



# 2018 Benefits Guide

## 3 Key Things to Know for Annual Enrollment

1

If you're happy with your current elections, no action is required and your current coverage will roll over to 2018. But it's always a good idea to review this information to see the valuable benefits available to you from Veolia.

2

Your Flexible Spending Account (FSA) elections do not roll over. You must make a new election during annual enrollment.

3



Look for this icon throughout the guide for helpful tips to maximize your benefits.

Veolia North America | **Annual Enrollment: November 1 - November 15, 2017**

Kendall Union Employees



# Welcome to 2018 Annual Enrollment

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**Your current coverage, except flexible spending account elections, will roll over to 2018 unless you make a change.**

You are required to make a new election for FSA during the 2018 annual enrollment. **See inside for more information.**

**Now is the time to review your elections!**

You must log on to the enrollment site through [YourVeoliaBenefits.com](http://YourVeoliaBenefits.com) or call the **Veolia Benefits Center** from November 1 through November 15, 2017 to review your current elections or make changes for your 2018 benefits.

At Veolia North America (VNA), we're proud to offer a competitive, valuable benefits program, which helps us attract, retain and reward our U.S. employees.

**Now is the time to enroll in or make changes to:**

- ❖ Medical/prescription drugs
- ❖ Dental
- ❖ Vision
- ❖ Spending accounts — flexible spending accounts (FSAs) and the health savings account (HSA)
- ❖ Supplemental life and accidental death & dismemberment (AD&D) insurance

**Elections or changes will take effect January 1, 2018.**

**Who Is Eligible for Benefits**

- ❖ All active employees regularly scheduled to work at least 30 hours per week
- ❖ Your spouse or same-gender domestic partner
- ❖ Your children, stepchildren, children of your same-gender domestic partner or children in your guardianship up to age 26
- ❖ Adult children, stepchildren, children of your same-gender domestic partner or children in your guardianship of any age who are deemed disabled

**You will be required to provide documentation supporting the eligibility of newly added dependents.**

We encourage you to log in to the enrollment system and confirm your covered dependents and beneficiaries during annual enrollment.

**Note: If you are represented by a bargaining unit, you should refer to your union contract, which identifies any Company benefits for which you may be eligible.**

**What's Changing for 2018**

**New HSA and FSA Vendor**

To learn more about ConnectYourCare, see the insert included in your annual enrollment packet.

**New 2018 IRS HSA contribution limits**

For those who participate in the Kendall HSA Plan, you can contribute more in 2018. IRS contribution limits will increase to \$3,450 for individual coverage and \$6,900 for family coverage.



# How to enroll in or make changes to your 2018 benefits

You have two easy ways to enroll in or make changes to your 2018 benefits:



## 1. YourVeoliaBenefits.com.

- ❖ Click on **Enroll in your 2018 Benefits**.
- ❖ In the **Log In** box, enter your 8-digit ADP Employee ID number.
- ❖ Your 4-digit PIN is the month and day you were born (MMDD). For example, if you were born on May 1, you would enter 0501.
- ❖ Click **Enter**.
- ❖ Click **Enroll Now**.
- ❖ Click **Start New Enrollment** to begin the enrollment process.
- ❖ Confirm your 2018 benefit elections (otherwise, they will not be saved or recorded).
- ❖ Write down your confirmation number and print your Confirmation Statement for your records.
- ❖ Review your Confirmation Statement and ensure your elections are accurate. If not, you will need to log in again or call the Veolia Benefits Center to make corrections before the enrollment deadline.



## 2. Veolia Benefits Center

Call **1-888-892-6564, Monday – Friday, 7 A.M. to 7 P.M. CST** during annual enrollment.

### Before You Enroll, Compare Your Options!

The Medical Plan Cost Estimator (MPCE) on **YourVeoliaBenefits.com** can help you to:

- ❖ **Estimate your health care costs**
- ❖ **Compare medical plan options**
- ❖ **See how much you can save**

