

2018 Benefits Open Enrollment Guide

SKYLINE®

Medical

Dental

Vision

Disability

Life

Critical Illness

Accident

Wellness

Whole Life

Hospital
Indemnity



Benefits
to keep you
well.

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Welcome

Welcome to your 2018 benefits open enrollment guide. In this guide you will find an overview of the benefits available to you. **We are pleased to announce that open enrollment for our benefit programs will be held November 21 – December 8, 2017.** Because benefits are an important part of your total compensation package, Skyline strives to offer benefits that best fit your needs and help you protect your lifestyle and financial security. We encourage you to read this guide carefully and review your benefit options with your family.

This is an active enrollment, meaning that all benefit-eligible employees must complete an interview with a benefit counselor to have coverage for 2018. For more information on the enrollment process, please see the next page.

What's New for 2018

We are excited to announce the following changes:

- **Lucent Health with PHCS (Private Healthcare Systems) will be the new administrator for your employer-sponsored health plan.** You will receive a new ID card for your medical coverage.
- **Hospital Indemnity will now be available through Aflac** as a voluntary benefit for 2018. You can use this benefit to pay for out-of-pocket expenses and extra bills that can occur relating to hospitalization.

Making Careful Choices

Benefits you elect will be effective through December 31, 2018, unless you have a qualified family status change. Such changes include birth, death, marriage, divorce, adoption, ineligibility of a dependent, or a significant change in health coverage for you or your spouse because of your spouse's employment. Please choose your benefits carefully. If you have a qualifying event, you must notify Human Resources within 31 days of that event to change your benefit elections.

How to Enroll

This year, all benefit-eligible employees will attend an individual benefits meeting with a professional benefit counselor to complete the enrollment process. Your meeting with the counselor is your opportunity to ask questions, get more information, receive help in selecting the benefits that best fit your needs, and complete the enrollment process.

Eligibility

Regular employees working 16 or more hours per week are eligible for Skyline benefits. You are eligible to enroll on the first day of the month following 60 days of employment. Your dependents are eligible for coverage in most plans you elect; the benefit counselor will discuss the benefits available for your dependents during your meeting. Your eligible dependents include your legal spouse, children, and children for whom you are a legal guardian up to the age of 26, unless otherwise stated.

If you are adding a new dependent for 2018, you must provide proof of eligibility to Human Resources.

Wellness Program

Updates to program with participation in 2018 for incentives in 2019

By participating in Healthy Directions in 2018, Skyline will, for the 2019 medical insurance plan year, offer a health insurance premium discount from the to be determined 2019 rates. The actual discount will be provided at a later date. Any enrolled employee and spouse who voluntarily participates and completes the listed wellness initiatives may earn the premium discount for 2019. Both you and your covered spouse must voluntarily participate and complete the following items:

1. Complete an annual physical exam during the period from September 1, 2017 – August 31, 2018
2. Return the registration form and physician form by September 30, 2018

We are not requiring any tobacco usage certification this year. If you are a tobacco user, please talk to your doctor about your options.

Medical Plans *new for 2018!*

Because there's nothing more important than your health, Skyline is proud to announce a new partnership with Lucent Health, combined with Private Healthcare Systems (PHCS) and HealthSmart physician networks, effective January 1, 2018. Please see the chart on Page 3 for highlights on your medical plan options.

- You will receive a new ID card for your medical program. Please be sure to provide this to your doctor's office after January 1, 2018.
- **A Physicians PPO network will still be utilized for physician and other non-hospital provided services.** Your out-of-pocket expenses will be less when you see a physician within the network. This includes services such as visiting your Primary Care Physician, specialist, chiropractor, dermatologist, OBGYN, or therapist.
- **For inpatient and outpatient services, your plan is open access, allowing you to choose any facility.** There is no specific network of hospitals or outpatient facilities that you have to choose from. This includes services such as visiting hospitals, urgent care facilities, surgery centers, and emergency rooms. Non-emergency services will need to be precertified by your provider. It's always best to call the number on your ID card and double check that the provider has precertified your service before you go.
- For physicians in Indiana or Texas, please search for providers in the physician/ancillary only network at www.healthsmart.com. For physicians in any other state, please search for providers at www.multipan.com.
- **Your pharmacy program will be staying with CVS/Caremark.** Please continue to use that ID card for your pharmacy payment.
- **The Patient Advocacy Center (PAC) is a service offered to members of our Health Plan.** If you receive a balance bill from your provider for an amount above the deductible and co-insurance, please contact the Patient Advocacy Center. A Patient Advocate will guide you through the process and handle all communication on your behalf.

