



# REPRESENTED ORIENTATION PACKET





# REPRESENTED BENEFITS CONTACT INFORMATION

Ingalls Shipbuilding  
A Division of Huntington Ingalls Industries

Employee Benefits Office  
Employment Building - 228.935.3393

| Medical                           |                |  |
|-----------------------------------|----------------|--|
| Anthem BCBS Customer Service      | 1.800.948.3648 | <a href="http://www.anthem.com/ca">www.anthem.com/ca</a>               |
| Employee Assistance Program       |                |  |
| Anthem EAP                        | 1.855.400.9185 | <a href="http://www.anthemead.com">www.anthemead.com</a>               |
| Loss of Time                      |                |  |
| Prudential                        | 1.800.842.1718 | <a href="http://www.prudential.com">www.prudential.com</a>             |
| Flexible Spending Accounts (FSAs) |                |  |
| Your Spending Account (YSA)       | 1.877.216.3222 | UPoint on <a href="http://www.hiibenefits.com">www.hiibenefits.com</a> |
| Other Services                    |                |  |
| Teladoc                           | 1.800.TELADOC  | <a href="http://www.teladoc.com/hii">www.teladoc.com/hii</a>           |
| HII Family Health Center          | 228.205.7000   | <a href="http://www.myquadmed.com/hii">www.myquadmed.com/hii</a>       |
| Critical Illness                  | 800.438.6388   |  |

Non-Industrial Leave of  
Absence:  
Phone: 228.935.1009  
Fax: 228.933.6393

Huntington Ingalls Benefits Center  
(HIBC):  
1.877.216.3222  
[www.hiibenefits.com](http://www.hiibenefits.com)



# REPRESENTED MEDICAL PLAN

| Anthem Preferred Provider Organization (PPO)<br>Ingalls Represented Medical Plan |  |
|--|--|
| Deductible   | <ul style="list-style-type: none"> <li>In-Network: \$300 Individual / \$600 Family</li> <li>Out-of-Network: \$800 Individual / \$600 Family</li> </ul>   |
| Co-Pays  | <ul style="list-style-type: none"> <li>In-Network Office Visit: \$15 / Specialist: \$30</li> <li>Out-of-Network: 40% co-insurance</li> </ul>   |
| Patient Co-Insurance   | <ul style="list-style-type: none"> <li>In-Network: 10%</li> <li>Out-of-Network: 40%</li> </ul>   |
| Emergency Room Co-Pay  | <ul style="list-style-type: none"> <li>In-Network: \$250 (waived if admitted)</li> </ul>   |
| Plan Year Out-of-Pocket Max  | <ul style="list-style-type: none"> <li>In-Network: \$2,000 Individual / \$4,000 Family</li> <li>Out-of-Network: \$5,000 Individual / \$10,000 Family</li> </ul>  |
| Prescription Drug Coverage   | <ul style="list-style-type: none"> <li>Available through CVS Caremark</li> </ul>   |
| Other  | <ul style="list-style-type: none"> <li>No primary care physician needed</li> </ul>   |
| Teladoc  | <ul style="list-style-type: none"> <li>Phone or online video consultation with U.S. board-certified doctors and pediatricians</li> </ul>   |
| HII Family Health Center   | <ul style="list-style-type: none"> <li>\$15 copay per visit</li> <li>Free annual physicals and wellness and nutritional counseling</li> <li>On-site pharmacy</li> </ul>                                  |
| Tobacco-Free Incentive Program   | <ul style="list-style-type: none"> <li>Employees who do not use tobacco are eligible for the preferred tobacco-free medical insurance rate that is \$660 less annually than the standard rate</li> </ul> |

| Non-Tobacco User Weekly Rate |         |
|------------------------------|---------|
| Employee Only                | \$55.44 |
| Family                       | \$80.88 |

| Tobacco User Weekly Rate |         |
|--------------------------|---------|
| Employee Only            | \$68.64 |
| Family                   | \$94.08 |

| Loss of Time Weekly Rate |        |
|--------------------------|--------|
| Per Week                 | \$6.00 |



## REPRESENTED RETIREMENT BENEFITS

### FSSP Retirement Account

- Automatic enrollment on the 1st of the month following 30 days of service at 3% employee contribution with a 1% escalation each year
- The 1st 1% - 4% tax deferred contributions go into the FSSP Retirement Account
- Guaranteed minimum 5% annual return
- Normal unreduced retirement at age 62 or age 60 with 80 points (years of service plus age)
- Lump sum or annuity options

### FSSP Savings Account

- After contributing the full 4% to the Retirement Account, employees can contribute an additional 1 to 71% of eligible compensation to the Savings Account.
- The company matches .50 on the dollar of the 1st 4% tax deferred contribution to the Savings Account.
- 50% vested in company-matching contributions after 2 years of service
- 100% vested in company-matching contributions after 3 years of service