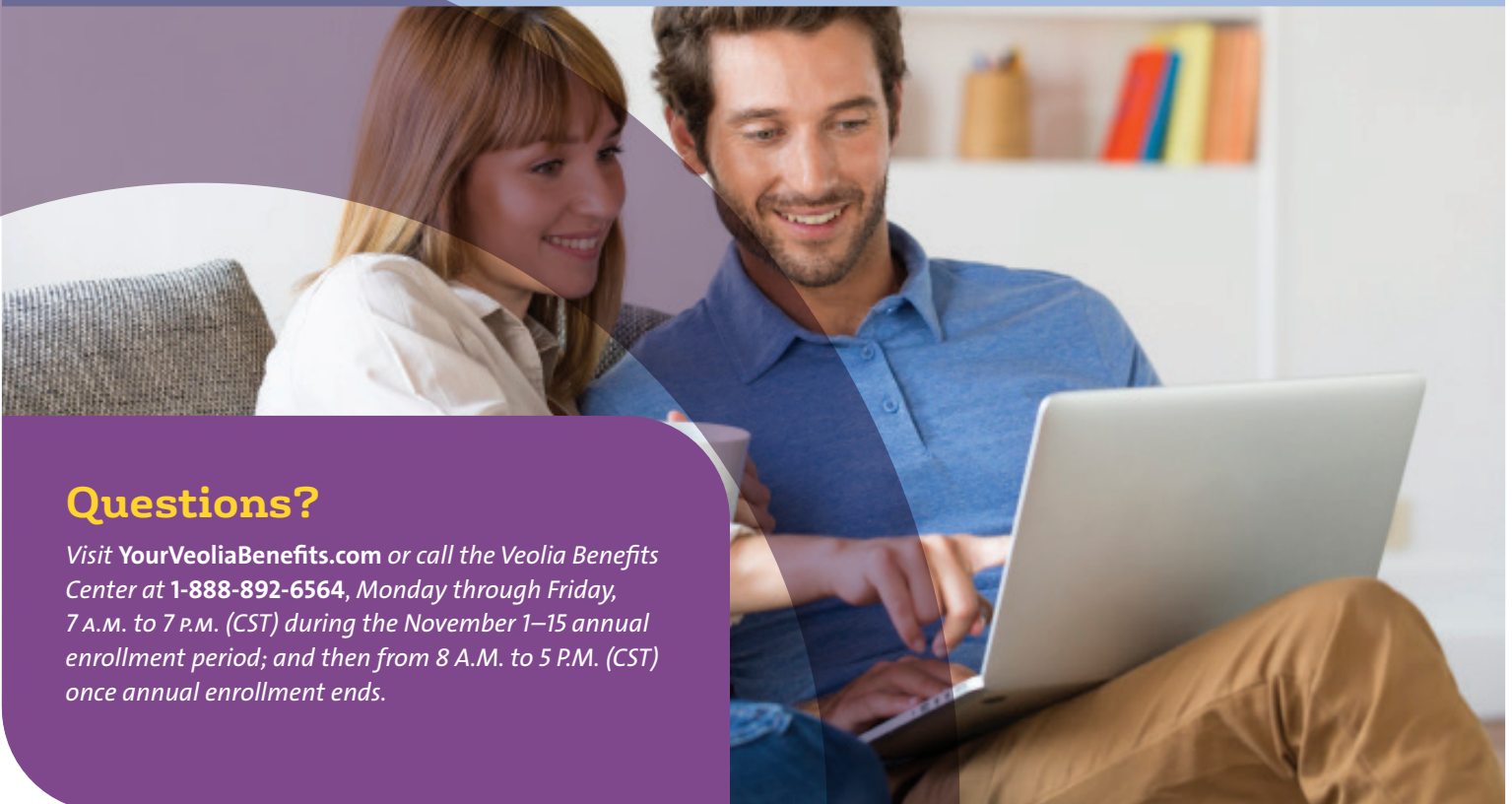
## IMPORTANT!

If you're happy with your current coverage, your 2017 benefit elections will automatically roll over to 2018, **EXCEPT** for your flexible spending account (FSA) elections. You must elect these every year.

If you don't want benefits coverage from Veolia, **you must actively waive coverage during annual enrollment.**

## Questions?

Visit **YourVeoliaBenefits.com** or call the Veolia Benefits Center at **1-888-892-6564, Monday through Friday, 7 A.M. to 7 P.M. (CST)** during the November 1–15 annual enrollment period; and then from **8 A.M. to 5 P.M. (CST)** once annual enrollment ends.



## New Hires/Newly Eligible

Newly hired or newly benefits-eligible employees are eligible for benefits starting on their hire date. **You must enroll in benefits or actively waive coverage** within 45 calendar days of your hire date or the date you become eligible for benefits. **If you do not elect or waive coverage, you will be enrolled in the following default coverage and the associated cost will be deducted from your pay:**

- ❖ Employee only medical/prescription drug coverage in the Kendall HSA Plan;
- ❖ Basic life and basic AD&D insurance;
- ❖ Long-term disability (LTD) insurance;
- ❖ Short-term disability (STD) insurance; and
- ❖ Employee assistance program.

**If you experience a qualified life event, you must contact the Veolia Benefits Center within 31 calendar days of the event in order to change your benefit elections. Do not wait to call the Veolia Benefits Center until you have a Social Security number or other documentation (such as a birth certificate or marriage certificate).**

You can reach the Veolia Benefits Center Monday through Friday, 8 A.M. to 5 P.M. (CST) at **1-888-892-6564**.

## How you pay for your benefits

### YOU pay for...

Pre-tax paycheck deductions	After-tax paycheck deductions
Medical	Supplemental life
Dental	Supplemental AD&D
Vision buy-up plan	
Health savings account	
Health Care, Limited Purpose and Dependent Care Flexible Spending Accounts	

### VEOLIA pays for...

Contribution to a health savings account for employees in the Kendall HSA Plan

Basic life and basic AD&D

Long-term disability plan

Employee assistance program

Short-term disability

HealthAdvocate (health care assistance program)

## Changing Your Benefits Outside of Annual Enrollment

You can only make changes outside of annual enrollment if you experience a qualified life event, such as:

- ❖ Marriage, divorce or establishment or dissolution of a domestic partnership;
- ❖ Birth or adoption of a child; or
- ❖ Loss or gain of other coverage through your spouse's or same-gender domestic partner's employment.

**2018 Annual Enrollment is November 1 – November 15, 2017**

## Medical plans

Choose the coverage that best fits your needs from our three medical plan options:

- » One Health Savings Account (HSA) plan option
- » Two Preferred Provider Organization (PPO) plan options