Medical Plan Features

Please see the chart below for highlights on your medical plan options. The Summary of Benefits and Coverage (SBCs) is available on your online employee portal. A paper copy is also available upon request.

Medical Plan Features				
Benefit	PPO		HSA	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductibles				
Single	\$5,000		\$2,700	
Family	\$10,000		\$5,400	
Co-insurance				
Medical and Rx	80%	60%	90%	60%
Annual Medical and Rx Out-of-Pocket Maximum				
Single	\$6,350		\$5,000	
Family	\$12,700		\$10,000	
Physician Services				
Preventive Office Visit	100%, no deductible	Not covered	100%, no deductible	Not covered
Office Visit	\$25/\$40 co-pay	60% after deductible	90% after deductible	60% after deductible
Hospital Services				
Inpatient	\$250 co-pay 80% after deductible	\$250 co-pay 60% after deductible	90% after deductible	60% after deductible
Outpatient	80% after deductible	60% after deductible	90% after deductible	60% after deductible
Emergency Services				
Emergency Room	\$150 co-pay 80% after deductible		90% after deductible	
Hi-tech X-rays and labs	80% after deductible		90% after deductible	
Urgent Care	80% after deductible	60% after deductible	90% after deductible	60% after deductible
Prescription Coverage Administered by CVS/Caremark <i>Generic/Formulary Brand/Non-formulary Brand</i>				
Retail	\$5/\$45/\$90		90% after deductible	
Mail Order	\$10/\$60/\$120		90% after deductible	

Hospital Indemnity *new for 2018!*

You have the option to enhance your medical plan with additional hospital benefits from Aflac. These benefits are designed to provide financial protection by paying you a benefit for hospital admission, hospital confinement, and ICU care. You can use this cash benefit to pay for out-of-pocket expenses and extra bills that can occur relating to hospitalization, or use the funds however you see fit—it's up to you. You can also earn an additional \$50 per year per insured for completing a qualified health screening. To file a claim for this benefit, please contact Aflac.

Hospital Indemnity *available as an enhancement to your medical plan*

Event

Benefit

Hospital Admission

\$1,000 once per year

Hospital Confinement

\$150 per day, up to 31 days

Hospital Intensive Care

\$150 per day, up to 10 days

Intermediate Intensive Care Step-Down

\$75 per day, up to 10 days

Health Savings Account (HSA)

The HSA is a tax-advantaged, interest-bearing account used to pay for eligible health care expenses. You can make pretax contributions to the HSA, and all the money in the account is yours to keep, even if you leave or retire from Skyline. You can use this money to cover eligible medical, prescription drug, dental, or vision expenses. You must be enrolled in the HDHP \$2,700 medical plan to be eligible for the HSA. If you choose to make a pretax election, Skyline will open an account for you with SelectAccount.

You can withdraw funds from your HSA to pay for current health care expenses, or you can keep the money in your account to pay for future expenses. You never pay taxes on the money you withdraw when you use it to pay for current or future eligible expenses. If you use HSA funds for ineligible expenses, tax penalties will apply. At the end of the year, any money in the HSA rolls over to the next year—you never lose it! Skyline will deposit your contributions into your account on each pay period.

HSA Eligibility Rules:

- Must be covered by a qualified HDHP and not be covered by any other non-HDHP insurance
- You cannot be enrolled in Medicare Part A or Part B or Tricare
- You cannot be claimed as a dependent on someone else's tax return
- 2018 HSA Contribution Limits: \$3,450 for single coverage/\$6,900 for family coverage
- Employees age 55 or over may contribute an additional \$1,000

Life Insurance

Basic Life and Accidental Death and Dismemberment (AD&D) Insurance is paid for by Skyline and provided at no cost to you.

