



2015 Plan Year COBRA Benefit Guide

MAY 1, 2015 - APRIL 30, 2016

WHAT'S INSIDE?

This informational guide offers you the resources you'll need to make informed enrollment decisions while you are on COBRA during the May 1, 2015 - April 30, 2016 Plan Year, including information on how to use your benefits.

Health insurance is one of the most important benefits offered by SprocketPRO, Inc. A major illness or injury could be financially challenging without adequate insurance. Even the cost of treatment of minor conditions can add up. With this in mind, Sprocket's Medical COBRA Plans have been designed to provide comprehensive medical benefits with a broad-based PPO Network of Doctors and Hospitals.

The benefit choices you make when you enroll will remain in place throughout the plan year unless you experience a **"Qualifying Life Event"** (e.g. marriage, divorce/legal separation, birth, adoption, death, or spousal change). If you experience a **"Qualifying Life Event"** and would like to make plan changes you are required to notify Human Resources of any changes within 30 days of the event date. If you do not notify Human Resources in the required time period, you will have to wait until the next Annual Open Enrollment to make changes.

This document is a brief overview of benefits and is intended as a summary only. Contact Human Resources for a complete listing of each plan's benefits, limitations and exclusions. In the event of a discrepancy between this summary and carrier documents, the carrier documents will prevail.

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SprocketPRO, Inc. offers a comprehensive suite of benefits to promote health and financial security for you and your family. You are either currently on COBRA or are still in the election period for COBRA

This guide contains your 2015 Benefit Enrollment Information, including instructions and descriptions of benefits and costs. We encourage you and your family to carefully review all information provided in order to make the best decision for you and your family.

Highlights for 2015

We evaluated various plan options for our benefits package with the intention of maintaining a high quality benefit package at an affordable cost. After reviewing the marketing results we will continue to offer three medical PPO plans through UnitedHealthcare (UHC).

The Delta Dental, VSP Vision coverage's will also remain the same for the May 1, 2015 through April 30, 2016 plan year.

Benefit Basics

You are eligible to elect Medical, Dental or Vision benefits or make any changes, adds or drops during the Open Enrollment Period. This is due to the fact that you are currently on Sprocket's COBRA or you are still in the election period for COBRA.

Your eligible dependents include: your spouse, domestic partner and your children up to age 26.

Once your benefit elections become effective, they remain in effect until the end of the unless you terminate your COBRA or do not elect COBRA during the elections period. In these cases, your term date will be because of non-payment of your COBRA premium or that you never elected COBRA which means that your original benefit term date will apply. You may only change coverage within 30 days of a "Qualifying Life Event" or during the Annual Open Enrollment period.

Sprocket's Benefit Plan Year (Medical, Dental, Vision) is from May 1st – April 30th of each year. Plan Deductibles, Out-of-Pocket Maximums, and other annual Plan Limitations accumulate according to Sprocket's Plan Year and NOT A CALENDAR YEAR. The only exception to this is Sprocket's Dental Plan, it's Deductibles and Maximums accumulate on a Calendar Year basis.

Enrollment Instructions

Read this benefits guide in its entirety and complete the corresponding carrier change form if you are making changes to your benefits enrollment or complete the carrier enrollment form(s) if you are a new employee enrolling in the plan.

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For more information about your benefits, please contact **Kent West** at kent.west@sprocketmedia.com or 801.694.8309.

Enrollment Forms and instructions are available on page 13 of this Guide.

Due Dates:

- > Open Enrollment - occurs during April of each year with benefits effective May 1st.
- > "Qualifying Life Event" - within 30 days of event

The Cost of Your Benefits

The Cost of your COBRA benefits are the full amount that UHC, Delta Dental and VSP charges SprocketPRO, Inc. for the coverages that you have elected.

Benefit	Who Pays
Medical Coverage	You
Dental Coverage	You
Vision Coverage	You

COBRA Premiums

For Plan Year 2015 (May 1, 2015 - April 30, 2016) the COBRA premiums will be as follows for UHC, Delta Dental and VSP coverages.

