A GUIDE TO THE RECORDING ACADEMY® EMPLOYEE BENEFITS

Effective January 2024
GET TO KNOW YOUR BENEFITS

The National Academy of Recording Arts & Sciences, Inc. (Recording Academy), and its affiliated entities are pleased to present this overview of your employee benefits plan. We offer a variety of benefits to help you take good care of yourself and your family. You're eligible to participate in these plans if you are a regular, full-time or part-time employee who is scheduled to work at least 20 hours per week. Coverage under these plans begins on the first day of the month following your date of hire.

Eligible dependents may be enrolled in your medical, dental, and vision coverage, as well as some of our voluntary benefit plans. Your eligible dependents include:
- Your spouse;
- Your qualified domestic partner;
- Your child up to age 26;
- Your mentally or physically disabled adult children, if they live with you and depend on you for support.

MEDICAL PLAN

The Recording Academy gives you a choice of two medical plans: the Blue Shield Health Maintenance Organization (HMO) Plan (CA only) and the Blue Shield Preferred Provider Organization (PPO) Plan. Which plan is best for you depends on your health care needs, your budget, and how much flexibility you require when choosing a provider.

How the HMO Works. An HMO is a network of doctors and health care facilities that provide medical services at little or no out-of-pocket cost to plan members. There are no deductibles to pay and no claim forms to fill out. You'll make a small copayment (usually $10) for certain services, like routine visits to your doctor; other care, such as hospitalization, is covered at no charge to you. When you enroll in the HMO, you (and each of your enrolled dependents) must choose a primary care physician (PCP) from the Blue Shield HMO network. That physician will oversee all your medical care, including any referrals to a specialist that may be necessary.

Remember, you must receive all of your non-emergency medical care within the HMO network – and under your PCP’s direction – or the plan will not pay benefits.

How the PPO Works. A PPO is a network of doctors and hospitals that have agreed to provide services to plan members at special discounted rates. You can go to any doctor you like within the PPO network, including specialists. Blue Shield has more than 77,000 providers and 380 hospitals throughout the state, so you should have no problem finding excellent care within the PPO network. If you decide you'd rather go to a doctor or health care facility that does not belong to the PPO network, you are free to do so—but your out-of-pocket costs will be higher.

When you enroll in the PPO, you must pay a portion of most medical expenses each calendar year before the plan will pay benefits; this amount is called your “deductible.” The combined deductible for in-network and out-of-network is $250 per person; the family deductible is $750. After the deductible is paid, you will pay a portion of the cost for health care services you receive; this amount is called your “coinsurance.” If your share of the medical expenses reaches an amount called the “out-of-pocket maximum,” you will not have to pay any more coinsurance for the rest of the calendar year.

- **Maximum Savings and Convenience**: Using the PPO Network. If you receive health care services from a provider within the PPO network, your coinsurance will usually be 10% of the PPO provider’s discounted rates. The annual out-of-pocket maximum for PPO network care is $1,750 per person/$3,500 per family. There are no claim forms or other paperwork to complete when you go to a PPO network provider.

- **Maximum Freedom of Choice**: Going Outside the PPO Network. If you receive health care services from an out-of-network provider, your coinsurance will be 30% for most services. The annual out-of-pocket maximum for out-of-network care is $3,250 per person / $6,500 per family. When you use an out-of-network provider, the plan pays benefits based on what Blue Shield has determined is the maximum allowable charge for a particular medical service in your area. If your doctor charges more than the allowable amount covered by the plan, you will have to pay the difference (in addition to your deductible and coinsurance). Also, when you go to an out-of-network provider, you may need to pay the full cost of your medical services up front. You will then file a claim with Blue Shield to be reimbursed for the covered amount.

YOUR RESOURCES

Blue Shield of California PPO Plan
Blue Shield of California HMO Plan
NY Life and Disability (STD and LTD)
MetLife Dental Plan
Vision Service Plan (VSP)
The Holman Group EAP

www.blueshieldca.com
www.blueshieldca.com
www.newyorklife.com
www.metlife.com
www.vsp.com
www.holmangroup.com
DENTAL PLAN
The MetLife dental plan is a preferred provider program that gives you the option of receiving treatment from any licensed dental provider you choose. If you go to a dentist who is a member of MetLife’s extensive preferred provider network, you will be able to take advantage of MetLife’s special discounted rates and reduce your out-of-pocket costs. Also, there are no claims forms to fill out when you go to a network dentist.

