

# 2025 Benefits At A Glance Hawaii Part-Time Home Caregivers and Clinicians



## Benefits Overview

BAYADA offers a comprehensive benefits plan designed to meet the needs of our employees.

### **Paid Time Off (PTO) and holidays**

Employees will receive 1 credit for every 1 hour worked. Once the employees reach 2,000 credits, they will receive an average week of PTO. The average week is calculated as 2,000 hours divided by the number of weeks worked to get to 2,000 credits, with a maximum average week of 40 hours.

### **Health insurance, dental, and vision plans**

Employees are newly eligible the first of the following month after working at BAYADA for 4 consecutive weeks with 20 or more hours each week. If an eligible employee does not enroll during the newly eligible period, the employee must wait for the next open enrollment period or experience a Qualifying Life Event (QLE). An employee must continue to work 80 or more hours each month to maintain eligibility. If an employee does not work more than 80 hours, the employee will lose coverage at the end of the month.

### **Retirement benefits**

Eligibility to participate in the 401(k) starts on your date of hire and you can enroll after receiving your first BAYADA paycheck. You can contribute to the 401(k) on a pre-tax and/or after-tax (Roth) basis up to the IRS annual maximum. You may be eligible for a discretionary employer match after meeting age and service requirements (excluding catch-up contributions). For more information, visit [bayada.com/benefits/find-benefits/retirement-plans](https://bayada.com/benefits/find-benefits/retirement-plans).

### **Tuition reimbursement**

You will be eligible for tuition reimbursement for one 3-credit course per semester as approved by your office director

### **Hawaii state disability**

You are covered under the state disability plan. To be eligible, you must have at least 14 weeks of Hawaii employment in which you were paid for 20 hours or more, earned no less than \$400 in the 52 weeks preceding the first day of disability, and are currently employed.

### **Voluntary short-term disability**

You may purchase STD coverage through The Hartford in addition to your Hawaii state disability coverage. You have the choice of two disability plans. Premiums for coverage are deducted from your paycheck

### **Life insurance**

You will become eligible for a \$15,000 term-life insurance policy after working a minimum of 1,000 benefit credit hours in the previous calendar year.

### **Voluntary accidental life, critical illness, and hospital indemnity**

You will become eligible after 90 days of service and will receive notification of enrollment process.

### **Direct deposit**

You have the option to directly deposit your weekly paycheck. You may choose to split the check into up to three accounts (checking, savings or a combination of each). This service is available to all employees at time of hire (no waiting period).

### **Online earnings statement**

All employees will have 24 / 7 access to view their earnings statements online by visiting [home.bayada.com](https://home.bayada.com).

### **Identity Theft Protection**

BAYADA has partnered with IdentityForce to sponsor identity protection for group-eligible employees. Each year, millions of people have their identity stolen. That's why it's more important than ever to be protected.

### **Public Service Loan Forgiveness partner**

While not a BAYADA managed benefit, some employees may be eligible for the Public Service Loan Forgiveness (PSLF) federal program administered by the US Department of Education, which provides student loan forgiveness to eligible full-time employees of qualifying 501(c)(3) non-profit employers. Not all entities of BAYADA are qualifying 501(c)(3) non-profit employers. For more PSLF information and/or to determine if your BAYADA entity is qualifying for PSLF, visit [bayada.com/benefits/find-benefits/additional-benefits](https://bayada.com/benefits/find-benefits/additional-benefits).

Contact [pslf@bayada.com](mailto:pslf@bayada.com) for additional questions and/or PSLF form completion.

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## MEDICAL – HMSA and Kaiser

Your medical plans will be offered through Kaiser Permanente and HMSA. The Kaiser HMO plan offers low copays for both a primary care physician office visit as well as a specialist office visit. The HMSA PPO network offers discounted rates with groups of “in-network” medical providers.