Medical

Coverage Type	UnitedHealthcare \$500 Deductible PPO RZQ /IV	UnitedHealthcare \$1,000 Deductible PPO RZX / IW	UnitedHealthcare \$2,000 Deductible PPO RZX / IZ
Employee Only	Monthly \$727.35	Monthly \$657.42	Monthly \$554.88
Employee + Spouse/ Domestic Partner	\$1,600.19	\$1,466.30	\$1,220.75
Employee + Child(ren)	\$1,309.25	\$1,183.34	\$998.78
Employee + Family	\$2,182.08	\$1,972.22	\$1,644.65

Dental

Coverage Type	DeltaCare USA (CA Only)	Delta Dental PPO
	Monthly	Monthly
Employee Only	\$21.77	\$50.98
Employee + One	\$39.07	\$100.55
Employee + 2 or more	\$57.79	\$153.27

Vision

Coverage Type	VSP
	Monthly
Employee Only	\$8.72
Employee + One	\$14.95
Employee + Child(ren)	\$15.26
Employee + Family	\$24.61

When You Can Make Changes

- > **Annual Open Enrollment** – As a COBRA participant or someone who is still in the COBRA Election Period, Open Enrollment offers you the opportunity to make changes in your plan participation or to participate in the Benefit Plan for which you have not previously enrolled. You may make changes during Open Enrollment, which occurs during a 10 day period in April for a May 1st effective date. Each year you will be notified when the Open Enrollment period is and will receive an overview of any significant changes that are being made to the benefit plans. Your current benefits are evergreen, or rollover, if no changes are made.
- > **Qualifying Life Event** – Other than the above situations, you cannot make changes unless you have an IRS-approved “change of family status / qualifying life event” during the year. This may include:
 - > the addition of a dependent through birth, adoption or marriage;
 - > the loss of a dependent through divorce or death, or if your child reaches the maximum age limit for coverage;
 - > a change in your or your spouse’s employment status affecting eligibility;
 - > a substantial change in your or your spouse’s benefits coverage

You must adjust your benefit elections within 30 days of the **“Qualifying Life Event.”** It is your responsibility to contact Human Resources to request an Enrollment/Change form as soon as you are aware of an event.

You may add or drop dependents from your coverage as long as the changes are consistent with the type of family status change you have had. After submitting your form, you will be notified which, if any, of your benefits may be changed as a result of your status change. The decisions you make will affect your benefits for the remainder of the benefits plan year, which is May 1 through April 30.

Medical Coverage

SprocketPRO Inc. offers a choice of three (3) medical plan options for the 2015 Plan Year (May 1, 2015 - April 30, 2016); you choose the plan that meets your needs, and those of your family. Each plan includes comprehensive health care benefits, including free preventive care services and coverage for prescription drugs. To help you and your family Sprocket shares in cost of your Medical coverage.



2015 Medical Plans

- > \$500 Deductible PPO Plan
RZQ / IV
\$20 In-Network Office Visits
\$500 Individual In-Network
Deductible/Network Benefits Paid
at 90% after Deductible
- > \$1000 Deductible PPO Plan - RZU
/ IW
\$30 In-Network Office Visits
\$1000 Individual In-NETWORK
Deductible/Network Benefits Paid
at 70% after Deductible
- > \$2000 Deductible PPO Plan -
RZX / IZ - \$40 In-Network
Office Visits / \$2000 Individual
In-Network Deductible/Network
Benefits Paid at 70% after
Deductible

The comparison chart and Benefit Summary's on the following 2 pages will allow you to compare the 3 - 2015 Sprocket UHC PPO Medical Plans.

2015 Medical Plan Changes

There are no changes for the 2015 Plan Year with Sprocket's UHC Medical Plans. The Benefits of the Medical plans remain the same as they were for the 2014 Plan Year. Only the cost of the Medical Plan has changed for the 2015 Plan Year.

2015 UnitedHealthcare Medical PPO / Rx Plans Comparison

May 1, 2015 - April 30, 2016 Plan Year

Plan Features	UHC - \$500 DEDUCTIBLE 04P6627 / RZQ - IV		UHC - \$1,000 DEDUCTIBLE 02M1329 / RZU - IW		UHC - \$2,000 DEDUCTIBLE 07R2892 / RZX - IZ	
	PPO		PPO		PPO	
	In-Network	Non-Network	In-Network	Non-Network	In-Network	Non-Network
Annual Deductible						
Individual	\$500	\$1,000	\$1,000	\$2,000	\$2,000	\$4,000
Family	\$1,500	\$2,000	\$2,000	\$4,000	\$6,000	\$12,000
Maximum Out-of-Pocket						
Individual	\$5,500	\$11,000	\$5,500	\$11,000	\$6,350	\$12,700
Family	\$11,000	\$22,000	\$11,000	\$22,000	\$12,700	\$25,400
Lifetime Maximum	Unlimited		Unlimited		Unlimited	
Preventative Services						
Physical Exams	No charge	Not covered	No charge	Not covered	No charge	Not covered
Adult Services	No charge	Not covered	No charge	Not covered	No charge	Not covered
Well Child	No charge	Not covered	No charge	Not covered	No charge	Not covered
Immunizations	No charge	Not covered	No charge	Not covered	No charge	Not covered
Vision & Hearing	No charge	Not covered	No charge	Not covered	No charge	Not covered
Physician Services						
Office Visits	\$20	copay 70%	\$30 copay	50%	\$40 copay	50%
Specialist Visit	\$40	copay 70%	\$50 copay	50%	\$60 copay	50%
Hospital Services						
Inpatient	90% after \$500 copay	70% after \$500 copay	70% after \$500 copay	50% after \$500 copay	70% after \$500 copay	50% after \$500 copay
Emergency	\$250 copay		\$250 copay		\$250 copay	
Ambulance	90%	90%	70%	70%	70%	70%
Outpatient Hospital						
Surgery - Ambulatory	\$250 then 90%	\$250 then 70%	\$250 then 70%	\$250 then 50%	\$250 then 70%	\$250 then 50%
Surgery - Hospital based	\$250 then 90%	\$250 then 70%	\$250 then 70%	\$250 then 50%	\$250 then 70%	\$250 then 50%
Lab & X-Ray						
Free-standing or Dr. Office	90%	70%	70%	50%	70%	50%
Out-patient Hospital based	\$250 then 90%	\$250 then 70%	\$250 then 70%	\$250 then 50%	\$250 then 70%	\$250 then 50%

2015 UnitedHealthcare Medical PPO / Rx Plans Comparison

May 1, 2015 - April 30, 2016 Plan Year (continued)

Plan Features	UHC - \$500 DEDUCTIBLE 04P6627 / RZQ - IV		UHC - \$1,000 DEDUCTIBLE O2M1329 / RZU - IW		UHC - \$2,000 DEDUCTIBLE 07R2892 / RZX - IZ	
	PPO		PPO		PPO	
	In-Network	Non-Network	In-Network	Non-Network	In-Network	Non-Network
Miscellaneous	Annual Deductible Applies		Annual Deductible Applies		Annual Deductible Applies	
Skilled Nursing	90% 60 days	70% 60 days	70% 60 days	50% 60 days	70% 60 days	50% 60 days
Home Health Care	90% 100 visits	70% 100 visits	70% 100 visits	50% 100 visits	70% 100 visits	50% 100 visits
Hospice	90%	70%	70%	50%	70%	50%
Physical Therapy	\$20 copay 20 visits	70% 20 visits	\$30 copay 20 visits	50% 20 visits	\$40 copay 20 visits	50% 20 visits
Chiropractic Care	\$20 copay 24 visits	70% up to \$25 24 visits	\$30 copay 24 visits	50% up to \$25 24 visits	\$40 copay 24 visits	50% up to \$25 24 visits
Durable Med. Equip.	90% No limitation per year		70% No limitation per year		50% No limitation per year	
Prescription Drugs						
Deductible (individual/family)	None		\$150 / \$450		\$250 / \$750	
Tier1 / Tier 2/ Tier 3 Specialty Drugs Supply	\$15/\$35/\$60 \$15/25%/30% 30 days	Not Covered Not Covered	\$15/\$35/\$60 \$15/25%/30% 30 days	Not Covered Not Covered	\$15/\$35/\$60 \$15/25%/30% 30 days	Not Covered Not Covered
Mail Order Supply	2.5 times 90 days	Not Covered 90 days	2.5 times 90 days	Not Covered 90 days	2.5 times 90 days	Not Covered 90 days

