

# 2022 Benefit Highlights

All Sunrunners (Except Hawaii)



## Who's Eligible for Benefits

Full-time employees working 30 hours or more per week are eligible for benefits. Benefits are effective on the first of the month following date of hire.

## How to Enroll

For detailed instructions on how to enroll, [click here](#).

## Changing Your Benefits Midyear

If you experience a qualifying life event (e.g., marriage, divorce, birth or adoption of a child, gain/loss of coverage) during the year, you have 31 days to make changes to your elections. You must provide documentation to validate your change in status.

## 401(k) Plan & Company Match

- All Sunrunners (except 1099 employees) are eligible to participate in the 401(k) on the first of the month following 60 days of service.
- Employees age 18 or older will be automatically enrolled in the Empower Retirement 401(k) Plan at a contribution rate of 4% on the first of the month following 60 days of employment.
- Sunrun will match your contributions up to 3.5%.

## Get Answers to Your Benefits Questions

For general questions on your benefits, turn to the Benefit Advocate Center throughout the year at (844) 632-2197, Monday–Friday, 7 a.m. to 5:30 p.m. PT or [champion@hubinternational.com](mailto:champion@hubinternational.com).

Don't forget to visit [sunrun.gobenefits.net](http://sunrun.gobenefits.net) year round for:

- Plan overviews
- Carrier contact information
- Plan documents
- Videos and more

## Finding an In-Network Provider

In general, you will lower your out-of-pocket health care costs when you use in-network health care providers (doctors, clinics, hospitals, etc.).

### How to Search for In-Network Providers & Prescriptions

#### Medical: Cigna

- Go to [cigna.com](http://cigna.com)
- Select "Find a Doctor, Dentist or Facility"
- Select "Employer or School" under "How are you covered?"
- Enter your zip code, city or state and select the "Doctor by Type, Doctor by Name, or Health Facilities" button
- Select "Open Access Plus, OA Plus, Choice Fund OA Plus" under Medical plan at the top of the search
  - » If you live in Utah, you must select the "PPO, Choice Fund PPO" plan

#### Medical: Kaiser (in select California zip codes only)

- Go to [kp.org](http://kp.org)
- Select "Doctors & Locations"
- Select "Northern or Southern California"
- Search by doctor or location
- Enter your zip code, city or health plan (HMO)

#### Prescription Drugs: Rx Benefits

- Go to [express-scripts.com](http://express-scripts.com)
- To locate a pharmacy: click on "Locate a Pharmacy" and enter your zip code, city or state
- Click on "Locate Pharmacy"

The prescription drug formulary is a list of drugs your plan covers. It is divided into separate levels, called tiers. In general, you will pay less for lower-tier drugs, such as generics. To check whether your prescription is covered:

- Go to [express-scripts.com](http://express-scripts.com)
- Click on "Preferred Drug List"
- Enter the name of your drug

#### Dental: MetLife

- Go to [metlife.com](http://metlife.com) and select "Find a Dentist" > Select "PDP Plus"
- Enter your zip code, city or state and select "Find a Dentist"

#### Vision: VSP

- Go to [vsp.com](http://vsp.com) and click "Find A Doctor"
- Search by location, office or doctor
- Select "Choice Network" under "Advanced Search"

## Your 2022 Benefits-at-a-Glance

The following chart outlines the many benefit options available to you. For details on your benefit options, visit [sunrun.gobenefits.net](https://sunrun.gobenefits.net).

Health	Financial	Work-Life
<p><b>Medical</b></p> <ul style="list-style-type: none"> <li>Cigna PPO Plan</li> <li>Cigna Consumer Directed Health Plan (CDHP) Option 1</li> <li>Cigna Consumer Directed Health Plan (CDHP) Option 2 with Hospital Indemnity Insurance</li> <li>Kaiser Permanente HMO Base &amp; Buy-Up Plans (in select California zip codes only)</li> </ul> <p><b>Dental</b></p> <ul style="list-style-type: none"> <li>MetLife Core Plan</li> <li>MetLife Buy-Up Plan</li> </ul> <p><b>Vision</b></p> <ul style="list-style-type: none"> <li>VSP Basic Plan</li> <li>VSP Buy-Up Plan</li> </ul>	<p><b>Health Savings Account (HSA)</b></p> <p><b>Flexible Spending Accounts (FSAs)</b></p> <ul style="list-style-type: none"> <li>Health Care FSA</li> <li>Limited-Purpose FSA (CDHP members only)</li> <li>Dependent Care FSA</li> <li>Commuter Benefit (Transit &amp; Parking)</li> </ul> <p><b>Sunrun 401(k) Plan + Company Match</b></p> <p><b>Employee Stock Purchase Plan (ESPP)</b></p> <p><b>Basic Life (100% company paid)</b></p> <p><b>Voluntary Life and Accidental Death and Dismemberment (AD&amp;D) (employee paid)</b></p> <p><b>Short-Term &amp; Long-Term Disability (100% company paid)</b></p>	<p><b>Employee Assistance Program (EAP)</b></p> <p><b>Voluntary Benefits</b></p> <ul style="list-style-type: none"> <li>Accident Insurance</li> <li>Critical Illness Insurance</li> <li>Hospital Indemnity Insurance</li> <li>Legal Plan</li> <li>Auto &amp; Home Insurance</li> <li>Identity Theft Insurance</li> </ul> <p><b>WinFertility Maternity Program (for Cigna members only)</b></p> <p><b>Leaves of Absence</b></p> <p><b>PowerU Education Benefit</b></p> <p><b>Fond Employee Discount Program</b></p> <p><b>Nationwide Pet Discount Program</b></p> <p><b>Weight Watchers Support</b></p>