VISION PLAN
Your vision care coverage is provided through Vision Service Plan (VSP). Under this plan, you can choose between in-network and out-of-network providers – but you will receive a higher level of benefits, and enjoy greater convenience, if you go to a provider in the VSP network. There is a $10 exam copayment and a $25 material copayment. If you go to a VSP vision care provider, eye exams are covered in full after a $10 copayment; lenses are covered in full up to the plan allowance after the $25 material copayment; frames are covered in full up to $150 once every two years, or choose elective contact lenses, which are covered up to $120/year. If you decide to go to an out-of-network provider, you will be reimbursed for exams and eyewear according to a schedule of allowances.

401(k) PLAN
The Recording Academy offers a 401(k) plan to help you prepare for a comfortable retirement. The plan allows you to save for your retirement on both a before and after-tax basis, and the Recording Academy will match 50% of your 401(k) contributions.

TIME OFF & SPECIAL PERKS
Employees receive:
paid vacation (starting at 2 weeks/yr)
sick time (9 days/yr)
floating holidays (6 days/yr)
In addition, the Recording Academy offers options for remote/hybrid work as well as alternative workweek options. The Recording Academy also provides its employees with Carrot Fertility Care, LinkedIn Learning memberships, Tuition Reimbursement, Dashpass, and Financial Advisory Services. The Recording Academy also offers special fringe benefits including discount auto and home owners’ insurance and discounted gym memberships (in cities where applicable).

DISABILITY INSURANCE
The Recording Academy provides company-paid short-term disability (STD) and long-term disability (LTD) coverage through Cigna, to help protect your income if you become disabled and are unable to work. The STD plan pays the lesser of 60% of your weekly earnings or a maximum weekly benefit of $2,308, if an accidental injury or illness keeps you out of work for 8 days or more. The LTD plan pays the lesser of 60% of your monthly salary or the maximum monthly benefit of $15,000 if you have a disabling condition that lasts beyond 90 days. You must be classified as a full-time employee working at least 30 hours a week in order to receive the STD and LTD benefit.

LIFE AND AD&D INSURANCE
Employees receive company-paid life and accidental death and dismemberment (AD&D) insurance through NY Life. Your benefit amount under each plan is equal to two times your annual base salary, up to a maximum benefit of $750,000. The plan has a “guarantee issue” amount of $500,000, which means no medical questions will be asked for coverage under $500,000. Amounts over the “guarantee issue” will be subject to medical review.

FLEXIBLE SPENDING ACCOUNTS (FSAs)
FSAs allow you to save money by paying certain health and dependent care expenses on a before-tax basis. You may set aside up to $5,000 per year for your health care FSA and up to $5,000 per year for your dependent care FSA (if your tax filing status is “married filing jointly” or “head of household”). You pay no taxes on the money you put in these accounts, which means more take-home pay for you.

VOLUNTARY BENEFITS
An array of voluntary benefit plans are available, some of which include gender forming and fertility benefits, supplemental life insurance for you and your dependents, long term care options, and pretax transportation deductions. If you choose to enroll in any of these plans, you will pay the full costs of your coverage through payroll deductions.

EMPLOYEE ASSISTANCE PROGRAM (EAP)
If you need help with a difficult situation affecting your home life or your work, the EAP is there for you (and your spouse and your children living at home) 24 hours a day. This program is provided by the Recording Academy at no cost to you and is administered by The Holman Group. The EAP provides strictly confidential counseling through outside professionals to help you manage a variety of issues, including family concerns, stress, depression, substance abuse, work-related conflict, and legal matters. The EAP will cover up to eight (8) free, in-person counseling sessions for each problem per year.

This brochure summarizes the key features of your benefit plan. Please refer to the plan documents for exact terms and conditions of coverage. If any conflict ever arises between this brochure and official plan documents, the terms of the actual plan documents or other applicable documents will govern in all cases. The National Academy of Recording Arts & Sciences, Inc., and its affiliated entities reserve the right to change, modify, or terminate the benefit plans at any time. This brochure is not a contract for purpose of employment or payment of benefits.