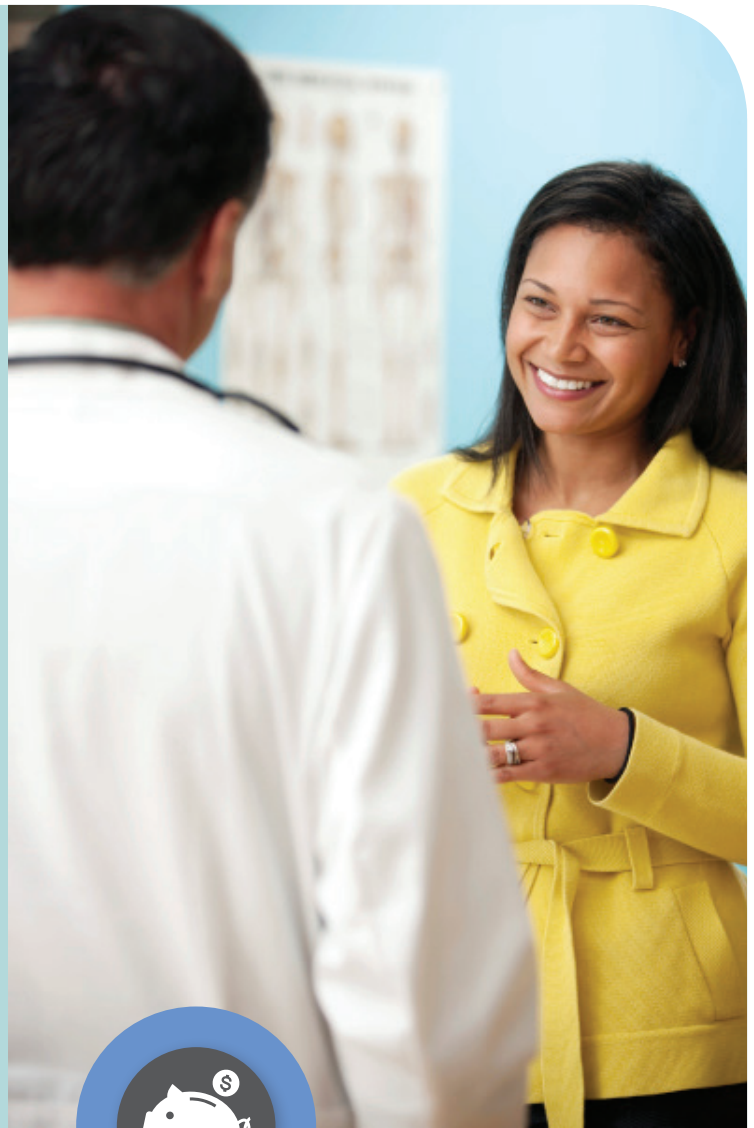
### Kendall Health Savings Account (HSA) Plan

The Kendall HSA Plan works very similarly to the PPO Plans: both types provide comprehensive medical and prescription drug coverage and use the same provider networks. In-network preventive care is covered at 100% with no deductible, helping you and your family to stay well. And, you can save money on non-preventive care when you use in-network providers.

Depending on how you use health care in a typical year, you could save money by enrolling in the Kendall HSA Plan with a health savings account. This plan allows you to set aside pre-tax dollars to cover eligible expenses, including out-of-pocket expenses for health, dental and vision. In addition, to spending it on your current health expenses, you can also save the money for future health care expenses, to be used even after you retire. Your spouse and covered dependents (not including domestic partners and their children) can pay for eligible expenses with this money too.

### Preferred Provider Organization (PPO) Plans

With the Kendall \$15 PPO and Kendall \$25 PPO Plans, you have the freedom to visit the provider of your choice – but you'll pay less when you receive care from doctors, hospitals and other facilities that are in the PPO network. Once you've met your deductible, you'll pay a percentage of the cost of care you receive until you reach the annual out-of-pocket maximum.



## Take Advantage of Free Preventive Care!

Pay nothing out of pocket and avoid potential health problems with free, in-network preventive care.

Some covered preventive care services include:

- » Annual routine physical
- » Well-child visits and immunizations
- » Preventive care/screenings, including pap/routine pelvic exam, mammograms, colorectal cancer screening and PSA (Prostate Specific Antigen)
- » Flu shot
- » Bone density test for osteoporosis
- » Routine dental exams, cleanings and X-rays

**Note:** In order for services to be covered at 100%, the claim must be submitted as routine/preventive and incurred by an in-network provider.

### If you enroll in the Kendall HSA Plan...

Generally, **your deductible will be higher** compared to the PPO Plans — but you'll have the opportunity to save money for eligible health care expenses with an HSA.

**Note:** In order to participate in the Kendall HSA Plan, you cannot be covered by any other medical plan.

### Is an HSA Plan Right for You?

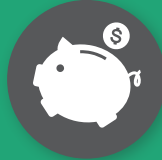
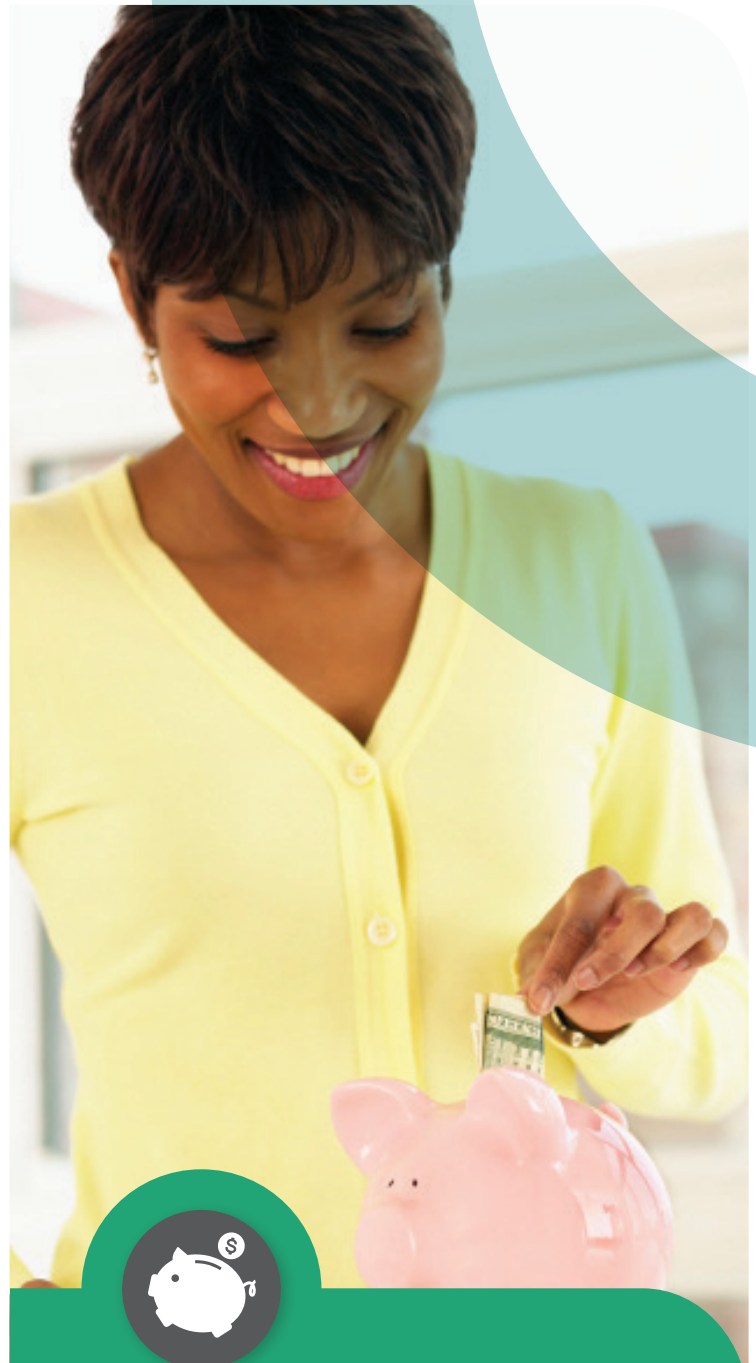
The Kendall HSA Plan could help you save money. You can put aside the money you save on employee contributions compared to the PPO Plans into your HSA to use on eligible expenses — now or later on down the road.