2015 UnitedHealthcare PPO Medical and Rx Benefit Summary's:

To see the specific MEDICAL and RX BENEFIT SUMMARY for any of SPROCKET'S 2015 MEDICAL PLANS, please click on the appropriate PLAN link below:

The Affordable Care Act (ACA) requires that the PLAN provides you with Summary of Benefits Coverage (SBC) for each for comparison. The SBC combines both the Medical & Rx Plans into one Summary. To see the SBC for each PLAN, please click on the appropriate ACA - SBC link below.

UHC PPO - \$500 Deductible Plan - 04P6627

Medical Plan: RZQ UHC Select Plus Direct - RZQ 20/500/90% Plan - Benefit Summary 5/1/2015

Rx Plan: OIV UHC OptumRx - OIV 15/35/60 - \$0 Plan - Benefit Summary 5/1/2015

ACA - SBC: RZQ / OIV UHC - Summary of Benefits Coverage - RZQ/OIV \$500 Deductible Plan - 5/1/2015

UHC PPO - \$1000 Deductible Plan - O2M1329

Medical Plan: RZU UHC Select Plus Direct - RZU 30/1000/70% Plan - Benefit Summary 5/1/2015

Rx Plan: OIW UHC OptumRx - OIW 15/35/60 - \$150 Plan - Benefit Summary 5/1/2015

ACA - SBC: RZU / OIW UHC - Summary of Benefits Coverage - RZU/OIW \$1000 Deductible Plan - 5/1/2015

UHC PPO - \$2000 Deductible Plan - 07R2892

Medical Plan: RZX UHC Select Plus Direct - RZX 40/2000/70% Plan - Benefit Summary 5/1/2015

Rx Plan: OIZ UHC OptumRx - OIZ 15/35/60 - \$250 Plan - Benefit Summary 5/1/2015

ACA - SBC: RZX / OIZ UHC - Summary of Benefits Coverage - RZZ/OIZ \$2000 Deductible Plan - 5/1/2015

To enroll or to make changes: Complete and return the **UHC - Medical Enrollment Form** to kent.west@sprocketmedia.com.

Dental Coverage

Regular dental exams can help you and your dentist detect problems in the early stages when treatment is simpler and costs are lower. Keeping your teeth and gums clean and healthy will help prevent most tooth decay and periodontal disease and is an important part of maintaining your medical health.

SprocketPRO, Inc. offers 2 Dental plans to choose from; DeltaCare USA (CA Only) and Delta Dental PPO. Please see the below summary of each plan.

Plan Provision	DeltaCare USA (CA Only)	Delta Dental PPO (Nationwide)	
		In-Network	Out-of-Network
Annual Deductible (Individual /Family)	None	\$50 / \$150	
Annual Maximum (Per Person)	Unlimited	\$2,000	
Diagnostic and Preventive Care: Includes cleanings, fluoride treatments and x-rays	Please refer to the Copay Schedule	100%, no deductible	100%, no deductible
Basic Services: Includes fillings, periodontics, scaling and root planning, and oral surgery	Please refer to the Copay Schedule	80% after deductible	80% after deductible
Major Services: Includes crowns, bridges and full and partial dentures	Please refer to the Copay Schedule	50% after deductible	50% after deductible
Orthodontia (Adults and Dependent Children)	\$1,900/\$1,700 copay	Not Covered	

To see a comprehensive explanation, comparison and Benefits Summary's for the 2015 Sprocket Dental Plans, go to: [2015 - SprocketPRO Delta Dental Plans Information Sheet](#)

Vision Coverage

The vision plan covers routine eye exams and also pays for a portion of the cost of glasses or contact lenses if you need them.