## 2022 Employee Contributions Per Pay Period

Medical Coverage										
	Cigna PPO Plan		Cigna CDHP Option 1 with HSA		Cigna CDHP Option 2 with HSA		Kaiser HMO Base Plan (CA Only)		Kaiser HMO Buy-Up Plan (CA Only)	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Employee Only	\$62.77	\$85.85	\$54.92	\$78.00	\$31.85	\$54.92	\$50.77	\$73.85	\$67.85	\$90.92
Employee + Spouse	\$150.00	\$173.08	\$133.38	\$156.46	\$71.08	\$94.15	\$148.62	\$171.69	\$189.23	\$212.31
Employee + Child(ren)	\$135.23	\$158.31	\$120.46	\$143.54	\$64.62	\$87.69	\$120.00	\$143.08	\$154.62	\$177.69
Family	\$212.31	\$235.38	\$188.77	\$211.85	\$101.54	\$124.62	\$199.38	\$222.46	\$255.23	\$278.31

Note: If you use tobacco, you will pay a \$50 surcharge per month on your medical premiums. You can avoid the surcharge by completing a tobacco cessation program. Call ComPsych at (800) 851-1714 to enroll.

Dental Coverage	Core Plan	Buy-Up Plan
Employee Only	\$6.46	\$9.87
Employee + Spouse	\$12.92	\$20.40
Employee + Child(ren)	\$14.31	\$22.32
Family	\$21.23	\$33.85

Vision Coverage	Base Plan	Buy-Up Plan
Employee Only	\$2.69	\$6.48
Employee + Spouse	\$5.38	\$12.96
Employee + Child(ren)	\$5.76	\$13.87
Family	\$9.20	\$22.17

**Note:** Voluntary benefit rates can be found in Workday during the enrollment process.



## 2022 Medical Coverage

The following are highlights of our in-network coverage options for 2022. For more details, please visit [sunrun.gobenefits.net](https://sunrun.gobenefits.net).

Plan Feature	Cigna PPO Plan	Cigna CDHP Option 1 with HSA	Cigna CDHP Option 2 with HSA*	Kaiser HMO Base Plan (CA Only)	Kaiser HMO Buy-Up Plan (CA Only)
	In-Network	In-Network	In-Network	In-Network Only	In-Network Only
<b>Annual Deductible</b>					
▶ Employee Only	\$600	\$1,500	\$3,000	\$750	\$250
▶ Family	\$1,200	\$3,000	\$6,000	\$1,500	\$500
<b>Annual Out-of-Pocket Maximum</b>					
▶ Employee Only	\$3,000	\$3,000	\$5,000	\$3,000	\$3,000
▶ Family	\$6,000	\$6,000**	\$10,000**	\$6,000	\$6,000
<b>Sunrun Contribution to Health Savings Account (HSA)</b>					
▶ Employee Only	N/A	\$500	N/A	N/A	N/A
▶ Family	N/A	\$1,000	N/A	N/A	N/A
<b>Services</b>					
▶ Preventive Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 100%	Plan pays 100%
▶ Primary Care Physician Office Visit	\$25 copay	Plan pays 90% after deductible	Plan pays 80% after deductible	\$25 copay	\$10 copay
<b>Prescription Drugs (Tier 1/Tier 2/Tier 3/Tier 4)</b>					
▶ Preventive	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 100%, no deductible
▶ Retail (up to a 30-day supply)	\$15/\$35/\$50/30% with a maximum of \$100	After deductible, \$15/\$25/\$40/20%	Plan pays 80% after deductible	\$10/\$30/\$30/20% with a maximum of \$250	\$10/\$30/\$30/20% with a maximum of \$250
▶ Mail Order (up to a 90-day supply)	\$30/\$70/\$100/30% with a maximum of \$200	After deductible, \$30/\$50/\$80/20%	Plan pays 80% after deductible	\$20/\$60/\$60/20% with a maximum of \$250	\$20/\$60/\$60/20% with a maximum of \$250

\*The CDHP Option 2 includes hospital indemnity benefits, including admission and accident-related inpatient rehabilitation and hospital stays.

\*\*This out-of-pocket maximum is embedded. With an embedded out-of-pocket maximum, the annual out-of-pocket maximum can be met on an individual basis. This means that once a family member meets his/her individual out-of-pocket maximum, the plan will begin to pay coinsurance for that family member. The in-network individual embedded out-of-pocket maximum is \$3,000 for the CDHP Option 1 and \$6,850 for the CDHP Option 2.

## 2022 Dental Coverage

The following are highlights of our in-network coverage options for 2022. For more details, please visit [sunrun.gobenefits.net](https://sunrun.gobenefits.net).

Plan Feature	Low Plan	High Plan
<b>Deductible</b>	\$50 Ind. / \$150 Fam.	\$25 Ind. / \$75 Fam.
<b>Coinsurance (Preventive/Basic/Major)</b>	100% / 80% / 50%	100% / 90% / 70%
<b>Annual Maximum Per Person</b>	\$1,750	\$3,000
<b>Orthodontic Coverage</b>	50% / \$1,500 maximum	50% / \$1,500 maximum

## 2022 Vision Coverage

The following are highlights of our in-network coverage options for 2022. For more details, please visit [sunrun.gobenefits.net](https://sunrun.gobenefits.net).

Plan Feature	Base Plan	Buy-Up Plan
<b>Vision Exam Copay</b>	\$10	\$10
<b>Frame Allowance</b>	\$150 / \$170 featured frames (every other year)	\$200 / \$220 featured frames (every year)
<b>Contact Allowance</b>	\$140	\$200
<b>Laser Vision Correction</b>	Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities	