



ALEXANDER
& BALDWIN

benefitsbulletin 2019

your 2019 A&B benefits

OPEN ENROLLMENT is your **opportunity** to:

- Evaluate whether the benefits coverage you have this year will meet your needs next year, and
- Make a decision about coverage for 2019.

How To Enroll

You can enroll on the PlanSource website at: <https://benefits.plansource.com/>

Login Information:

Username: Your first initial of your first name; up to the first six characters of your last name; then the last four numbers of your Social Security Number. (For example, the user name for James Alexander would be jalexan1234).

Password: Your password has been reset to your birth date in the following format YYYYMMDD (Year/Month/Day).



Important Notes

- Your current health plan and other benefit coverages will carry over into 2019, unless you make changes online during the Open Enrollment period.
- You **MUST** make new elections online for flexible spending accounts (medical, dependent care) and the transportation benefit.
- You also have the ability to waive Company-provided medical coverage. If you elect to waive medical coverage, you will receive a \$150 monthly payment from the Company (\$1,800 annually). These payments are taxable. You must show proof of approved healthcare coverage and complete the necessary waiver form(s) to receive the payment.

OPEN ENROLLMENT for the 2019 plan year is scheduled for
OCTOBER 29 - NOVEMBER 14

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Looking Ahead to 2019...

The benefit plans we have today will continue to be offered in 2019, as outlined on **page 3**. More detailed information about the 2019 benefit plans is included in the Open Enrollment Guide.

In 2019:

- With the move to the web-based payroll system in 2019, we will no longer be utilizing the **PlanSource** benefit system after the 2019 open enrollment has been completed. Life event benefit changes will be made directly in the new payroll system.
- In 2019, the single premium for the A&B medical plans will now be based on a flat contribution amount for all employees.
- A&B will continue to contribute 80% of the premium for dependent coverage with your contributions continuing to be 20%.
- See **page 4** for a breakdown of premium and semi-monthly contributions.
- A&B will not be making any significant “benefit” changes but here are some important reminders:
 - HMSA and Kaiser plans include the Active & Fit Exercise Programs so be sure to take advantage of these programs to stay healthy
 - These programs allow you to join a gym for a low annual membership or purchase home exercise kits so you can exercise at home.
 - Kaiser is broadening their facility network in 2019 so please see HMSA and Kaiser Active & Fit brochures for details about program costs, participating facilities, and FAQ’s.



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BENEFIT	OPTIONS AVAILABLE
Medical (includes prescription drug and vision coverage)	HMSA PPO (HMSA is making standard plan design changes/enhancements; details to follow) HMSA HMO HPH Plus (HMSA is making standard plan design changes/enhancements; details to follow) Kaiser HMO (Kaiser is making standard plan design changes/enhancements; details to follow)
Dental	Delta Dental / HDS Plan (100% Preventive / 70% Restorative)
Long-Term Disability	60% of your monthly base salary up to the \$15,000 maximum
Life Insurance	<p>For You — The Company automatically pays for coverage at 2 x your annual base salary; however you have the option of electing a flat \$50,000 of coverage. You may purchase additional coverage, to the following amounts, up to the plan's maximum:</p> <ul style="list-style-type: none"> ■ 3 x your annual base salary (2 x your annual base salary paid by the Company and 1 x your annual base salary paid by you) ■ 4 x your annual base salary (2 x your annual base salary paid by the Company and 2 x your annual base salary paid by you) ■ 5 x your annual base salary (2 x your annual base salary paid by the Company and 3 x your annual base salary paid by you) <p>Note: Any increases may require a statement of health</p>
Accidental Death and Dismemberment (AD&D) Insurance	<p>For You — The Company automatically pays for coverage at 1 x your annual base salary. You may purchase additional coverage which brings your total coverage up to the following amounts:</p> <ul style="list-style-type: none"> ■ 2 x your annual base salary (1 x your annual base salary paid by the Company and 1 x your annual base salary paid by you) ■ 3 x your annual base salary (1 x your annual base salary paid by the Company and 2 x your annual base salary paid by you) ■ 4 x your annual base salary (1 x your annual base salary paid by the Company and 3 x your annual base salary paid by you) ■ 5 x your annual base salary (1x your annual base salary paid by the Company and 4 x your annual base salary paid by you)
Dependent Life Insurance	You may choose from two levels of coverage for your spouse and one level of coverage for your dependent children
Health Care and Dependent Care Reimbursement Accounts	Tax-advantaged ways to pay for common types of health care and dependent day care expenses Administered by National Benefit Service (NBS)
Transportation Benefit	Tax-advantaged ways to pay for your parking and commuting expenses Administered by National Benefit Service (NBS)
Business Travel Accident Insurance	Business Travel Accident Insurance is coverage while traveling on company business
Long Term Care Insurance	Long Term Care Insurance for you at no cost (\$1,000 facility monthly benefit for a 3-year duration) and additional options for you and your family.
EAP/Wellness Program	Employee Assistance Program/Wellness Program

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PREMIUM AND EMPLOYEE CONTRIBUTIONS

2019 Group Rates for Salaried Plans

Tier:	2019	2019 Employer Cost	2019 Employee Monthly	2019 Employee Semi-Monthly
HMSA Health Plan Hawaii (HMO)				
Single*	\$473.76	\$436.26	\$37.50	\$18.75
Two-Party	\$947.51	\$758.01	\$189.50	\$94.75
Family	\$1,420.99	\$1,136.79	\$284.20	\$142.10
HMSA Preferred Provider (PPO)				
Single*	\$563.22	\$525.72	\$37.50	\$18.75
Two-Party	\$1,126.37	\$901.09	\$225.28	\$112.64
Family	\$1,689.29	\$1,351.43	\$337.86	\$168.93
Kaiser (includes Vision)				
Single*	\$585.62	\$548.12	\$37.50	\$18.75
Two-Party	\$1,171.23	\$936.99	\$234.24	\$117.12
Family	\$1,756.85	\$1,405.47	\$351.38	\$175.69

VSP (for HMSA HMO & PPO)		HDS	
Single	\$11.79	Single	\$42.44
Two-Party	\$19.00	Two-Party	\$84.89
Family	\$28.87	Family	\$118.58

*Single Medical premium subject to the Hawaii Prepaid Health Care Law.

And remember...it's not too late to earn the WELLNESS INCENTIVE for 2019, so get started today!

Employees enrolled in the Company's medical plan earning 15 points by November 14, 2018, will receive an annual reduction of \$300 (\$25/month) in their employee premiums for 2019. If an employee's spouse is also enrolled in the Company's medical plan and earns 15 points in the Wellness program, an additional \$300 annual reduction will be applied towards the employee's total medical premiums.