You can also carry any unused balance forward from year to year to use for future health care expenses — even if you leave Veolia. And your health savings account earns interest too, which helps your account balance grow over time.

### The Kendall HSA Plan could be right for you if...

- ❖ You rarely have enough medical expenses during the year to meet the annual deductible.
- ❖ You want an account you can use specifically to budget for health expenses that apply to your deductible and other out-of-pocket health, dental and vision care costs.
- ❖ You want to build interest-bearing savings to help with future health expenses (for example, in retirement).

**Note:** Save your receipts for expenses you pay from your health savings account, in case you have to prove to the IRS that they were eligible expenses. If they weren't, you'll be subject to a tax penalty.



## Free money in the Kendall HSA Plan!

*Veolia contributes money to your HSA if you enroll in the Kendall HSA Plan. Contribution amounts depend on your level of coverage. See page 6 for details.*

For more information or to enroll, go to  
**YourVeoliaBenefits.com.**

## How the health savings account works

### MONEY GOES IN

Your pre-tax contributions



In the Kendall HSA Plan, Veolia contributes money to your health savings account:

**\$500 maximum annual contribution** for employee only coverage

**\$1,000 maximum annual contribution** for other coverage tiers

**Note:**

You and Veolia can contribute up to the 2018 IRS limit:

**\$3,450** for employee only coverage

**\$6,900** for other coverage tiers

Add an extra **\$1,000** if you are age **55** or older

# HSA

### MONEY GOES OUT

You decide to use HSA funds or save it for later and pay with other money when you have an eligible expense — your HSA money comes out tax-free!

Use your HSA to pay the full cost of non-preventive medical care (including prescription drugs) until you meet the deductible. HSA funds can also be used for out-of-pocket dental and vision expenses.

Pay less when you use in-network providers.

### HAVE MONEY LEFT? IT ROLLS OVER!

Unlike flexible spending accounts, the money in your health savings account rolls over from year to year for you to use. Plus, if you leave Veolia, you can take it with you.

**Don't forget!**  
**You can elect, stop or change your HSA contribution amount at any time throughout the year.**

### Want to Know More?

Check out the information available at [ConnectYourCare.com/veolianorthamerica](http://ConnectYourCare.com/veolianorthamerica).

Watch the HSA video on [YourVeoliaBenefits.com](http://YourVeoliaBenefits.com) or call the Veolia Benefits Center at 1-888-892-6564.

# Comparing Your Plan Options

## Key terms to know

<b>Embedded deductible</b>	When covering one or more dependents, each covered person must meet the individual deductible before the plan covers expenses for that person. Or, a combination of family members must meet the family deductible before the plan covers eligible expenses for the family.
<b>Aggregate deductible</b>	When covering one or more dependents, the total family deductible must be met before the plan covers eligible expenses, including prescription drugs.
<b>Embedded out-of-pocket maximum</b>	A family member must meet the individual out-of-pocket maximum before the plan covers eligible expenses. Or a combination of family members can meet the family out-of-pocket maximum before the plan covers eligible expenses.
<b>Aggregate out-of-pocket maximum</b>	The total family out-of-pocket maximum must be met before eligible expenses are covered by the plan for all coverage tiers other than employee only.
<b>Preventive care</b>	In-network preventive services are covered at 100% with no deductible, so you pay nothing.
<b>Deductible</b>	You pay for expenses incurred up to your annual deductible before the plan begins to pay.
<b>Coinsurance</b>	You pay a portion of expenses incurred through coinsurance. This means you and Veolia share the cost of covered non-preventive services after you meet your deductible.
<b>Out-of-pocket maximum</b>	You are protected from catastrophic costs in a given year through the annual out-of-pocket maximum. If you meet the out-of-pocket maximum, the plan pays 100% of covered services for the remainder of the plan year.