	HMSA PPO Plan		Kaiser Permanente HMO Plan
	In-Network	Out-of-Network	In-Network Only
<b>PLAN FEATURES</b>			
Annual Deductible (Individual/Family)	Embedded	\$350 / \$1,050	None
Annual Out-of-Pocket Maximum (Individual/Family)	Embedded	\$3,000 / \$9,000	\$2,500 / \$7,500
<b>YOUR COSTS FOR CARE</b>			
Coinsurance		20%*	N/A
Preventive Care	No cost	Covered up to the HMSA allowed amount	No cost
Primary Care Physician (PCP) Office visit & Telemedicine	\$17 copay*	\$17 copay* Covered up to the HMSA allowed amount	\$15 copay for adults 18+ \$0 copay for children through 17
Specialist Visit Office Visit & Telemedicine	\$17 copay*	\$17 copay* Covered up to the HMSA allowed amount	\$15 copay for adults 18+ \$0 copay for children through 17
Urgent Care	\$17 copay*	\$17 copay*	\$15 copay per visit
Emergency Room		20%*	\$75 copay per day

\* After deductible

## PHARMACY – HMSA and Kaiser

Prescription drug coverage through HMSA and Kaiser is included with all of our medical plans. You can also purchase a 90-day supply through HMSA or Kaiser mail order pharmacy. Review the chart for the amount you will pay for a 30-day supply of the prescription drug category listed. Your medical ID card will also include information on your prescription drug coverage.

	HMSA PPO Plan		Kaiser Permanente HMO Plan
	In-Network	Out-of-Network	In-Network Only
<b>RETAIL 30-DAY SUPPLY</b>			
Generic	\$7	\$7 + 20% Coinsurance	Generic Maintenance: \$3 Other Generic: \$10
Preferred Brand	\$30	\$30 + 20% Coinsurance	\$45
Non-preferred Brand	\$30 + \$45 (other brand name cost share)	\$30 + 20% Coinsurance + \$45 (other name brand cost share)	\$45
Specialty	\$100	Not Covered	\$200
<b>MAIL ORDER 90-DAY SUPPLY</b>			
Generic	\$11	Not Covered	2x Retail for 90-day supply
Preferred Brand	\$65		
Non-preferred Brand	\$200		

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## DENTAL – HMSA and Kaiser

BAYADA offers two dental plans through HMSA and Kaiser Permanente. Premiums for coverage are deducted from your paycheck.

	HMSA	Kaiser
Annual Maximum Per Person	\$1,500	\$1,200
<b>Preventive and Diagnostic</b>		
Examinations and Cleanings	100% twice per year	100% twice per year
Bitewing x-rays	100% twice per year	100% twice per year
Fluoride (ages 18 and younger)	100% twice per year	100% twice per year
Space maintainers	70% age 13 and under	70% through age 17
Other x-rays	70%	70%
<b>Other Services</b>		
Endodontics	70%	70%
Periodontics	70%	70%
Prosthodontics	50%	50%
Roll over Amount	Up to \$5,000 (max accumulation \$1,250)	N/A

## VISION – EyeMed

Vision coverage is available to you through EyeMed. Premiums for coverage are deducted from your paycheck.

	Member Cost In-Network*
Eye Exam (Once every 12 months)	\$10 copay
<b>Lenses (Once Every 12 Months)</b>	
Single	\$15 copay
Bifocal	\$15 copay
Trifocal	\$15 copay
Frames (Once every 24 months)***	Up to \$150 allowance plus 20% off any amount above \$130
<b>Contact Lenses*** (Once every 12 months)</b>	
Medically Necessary	Covered in full
Elective	Up to \$130 allowance plus 15% off any amount above allowance

## LIFE AND DISABILITY – MetLife

The Basic Life and AD&D plan provides a benefit in the event of your death, dismemberment or paralysis. This benefit is sponsored by BAYADA, so you will automatically be enrolled at no cost to you. Your coverage will be a fixed amount of \$15,000.

## DISABILITY – Hawaii State and The Hartford

You are eligible for the Hawaii State Disability if you have at least 14 weeks of Hawaii employment in which you were paid for 20 hours or more, earned no less than \$400 in the 52 weeks preceding the first day of disability, and are currently employed. You may purchase STD coverage through The Hartford while you meet your waiting period for coverage with MetLife. You have the choice of two disability plans. Premiums for coverage are deducted from your paycheck

### Hawaii State Disability

Benefit Amount	58% of average weekly wages up to a maximum of \$650 per week
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### The Hartford Benefits

		Option 1	Option 2
Benefit Amount	You may choose your weekly benefit. Benefits are in \$100 increments, not to exceed 60% of your weekly earnings	\$300 - \$1,400	\$300 - \$1,400
Benefit Starts	You may choose when you want your benefit to start	Day 8	Day 15
Benefit Duration	You may choose how long you want to receive your benefit	26 weeks	52 weeks

**For a full outline of benefit offerings, please refer to your Benefit Guide, Policy Documents, or contact your Benefits team.**