



Employee Benefits Manual

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## Introduction

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**AbelCine Tech, Inc.** is committed to providing high quality benefits to you and your family. We have selected coverage from top insurers and opted to subsidize a significant portion of the cost for you and your dependents where eligible.

This brochure provides highlights of your benefit options. For complete plan details, refer to the official plan documents as they are controlling and shall be given full force and effect.

Should you have any questions, please contact our benefits consultants:

- [Medical Insurance](#)
- [Dental Insurance](#)
- [Vision Insurance](#)
- [Life & Disability Insurance](#)
- [Commuter Benefits](#)
- [Flexible Spending Account](#)
- [Discount Programs](#)
- [Gym Reimbursement Program](#)
- [Employee Assistance Program](#)

## Health Benefits

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Coverage is provided through *Oxford*. Coverage can begin 60 days following your date of hire. Employees may enroll their eligible dependents to the coverage. Eligible dependents include:

- Your spouse (unless you are legally separated)
- Your dependent children to age 26 (coverage ends on the end of the calendar year)
- Domestic partners meeting specific eligibility criteria

	Oxford Freedom Low Plan EPO		Oxford Freedom High Plan POS	
<b>Drug Card</b>				
Prescription Card – Retail (30 day)	\$15/\$25/\$50		\$10/\$25/\$50	Not Covered
Prescription Card - Mail Order (90 day)	\$37.50/\$62.50/\$125		\$25/\$62.50/\$125	
Prescription Deductible (Calendar Year)	\$100, waived for generics		\$100, waived for generics	
<b>OON Reimbursement</b>				390% Medicare
<b>Major Medical</b>	<i>In Network</i>	<i>Out of Network</i>	<i>In Network</i>	<i>Out of Network</i>
Deductible - Ind/Fam (Calendar Year)	\$500/\$1,000		N/A	\$3,000/\$6,000
Co-Insurance	0%		N/A	30%
Out-of-Pocket Maximum (Calendar Year)	\$2,000/\$4,000 (incl ded)		\$2,500/\$5,000	\$6,000/\$12,000 (incl ded)
Primary Care Office Visit	\$25 co-pay		\$25 co-pay	Ded then 30%
Preventive Care	No Charge		No Charge	Ded then 30%
Diagnostic Tests - X-Ray/Lab	\$0/Ded & Colns		No Charge	Ded then 30%/Not Covered
Complex Imaging* (MRI, CT/PET Scan)	Facility: Ded & Colns Office: \$40 co-pay		Facility: No Charge; Office: \$40 co-pay	Ded then 30%
Specialist	\$40 co-pay		\$40 co-pay	Ded then 30%
Urgent Care	\$40 co-pay		\$40 co-pay	Ded then 30%
<b>Hospital &amp; Surgical Benefits</b>				
In-Patient*	Ded & Colns		\$500 co-pay/admit	Ded then 30%
Out-Patient*	Ded & Colns		\$500/ \$250 co-pay	Ded then 30%
Emergency Room	\$200 co-pay		\$150 co-pay	\$150 co-pay
<b>Mental Health &amp; Substance Abuse</b>				
In-Patient*	Ded & Colns		\$500 co-pay/admit	Ded then 30%
Out-Patient	IOP Facility: No Charge; Office: \$25/40 co-pay		IOP Facility: No Charge; Office: \$25/40 co-pay	Ded then 30%
<b>Other</b>				
Outpatient Therapy - PT/ST/OT*	\$40 co-pay (60 visits/cal yr combined)		\$40 co-pay (90 visits/cal yr combined)	Ded then 30%
Chiropractic Care*	\$40 co-pay		\$40 co-pay	Ded then 30%
Gym Reimbursement** (50 visits per 6 months)	\$200/6 month – Employee \$100/6 month – Spouse/dependent children age 13 or older		\$200/6 month – Employee \$100/6 month – Spouse/dependent children age 13 or older	

\*Prior Authorization may apply

\*\*Gym reimbursement for employees & covered spouses. Dependent children age 13 or older are now eligible.

## Dental Benefits



Coverage is provided through *Guardian*. Coverage can begin 60 days following your date of hire. Employees may enroll their eligible dependents to the coverage. Eligible dependents include:

- Your spouse (unless you are legally separated)
- Your dependent children to age 26 (coverage ends on 26<sup>th</sup> birthday)
- Domestic partners meeting specific eligibility criteria

Each participating employee is required to contribute a portion of his or her health insurance premium. This pre-tax contribution is subject to change at the discretion of the principals.

