@explainmybenefits.com">service@explainmybenefits.com</a>
<b>Legend Human Resources</b>	316-616-6288	<a href="mailto:LSL-HRIS@legendseniorliving.com">LSL-HRIS@legendseniorliving.com</a>



### **Benefit Guide Description**

*This summary of benefits is not intended to be a complete description of Legend Senior Living insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.*

*In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Legend Senior Living maintains its benefit plans on an ongoing basis, Legend Senior Living reserves the right to terminate or amend each plan in its entirety or in any part at any time.*

*For questions regarding the information provided in this overview, please contact your Legend Senior Living human resources representative.*