## How the plans work

	<b>Kendall HSA Plan</b>	<b>Kendall \$15 PPO and Kendall \$25 PPO Plans</b>
<b>Providers</b>	You can see any provider, but you will pay less when you use in-network providers	You can see any provider, but you will pay less when you use in-network providers
<b>Aggregate vs. embedded deductible</b>	Aggregate deductible	Embedded deductible
<b>Out-of-pocket maximum</b>	<ul style="list-style-type: none"> <li>❖ Deductible</li> <li>❖ Coinsurance for medical and prescription drugs</li> <li>Aggregate out-of-pocket maximum</li> </ul>	<ul style="list-style-type: none"> <li>❖ Deductible</li> <li>❖ Coinsurance for medical and prescription drugs</li> <li>Embedded out-of-pocket maximum</li> </ul>
<b>Prescription drug costs</b>	Count toward your annual deductible and out-of-pocket maximum	Do not count toward your annual deductible
<b>Health savings account</b>	Yes	No
<b>Health Care Flexible Spending Account</b>	Limited Purpose only	Yes

## How much the plans cost

Component	Kendall HSA*	Kendall \$15 PPO	Kendall \$25 PPO
<b>Veolia maximum annual HSA contribution</b> Employee only/other coverage tiers	\$500/\$1,000	N/A	N/A
<b>Preventive</b>	If in-network, covered at 100% with no out-of-pocket cost to employee. If out-of-network, subject to out-of-network deductible and coinsurance, if applicable.		
<b>Deductible</b>			
In-network individual/family	\$1,500/\$3,000	\$0/\$0	\$150/\$450
Out-of-network individual/family	\$3,000/\$6,000	\$400/\$1,200	\$600/\$1,800
<b>Coinsurance: you pay</b>			
In-network	20%	10%	20%
Out-of-network	40%	30%	40%
<b>Out-of-pocket maximum</b>			
In-network individual/family	\$5,000/\$6,850	\$1,000/\$2,000	\$2,000/\$6,000
Out-of-network individual/family	\$10,000/\$20,000	\$2,000/\$4,000	\$4,000/\$12,000
<b>Office visit</b>			<b>After deductible</b>
Primary care physician	<b>After deductible</b>	<b>After deductible</b>	\$25 copay per visit In-network/40% Out-of-network
Virtual visit	20% In-network/ 40% Out-of-network	\$15 copay per visit In-network/ 30% Out-of-network	\$35 copay per visit In-network/40% Out-of-network
Specialist			
<b>Hospital</b>			<b>After deductible</b>
Inpatient	<b>After deductible</b>	<b>After deductible</b>	20% In-network/ 40% Out-of-network
Outpatient	20% In-network/ 40% Out-of-network	10% In-network/ 30% Out-of-network	40% Out-of-network
<b>Emergency room</b>	20% deductible for true emergency; applicable In-network or Out-of-network coinsurance for non-emergency	\$75 copay plus 10% coinsurance (deductible waived) for true emergency; applicable In-network or Out-of-network coinsurance after deductible for non-emergency	\$150 copay plus 20% coinsurance (deductible waived) for true emergency; applicable In-network or Out-of-network coinsurance after deductible for non-emergency

\*In the Kendall HSA Plan, you will pay full price for prescriptions until you meet your medical deductible.



## Save money with the right medical plan!

Use the Medical Plan Cost Estimator (MPCE) to compare your options and select the plan that best fits your needs — you might find you'll save money depending on the plan you choose. You can project how your family will use health care throughout the year and receive an estimate of your out-of-pocket expenses for each option. Log on to [YourVeoliaBenefits.com](https://YourVeoliaBenefits.com) to get started.



## Prescription drug coverage

Prescription drug coverage through Express Scripts is automatically included with each Veolia medical plan, but benefits vary based on:

- ✦ the plan you choose
- ✦ the type of medication you are prescribed
- ✦ where you fill your prescription (retail pharmacy or home delivery)

### Maintenance medication home delivery

If you take a maintenance medication, such as those used to treat high blood pressure or high cholesterol, you'll need to make an important decision on where you fill that prescription.

**At a retail pharmacy, you'll pay the entire cost for a maintenance medication after the second purchase if you do not have that prescription filled through home delivery.**

To avoid higher costs, take advantage of the home delivery pharmacy services from Express Scripts. For more information, contact Express Scripts at **1-888-792-7276** or **Express-Scripts.com**.

### Advanced Utilization Management Programs

The Advanced Utilization Management (AUM) programs help you choose the safest, most cost-effective drug and ensure that your use of the drug meets FDA guidelines.

- ✦ **Prior authorization** ensures clinically appropriate use of medications.
- ✦ **Step therapy** encourages use of clinically effective, lower-cost generic and preferred brand alternatives before higher-cost medications.
- ✦ **Drug quantity management** aligns dispensing quantity with FDA-approved dosage guidelines and other supportive evidence.

The formulary (list of drugs covered under the plan) can change at any time. Be sure to review it regularly by logging into your account at **Express-Scripts.com**.

### 2018 Prescription drug benefits overview

Prescription Drugs	Kendall HSA*	Kendall \$15 PPO	Kendall \$25 PPO
<b>Retail (30 day supply)**:</b>			
> <i>Generic</i>	\$10 copay after deductible	\$5 copay	\$5 copay
> <i>Brand***</i>	\$25 copay after deductible	\$10 copay	\$25 copay
> <i>Non-formulary</i>	\$40 copay after deductible	\$20 copay	\$40 copay
> <i>Maintenance medications</i>	100% of the retail cost (after second purchase)	100% of the retail cost (after second purchase)	100% of the retail cost (after second purchase)
<b>Home Delivery (90-day supply):</b>			
> <i>Generic</i>	\$20 copay after deductible	\$10 copay	\$10 copay
> <i>Brand***</i>	\$50 copay after deductible	\$20 copay	\$50 copay
> <i>Non-formulary</i>	\$80 copay after deductible	\$40 copay	\$80 copay

\*In the Kendall HSA Plan, you will pay full price for prescriptions until you meet your medical deductible.

\*\*Up to two 30-day fills of long-term medications allowed at retail; maintenance medications are then required to be filled in 90-day supplies from Express Scripts Home Delivery.