Plan Provision	VSP	
	In-Network Only	Out-of-Network Maximum Reimbursements
Exam Materials	\$10 copay \$25 copay	up to \$45 See below
Frequency Exam Lenses Frames	12 months 12 months 24 months	
Frames	\$130 allowance + 20% off amount over allowance	up to \$70
Lenses	After \$25 copay	
Single Vision	100%	up to \$30
Bifocal	100%	up to \$50
Trifocal	100%	up to \$65
Medically Necessary Contact Lenses	100%	up to \$105
Elective Contact Lenses in lieu of glasses	Up to \$60 copay for lens fitting, \$130 allowance for contacts	up to \$105

To see a comprehensive explanation, comparison and Benefits Summary for the 2015 Sprocket Vision Plan, go to [2015 - SprocketPRO VSP Vision Plan Information Sheet](#)

Enrollment Forms – Who is Eligible and When Sprocket Plan Year May 1st – April 30th

Complete and return forms to Kent West at kent.west@sprocketmedia.com or fax to 801.384.0657.

PLAN	ENROLLMENT FORM	WHO IS ELIGIBLE & WHEN
Medical - UnitedHealthcare	UHC Medical Enrollment Form	COBRA participants or if you are still in the COBRA election period.
Dental - Delta Dental	Delta Dental Enrollment Form	COBRA participants or if you are still in the COBRA election period.
Vision - VSP 2014 -	VSP Vision Enrollment Form	COBRA participants or if you are still in the COBRA election period.

Benefit Carrier Contacts

Medical - UnitedHealthcare	800.357.0978	www.myuhc.com
Dental - Delta Dental	DeltaCare USA - 800.422.4234 Delta Dental PPO - 800.765.6003	www.deltadentalins.com
Vision - VSP	800.877.7195	www.vsp.com

Glossary of Medical Plan Terms

Brand Name Drugs—Drugs that have trade names and are protected by patents. Brand name drugs are generally the most costly choice.

Coinsurance—The percentage of a covered charge paid by the plan.

Consumer Driven Health Plan (CDHP)—A medical plan used in conjunction with a health savings account (HSA).

Copayment (Copay)—A flat dollar amount you pay for medical or prescription drug services regardless of the actual amount charged by your doctor or health care provider.

Deductible—The annual amount you and your family must pay each year before the plan pays benefits.

Generic Drugs—Generic drugs are less expensive versions of brand name drugs that have the same intended use, dosage, effects, risks, safety and strength. The strength and purity of generic medications are strictly regulated by the Federal Food and Drug Administration.

In-Network—Use of a health care provider that participates in the plan's network. When you use providers in the network, you lower your out-of-pocket expenses because the plan pays a higher percentage of covered expenses.

Out-of-Network—Use of a health care provider that does not participate in a plan's network.

Mail Order Pharmacy—Mail order pharmacies generally provide a 90-day supply of a prescription medication for the same cost as a 60-day supply at a retail pharmacy. Plus, mail order pharmacies offer the convenience of shipping directly to your door.

Inpatient—Services provided to an individual during an overnight hospital stay.

Outpatient—Services provided to an individual at a hospital facility without an overnight hospital stay.

Out-of-Pocket Maximum—The maximum amount you and your family must pay for eligible expenses each plan year. Once your expenses reach the out-of-pocket maximum, the plan pays benefits at 100% of eligible expenses for the remainder of the year.

Specialist—A physician who has specialized training in a particular branch of medicine (e.g., a surgeon, gastroenterologist or neurologist).

