

# BENEFITS GUIDE



Community Living Experiences, Inc.

2026

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# WELCOME TO COMMUNITY LIVING EXPERIENCES

The effective date for all changes is **January 1, 2026**.

- ❑ This booklet includes an outline of the medical plan and associated costs.
- ❑ If you previously waived coverage and wish to enroll, or if you want to add dependents, please notify HR.

## WHAT'S STAYING THE SAME

Medical coverage will remain with **Anthem**.

## WHAT'S NEW

The following coverages are now provided by **Principal Insurance**:

|                    |          |                          |
|--------------------|----------|--------------------------|
| Dental             | Vision   | Voluntary Life Insurance |
| Hospital Indemnity | Accident | Critical Illness         |

If you currently have coverage under any of these lines and wish to keep it, you **must select these options on your Election Form**. Coverage will not continue automatically.

## NEW HIRES


HR will inform you of deadlines for completing and returning enrollment paperwork.

## MAKING CHANGES DURING THE YEAR

Enrollment changes outside of open enrollment are only allowed for qualifying life events (e.g., birth, adoption, marriage, death).

**You must notify HR within 30 days of the event and submit the required paperwork to the carrier.**

Open enrollment election forms must be submitted to HR  
no later than December 15th.

| COVERAGE  | PAYROLL DEDUCTIONS   | CARRIER INFORMATION                         |
|---|--|---|
| Medical   | \$ 55.19 Employee Only<br>\$ 544.23 Employee/Spouse<br>\$ 288.90 Employee/Child(ren)<br>\$ 801.04 Family | <b>Anthem Insurance</b><br><br>800-552-9159 |
| The benefits below are with Principal Insurance  |  |   |
| Dental  | \$ 14.56 Employee Only<br>\$ 29.12 Employee/Spouse<br>\$ 32.42 Employee/Child(ren)<br>\$ 50.01 Family    | 800-247-4695                                |
| Vision  | \$ 3.00 Employee Only<br>\$ 5.98 Employee/Spouse<br>\$ 6.41 Employee/Child(ren)<br>\$ 10.22 Family       | 800-877-7195                                |
| Life Insurance  | Rates are based on age and coverage amount – refer to Employee Navigator for pricing.                    | 800-247-9988                                |
| Accident Insurance  | \$ 3.81 Employee Only<br>\$ 6.26 Employee/Spouse<br>\$ 7.05 Employee/Child(ren)<br>\$11.08 Family        | 800-245-1522                                |
| Critical Illness  | Rates are based on age and coverage amount – refer to Employee Navigator for pricing.                    | 800-245-1522                                |
| Hospital Indemnity  | \$ 6.84 Employee Only<br>\$ 13.89 Employee/Spouse<br>\$ 10.15 Employee/Child(ren)<br>\$ 17.78 Family     | 800-245-1522                                |

For more information  
scan here



# MEDICAL PLAN - PPO

|   |  |
|---|--|
|   | Plan Name: Blue Access 2025 PPO Option 27 Rx-T2 PrevRx |
| <b>Anthem Network</b>                       |  |
| Deductible                                  | \$2,500 Individual<br>\$5,000 Family                   |
| Deductible Type                             | Embedded   |
| Co-Insurance                                | You pay 20% After the Deductible                       |
| Out of Pocket (with deductible & Co-Pays)   | \$7,000 Individual<br>\$14,000 Family                  |
| <b>Physician Services</b>                   |  |
| Office Visits to Non-Specialist             | \$35 Co-Pay  |
| Office Visits to Specialist                 | \$70 Co-Pay  |
| Preventative Care for Chronic Conditions    | Covered in full  |
| Preventative/ Screenings/ Immunizations     | Covered in full  |
| Urgent Care Provider                        | \$75 Co-Pay  |
| Emergency Room Co-Pay waived if admitted    | \$400 Co-Pay, then Coinsurance                         |
| Non-Emergency Care in an Emergency Room     | Not covered  |
| <b>Pharmacy - Generic Drugs</b>             |  |
| Retail                                      | \$10 Co-Pay  |
| 90 Day Mail Order                           | \$20 Co-Pay  |
| <b>Pharmacy - Preferred Brand Drugs</b>     |  |
| Retail                                      | \$40 Co-Pay  |
| 90 Day Mail Order                           | \$100 Co-Pay   |
| <b>Pharmacy - Non-Preferred Brand Drugs</b> |  |
| Retail                                      | \$70 Co-Pay  |
| 90 Day Mail Order                           | \$175 Co-Pay   |
| <b>Pharmacy - Specialty Drugs</b>           |  |
| Preferred Specialty                         | 25% up to \$350 Maximum                                |
| 30 Day Mail Order                           | 25% up to \$350 Maximum                                |

