



2024 Benefits New Hire Orientation



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2024 Eligibility for Benefits

Who is eligible for benefits?

- All active employees regularly scheduled to work at least 20 hours per week
- Your spouse or domestic partner*
- Your children, stepchildren, children of your domestic partner or children in your guardianship up to age 26**
- Adult children, step children, children of your domestic partner or children in your guardianship of any age who are disabled

*You will need to provide the Domestic Partner Affidavit to verify the eligibility of your Common Law Spouse or Domestic Partner.

**Dependent children can be covered under Veolia benefits until the age of 26. Their medical, dental, and vision coverage ends at the end of the month of the dependent's 26th birthday.

MEDICAL, DENTAL, VISION PLAN OPTIONS AND FEATURES

2024 Benefits

2024 Medical Plan Options

Medical Plan Options - United Healthcare

- High Deductible Health Plan - Gold
- High Deductible Health Plan - Silver
- Preferred Provider Organization - PPO
- Exclusive Provider Organization - EPO



Gum Springs Union Employees (only option)

- Gum Springs UHC PPO

Milwaukee Union Employees (additional option)

- Milwaukee Union UHC EPO

Employees Residing in California (additional option)

- Kaiser HMO



Employees Residing in Hawaii (only option)

- HMSA PPO Plan A | HMSA HMO | HMSA CompMED



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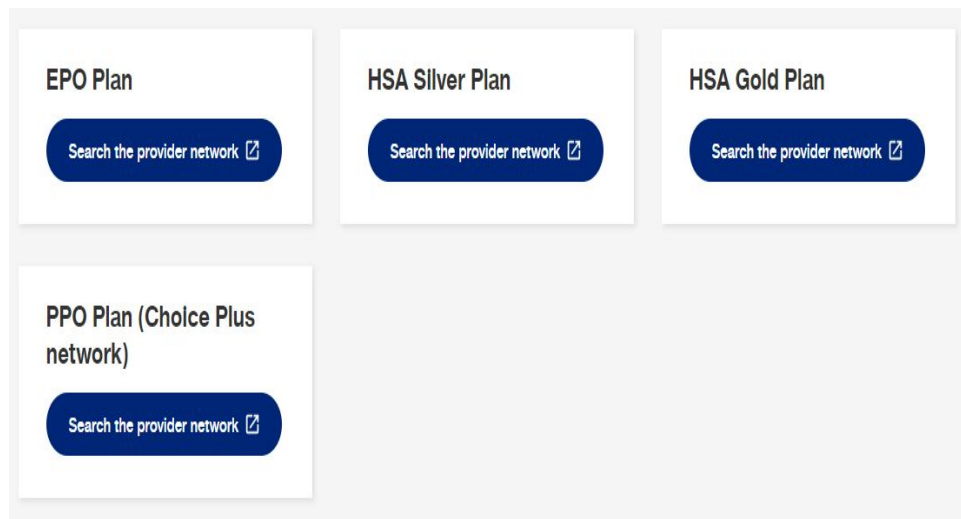
2024 Medical Plan Options

How do I confirm my doctor is in network?

Visit [whyUHC.com/veolia](https://www.whyUHC.com/veolia)

Phone Number: 1-866-747-1020

- Click 'Search for Provider'
- Select a plan to find a doctor or facility that's in the UHC network.



2024 Medical Plans - United Healthcare

Plan Design (In-Network)	PPO	High Deductible Health Plan (HDHPs)		EPO
Plan Name	PPO	Silver HDHP (Low)	Gold HDHP (High)	EPO
Vendor	United Healthcare (UHC)			
Plan Sponsor HSA Funding (EE/ Fam)	n/a	n/a	\$750 / \$1,500	n/a
Deductible (EE/ Fam)	\$750 / \$1,500	\$3,000 / \$6,000	\$1,750 / \$3,500	\$500 / \$1,000
Deductible Accumulation (Fam)	Embedded	Embedded (Ind. \$3,200)	Aggregate	Embedded
Deductible Application	Medical Only	Medical / Rx	Medical / Rx	Medical Only
Coinsurance (EE Pays)	20%	30%	20%	10%
Out-of-Pocket Max (EE/Fam) ¹	\$3,250 / \$6,500	\$6,000 / \$12,000	\$3,500 / \$7,000	\$2,500 / \$5,000
Out-of-Pocket Max Accumulation (Fam)	Embedded	Embedded	Aggregate	Embedded
Out-of-Pocket Max Application	Medical / Rx	Medical / Rx		Medical / Rx
Preventive Services	Covered 100%	Covered 100%		Covered 100%
Office Visit (PCP / SPC)	\$25 / \$40	Acute/Wellness: Covered 100% PCP / SPC: 30% AD	Acute/Wellness: Covered 100% PCP / SPC: 20% AD	10% AD
Virtual Care / Telemedicine	Acute/Wellness: Covered 100% PCP: \$25 / SPC: \$40	30% AD	20% AD	10% AD
Urgent Care	\$50	30% AD	20% AD	10% AD
Emergency Room	\$175	30% AD	20% AD	10% AD
Inpatient Hospital	20% AD	30% AD	20% AD	10% AD