COBRA FAQ's

What does COBRA do?

COBRA requires continuation coverage to be offered to covered employees, their spouses, and dependent children when your coverage would otherwise be lost due to certain specific events. COBRA continuation coverage is often more expensive than the amount that active employees are required to pay for group health coverage, since the employer usually pays part of the cost of the employees coverage and all of that cost can be charged to individuals.

What plans will I be eligible to participate in during my COBRA?

You can only initially participate in the Medical, Dental or Vision Plan that you had when your benefits were terminated. Sprocket will have its Annual Open Enrollment during April with Benefits effective 5/1/2015. You will be given the opportunity to change or add Medical, Dental or Vision Plans, only if you elect COBRA and pay your premium for COBRA from the time your benefits ended, until you make your COBRA payment.

How long do I have to elect COBRA once I receive my COBRA Packet from Paychex?

You have 60 days from the date of the Paychex COBRA Packet to elect whether you want to participate in COBRA, in your Sprocket Medical, Dental or Vision that you had until your Benefits ended with Sprocket. Electing coverage does not allow us to update your eligibility in the UHC, Delta Dental or VSP systems. We must receive your payment before any eligibility will be updated.

How long do I have until I have to make a payment for COBRA?

You have 45 days from the time you elect COBRA to make a your payment, which must include the cost of the Medical, Dental or Vision Plan, from the date that you became eligible for COBRA to the date of your COBRA payment. Example: If you elect COBRA on May 20, 2015, you would then need to make a payment for the month of April & May 2015 before we would apply the payment and in turn update your eligibility in the UHC, Delta Dental or Vision systems.

How long will my COBRA coverage last?

Your COBRA will last, if elected, for 18 months from day your benefits originally ended, if you make your COBRA payments on-time.

What happens if I incur a Medical, Dental or Vision expense/claim before I have elected and paid for COBRA and my eligibility has been updated in the Carrier system?

Any claims submitted by a provider will require you to contact the UHC, Delta Dental or VSP and ask them to reprocess the denied claim, if it has been processed and denied. For claims that you will need to pay for out-of-pocket, you will need to contact UHC, Delta Dental or VSP and request a claim form to get reimbursed for that particular claim.

Continued on next page...

COBRA FAQ's

Can my COBRA coverage be terminated early for any reason?

- > Premiums are not paid in full on a timely basis
- > The employer ceases to maintain any group health plan
- > A qualified beneficiary begins coverage under another group health plan after electing COBRA coverage

Are there alternatives for health coverage other than COBRA?

- > Eligibility for COBRA coverage won't limit your eligibility for the Affordable Care Act's "Marketplace" coverage. You can apply for Marketplace coverage at HealthCare.gov or by calling 1-800-318-2598. To qualify for special enrollment in the "Marketplace" plan, you must select a plan within 60 days before or 60 days after losing your job-based coverage. If you need health coverage in the time between losing your job-based coverage and beginning coverage through the "Marketplace", you may wish to elect COBRA coverage through Sprocket, COBRA coverage will ensure coverage until the coverage through your "Marketplace" plan begins.
- > Losing your Sprocket Coverage is considered a special event and will allow you to enroll in your Spouse's Coverage, if available, within 30 days of the loss of coverage.

How will Sprocket's Annual Open Enrollment affect my COBRA?

- > During Sprocket's Annual Open Enrollment all COBRA participants and those in the COBRA Election Period are given the opportunity to add or change coverages for Medical, Dental, or Vision Plans.
- > Information regarding the changes and how to add or change coverage will be sent to your home and email (on file) In April 2015.
- > Only those COBRA participants (those who have elected and paid their premiums) changes and additions will then become effective 5/1/2015.
- > All Plan Benefits remain the same effective 5/1/2015 for Medical, Dental & Vision.

All other questions COBRA Question can be answered by contacting Paychex COBRA Department, Sprocket's COBRA Administrator, at 1.877.244.1771
8 am to 8 pm ET Monday - Friday.



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