## Disclaimer

This benefit overview only summarizes your benefit plans. If there is a discrepancy between the information in this overview and the official plan documents, the plan documents will always govern. While the company intends to continue these plans, it reserves the right to change, amend or terminate them at any time for any reason.

For more information  
scan here



For over 20 years, employers have embraced ERCHealth as a true investment in the health, wellness, and productivity of their people and organization.

Today, with a new and advanced suite of personalized programs and employee options, ERCHealth continues its delivery of superior level access, service, and support.

We help simplify, and amplify, the benefits of health insurance, preventive care, and wellness to provide financial value and a positive member experience.

When you commit to making critical changes and improvements in your life, ERCHealth is there to reward you in the ways you want to be rewarded and your organization wins too.

## ERCHealth Service and Support

Making improvements to your health and wellbeing can be challenging. Connecting to your benefits and resources shouldn't be!

ERCHealth is committed to helping members connect with all of our enhanced program services. Questions about preventive care, rewards, and Sydney app can all be sent to Service and Support. Check back on July 1st for contact information for this new feature!



## Prevention Focused

A cornerstone of the ERCHealth program, enrolled employees and spouses are encouraged to invest in their health by choosing preventive exams or screenings that are meaningful to them each year.

Take a look at the next page for details on how you can get rewarded for these exams, screenings, and other wellness activities!



## Smart Rewards

**\$300 Max Per Enrolled Employee & Enrolled Spouse**

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### Annual Well Exam or Annual Well Woman Exam

\$100 per plan year

Completing an annual well exam or well woman exam is an essential step in understanding your health and building an on ongoing relationship with your primary care physician.

---

### Preventive Cancer Screenings

\$50 per plan year

Get rewarded for completing one of the following preventive cancer screenings: mammogram, colorectal screening, prostate screening, and skin cancer screening.

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### ConditionCare

\$100 per plan year

If you're dealing with a chronic condition like asthma or diabetes, you can get one-on-one help from a health care professional to help you manage your health and reach your goals.

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### Steps Tracking

\$25 per month

Employees and spouses can earn up to \$25 per month for meeting a minimum of 240,000 steps. Keep track manually or by linking a wearable device or app.

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### Building Healthy Families

\$75 per plan year

Work with a Family Care Coach who provides personalized support to help you navigate your family's unique journey.

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### Health Assessment

\$50 per plan year

Receive a reward for completing your Health Assessment by answering questions about your overall health, medical history, diet, and exercise.

### Well-being Coach

\$100 per plan year

A live health coach motivates and supports you through making meaningful changes towards quitting smoking or weight management.

## Anthem Sydney App

All of your ERChealth and Anthem benefits in one place!

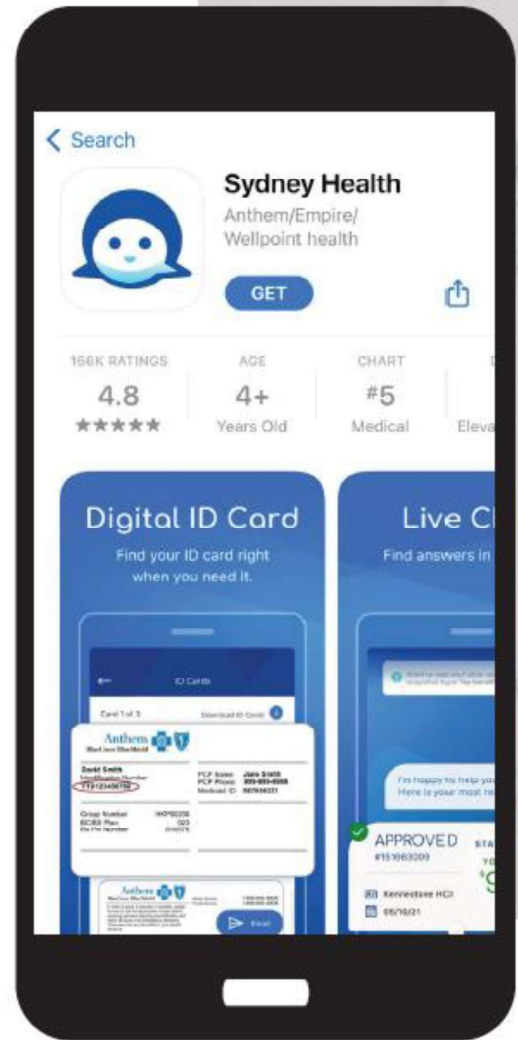
Instantly access your personalized technology through this central hub and view your Anthem benefit information, text a Health Guide, earn rewards, and much more.