Rates are in effect from July 1, 2024 to June 30, 2025. Rates may differ slightly due to rounding.

	Guardian DentalGuard Preferred PPO	
	<i>In-Network</i>	<i>Out-of-Network*</i>
<b>Deductible</b> (Calendar Year - Waived for Preventive Services)	\$50/\$150	\$50/\$150
<b>Annual Maximum</b> (Calendar Year)		\$1,000
<b>Type 1: Preventive Services</b>	100%	100%
Oral Exams (2x/12 mos.)		
Cleanings (2x/12 mos.)		
X-Rays (Full-mouth series 1/36 mos.)		
Fluoride Treatment (to age 19, 2x/12 mos.)		
Space Maintainers		
Sealants (to age 16, 1/36 mos.)		
<b>Type 2: Basic Services</b>	50%	50%
Amalgam & Composite Fillings		
Simple Extractions		
Root Canal Treatment		
Periodontal Surgery		
Periodontal Maintenance		
General Anesthesia		
Scaling & Root Planing		
<b>Type 3: Major Services</b>	50%	50%
Crowns, Inlays & Onlays		
Bridges		
Implants		
Dentures		

\*Covered % is based on 80<sup>th</sup> percentile of UCR

## Vision Benefits



Coverage is provided through *Guardian*. Coverage can begin 60 days following your date of hire. Employees may enroll their eligible dependents to the coverage. Eligible dependents include:

- Your spouse (unless you are legally separated)
- Your dependent children to age 26 (coverage ends on 26<sup>th</sup> birthday)
- Domestic partners meeting specific eligibility criteria

Each participating employee is required to contribute a portion of his or her health insurance premium. This pre-tax contribution is subject to change at the discretion of the principals.

Rates are in effect from July 1, 2024 to June 30, 2025. Rates may differ slightly due to rounding.

	Guardian VSP Vision Network – Full Feature	
	<i>In-Network</i>	<i>Out-of-Network</i>
<b>Exam</b> Frequency: 1 per calendar year	\$20 copay	\$39 allowance
<b>Lenses</b> Frequency: 1 per calendar year		
Single Vision Lenses	\$20 copay	\$23 allowance
Bifocal Lenses	\$20 copay	\$37 allowance
Trifocal Lenses	\$20 copay	\$49 allowance
Lenticular Lenses	\$20 copay	\$64 allowance
<b>Contact Lenses * (retail allowance)</b> Frequency: 1 per calendar year		
Elective	\$130 allowance (copay waived)	\$100 allowance
Medically Necessary	\$20 copay	\$210 allowance
<b>Frame (retail allowance)</b> Frequency: 1 per 2 calendar yr	\$130 allowance + 20% discount	\$46 allowance

\*One pair or a single purchase supply of contact lenses in lieu of lenses and frame benefit

## Life and Disability Insurance

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Coverage is provided through *Guardian*. Benefit is for employee only and paid by AbelCine. Coverage will begin 60 days following your date of hire.

You are responsible for paying tax for any coverage above \$50,000.

### **Life and AD&D Insurance:**

- 1x Base Salary to a maximum of \$100,000
- Equal amount of AD&D
- Guarantee Issue
- Benefit reduction to 65% at age 65, 60% at age 70, 75% at age 75 and 85% at age 80

### **Long Term Disability Insurance:**

- 60% of Base Salary
- Maximum of \$10,000 a month
- Guarantee Issue
- 90 day waiting period
- Benefit is paid to Social Security Normal Retirement Age
- AbelCine pays the premium and LTD benefits are taxable

## Commuter Benefits

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Customer Service: (888) 235-9223

<https://commuterbenefits.com/>

Company ID: 109806

Coverage is provided through *My Commuter Check*. Benefit is for employees only.

**Orders must be entered by the 10th of the month for the following benefit period.** For example, to receive an order for use in January, you must place your order before December 10<sup>th</sup>. Changes must be made online before the cut-off date of the 10th of the month for the following benefit month.

