



wecare.

Life balanced

Improvement Continues!

Like many employers, the rising health care cost associated with providing high quality health care coverage continues to be a challenge. At Western, we are excited to announce that we have been able to continue to improve our plan offerings for the 2021 plan year.

We are proud to offer our employees our most extensive and competitive plan options in Western's prestigious 40 year history. We encourage all employees to continue to be consumers of health care services, as this will help us combat the continued rising cost of health care. The plan changes will go into effect on January 1, 2021.



Open Enrollment

Open Enrollment is your only opportunity to elect benefits for 2021, unless you experience a qualifying life event (i.e., birth, marriage, and divorce). With big improvements to Western's Benefit plan offering and other new offerings, please take the time to review your options and make sure you have the right coverage at the right cost.

Our Open Enrollment period will be from November 23, 2020 and end on December 5, 2020. You will be provided an enrollment form indicating the per pay period costs for all benefits for which you are eligible. For any questions you have or for a financial comparison of the available medical options, please use the Alliant Benefits Advocates at (877) 306-9305.

If you are happy with your current elections, you do not have to re-enroll. However, we encourage all employees to review current elections for accuracy and determine if they would like to enroll in any of the new offerings.

Face-to-Face Meetings

Small group face-to-face meetings will be held in November to explain the improvements to Western's Benefit offerings.



Medical Coverage

For 2021, you will be able to choose between our Flex Plan and our High Deductible Health Plan that allows for HSA Contributions.

2021 Highlights

What's New:

Symetra is the new carrier for life and disability. Short-term disability will continue to be paid for those that enroll in the medical plan. You can still purchase short-term disability on a voluntary basis if you do not enroll in the medical plan. You also have the choice to purchase long-term disability through Symetra. MedPut is now a voluntary benefit to assist with healthcare expenses up to 3,000 at 0% financing.

Don't forget to consider these options:

Two Medical Options – a Flex Plan (PPO) and a High Deductible HSA Plan
Two Dental Options – a low cost managed dental plan and a PPO option, both with Metlife
Vision Coverage with Metlife
Life Insurance and Voluntary Short Term and Long Term Disability with Symetra.



Flex Plan

The **FLEX** Plan allows care to be accessed 3 ways
CareATC clinics providing primary care, health screenings, acute care, ongoing condition management, and a select list of prescriptions at no cost through Walmart Pharmacy.

In-Network care through the Imagine Health high performance Network, featuring Baylor Scott and White facilities, physicians, specialists and select DFW children's specialty hospitals. With the exception of office visits, where you'll only pay 30% for Primary Care or Specialists, other In-Network care (such as surgeries or hospitalizations) is subject to the Deductible and Coinsurance.

Out of Network care is available, through the Cost Plus program through GPA.

Pharmacy Benefits on this plan (outside of the CareATC formulary) are covered at a \$10 Copay for Generic Drugs and tier two and tier three brand name drugs are subject to the deductible and coinsurance.

Administered by GPA		Flex Plan	
Medical Network		Imagine Health	Out-of-Network
Deductible	Individual	\$2,500/Embedded	\$10,000
	Family	Up to \$10,000 max	\$20,000
Coinsurance (Insurance Pays / You Pay)		70% / 30%	50%
Out-of -Pocket (OOP) Maximum	Individual	\$6,850	\$20,000
	Family	\$13,700	\$40,000
Office Visits	CareATC - Primary Care	No Cost to You	Deductible and Coinsurance Apply
	Imagine Health In-Network Primary or Specialist	You pay 30% of the discounted cost	Not Available
	Preventative Care	Covered at 100%	Deductible and Coinsurance Apply
	Urgent Care	No cost to you at CareATC; \$125 Copay for Imagine Health In-Network	Deductible and Coinsurance Apply
	Emergency Room	You pay \$250 Copay; then 30% coinsurance after deductible is met	You pay \$250 Copay; then 20% coinsurance after deductible is met
Surgery	Hospital Inpatient Stay	You pay \$250 Copay; then 30% coinsurance after deductible is met	Deductible and Coinsurance Apply
	Hospital Outpatient or Outpatient Surgery Center	30% coinsurance after deductible is met	Deductible and Coinsurance Apply
Pharmacy - CareATC Formulary		No Cost	No Cost
Pharmacy - All Other Generic		\$10 Copay	Deductible and Coinsurance Apply
Pharmacy - Brand Name		Deductible and Coinsurance Apply	Deductible and Coinsurance Apply
Mail Order		2.5 X Retail	Deductible and Coinsurance Apply





Care ATC has 6 locations throughout DFW and is growing. The Carrollton CareATC location is less than 2 miles from the Western Extrusions facility for your convenience.