### Sample

- Employee contributes 4% to Retirement and 4% to Savings = 2% company match to Savings

## YOU CONTRIBUTE THE FIRST 4% OF YOUR PAY

**THE NEXT 4%**  
of contributed Pay

You Contribute



Company Matches:



**(50%)**



## REPRESENTED ADDITIONAL BENEFITS

### Loss of Time

- Provides coverage for non-work related sickness or accident while under the regular care and treatment of a physician
- Eligible the first day of the month following 30 days of service
- Weekly benefit of \$305 paid for a maximum of 26 weeks
- Waiting periods may apply

### Life Insurance

- \$50,000 benefit
- No cost to employee

### Accidental Death and Dismemberment (AD&D)

- Provides income protection in the event of an accident that causes death or catastrophic injury
- \$50,000 benefit
- No cost to employee

### Flexible Spending Account (FSA)

Employees are able to save money on taxes by using pre-tax dollars to pay for eligible expenses.

#### Two types of FSAs:

#### 1. Health Care FSA

- Set aside up to \$2,700 for out of pocket expenses such as co-pays, coinsurance and non-covered services for medical, dental, vision and prescription drug

#### 2. Dependent Care FSA

- Set aside up to \$5,000 for eligible dependent day care expenses for your child under age 13 (or your disabled dependent over 13)

### Critical Illness Insurance

Coverage provides financial assistance when illnesses arise.

- Choose to purchase \$10,000, \$20,000 or \$30,000 of coverage for yourself and \$5,000, \$10,000 or \$15,000 of coverage for your dependents. Employees must be enrolled for dependents to be eligible for coverage.
- Covered conditions include, but are not limited to: Heart attack, blindness, major organ failure, end-stage renal (kidney) failure, occupational HIV, benign brain tumor, and coronary artery bypass surgery. Please see the plan summary for a complete description of covered conditions.
- Premiums are deducted from your paycheck after taxes

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# REPRESENTED FAQ

## Medical

### **Q. Will I be eligible for medical coverage on my first day of employment?**

**A.** No. You will become eligible for medical coverage on the first day of the month following 30 days of employment. At that time you will automatically be enrolled in Employee Only coverage. You will need to enroll other dependents that require coverage or waive coverage within 30 days of your eligibility date.

### **Q. When does the benefit plan year begin?**

**A.** The benefit plan year begins July 1 and ends June 30.

## Beneficiaries

### **Q. How do I elect a beneficiary for my life and AD&D insurance?**

**A.** You can elect or change a beneficiary online through UPoint or by calling the HIBC.

## Flexible Spending Account

### **Q. If I have money left in my Flexible Spending Account (FSA) at the end of the plan year, does it roll over for use in the next plan year?**

**A.** No, the dollars in you FSA account do not roll over. You may incur FSA expenses through September 15th of the following plan year and file them by December 31 for reimbursement.

### **Q. What types of expenses can I use my Your Spending Account (YSA) FSA debit card for?**

**A.** You may use your FSA debit card to pay for out of pocket expenses such as copays, coinsurance and non-covered services for medical, dental, prescription drugs and vision services.

### **Q. How long do I have to submit claims for reimbursement from my FSA?**

**A.** Claims must be submitted by December 31 following the benefit plan year.

## Miscellaneous

### **Q. Who do I contact if I have additional questions regarding my benefits?**

**A.** The Huntington Ingalls Benefits Center (HIBC) is available Monday – Friday from 9:00am – 6:00pm EST (1-877-216-3222) or you can find benefits information on the HII UPoint site: <http://hiibenefits.com>.



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**Q. What information do I need to provide when I call the HIBC?**

**A.** You will be asked to enter your password. New users can create a password on the HII UPoint website site or receive assistance from a benefits representative at the HIBC.

**Q. Can I make changes to my benefits after I enroll?**

**A.** Benefit elections can only be changed during the annual open enrollment period or if you experience a qualified life event such as gaining a dependent through marriage, birth or adoption. You have 30 days from the date of the event to call the HIBC and change your benefits.

**Q. Will I be able to view my savings plan on UPoint and make changes to my contributions?**

**A.** Yes. Savings plan information for the FSSP is available on UPoint. You will need to visit [www.hiibenefits.com](http://www.hiibenefits.com) or call 1.877.216.3222.

**Q. Do you have to be enrolled in a HII medical plan to be eligible to use the Employee Assistance Program (EAP)?**

**A.** No, the EAP program is not part of the HII medical plans and it is separate from the mental health and substance abuse programs available under the medical plan options.