Scan the QR code to  
download the free  
Sydney mobile app and  
Select *Register*

or

visit  
[Anthem.com/register](https://Anthem.com/register)



Anthem Health Guide helps you navigate the health care system by simplifying the health care experience and providing a seamless transition from service to care. They can assist with health insurance questions, discuss eligible programming, and assist with making member appointments.

Connect with a Health Guide by calling the Member Services number on the back of your Anthem ID, instant message via [Anthem.com](https://Anthem.com), or text via the Sydney app.



# Dental Insurance

## Preventive care costs are covered

Most dental insurance plans cover 100% of routine cleanings, exams, and X-rays.

Without insurance, these services could cost hundreds of dollars annually. Regular dental visits help dentists to detect issues early, avoiding costly treatments in the future.



|   |   |                     |                 |
|---|---|---------------------|-----------------|
| Preventative Deductible                       |   |                     | \$0             |
| Basic & Major Deductible                      |   |                     | \$50            |
| Family Deductible is 3x per person deductible |   |                     |                 |
| Preventive Care                               | Routine Exam  | 2 per calendar year | Covered at 100% |
|   | Bitewing X-rays                                       | 2 per calendar year |                 |
|   | Full Mouth / Panoramic X-rays                         | 1 in 5 years        |                 |
|   | Cleaning  | 2 per calendar year |                 |
|   | Fluoride for Children 16 and under                    | 2 per year          |                 |
| Basic Services                                | Periapical X-rays                                     |                     | Covered at 80%  |
|   | Fillings for Cavities                                 |                     |                 |
|   | Restorative Composites (anterior and posterior teeth) |                     |                 |
| Major Services                                | Onlays  |                     | Covered at 50%  |
|   | Crowns - 1 in 7 years per tooth                       |                     |                 |
|   | Endodontics & Periodontics                            |                     |                 |
|   | Denture Repair  |                     |                 |
|   | Dentures 1 in 7 years                                 |                     |                 |
|   | Simple & Complex Extractions                          |                     |                 |
|   | Anesthesia  |                     |                 |

# Vision Insurance

## VSP

Full-service locations with satisfaction guaranteed, offering a WellVision Exam® that can help detect signs of eye and overall health conditions, such as diabetes. Plus, a wide selection of eyewear and 24-hour access to emergency care.



## Retail chains

5,500+ retail partner chain locations, plus 4,700+ independent chain locations nationwide

- No required forms—you pay only copays, costs over coverage amounts, and/or for non-covered option
- Retail partners include Walmart, Sam’s Club, Costco® Optical, Visionworks®, Wisconsin Vision, Heartland Vision, RxOptical®, Cohen’s Fashion Optical®, Pearle Vision, and Shopko.

|                      |  |   |
|----------------------|--|---|
| Eye Exam             | \$10 copay   | 1 per 12 months   |
| Prescription Glasses | \$25 Copay   | 1 per 12 months   |
|                      | \$150 Allowance: 20% off balance   | 1 per 24 months   |
| Elective Contacts    | Up to \$60 copay for standard and elective lens exams<br><br>\$150 Allowance for elective contacts | 1 per 12 months<br><br>Instead of lens and frames benefit |
| Necessary Contacts   | \$25 Copay   | 1 per 12 months<br><br>Instead of lens and frames benefit |

## 1 Access your benefits.

- › Visit **vsp.com** and click on “Create an account.”
- › Follow the online Member Registration form using your member ID found on your vision ID card.