Arlington Clinic

3050 S Center Street
Arlington, TX 76014

Forth Worth Clinic

6617 Fossil Bluff Drive
Fort Worth, TX 76137

Richardson Clinic

1060 West Campbell Rd.
Richardson, TX 75080

Mansfield Clinic

1770 E Broad Street
Mansfield, TX 760063

Carrollton Clinic

1735 Keller Springs, Ste 100
Carrollton, TX 75006

Irving Clinic

Medical Office Building II
2021 North MacArthur Blvd, Ste 500
Irving, TX 76061

FLEX Plan In-Network Providers!

Serving both the FLEX Plan and the High Deductible Plan with HSA, the Imagine Health network provides quality In-Network care through Baylor Scott & White facilities and physicians.

Hospitals

- Baylor - All Saints
- Baylor - Andrews Women's
- Baylor - Carrollton
- Baylor - Centennial
- Baylor - Fort Worth Surgical
- Baylor - Frisco
- Baylor - Grapevine
- Baylor - Hamilton Heart Dallas
- Baylor - Hamilton Heart Ft. Worth
- Baylor - Heart Denton
- Baylor - Heart Plano
- Baylor - Irving
- Baylor - Lake Pointe
- Baylor - Las Colinas
- Baylor - McKinney
- Baylor - North Central Surgical
- Baylor - Orthopedic & Spine
- Baylor - Plano
- Baylor - Sunnyvale
- Baylor - Trophy Club
- Baylor - University
- Baylor - Uptown
- Baylor - Waxahatchine

Children's Hospitals

- Children's MC - Dallas
- Children's MC - Plano
- Children's MC - Our Children's House
- Cook Children's - Fort Worth



HSA Plan

The Western Extrusions High Deductible Health Plan with HSA is an option designed for employees who are comfortable with a larger deductible who want to take advantage of a tax-favored Health Savings Account.

With the exception of preventive care covered at 100%, all care, including office visits, other medical, surgery, emergency room, hospitalizations, etc. is subject to the In-Network \$3,500 Individual Deductible (\$7,000 if covering dependents). After meeting the deductible, the plan pays 80% for care up to the out-of-pocket limit (\$6,350 individual / \$12,700 with dependents) after which care is provided at 100%. There are out of network benefits available as well.

Administered by GPA		HDHP Plan with HSA	
Medical Network		Imagine Health	Out-of-Network
Deductible	Individual	\$3,500/Embedded	\$5,000
	Family	\$7,000	\$10,000
Coinsurance (Insurance Pays / You Pay)		80% / 20%	50% / 50%
Out-of -Pocket (OOP) Maximum	Individual	\$6,350	\$10,000
	Family	\$12,700	\$20,000
Office Visits	Primary Care	20% after deductible	Deductible and Coinsurance Apply
	Care ATC Visits	\$45 Copay	Not Available
	Specialists	20% after deductible	Deductible and Coinsurance Apply
	Preventative Care	Covered at 100%	Deductible and Coinsurance Apply
	Virtual Visits	20% after deductible	Deductible and Coinsurance Apply
	Emergency Room	20% after deductible	Deductible and Coinsurance Apply
Surgery	Hospital Inpatient Stay	20% after deductible	Deductible and Coinsurance Apply
	Hospital Outpatient or Outpatient Surgery Center	20% after deductible	Deductible and Coinsurance Apply
Pharmacy		Deductible and Coinsurance Apply	Deductible and Coinsurance Apply



Life Insurance

For 2021, Western Extrusions will continue our company sponsored life benefits through Symetra.

Symetra		Employer Paid Basic Life/AD&D
Benefit (Available based on length of Service)	0 to 2 years	Not available
	2 to 5 years	\$5,000
	5 to 15 years	\$10,000
	15 or more years	\$20,000
Age Reduction		35% at age 65; 50% at age 70; 75% at age 75, 85% at age 80

Symetra	Voluntary Employee Paid Life/AD&D		
	Employee	Spouse*	Child*
Benefit	Units of \$25K up to the lesser of 5x Earnings or \$500K	50% of Employee Coverage up to \$250,000	15 days to 26 years - 10% of Employee Coverage up to \$10,000
Guarantee Issue (Life) when initially eligible	\$250,000	\$50,000	\$10,000
Age Reduction	35% at age 65; 60% at age 70; 75% at age 75; 85% at age 80	Same as Employee	N/A
Evidence of Insurability	Health Statement Required if previously eligible or electing above the Guaranteed Issue Amount		Health Statement is Not Required



Dental

For 2021, Western Extrusions will offer two dental plans through Metlife.

