

# benefit highlights

for SALARIED CONSULTANTS

## Welcome.

Solomon Page offers a comprehensive Benefit Program for all full-time, salaried employees.

#### Medical

Solomon Page offers you and your dependents affordable medical insurance administered by UMR, utilizing the UnitedHealthcare Options PPO Network Provider. There are four coverage options to choose from: Platinum, Gold, Silver, or HSA.

SUMMARY OF BENEFITS				
PLAN PROVISION	PLATINUM PLAN	GOLD PLAN	SILVER PLAN	HSA PLAN
Deductible	N/A	N/A	\$1,500/\$3,000 of most services	\$2,000/\$4,000
Co-Insurance	N/A	N/A	80% - 20%	100%
Out of Pocket	\$1,500/\$3,000	\$2,500/\$5,000	\$4,000/\$8,000	\$4,000/\$8,000
Preventive Care	100%	100%	100%	100%
Physician Office - PCP	\$25	\$25	\$30	subject to deductable
Office Visit - Specialist	\$40	\$40	\$50	subject to deductable

BI-WEEKLY EMPLOYEE CONTRIBUTION								
PLAN TYPE	PLATINUM PLAN	GOLD PLAN	SILVER PLAN	HSA PLAN				
Single	\$185.77	\$114.65	\$63.69	\$99.69				
Single +1	\$597.12	\$366.23	\$222.93	\$318.46				
Family	\$684.69	\$477.69	\$318.46	\$415.38				

WEEKLY EMPLOYEE CONTRIBUTION								
PLAN TYPE	PLATINUM PLAN	GOLD PLAN	SILVER PLAN	HSA PLAN				
Single	\$92.89	\$57.33	\$31.85	\$49.85				
Single +1	\$298.56	\$183.12	\$111.47	\$159.23				
Family	\$342.35	\$238.85	\$159.23	\$207.69				

Visit www.umr.com to see if your providers participate.

AVAILABLE THE 1ST OF THE MONTH AFTER YOUR DATE OF HIRE

Medical Coverage

Healthcare Savings
Account (HSA)

Dental Coverage

**Vision Coverage** 

FSA and Dependent Care

Commuter Benefits

**AVAILABLE IN 12 MONTHS** 

401(k) Plan

Employee Stock
Ownership Plan

#### Health Savings Account (HSA)

Individual Coverage: \$4,150 Maximum per year Family Coverage: \$8,300 Maximum per year

Individuals 55 years of age or older by 12/31/22, may defer an additional \$1,000 for the year

Solomon Page offers a Health Savings Account (HSA), for reimbursement on non-reimbursable qualified medical expenses. To be eligible for the Health Savings Account, employees must be enrolled in a High Deductible Health Plan (HDHP) through Solomon Page. HSA's allow employees enrolled in qualified plans to pay lower health plan premiums and defer pre-tax payroll earnings to cover medical services. The designated funds are deducted from your pay pre-tax, meaning the dollars are not subject to withholding for federal income taxes and Social Security.

Please note, if you open an HSA account, you will not be able to put money into an FSA account for your medical expenses. However, you can enroll in a limited FSA, using those monies for dental, vision and over the counter drugs.

#### Dental

Solomon Page offers you and your dependents dental insurance through United.

SUMMARY OF BENEFITS				
PLAN TYPE	PLATINUM NETWORK	PLATINUM NON-NETWORK	GOLD NETWORK	GOLD NON-NETWORK
NON ORTHODONTICS				
Individual Annual Deductible	\$25	\$25	\$50	\$50
Family Annual Deductible	\$50	\$50	\$100	\$100
Maximum (the sum of all Network and Non-Network benefits will not exceed Annual maximum)	\$2,000 per person per Calendar Year	\$2,000 per person per Calendar Year	\$1,500 per person per Calendar Year	\$1,500 per person per Calendar Year
ORTHODONTICS				
Individual Annual Deductible	\$0	\$0	\$0	\$0
Family Annual Deductible	\$0	\$0	\$0	\$0
Maximum (the sum of all Network and Non-Network benefits will not exceed Annual maximum)	\$2,500 per person per Lifetime	\$2,500 per person per Lifetime	\$1,000 per person per Lifetime	\$1,000 per person per Lifetime
NON ORTHODONTICS				
Periodic Oral Evaluation	100%	100%	100%	100%
Radiographs	100%	100%	100%	100%
Prophylaxis (Cleaning)	100%	100%	100%	100%
Oral Surgery (incl. surgical extractions)	90%	90%	70%	60%