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Additional Programs for those enrolled in any UHC medical plan



Hinge Health:

- You and your dependents (over age 18) can receive:
 - Digital physical therapy programs for back, knee, hip, neck and shoulder pain
 - Personalized exercise therapy
 - Unlimited one-on-one health coaching
- Find out more and register any time at yourveoliabenefits.com > Other Benefits > [Hinge Health](#)

Omada:



- Omada nurses can help you lose weight, review nutrition, and/or help monitor your blood pressure. Omada can also provide a blood glucose meter, test strips, and/or digital scale. Plus, there is a mobile app with education to support healthy choices.
- Find out more and register any time at yourveoliabenefits.com > Other Benefits > [Omada](#)

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2024 Medical Plans - Kaiser HMO

Only available to California employees in addition to other medical plan options

- **Deductible:**
 - None
- **Out-of-Pocket Maximum:**
 - \$1,500 Individual
 - \$3,000 Family
- **Preventive Care:**
 - No charge
- **Primary Care Visit:**
 - \$25 per visit
 - Out-of-Network not covered
- **Specialist Visit:**
 - \$25 per visit
 - Out-of-Network not covered

Kaiser Customer Service number: 1-800-464-4000

2024 Medical Plans - HMSA



HMSA is only available to employees that live in Hawaii.

HMSA	PPO Plan A	HMO Plan	COMP MED
Preventative	If in-network, coverage at 100% with no out-of-pocket cost to employee. If out-of-network, subject to out-of-network deductible and coinsurance, if applicable.		
Deductible In-network Individual/Family	\$0	\$0	\$0
Deductible Out-of-network Individual/Family	\$100/\$300	No coverage	\$0
Coinsurance: you pay In-network Out-of-network	10% 30%	10% No Coverage	20% 20%
Out of pocket Maximum (combined in and out-of-network) Individual/Family	\$2500/ \$7,500	\$2,500/ \$7,500 (no coverage out of network)	\$2,500/ \$7,500
Office Visit Primary care physicians / specialist	\$12 copay	\$20 copay	\$14 copay
Hospital (In-network) Inpatient Outpatient Surgical Services	10% 10%	10% \$20 copay	20% 20%
>Cutting >Non-cutting	10% 20%	\$20 \$20	20% 20%
Emergency room	20%	\$100 copay	20%

HMSA Customer Service number: 1-800-776-4672

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2024 Pharmacy Plans - Express Scripts

(For UHC Enrollees Only)

Retail (30-Day Supply)	PPO	High Deductible Health Plan-Gold	High Deductible Health Plan-Silver	EPO
Generic	\$10 co-pay	20% after deductible	20% after deductible	\$10 co-pay
Preferred Brand	25% (min \$30/max \$75)	30% after deductible	30% after deductible	25% (min \$30/max \$75)
Non-Preferred Brand	35% (min \$50/max \$110)	40% after deductible	40% after deductible	35% (min \$50/max \$110)
Maintenance Medications	100% of the retail cost (after second purchase); You pay 100% of the cost of the drug when you refill a maintenance medication at a retail pharmacy after the second purchase.	100% of the retail cost (after second purchase); You pay 100% of the cost of the drug when you refill a maintenance medication at a retail pharmacy after the second purchase.	100% of the retail cost (after second purchase); You pay 100% of the cost of the drug when you refill a maintenance medication at a retail pharmacy after the second purchase.	100% of the retail cost (after second purchase); You pay 100% of the cost of the drug when you refill a maintenance medication at a retail pharmacy after the second purchase.