Metlife 1/1/2021 to 12/31/2021		Dental	
		DHMO	DPPO
Dental Network		Managed Dental Guard	Dental Guard Preferred
Network Deductible	Individual	NONE	\$50
	Family	NONE	\$150
Cost Sharing	Preventive Care	NONE	100% Covered
	Basic Care	Schedule of Copays	80% Coinsurance
	Major Care	Schedule of Copays	50% Coinsurance
	Orthodontia (Adults & Children)	Not Covered	Not Covered
Office Visit Copay		\$5	Not Applicable
Maxium	Annual	Unlimited	\$1,000 Per Person
Out-of-Network Services		Please note that this plan does not cover Out-of-Network Care.	Charges will be paid for only up to the maximum allowable charge.

Dental Employee Contributions					
MetLife DHMO	Weekly	Bi-Weekly	MetLife DPPO	Weekly	Bi-Weekly
Employee	\$3.09	\$6.18	Employee	\$6.52	\$13.04
Employee + Spouse	\$4.89	\$9.77	Employee + Spouse	\$14.04	\$28.08
Employee + Child(ren)	\$6.70	\$13.40	Employee + Child(ren)	\$15.66	\$31.32
Employee + Family	\$7.95	\$15.91	Employee + Family	\$23.18	\$46.37



Vision

For 2021, Western will offer vision coverage through Metlife.

Metlife		
Vision Network		Metlife / VSP
Network Copays	Exam	\$10
	Materials	\$25
Frequency	Exam	Once per Calendar Year
	Lenses	Once per Calendar Year / Paid in full with materials copay
	Contact Lenses	Elective: Once per Calendar Year / \$130 allowance
	Frames	24 Months / Covered up to \$130 allowance

Vision Employee Contributions		
MetLife Vision	Weekly	Bi-Weekly
Employee	\$1.50	\$3.00
Employee + Spouse	\$2.52	\$5.04
Employee + Child(ren)	\$2.57	\$5.14
Employee + Family	\$4.07	\$8.14



LegalShield / IDShield

LegalShield and IDShield provide the legal and identity theft protection you and your family need and deserve.

LegalShield Plan Benefits	IDShield Plan Benefits
Legal Consultation and Advice	Identity Consultation and Advice
Court Representation	Dedicated Licensed Private Investigators
Dedicated Law Firm	Identity and Credit Monitoring
Legal Document Preparation and Review	Social Media Monitoring
Letters and Phone Calls Made on Your Behalf	Child Monitoring (Family Plan Only)
Speeding Ticket Assistance	Comprehensive Identity Restoration
Will Preparation	Identity and Credit Threat Alerts
24/7 Emergency Legal Access	24/7 Emergency Legal Access
Mobile App	Mobile App

LegalShield Plan Pricing	IDShield Plan Pricing
Individual / \$17.50 monthly	Individual / \$8.95 monthly
Family / \$17.50 monthly	Family / \$16.95 monthly
LegalShield & IDShield Combined Plan Pricing	
Individual / \$25.15 monthly	
Family / \$31.95 monthly	



Employee Medical Contributions

	Monthly Contributions		Weekly Contributions		Bi-Weekly Contributions	
Employees Earning Under \$85,000 per Year						
	FLEX Plan	HSA Plan	FLEX Plan	HSA Plan	FLEX Plan	HSA Plan
Employee	\$99.32	\$234.12	\$22.92	\$54.02	\$45.84	\$108.05
Employee & Spouse	\$436.98	\$702.36	\$100.84	\$162.08	\$201.68	\$324.16
Employee & Child(ren)	\$306.22	\$468.20	\$70.66	\$108.04	\$141.33	\$216.09
Employee & Family	\$604.87	\$624.41	\$139.58	\$144.09	\$279.17	\$288.18
Employees Earning Over \$85,000 per Year						
	FLEX Plan	HSA Plan	FLEX Plan	HSA Plan	FLEX Plan	HSA Plan
Employee	\$381.77	\$234.12	\$88.10	\$54.02	\$176.20	\$108.05
Employee & Spouse	\$933.21	\$702.36	\$215.35	\$162.08	\$430.71	\$324.16
Employee & Child(ren)	\$706.28	\$468.20	\$162.98	\$108.04	\$325.98	\$216.09
Employee & Family	\$1,493.14	\$624.41	\$344.57	\$144.09	\$689.14	\$288.18





Need Help?

Attend a **face-to-face** meeting in **November** for more detailed information.
As always you can stop in and ask for help in the HR Office.
In addition, Benefits Advocates are
available through our broker, Alliant Insurance Services.

They can be reached as follows:
Alliant Benefits Advocates
(512) 306-9300 / (877) 306-9305

Monday – Thursday 8:00 am – 5:30 pm CST / Friday 8:00 am – 5:00 pm CST