



## Michigan Consultant Benefits January 1, 2021 – December 31, 2021

We are proud to provide you with group health insurance. You are eligible for benefit coverage on the first of the month following sixty (60) days of employment. Deductions are made on a weekly basis. In the four (4) months with five (5) pay checks, deductions will be taken in the first four (4) pay checks only. Benefits must be elected thirty (30) days from start date or qualifying life event.

<b>Medical Plan Options (Employer Sponsored)</b>		
<b>Total Health Care (THC) 5000 HMO (Available in SE Michigan Only)</b>		<b>Per Pay Amount</b>
<i>\$5000/\$10,000 single/family deductible            Coinsurance 30% after deductible            Office Visit Co-Pay \$30 Primary/\$60 Specialist            Out of Pocket Maximum \$7,000/\$14,000 single /family            THC Vision Plan Included at no additional cost to employee. BCBSM Vision may be elected for additional coverage outside the THC Network</i>	Single	24.00
	Employee +1	63.00
	Family	125.00
<b>Blue Care Network (BCN) 3000 HMO (Available in Michigan Only)</b>		<b>Per Pay Amount</b>
<i>\$3,000/\$6,000 single/family deductible            Coinsurance 20% after deductible            Office Visit Co-Pay \$30 Primary/\$50 Specialist            Out of Pocket Maximum \$6,850/\$13,700 single /family</i>	Single	38.00
	Employee +1	115.00
	Family	140.00
<b>Blue Cross Blue Shield (BCBS) Simply Blue 3000 PPO with HSA</b>		<b>Per Pay Amount</b>
<i>\$3,000/\$6,000 single/family deductible            Coinsurance 30% after deductible            Office Visit Co-Pay 30% after deductible            Out of Pocket Maximum \$6,350/\$12,700 single /family</i>	Single	57.00
	Employee +1	175.00
	Family	250.00
<b>Blue Cross Blue Shield (BCBS) Simply Blue 4000 PPO</b>		<b>Per Pay Amount</b>
<i>\$4,000/\$8,000 single/family deductible            Coinsurance 30% after deductible            Office Visit Co-Pay \$40 Primary/\$60 Specialist            Out of Pocket Maximum \$6,350/\$12,700 single /family</i>	Single	75.00
	Employee +1	200.00
	Family	250.00



Dental Plan Options (Employer Sponsored)		
<b>BCBS Dental EPO</b>		<b>Per Pay Amount</b>
<i>In-Network Only</i> <i>\$1000 annual max benefit</i> <i>\$25 single deductible</i> <i>\$75 family deductible</i>	Single	5.00
	Employee + 1	11.00
	Family	19.00
<b>BCBS Dental PPO</b>		<b>Per Pay Amount</b>
<i>In &amp; Out of Network</i> <i>\$1000 annual max benefit</i> <i>\$25 single deductible</i> <i>\$75 family deductible</i>	Single	8.00
	Employee + 1	17.00
	Family	29.00
Vision Plan (Employee Paid)		
<b>BCBS Vision VSP</b>		<b>Per Pay Amount</b>
<i>Exam every 12 months</i> <i>Lenses/Contacts every 12 months</i> <i>Frames every 12 months</i>	Single	1.26
	Employee + 1	2.51
	Family	4.16

#### **401(k) Savings Retirement Plan**

The 401(k) Savings Retirement Plan is administered through ADP Retirement Services. Epitec matches 25% per dollar of employee contribution up to the first 6% of your gross wages. You can elect from Fidelity investments and investment models. We also offer a Roth IRA deferral option (post tax). Eligibility and participation will be effective on the first day of the month following your hire date. For example, if you are hired on August 17th, your eligibility date would be September 1st.

#### **Holidays**

You can decline holiday pay in favor of a higher pay rate. You can elect holidays recognized by both Epitec and the Client up to a max of 10 holidays dependent upon what the Client observes. For example, if the Client only observes the 6 national holidays, 6 would be the max you can elect.

#### **Paid Time Off ("PTO")**

PTO time is an accrued benefit and it can be negotiated as part of your tailored compensation package. It will take an accrual of approximately 2080 hours worked or paid to see the full value of this benefit. The maximum rate a consultant can accrue PTO at is .0576 per hour, which is 3 weeks of PTO per calendar year. You can always decline PTO time in favor of a higher pay rate. You are eligible to use PTO after three (3) full calendar months of employment.

The annual PTO accrual amounts available are listed below:

- 1 week PTO accrue PTO at .0192 per hour
- 2 weeks' PTO accrue PTO at .0384 per hour
- 3 weeks' PTO accrue PTO at .0576 per hour



***Life and AD&D Coverage***

Each full-time employee is offered \$15,000 of employer paid Basic Life/Accidental Death and Dismemberment. You may purchase optional Life & AD&D insurance in increments of \$10,000 up to a max of \$200,000. Spouse and dependent coverage is also available.

***Voluntary Short-Term & Long-Term Disability Coverage***

Epitec offers short and long term disability coverage on a voluntary basis. Rates, age-bands and calculation tables can be found in our summary plan description.

***Voluntary Life Coverage***

Epitec offers voluntary life insurance coverage for you, your spouse, or child(ren) on a voluntary basis. Rates, age-bands and calculation tables can be found in our summary plan description.

***Contact us through the Epitec Employee Portal***

If you have questions contact our Employee Care Team on the [Epilink Employee Portal](#) or call (248) 864-7215.