Express Scripts Customer Service Number: 1-888-792-7276

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2024 Dental Plans - Delta Dental and Aetna



Delta Dental - deltadentalil.com

Plan type	Dental PPO
Deductible	\$50 single/\$150 family
Calendar year maximum per covered person	\$2,000
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 80% after deductible
Major services <i>Inlays/onlays, crowns, bridges, dentures, implants</i>	Covered at 50% after deductible
Orthodontia <i>Eligible adults and children up to age 26</i>	Covered at 50% up to a \$2,500 lifetime maximum benefit Deductible does not apply

Delta Dental Customer Service: 1-800-323-1743



Aetna DMO - MyAetnaWebsite.com In-Network Providers Only

Plan type	DMO
Deductible	None
Calendar year maximum per covered person	None
Preventive care <i>Exams, cleanings, X-rays, fluoride, sealants</i>	Covered at 100%
Basic services <i>Fillings, simple extractions, root canal therapy</i>	Covered at 100%
Major services <i>Inlays/onlays, crowns, bridges, dentures, implants</i>	Covered at 60%
Orthodontia <i>Dependent children up to age 26, no age limit for employee or spouse</i>	Adults and children covered at 50% no maximum

Aetna Customer Service Number: 1-877-238-6200

NOTE: Aetna DMO is only available in certain geographies. If available in your zip code, you will see this option in the enrollment site. Please keep in mind that you need to go to a dentist that accepts Aetna Network.

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2024 Vision Plans - VSP

	Basic Plan	Enhanced Plan
In-Network		
Eye Exam <i>Once every calendar year</i>	Essential examination \$20 copay; comprehensive examination \$25 copay	\$10
Frames <i>Discounts apply on completed pair of prescription glasses</i>	\$150 allowance (\$80 at Costco); 20% off over allowance on glasses from a VSP doctor <i>Once every other calendar year</i>	\$200 allowance (\$110 at Costco); 20% off over allowance on glasses from a VSP doctor <i>Once every calendar year</i>
Eye glass lenses <i>(clear, standard, glass or plastic; anti-scratch/anti-reflective coating, progressive, polycarbonate) Single vision, bifocal or trifocal</i>	\$25 (combined with eye exam)	\$10 (combined with eye exam)
Contact lenses <i>Once every calendar year in lieu of eyeglass lenses</i>	Up to \$60 copay for fitting and evaluation; \$175 allowance, plus 15% off on amount over allowance	Up to \$60 copay for fitting and evaluation; \$225 allowance, plus 15% off on amount over allowance
Laser vision correction	5% off promotional price or average 15% off regular price (contracted facilities only)	

VSP Customer Service Number: 1-800- 877-7195

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2024 Flexible Spending Accounts (FSA) - WEX

Health Care FSA

- For EPO and PPO plan participants only
- 2024 annual maximum contribution amount is \$3,200
- May be used to cover out-of-pocket medical, dental, and/or vision expenses
- [Link to eligible FSA expenses](#)

Limited Purpose FSA

- For High Deductible Health Plan plan participants only
- 2024 annual maximum contribution amount is \$3,200
- May be used to cover only dental and/or vision expenses

Dependent Care FSA

- 2024 annual maximum contribution amount is \$5,000
- May be used to cover the daycare expenses for an eligible dependent (either a child under age 13 or a dependent adult), such as nursery or daycare

Commuter FSA

- Set aside pre-tax funds up to certain monthly limits to order transit and parking passes or vouchers through their local transit authorities, paying with pre-tax dollars up to the limit
- The monthly pre-tax limit for parking and transit benefits is \$315 per month

Wex Debit Cards will be mailed after you enroll and can be used for all spending accounts.

Wex Customer Service number: 1-844-690-0918

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2024 Health Savings Accounts (HSA) - Fidelity

- **2024 annual maximum contribution amounts:**
 - Employee Only Coverage: \$4,150
 - All other coverage tiers: \$8,300
 - (An additional \$1,000 can be contributed by those age 55+).
- **If you are enrolled in the HDHP Gold plan, Veolia contributes to your HSA**
 - \$750 for employee only coverage or
 - \$1,500 per year for all other tiers
 - Contributions are made throughout the year and will be prorated based on the start date of your HDHP - Gold plan coverage.
- Must be enrolled in a High Deductible Health Plan to participate
- Must accept Fidelity's Terms and Conditions upon enrollment
- Use the same user ID and password as 401(k) on Fidelity's [Netbenefits.com](https://www.fidelity.com/netbenefits) site
- In order to participate in an HSA, you cannot be covered by any other medical plan, including Medicare. To contribute to an HSA after age 65, you will need to call the Veolia Benefits Center to confirm you are not enrolled in Medicare.
- Here is a [flyer](#) with more information.