### Transit Benefits:

- 2024 Monthly Pre-Tax Contribution Limit of \$315
- Additional money may be added post-tax
- Contributions may be changed on a monthly basis
- Unused contributions rollover
- Order options include:
  - Smart Card (MetroCard, CTA, Clipper, etc.)
  - Reloadable Commuter Check Card
  - Commuter Check Voucher

### Parking Benefits:

- 2024 Monthly Pre-Tax Contribution Limit of \$315
- Additional money may be added post-tax
- Contributions may be changed on a monthly basis
- Unused contributions rollover
- Order options include:
  - Direct Pay (My Commuter Check pays the garage/lot)
  - Reloadable Commuter Check Card
  - Commuter Check Voucher



## Flexible Spending Account

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Coverage is provided through *United Benefit Services* and can begin as of your date of hire.

### Medical Flexible Spending Account (FSA):

- Allows employees to set aside money on a pre-tax basis for IRS eligible medical expenses
- FSA runs on a plan year from 7/1 to 6/30
- 2024 Pre-Tax Annual Contribution Limit: \$3,200
- All IRS eligible expenses:  
<https://www.myuhc.com/member/prefsaCalcExpenses.do?pagelink=eligibleHealthCare>
- Over-the-counter medication and menstrual products are now eligible without a prescription
- Grace period is 2.5 months. You may incur expenses from July 1, 2024 through September 15, 2025.

### Dependent Care Account (DCA):

- Allows employees to set aside money on a pre-tax basis for eligible dependent care expenses
- Expenses are only eligible if the care enables you and your spouse to work, look for work, or go to school full-time. ***If your spouse is a stay-at-home mom or dad, you cannot participate.***
- DCA runs on a plan year from 7/1 to 6/30
- 2024 Pre-Tax Annual Contribution Limit:
  - \$5,000 married, filing jointly
  - \$2,500 single filing separately

## Discount Programs

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**Aflac provides cash benefits directly to you – Use the money for any purpose, including help in paying:**

- Rising deductibles and co-payments.
- The extra cost of going to a medical provider not on your approved network.
- Charges beyond what is reasonable or customary.
- Travel-related expenses for treatment, including airfare, hotels, and meals.
- Everyday living expenses like mortgage (or rent) payment, car notes, groceries, and utility bills.
- Lost income – particularly if the healthy spouse has to leave work to care for the recuperating one.

## Employee Assistance Program (EAP)



Coverage is provided through *Guardian - Uprise Health*

Uprise Health Employee Assistance Program offers services to help promote well-being and enhance the quality of life for you and your family. Your Confidential Employee Assistance Program – Helping find balance between work and home life.

Uprise Health provides guidance for personal issues that you might be facing and information about other concerns that affect your life, whether it's a life event or on a day-to-day basis.

- Unlimited free telephonic consultation with an EAP counselor available 24/7 at 800-386-7055
- Referrals to local counselors — up to three sessions free of charge
- State-of-the-art website featuring over 3,400 helpful articles on topics like wellness, training courses, and a legal and financial center

**Guardian - Uprise Health can offer help with:**

### **Health**

- Healthy Living
- Stress Management
- Mental Health
- Diet and fitness
- Overall wellness

### **Family**

- Parenting Support
- Child and Elder care
- Learning program
- Special needs help

### **Legal and Financial**

- Legal Issues
- Will preparation
- Taxes and debt
- ID theft services
- Financial tools and assistance
- Medical bill negotiation tools

## Discount Programs

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### Special Rates for employees of AbelCine:

#### GREEN OPTION

\$34 Month to Month All access (includes Manhattan)

#### BLUE OPTION

\$25 Month to Month Regional access (excludes Manhattan)

#### ANNUAL FEE

\$59.99 charged on the 3<sup>rd</sup> day of the 2<sup>nd</sup> month

\$0 buy out fee/ 45-day notice required to cancel

#### For more information:

[corporatemembership@blinkfitness.com](mailto:corporatemembership@blinkfitness.com)



### Special Rates for employees of AbelCine:

#### NATIONWIDE ACCESS

\$76 per month

#### NYC ACCESS

\$72 per month

#### ONE CLUB NY/HOBOKEN ACCESS

\$69 per month

#### CALIFORNIA ACCESS

\$60 per month.

\$0 enrollment / \$0 processing fee

#### For more information:

[frank.sancilio@crunch.com](mailto:frank.sancilio@crunch.com)

## Gym Reimbursement Program

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Customer Service: (800) 444-6222  
[www.myuhc.com](http://www.myuhc.com)

Reimbursement is provided by *Oxford* and is for enrolled employees and their enrolled spouses/domestic partners. Dependent children age 13 or older are now eligible.