Supplemental Life Insurance is available in addition to your Skyline-provided basic life insurance. You may also purchase life insurance for your dependents if you purchase additional coverage for yourself. Employees must complete evidence of insurability and submit to HR for approval by the insurance company.

<i>Employee</i>	Up to \$500,000 in \$10,000 increments
<i>Spouse</i>	Up to \$250,000 in \$10,000 increments, not to exceed 100% of the amount of employee's supplemental life insurance
<i>Children</i>	Ages 14 days to six months: \$500 Ages six months to 26 years: up to \$10,000 in \$2,000 increments

Whole Life Insurance

Whole Life Insurance is available through Aflac. Whole Life provides permanent and portable life insurance protection for yourself and your family. This policy can build cash value over time, which you can apply towards a paid-in-full life policy or borrow again later. **During this enrollment period only, you can elect up to \$50,000 of coverage without answering medical questions!**

Disability Insurance

Short Term Disability (STD) Insurance provides employees working 30 or more hours per week with a portion of your income up to 26 weeks if you become disabled due to an injury or illness. Benefits begin on the first day for an injury and on the eighth day for an illness. This benefit is paid for by Skyline and is provided at no cost to you. During this enrollment there will be no evidence of insurability will be required. Skyline does not send a file feed so employees must complete a new application for any coverage level changes and that form must be signed and added within the enrollment period.

Supplemental Short Term Disability (STD) Insurance is available in addition to your Skyline-provided coverage. The amount of coverage you can purchase is based on your job classification. To add STD coverage, employees must complete evidence of insurability and submit to HR for approval by their insurance company. This insurance is not available to anyone that was previously denied or withdrew their coverage.

Accident Insurance

Accident insurance includes coverage for off-the-job accidents. Having an unexpected accident can cause more than physical injury; it can hurt your bank account too.

This policy can help you pay for out-of-pocket expenses associated with an accident by paying you a benefit depending on the injuries you suffer and the treatment you receive. You can use the money as you see fit, whether to pay for expenses associated with your accident, like a trip to the emergency room, or to pay for childcare so you can get to the doctor for a follow-up visit. The policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides.

Critical Illness Insurance

Critical illness insurance protects your family and your assets. No one saves to get sick, which is why being diagnosed with a covered condition can be especially draining, both emotionally and financially. The policy provides you with a lump sum cash benefit in the event you or an insured loved one is diagnosed with a covered condition such as cancer, heart attack, or stroke. It can help provide financial protection so you can focus on what's really important—getting better.

You have the option of picking from two levels of coverage so you can make sure you have the right protection for your family. Plus, the policy will also pay you a benefit when you complete a qualified health assessment.

How the Plan Works*



Joe's Critical Illness policy provided the following benefits:

Wellness Benefit:	\$100
Heart Attack Benefit:	\$20,000
Cancer Benefit:	\$20,000
Total Benefits:	\$40,100

**This example is for illustrative purposes only; your actual benefits may differ.*

Value-Added Benefits from Aflac

If you participate in Aflac's accident, critical illness, or hospital indemnity programs, you will have access to value-added services at no additional cost.

- **Health Advocacy from Health Advocate** gives you access to Personal Health Advocates who can help you find providers, schedule appointments, resolve benefits issues, and more.
- **Medical Bill Saver from Health Advocate** can help you negotiate medical and dental bills of \$400 or more that are not covered by health insurance.
- **Telemedicine from MeMD** provides 24/7/365 access to U.S. licensed health providers. When you have a health issue, log on and request a provider consultation for a range of health issues such as allergies, colds, and medication refills for \$35 per visit.

Dental

Because maintaining your smile is important, Skyline offers two dental plans through MetLife. Although you have the option to see any provider you wish, you will receive the best benefits when you choose an in-network dentist.

Dental Plan Features		
	Low PPO Option	High PPO Option
Deductible	\$75	\$50
Preventive Services	100%	100%
Basic Services	70% after deductible	80% after deductible
Major Services	40% after deductible	50% after deductible
Orthodontia (Children to 19 only)	N/A	50% up to \$1,000
Annual Maximum	\$1,000	\$1,000

To locate a dentist in your area, please visit www.metlife.com/dental.