\*\*\*If you or your physician request a brand drug when a generic is available, you will pay the difference in price between the brand and generic drug plus your copay, and only the copay accrues to your out-of-pocket limit.



## Dental plan

Coverage provided through Delta Dental of Illinois. Visit any dentist you choose, but pay less for care when you use a Delta Dental PPO or Premier in-network dentist.

Dental highlights	
Plan type	Dental PPO
Deductible	\$0 single/\$0 family
Calendar year maximum per covered person	\$1,200
Preventive care <i>Exams, cleanings, X-rays, fluoride, sealants</i>	Covered at 100% with no deductible
Basic services <i>Fillings, simple extractions, root canal therapy</i>	Covered at 100% after deductible
Major services <i>Inlays/onlays, crowns, bridges, dentures, implants</i>	Covered at 70% after deductible
Orthodontia <i>Eligible dependents under the age of 26</i>	Up to \$1,500 lifetime maximum benefit

## Enhanced Benefits Program

Delta Dental of Illinois offers additional services to people who have specific health conditions, including:

- ❖ Periodontal (gum) disease
- ❖ Diabetes
- ❖ Pregnancy
- ❖ High-risk cardiac conditions
- ❖ Kidney failure or who are undergoing dialysis
- ❖ Cancer-related chemotherapy and/or radiation
- ❖ Suppressed immune systems due to HIV positive status, organ transplant, and/or stem cell (bone marrow) transplant

If you have one or more of these medical conditions, call Delta Dental at **1-800-323-1743** or go to **DeltaDentalil.com** for more information about the Enhanced Benefits Program or to enroll.

To find an in-network dentist, visit **DeltaDentalil.com** or call **1-800-323-1743**.

## Vision plan

Veolia offers vision coverage to Kendall employees through the Vision Buy-Up Plan, which is administered by Vision Service Plan (VSP). VSP partners with Costco® Optical, Eye Care Centers of America™ and other high-quality retail chains (“Retail Chain Affiliate Providers”).

Vision highlights	
BUY-UP	
<i>Paid for by employee</i>	
<b>In-network</b>	
Exam <i>Once every calendar year</i>	\$20 copay (from a VSP doctor or a retail chain affiliate provider)
Frames <i>Only applies when a complete pair of glasses is purchased</i>	Allowance up to \$180 (\$100 at Costco); 20% off balance at a VSP doctor or retail chain affiliate providers other than Costco <i>Once every other calendar year</i>
Lenses (clear, standard, glass or plastic; anti-scratch/anti-reflective coating, progressive, polycarbonate) <i>Once every calendar year; only applies when a complete pair of glasses is purchased</i>	
Single vision	\$20 copay. Average 20%–25% discount off other lens options from VSP doctor or retail chain affiliate provider other than Costco; check with Costco for VSP member pricing
Bifocal	
Trifocal	
Contact lenses <i>Once every calendar year</i>	\$130 allowance; \$60 maximum copay for standard and premium contact lens fitting and evaluation
LASIK	5% off promotional price or average 15% off regular price (contracted facilities only)
<b>Out-of-network</b>	
Exam <i>Once every calendar year</i>	Up to \$45
Frames <i>Once every other calendar year</i>	Up to \$70
Lenses (clear, standard, glass or plastic; anti-scratch/anti-reflective coating, progressive, polycarbonate) <i>Once every calendar year</i>	
Single vision	Up to \$30
Bifocal	Up to \$50
Trifocal	Up to \$65
Progressive	Up to \$50
Contact lenses <i>Once every calendar year</i>	Up to \$105



### Save with VSP

VSP offers additional savings through Exclusive Member Extras, including:

❖ Discounts on featured frame brands

❖ Mail-in rebates and free trials on popular contact lens brands

❖ Discounts on digital hearing aids and batteries

❖ Savings on LASIK

For more great offers, visit [VSP.com/specialoffers](https://www.vsp.com/specialoffers).

## Disability

Short-term disability (STD) benefits are offered at no cost to you and help replace a portion of your income if you are ill or injured and unable to work.

Your approved STD benefits will begin on the fourth calendar day of illness or injury (the first day after expiration of the three-day elimination period). Employees may use accrued time off (e.g., sick time, floating holidays or vacation days) until the elimination period expires to avoid an interruption of income.

Beginning on the fourth calendar day, STD benefits for an approved disability due to a non-work-related illness or injury, including pregnancy or emergency hospitalization, will cover 100% of your base pay for up to 180 days in a rolling 12-month period of time.

Benefits are administered by Liberty Mutual and are conditional on approval by Liberty Mutual. STD benefit checks are issued through VNA's payroll system.

## Eligibility

You are eligible for STD benefits starting on your date of hire unless stated otherwise in applicable collective bargaining agreements.

## Long-term disability

Administered by Liberty Mutual, long-term disability (LTD) provides a benefit for a disability that extends beyond 180 days. Benefits are conditional on approval by Liberty Mutual.

Monthly Benefit	Who pays?
66.67% of pre-disability base pay (up to \$12,000 per month)	Veolia



## Life and accidental death & dismemberment (AD&D) insurance

### Basic life and basic AD&D insurance

Once eligible, you will automatically be enrolled for coverage through Liberty Mutual. Life insurance pays a benefit to your beneficiary in the event of your death, while AD&D insurance provides an additional benefit to you or your beneficiary in the event of certain accidental losses or death.

Basic coverage	Limit
2x annual base salary	Up to \$500,000

### Designate your beneficiaries!

Annual enrollment is the perfect time to review and update your current beneficiaries!