- \$200 per 6 months for employees
- \$100 per 6 months for spouses/partners/dependent children age 13 or older

Your reimbursement period begins on the date of your first fitness facility visit or class and ends after you have completed 50 visits, 50 classes, or a mix of visits and classes that add up to 50. The reimbursement period ends six months from your first visit. You can start a new reimbursement period one day after your last reimbursement period ends.

The claim form can be found on:

[https://www.oxhp.com/secure/materials/SweatEquity\\_ClaimForm.pdf](https://www.oxhp.com/secure/materials/SweatEquity_ClaimForm.pdf)

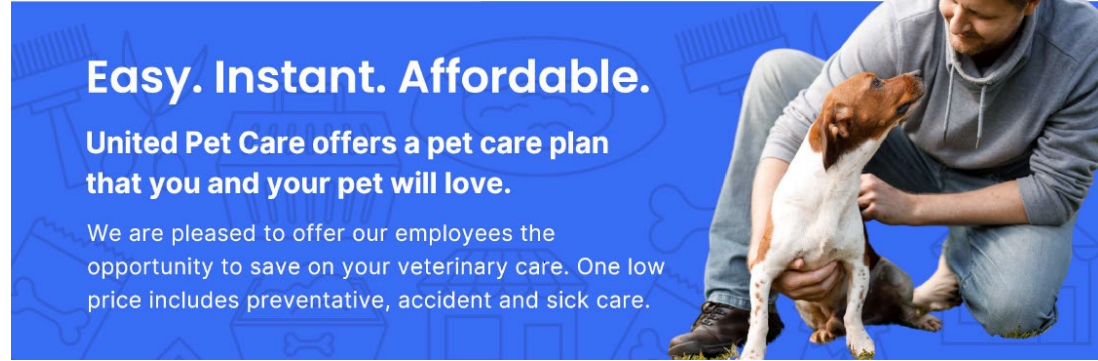
### Examples of qualifying fitness facilities and classes:

- Aerobics
- Boot camps
- Boxing/Kickboxing
- CrossFit
- Indoor rock climbing
- Martial arts
- Personal training
- Pilates
- Pure Barre
- Standard gym, including YMCAs and community centers where fitness services are offered
- Swimming
- Tennis/Racquetball
- TRX
- Weight/Resistance
- Yoga
- Zumba®

### Examples of cardiovascular equipment:

- Elliptical trainer/Cross-trainer
- Rowing machine
- Stair climber
- Stationary bicycle
- Treadmill

## Discount Programs



### Easy. Instant. Affordable.

United Pet Care offers a pet care plan that you and your pet will love.

We are pleased to offer our employees the opportunity to save on your veterinary care. One low price includes preventative, accident and sick care.

#### Wellness Care

Office Visits

Annual Examinations

Vaccinations

Puppy & Kitten Vaccines

*(under age of 1 year, series of vaccines including rabies)*

#### Savings

20%  
to  
50%

#### Additional Procedures

All Surgeries/Hospitalization

Dental Cleaning/Extractions

Diagnostic Testing/Lab Work

Radiology

Medications

Spay & Neuter

#### Savings

20%  
to  
25%

#### Program Pricing

##### Employee Rate Per Month

1 Pet	\$17.50
2 Pets	\$34.00
3 Pets	\$50.50
Each Additional	\$16.50

**Includes Access to  
24/7 Pet Helpline**

- ✘ No deductibles
- ✘ No waiting periods
- ✘ No claim forms



#### Get Care

From two months to twenty years, you can enroll your pet at any stage. We never punish you for age or pre-existing conditions.



#### Feel the Love

From our veterinary providers to our UPC service team, we're all about providing compassion and support for your pet care journey.

*All savings are based on standard agreements. Each Veterinary Provider can choose to increase/decrease discount percentages and/or exclude any service. Please review your specific providers discounts and exclusions prior to selecting them as your primary provider*

**Enjoy discounts, rewards, and perks on 1,000s of brands  
you love in a variety of categories:**

- Travel
- Auto
- Electronics
- Apparel
- Local Deals
- Education
- Entertainment
- Restaurants
- Health & Wellness
- Beauty & Spa
- Tickets
- Auto & Home Insurance





# New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved  
OMB No. 1210-0149  
(expires 6-30-2023)

## PART A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

### What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

### Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

### Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.<sup>1</sup>

**Note:** If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution—as well as your employee contribution to employer-offered coverage—is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

### How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact Gala Napakh

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](http://HealthCare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

<sup>1</sup> An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.