Vision

We are proud to offer vision benefits through both the EyeMed and VSP networks. Although you have the option to see any provider you wish, you will receive the best benefits when you choose an in-network doctor.

Vision Plan Features				
Benefit	EyeMed Access		VSP	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Benefit				
Exam	\$20 co-pay	\$35	\$20 co-pay	\$45
Eye Glasses				
Frames	\$130 allowance	\$65	\$120 allowance	\$70
Lenses <i>single/bifocal/trifocal</i>	\$20 co-pay	\$25/\$40/\$55	\$25 co-pay	\$30/\$50/\$65
Contacts				
Exam	Standard: co-pay up to \$55 Premium: 10% discount	N/A	Co-pay up to \$60	N/A
Conventional	\$130 allowance	\$104	\$120 allowance	\$105
Frequency				
Exam	Once every 12 months		Once every 12 months	
Frame	Once every 24 months		Once every 24 months	
Lenses or Contacts	Once every 12 months		Once every 12 months	



To locate a VSP provider in your area, log on to www.vsp.com.

To locate an EyeMed provider in your area, log on to www.eyemedvisioncare.com.

The Cost of Your 2018 Benefits

The benefits that Skyline is offering for 2018 are a valuable part of your overall compensation package. The tables below show the weekly employee cost for medical (Tier 1 rates), dental, and vision insurance.

PPO				
	Non-wellness	10% Discount Tobacco only	20% Discount Physician only	30% Discount Physician & Tobacco
Employee	\$148.61	\$133.74	\$118.88	\$104.02
Employee + Spouse	\$475.54	\$427.98	\$380.43	\$332.88
Employee + Child(ren)	\$455.72	\$440.86	\$426.00	\$411.14
Family	\$515.16	\$467.61	\$420.06	\$372.50

HSA				
	Non-wellness	10% Discount Tobacco only	20% Discount Physician only	30% Discount Physician & Tobacco
Employee	\$275.35	\$247.82	\$220.88	\$192.75
Employee + Spouse	\$660.83	\$594.74	\$528.66	\$462.58
Employee + Child(ren)	\$633.29	\$605.76	\$578.22	\$550.69
Family	\$715.89	\$649.81	\$583.73	\$571.65

Dental Rates		
	Low	High
Employee	\$3.95	\$5.13
Employee + Spouse	\$8.40	\$10.92
Employee + Child(ren)	\$8.20	\$10.66
Family	\$13.79	\$17.92

Vision Rates		
	EyeMed	VSP
Employee	\$1.06	\$1.55
Employee + Spouse	\$2.12	\$3.09
Employee + Child(ren)	\$2.33	\$3.31
Family	\$3.67	\$5.29

Benefit Contact Information			
Plan	Provider/Contact	Phone Number	Website/Email
Whole Life	Aflac	800-433-3036	www.aflac.com
Hospital Indemnity	Aflac	800-433-3036	www.aflac.com
Accident	Aflac	800-433-3036	www.aflac.com
Critical Illness	Aflac	800-433-3036	www.aflac.com
Medical	Anthem	866-350-7597	www.anthem.com
Pharmacy	CVS/Caremark	866-240-4915	www.caremark.com
Wellness Program	Healthy Directions	866-350-7597	www.livehealthonline.com
Dental	MetLife	800-942-0854	www.metlife.com/dental
Patient Advocacy Center (PAC)	n/a	888-837-2237	patientadvocacy@hstechnology.com
Life/Disability	Reliance	800-351-7500	www.reliancestandard.com
Vision	EyeMed	866-392-6057	www.eyemedvisioncare.com
Vision	VSP	800-877-7195	www.vsp.com

Open enrollment will be held November 21 – December 8, 2017.

This guide summarizes the key features of Skyline Corporation Health Benefit Plans. If any conflict arises between the information stated here and any Plan provisions, the terms of the actual Plan documents or other applicable documents will govern in all cases. Provisions of the plans and eligibility for coverage to do not constitute a contract of employment with any individual. Plans described in this Guide are subject to change at the discretion of Skyline Corporation.