BI-WEEKLY EMPLOYEE CONTRIBUTION								
PLAN TYPE		PLATINUM PLAN	GOLD PLAN					
Single		\$18.14	\$9.23					
Single +1		\$41.12	\$23.07					
Family		\$63.29	\$34.62					

WEEKLY EMPLOYEE CONTRIBUTION							
PLAN TYPE			PLATINUM PLAN	GOLD PLAN			
Single			\$9.07	\$4.62			
Single +1			\$20.56	\$11.54			
Family			\$31. 65	\$17.31			

Visit myuhc.com to see if your providers participate.



## Vision

Solomon Page offers you and your dependents vision insurance through United.

SUMMARY OF BENEFITS	
Comprehensive Exam(s)	Once every 12 months
Spectacle Lenses	Once every 12 months
Frames	Once every 12 months
Contact Lenses in Lieu of Eyeglasses	Once every 12 months
COPAYS	
Exam(s)	\$10.00
Materials	\$10.00
FRAME BENEFIT (for frames that exceed the allowance, an additional 30%)	discount may be applied to the overage) <sup>1</sup> Accepted by Warby Parker
Private Practice Provider	\$150.00 retail frame allowance
Retail Chain Provider	\$150.00 retail frame allowance
CONTACT LENS BENEFIT <sup>2</sup>	
Necessary contact lenses <sup>3</sup>	Covered in full after copay (if applicable)

BI-WEEKLY I	EMPLOYEE C	ONTRIBUTION			
Single					\$1.53
Single +1					\$2.80
Family					\$4.85

WEEKLY EMF	PLOYEE CONTRIBUTION			
Single				\$0.77
Single +1				\$1.40
Family				\$2.43

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#### FSA and Dependent Care \$3,050 FSA maximum, \$5,000 maximum dependent care

Solomon Page offers Flexible Spending Accounts, for reimbursement up to \$3,200 to be used for qualified medical, dental and vision expenses for employees and their dependents. Additionally, employees can elect up to \$5,000 for reimbursement of qualified child care expenses into a Dependent Care Account. If hired mid-year, the account maximums will be prorated and balances up to \$640 will roll over into the following plan year.

Please note, if you open an HSA account, you will not be able to put money into an FSA account for your medical expenses. However, you can enroll in a limited FSA, using those monies for dental, vision and over the counter drugs.



#### **Commuter Benefits**

The Solomon Page Commuter Benefits Program, in partnership with HealthEquity (formerly Wage-Works), allows employees to set aside up to \$315 pre-tax per month to pay for public transportation (subway, rail, bus, and ferry) and up to \$315 pre-tax per month to pay for parking. These funds will available in the form of a Visa card, pre-loaded with your elected amount each month.



### **401(k)** Plan

Employees are eligible to participate in the company sponsored 401(k) Plan, administered through Principal, after completion of 1 year AND 1,000 hours of service within the first twelve months of employment. Employees may contribute up to 100% of their annual pay, to a maximum of \$23,000, plus additional catch-up contributions for individuals over the age of 50. The company provides a discretionary\* match of 50% of the first 6% of contributions, to a maximum of \$1,500 per year.

\*Match is subject to change.



#### Employee Stock Ownership Plan

ESOP contributions are available to employees who complete 1 year of service (remain employed for 12 months from hire date and complete 1,000 hours of service). If eligibility is not reached in the first year, hours will be recalculated each year thereafter.

#### the **DETAILS**

Employee contributions are primarily withheld on a pre-tax basis. Accordingly, the impact on your net after-tax income is approximately 20 to 25% on average, and your contributions are not subject to federal tax, Social Security tax, Medicare tax, or, in many instances, state income tax.

The benefits described in this document do not create a contract of employment.

This document is meant to be a summary of the benefits available through Solomon Page Group, LLC.

Please refer to the applicable Summary Plan Descriptions (SPD) for all benefit plan provisions and limitations. The SPDs govern all benefit plan determinations.

Effective February 1, 2022, the Solomon Page 401(k) Plan contains an automatic arrangement that applies to new participants or re-hired participants as they enter the plan. If you are a new participant, you will be automatically enrolled in the retirement plan, meaning 4% of your pay will be deducted from paychecks and contributed to the retirement plan on your behalf unless you elect a different salary deferral percentage.

#### SOLOMON PAGE

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