Fidelity HSA Customer Service number: 1-800-835-5095

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LIFE INSURANCE AND DISABILITY PLANS

2024 BENEFITS

2024 Life Insurance and AD&D - Metlife



Basic Life and AD&D Insurance:

- Veolia provides coverage at two times your annual base salary, up to \$1,500,000.

Supplemental Employee Life and AD&D Insurance:

- You can select supplemental coverage from 1 to 6 times, with a limit of \$1,500,000 (combined with basic coverage).
- You can elect coverage up to a combined basic and supplemental employee life insurance amount of \$750,000 without Evidence of Insurability (EOI) during your new hire enrollment. Any amount over \$750,000 would require EOI.

Spouse Life Insurance:

- You can cover your spouse or domestic partner in \$10,000 increments up to \$250,000 (not to exceed 50% of your supplemental life coverage). An Evidence of Insurability is required if the amount of the increase is greater than \$50,000.

Dependent Children Life Insurance:

- Can be covered at a flat \$25,000.

Metlife Customer Service number: 1-800-438-6388

2024 Short Term and Long Term Disability - Lincoln

Short-term disability (STD):

- You will automatically be enrolled in this company-paid benefit through Lincoln Financial
- You are eligible for benefit starting on your date of hire
- Benefits are provided for up to 26 weeks, with the first 13 weeks paid at 100% of eligible pay, followed by 60% for the remaining 13 weeks

Long-term disability (LTD):

- You will automatically be enrolled in this company-paid benefit through Lincoln Financial
- LTD extends beyond the 26 weeks of STD, if you are approved for coverage
- The Core plan pays 60% of eligible pay (up to a max of \$15,000 per month)
- Buy-up coverage pays 66.67% of eligible pay (up to a max of \$20,000)
 - ***ENROLLMENT REQUIRED! You can elect buy-up during New Hire Enrollment and pay for coverage through payroll deductions***

If you have any questions or need to file a claim, contact Lincoln Financial Group at 1-844-247-4446 or online at [MyLincolnPortal.com](https://www.lincolnfinancial.com). Company Code: VEOLIA

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2024 Paid Parental Leave

The company offers paid parental leave plan for all USA employees who regularly work 20 hours or more per week (except temporary or staffing contract employees).

- The plan allows employees to take time off to bond with a newly born or newly adopted child.
- Initial eligibility will occur upon date of hire.
- Eligible employees will be entitled to up to 10 weeks of parental leave in any 12-month rolling period paid at 100% of regular straight-time weekly pay.
- Paid Parental Leave may be offset by amounts that the employee is eligible to receive from any other sources (e.g., state or local leave laws) so that the employee will not receive more than 100% of their regular straight-time weekly pay

If you have any questions or need to file a claim, contact Lincoln Financial Group at 1-844-247-4446 or online at [MyLincolnPortal.com](https://www.lincolncapital.com). Company Code: VEOLIA

For more information, please visit [Paid Parental Leave](#)

SUPPLEMENTAL INSURANCE AND OTHER BENEFITS

2024 BENEFITS

2024 Supplemental Insurance



- Hospital Indemnity
- Critical Illness
- Accident Insurance



- Legal Insurance



- Identity Theft Protection

For additional information go to yourveoliabenefits.com > Other Benefits > Supplemental Benefits for more information

Important Additional Benefits



HeadSpace:

- Headspace provides preventive mental health support for everyday stressors before they become bigger problems. You don't need to have it all figured out to reach out for help. Whether you could use a quick check-in with a coach, regular treatment for deeper challenges, or self-care strategies to practice on your own time, Headspace Care provides convenient, affordable, and private mental healthcare for every moment.

What's Included?

- You get unlimited access to text-based chats, self-care activities, and access to the Headspace app, plus up to 8 video sessions with therapies and psychiatrists per year at no cost to you.
- An additional 8 sessions per year are available to your spouse, domestic partner, and dependents over the age of 13. *Please note, parents/guardians have to refer their child to access care. Unlike adult dependents, adolescents cannot enroll on their own and must be invited by their adult.*
- For additional information go to yourveoliabenefits.com > Other Benefits > [Mental and Behavioral Health \(Headspace Care\)](#)

Important Additional Benefits



Employee Assistance Program (EAP):

- Employees and their dependents automatically have access to this program, which is administered by Magellan Health
- EAP provides confidential assistance 24 hours/day all plan year
- Licensed counselors through EAP can assist with parenting, work-related situations, relationship problems, substance abuse, and both legal and financial services
- For additional information go to yourveoliabenefits.com > Other Benefits > [Employee Assistance Program \(EAP\)](#)

EAP Phone Number: 1-800-324-8914



Health Advocate:

- A free service that assists our employees with managing their healthcare
- The program will assist with locating doctors, hospitals, dentists, and other providers, obtaining cost estimates for medical procedures, resolving insurance claim issues, and answer questions regarding test results, treatments, and medications as well as other additional free services
- For additional information go to yourveoliabenefits.com > Other Benefits > [Health Advocate](#)
- **Health Advocate Phone Number: 1-866-695-8622**

Important Additional Benefits



Your Veolia Discount Marketplace:

- www.veoliadiscounts.benefithub.com offers purchase of discounted products to Veolia employees (travel, tickets, pet insurance, etc.)
- First time registration referral code is **WNLSXI**
- For additional information go to yourveoliabenefits.com > Other Benefits > [Your Veolia Discount Marketplace](#)

BenefitHub Customer Care at 1-866-664-4621

Purchasing Power:

- www.veolia.purchasingpower.com
- Eligible employees work at Veolia for at least one year and...
 1. Can purchase products online
 2. Can receive their order at home
 3. Can pay over time from their paycheck with interest-free fixed payments
- For additional information go to yourveoliabenefits.com > Other Benefits > [Purchasing Power](#)



Purchasing Power Customer Service at 1-888-923-6236

Important Additional Benefits

Pet Insurance:

MetLife offers a variety of insurance plans designed to fit your pet's specific needs. Plus, there are no exclusions on breed and no age limits. That means whether you have a ten-year-old tabby or a Pekingese puppy, you can rest assured they're eligible for coverage.

MetLife Pet Insurance offers flexible coverage plans and potential discounts designed to fit your pet—and your pocketbook.

**Have questions or want to enroll?
Call 1-800-GET-MET8 (1-800-438-6388)**

Home & Auto Insurance:

You have access to auto and home insurance from MetLife Auto & Home. This program provides you with special savings, outstanding customer service and a full suite of products to meet your diverse insurance needs. In addition to auto and homeowners insurance, we offer a variety of other policies including:

- Condo/renters
- Personal excess liability
- Boat
- Motorcycle
- RV
- Personal property

You may apply for group auto and home insurance at any time.

For additional information go to yourveoliabenefits.com >
Other Benefits > [Pet, Home & Auto Insurance](#)

2024 NEW HIRE ENROLLMENT INFORMATION

2024 New Hire Enrollment

- **Coverage Effective Date for New Hires:**
 - Health and Welfare - effective as of date of hire
 - 401(k) - You are auto-enroll 30 days after your hire date
- **Health & Welfare Benefit Enrollment Process:**
 - Online through the yourveoliabenefits.com > Eligibility/Enrollment > New Hires > Login link to enrollment system or
 - Online through [One Hub](#) > Human Resources > Enroll in Benefits US
- **Default Coverage:**
 - You will be automatically defaulted into the following benefits:
 - Basic Life Insurance, Basic AD&D Insurance, Short Term Disability, Core Long Term Disability and Employee Assistance Program
- **401k Overview and Questions:**
 - Contact Fidelity at (800) 835-5095, Monday through Friday, 8:30am -12am EST or www.netbenefits.com

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2024 New Hire Enrollment - How to enroll

To log in to the **Benefits Enrollment System**, click the applicable link below.

[I'm on the Veolia Intranet I'd like to view with one click](#)

[I'm on my home computer or mobile device](#)

Instructions for Logging In:

- Step 1: Your username is Veolia followed by your employee ID number (no spaces).
 - Example: Veolia10012345
- Step 2: Your initial password is your full date of birth followed by the last four digits of your social security number.
 - Example: if your birthday is 01/05/1975 (MMDDYYYY) and your social security number is 123456789, your default password will be 010519756789.
- Step 3: Click LOGIN

**You should be able to locate your Employee ID on your HRIS profile.
If you have any issues contact the Veolia Benefits Center at 844-690-0918.
(Monday through Friday, 7:30am-6pm CST)**

2024 New Hire Enrollment - Dependent Verification

- **Important Information About Adding Dependents:**
 - You must provide valid documentation for each dependent you elect to enroll within 45 days of your date of hire.
 - Your dependents' coverage will be pending until you provide valid documentation.
 - Click [HERE](#) for the list of documents that satisfy the substantiation requirement.
 - We suggest that you have your documentation available electronically (for example, take a picture of your marriage certificate) so you can upload it as you make your enrollment selections.
 - If you do not provide documentation after 45 days, you will not be able to enroll the dependent onto your plan unless you experience a Qualifying Life Event or until Annual Enrollment.

2024 New Hire Enrollment - Timeline

Deliverable	Timing
Review 2024 Benefits Information	Within 45 days of hire date
Enroll in 2024 Benefits	Within 45 days of hire date
Verify Dependents	Within 45 days of hire date
2024 Benefits Effective	On Date of hire

After you enroll...

You can only make changes if you experience a qualified life event (see QLE section) or during Annual Enrollment

BEYOND NEW HIRE ENROLLMENT

QUALIFYING LIFE EVENTS

Qualifying Life Events (QLE)

- **Benefit Elections**
 - You may change benefit elections due to a substantiated QLE.
- **Enrollment Process**
 - Online: yourveoliabenefits.com > Eligibility/Enrollment > Qualifying Life Events
 - Login to enrollment system to declare a life event
 - By phone: Veolia Benefits Center at (844) 690-0918, Monday through Friday, 7:30 a.m. - 6 p.m. CST
- **QLE Examples**
 - Marriage, Divorce, Birth or Adoption of a Child, Gain or Loss of Coverage
- **QLE Timeframe**
 - You have **31 days** from the date of your event to change your current elections.
 - **DO NOT WAIT** for a newborn's birth certificate to add the child to coverage.
 - You have **31 days** from the date of your event to provide substantiation.

SUPPORT & RESOURCES

2024 Benefits



Your Veolia Benefits Site Overview

- This site is your single destination for benefits information, news and communications.
- 3 ways to access Your Veolia Benefits Site
 - Enter www.YourVeoliaBenefits.com on your Home Computer, Work Laptop or Mobile Device (no username / password needed)
 - Go to [One Intranet](#) > Click Employee Hub > Benefits > Benefits Resources icon
 - Go to [SuccessFactor](#) > Click Human Resources > “My Veolia Benefits (US)”
- Home Page provides quick links to the Benefit Enrollment site for you to view current benefit elections, beneficiaries, and to verify dependents. Also, the home page provides a quick link to view benefit enrollment information for New Hires and if you’re experiencing a Qualifying Life Event.
- Organized tabs by different categories: Enrollments/Eligibility, Health Plans, Life/LOA/Disability, Retirement and Other Benefits.

ELIGIBILITY/ENROLLMENT ▾

HEALTH PLANS ▾

LIFE/LOA/DISABILITY ▾

RETIREMENT ▾

OTHER BENEFITS ▾

Support & Resources

BENEFITS INFORMATION & ENROLLMENT	CONTACT
Benefits Overview Portal	YourVeoliaBenefits.com
Enrollment Site	YourVeoliaBenefits.com > Eligibility/Enrollment > New Hire
Veolia Benefits Center	Call 1-844-690-0918 Monday through Friday, 7:30am-6pm CST Chat online through Live Chat on the Enrollment Site Email help@mybenefitexpress.com (48 business hours turnaround time)

Provider Contacts

Benefit Vendors:	CONTACT
United Healthcare	1-866-747-1020
Express Scripts	1-888-792-7276
Delta Dental	1-800-323-1743
Veolia Benefits Center	1-844-690-0918
HealthAdvocate	1-866-695-8622

Additional Provider Contacts go to YourVeoliaBenefits.com >
Enrollment/Eligibility > [Provider Contacts](#)

2024 New Hire Enrollment - Communication Timeline

Deliverable	Timing
2024 New Hire Benefit Enrollment - Welcome Email	Emailed to your work email address
2024 New Hire Benefit Enrollment Information	Located on YourVeoliaBenefits.com > Eligibility / Enrollment > New Hires
2024 Benefit Confirmation Statements	Emailed to your work email address within 48 hours after completing benefit enrollment
Member ID Cards	Medical, Prescription and Dental ID cards will be mailed to your home address 7-10 business days after you enroll in benefits.