### Employee supplemental life insurance

Coverage options	Limit (including Basic coverage)
1x – 5x annual base salary	Up to \$1,000,000

- ❖ Evidence of Insurability (EOI) is required if you are currently enrolled and decide to increase your coverage. Look for additional paperwork in the mail from Liberty Mutual – EOI must be approved for coverage to take effect.
- ❖ If you're a new hire or newly eligible employee, you may elect coverage up to \$750,000 (including Basic coverage) without providing EOI.

### Age Reduction Schedule

Once you reach the specified age below, your benefit amount will be reduced to the following percentage.

Age	Percentage of Available or In Force Amount at Age 64
65–69	65%
70–74	45%
75-79	30%
80+	20%

### Spouse/same-gender domestic partner and dependent child supplemental life insurance

	Coverage options	Limit
Spouse/same-gender domestic partner	\$10,000 increments	Up to \$100,000*
Dependent child	\$5,000 increments	Up to \$20,000

\*Not to exceed 100% of employee supplemental life coverage amount.

- ❖ EOI is required if you have previously waived spouse coverage or your spouse was previously denied coverage.
- ❖ If you are a new hire or newly eligible employee, EOI is required for spouse coverage over \$20,000.

**Note:** The employee must have supplemental life insurance coverage in order to elect supplemental life insurance coverage for a spouse/same-gender domestic partner and/or dependent child(ren).

### Supplemental accidental death & dismemberment (AD&D) insurance

Coverage options	Limit (including Basic coverage)
1x – 10x annual base salary	Up to \$1,000,000

- ❖ No EOI is required.

**If covering a spouse/same-gender domestic partner or dependent child under this plan, refer to the following limit and benefit amounts:**

<b>Employee + spouse only</b>	Spouse covered for 70% of employee supplemental AD&D coverage amount; \$700,000 maximum benefit
<b>Employee + child(ren) only</b>	Child(ren) covered for 20% of employee supplemental AD&D coverage amount; \$200,000 maximum benefit
<b>Employee + family</b>	<b>Spouse:</b> 60% of employee supplemental AD&D coverage amount; \$600,000 maximum benefit <b>Child:</b> 15% of employee supplemental AD&D coverage amount; \$150,000 maximum benefit

## Flexible spending accounts (FSA)

With an FSA, you can set aside tax-free money to pay for eligible expenses. Veolia offers the following FSA options through **ConnectYourCare**:

- ❖ Health Care FSA (for Kendall PPO Plan participants only or employees who decline Veolia's health insurance)
- ❖ Limited Purpose FSA (for Kendall HSA Plan participants only)
- ❖ Dependent Care FSA

When you participate in an FSA, you decide how much you want to contribute each plan year (January 1 through December 31) up to IRS annual limits. The amount you elect to contribute is deducted from each paycheck before taxes are taken out — this lowers your taxable income, which means lower taxes and more take-home pay for you!

### Health Care FSA

Contribute up to \$2,600 to cover eligible health care expenses, such as:

- ❖ Copays, deductibles and coinsurance for health care, prescription drugs, dental and vision expenses
- ❖ Over-the-counter items that are **not** a drug or medicine, such as bandages, reading glasses or contact lens solution
- ❖ Vision care not covered by your plan, including contact lens solution and LASIK surgery

Find the full list of eligible expenses at **ConnectYourCare.com/veolianorthamerica** or in IRS Publication 502 at **www.irs.gov/pub/irs-pdf/p502.pdf**.

**Note:** You are not eligible for a Health Care FSA if you participate in the Kendall HSA Plan. However, you are eligible to participate in the Limited Purpose FSA.

### Limited Purpose FSA

If you enroll in the Kendall HSA Plan, you may only enroll in the Limited Purpose FSA (not the Health Care FSA). The maximum contribution amount for the Limited Purpose FSA in 2018 is \$2,600, and **it can be used to cover only eligible dental and vision expenses**. The Limited Purpose FSA allows you to keep more money in your health savings account just for medical and prescription drug expenses.



### First step to maximizing savings — get an estimate!

The Medical Plan Cost Estimator (MPCE) can help you determine how much to contribute to your FSA in order to maximize your tax savings and avoid losing any unused balance at the end of the year. You can find the MPCE on **YourVeoliaBenefits.com**.

### Dependent Care FSA

You can contribute up to \$5,000 per family to the Dependent Care FSA each year. **This FSA can only be used to cover expenses for the care of an eligible dependent (a child or a dependent adult), such as nursery or day care costs, so you and your spouse (if you're married) can work. Dependent care funds may not be used to pay for health care expenses of eligible dependents.**

Find the full list of eligible expenses at **ConnectYourCare.com/veolianorthamerica** or in IRS Publication 503 at **www.irs.gov/pub/irs-pdf/p503.pdf**.

## Use It or Lose It!

**Unlike in the health savings account, FSA balances do not roll over from year to year — meaning you lose any unused money at the end of the year. So be sure to budget carefully when making your 2018 FSA election. And, if you're currently participating in an FSA, make sure you incur expenses by December 31, 2017, to use the rest of your 2017 FSA funds. You have until March 31, 2018, to submit reimbursement claims for your 2017 expenses. All reimbursement claims for 2017 expenses should be submitted to PayFlex. Terminated employees have 90 days from their date of termination to submit eligible expenses for reimbursement.**

### New for 2018 – FSA and HSA Benefits Benefits through ConnectYourCare

Your FSA and HSA accounts will now be provided through ConnectYourCare. Visit **ConnectYourCare.com/veolianorthamerica** to learn more.



## HEALTH CARE REFORM:

### *Key facts to know*

#### **Individual coverage mandate**

On January 1, 2014, the Affordable Care Act required that nearly everyone have medical coverage, or pay a penalty. This mandate continues for 2018. Your Veolia-sponsored medical coverage meets your requirement to have medical coverage. This means that if you enroll in one of our medical plan options, you'll meet the requirement for having health coverage and won't have to pay a penalty. Plus, you don't have to enroll in an option available in the public health insurance marketplace (see below).

#### **Public health insurance marketplace**

The public health insurance marketplace (also called "health insurance exchanges") opened October 1, 2013, in most states. Some people without employer coverage and who fall under certain income levels will qualify for subsidized coverage in the marketplace. For more information, go to [Healthcare.gov](http://Healthcare.gov). Since your Veolia coverage meets government requirements for affordable coverage, you would not receive a subsidy from the government if you enrolled in coverage from the health insurance exchanges.

## **Benefits provided at no cost to you**

### **Employee Assistance Program (EAP)**

Access licensed counselors from Magellan Health 24 hours a day, 365 days a year to get help with issues such as:

- ✦ Parenting
- ✦ Work-life balance
- ✦ Relationship problems
- ✦ Substance abuse
- ✦ Legal and financial services

For more information, call **1-800-324-8914** or visit **[MagellanHealth.com/member](http://MagellanHealth.com/member)**. In order to access the website, you will need to enter the toll-free phone number above and then create a user name and password.



## Health Advantage Program

The Health Advantage Program includes a team of experienced nurses who offer support to you or someone in your family if you are enrolled in one of Veolia's medical plan options - it's like having a nurse in your family!

Dedicated nurses are available 24/7 and provide 1-to-1 support with personalized service. As needed, your nurse can connect with other dedicated resources, like doctors, pharmacists, or a team of social workers and behavioral health specialists. The Health Advantage Program offers assistance for complex care, hospitalization support, as well as maternity support.

A nurse may call you after a hospital stay or a recent diagnosis to help connect you with information and resources that you may need.

### Consider this:

- ❖ **The people most likely to be in the hospital next month are the people currently in the hospital today.** These nurses will reach out to you to give you important support during your recovery to avoid readmission to the hospital.
- ❖ **For many conditions, there are several treatment options that can be equally effective (from simply rest to surgery.)** These nurses can help you review courses of treatment your doctor is considering and help you decide what's best for you.

**You don't need to take action to participate – if you are eligible for this program, a nurse will reach out to you directly.**

## Health care assistance from HealthAdvocate

HealthAdvocate offers you and your family the following free services to help manage your health care:

- ❖ Locate doctors, hospitals, dentists and other providers
- ❖ Get cost estimates for common medical procedures
- ❖ Help to resolve insurance claim problems
- ❖ Answer questions about test results, treatments and medications
- ❖ Assist with eldercare issues, including Medicare and in-home care
- ❖ Aid in the transfer of medical records, X-rays and lab results

For more information, call **1-866-695-8622** or go to **[HealthAdvocate.com/veolianoorthamerica](https://www.healthadvocate.com/veolianoorthamerica)**.

## Contact your providers

Benefit	Phone number	Website
<b>General</b>		
Veolia Benefits Center	1-888-892-6564	YourVeoliaBenefits.com
<b>Medical</b>		
Blue Cross Blue Shield of Illinois	1-800-995-0582	BCBSIL.com
<b>Medical Virtual Visits</b>		
Blue Cross Blue Shield of Illinois (MDLIVE)	1-888-676-4204	MDLIVE.com/bcbsil
<b>Prescription</b>		
Express Scripts	1-888-792-7276	Express-Scripts.com
<b>Dental</b>		
Delta Dental of Illinois	1-800-323-1743	DeltaDentalil.com
<b>Vision</b>		
Vision Service Plan (VSP)	1-800-877-7195	VSP.com
<b>FSA and HSA</b>		
ConnectYourCare	1-844-609-1806	ConnectYourCare.com/veolianorthamerica
<b>Short-Term Disability, Long-Term Disability and Family/Medical Leave</b>		
Liberty Mutual	1-844-247-4446	www.MyLibertyConnection.com
<b>Life and AD&amp;D Insurance</b>		
Liberty Mutual	1-888-787-2129	www.MyLibertyConnection.com
<b>Employee Assistance Program</b>		
Magellan Health	1-800-324-8914	MagellanHealth.com/member
<b>Health Care Assistance</b>		
HealthAdvocate	1-866-695-8622	HealthAdvocate.com/veolianorthamerica



Need access to health care on-the-go? Get access to fast, 24/7 treatment through your mobile device or computer with Virtual Visits. **Download the app to register your account and request a visit.**

[BCBSIL](#)

[MDLIVE app](#)

# Resourcing the world

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### *Legal notices and disclosures*

There are several important benefits-related legal notices and disclosures posted on YourVeoliaBenefits.com. These include required notifications about breast reconstruction and mastectomy-related benefits under the Women's Health and Cancer Rights Act, potential subsidies to help you pay for health insurance for you and/or your child under the Children's Health Insurance Program (CHIP), and protection of your personal health information under the Health Insurance Portability and Accountability Act (HIPAA).

You can access these notices from the "Legal Notices and Disclosures" section under the "Eligibility/ Enrollment" tab on the YourVeoliaBenefits.com website. Or, you may request them by calling the Veolia Benefits Center at 1-888-892-6564.

This is a summary document intended to provide an overview of 2018 benefits at Veolia North America, provided under benefit plans sponsored by Veolia North America, LLC (collectively "Veolia"). It is not a comprehensive description of the benefits offered under these plans, nor does it supersede or replace any other document.

The benefits described are subject to eligibility requirements and other plan provisions. In the event of conflict between this document and the legal and/or plan documents governing the benefits described, such legal and/or plan documents will prevail in all cases. Veolia and its affiliated entities reserve the right to change, modify or terminate the benefit plans at any time. This guide is not a contract for purposes of employment or payment of benefits.

Some benefits in this enrollment guide may or may not apply to you if you are a bargained employee; it depends on the terms of your collective bargaining agreement.