## 2 Search for providers.

- › Visit **vsp.com** or **principal.com/vsp**.
- › Enter your ZIP code or address and click Search.

## 3 Use your benefits.

- › Schedule your appointment with your provider of choice.
- › At your appointment, present your vision ID card and remind the provider to look up your benefits using the member ID on your card (not your Social Security number).

## Online shopping

With Eyeconic®, you get the convenience of shopping online plus the personal touch from a VSP network doctor. Visit [eyeconic.com](https://eyeconic.com)®.

- Free shipping and returns
- Virtual try on tool
- Free frame adjustment or contact lens consultation
- All-inclusive pricing
- Average savings of \$220 (compared to out-of-pocket expenses without VSP insurance)





# Group life

Find the solution that satisfies everyone with our flexible employer-paid and employee-paid products.



| Group term life for all members    |  |
|------------------------------------|--|
| Life benefit                       | \$15,000 benefit   |
| Accidental Death and Dismemberment | <p>\$15,000 benefit</p> <p>Coverage for employees on and off the job.</p>  |
| Benefit age reduction              | <p>35% reduction at age 65 and an additional 15% reduction at age 70</p> <p>Age reductions apply to the benefit amount after proof of good health.</p>   |
| Proof of good health               | <p>Required for life insurance amounts greater than \$15,000</p> <p>Persons age 70 and over shall have an amount that is the lesser of the amount shown or the amount with the prior carrier.</p> <p>Proof of good health is required if on the date the member becomes eligible for coverage there are fewer than five members insured.</p> |

| Additional benefits                |  |
|------------------------------------|--|
| Accelerated benefits               | Terminally ill employees can receive up to 75% of their life insurance benefit, up to \$250,000, if their life expectancy is 12 months or less (as diagnosed by a physician) and the death benefit is at least \$10,000. When an employee uses the accelerated benefit, the death benefit is reduced by the accelerated benefit payment. There are possible tax consequences to receiving an accelerated benefit payment and the employee should contact a tax advisor for details. Receipt of accelerated benefits could also affect eligibility for public assistance. |
| Coverage during disability         | If an employee becomes totally disabled before age 60, coverage will continue and premium will be waived. The employee must be totally disabled for 6 months before the waiver begins. Coverage continues without premium payment until the employee recovers or turns age 65, whichever occurs first. No benefits will be paid for any disability that results from: willful self-injury or self-destruction, while sane or insane / war or act of war / voluntary participation in an assault, felony, criminal activity, insurrection, or riot.                       |
| Accidental Death and Dismemberment | <p>Benefit is paid when the loss occurs within 365 days of the accident.</p> <ul style="list-style-type: none"><li>• Full benefit - Loss of life, loss of both hands, both feet, sight of both eyes, one hand and sight of one eye, one foot and sight of one eye, or one hand and one foot.</li><li>• Half the benefit - Loss of one hand, one foot, or sight of one eye.</li><li>• One fourth the benefit - Loss of thumb and index finger on the same hand.</li></ul>   |



# Additional Life Insurance



## Voluntary term life for all members

|                                    | Employee  | Spouse  |
|------------------------------------|---|---|
| Life benefit                       | <p>Employees choose to purchase benefits in \$10,000 increments.</p> <p>Minimum amount: \$10,000</p> <p>Maximum amount: \$500,000</p>   | <p>Eligible spouses choose an amount in \$5,000 increments.</p> <p>Minimum amount: \$5,000</p> <p>Maximum amount: Up to \$100,000.</p> <p>Employee coverage is required for spouse to elect coverage.</p> <p>Spouse benefits cannot exceed 100% of the employee's coverage.</p> |
| Accidental Death and Dismemberment | <p>Included. Benefit equal to the base voluntary term coverage.</p> <p>This is automatically included for employees electing voluntary term life insurance.</p>   | <p>Included. Benefit equal to the base voluntary term coverage.</p> <p>This is automatically included for employees electing spouse voluntary term life insurance.</p>  |
| Benefit age reduction              | 35% reduction of benefits at age 65 and an additional 15% reduction at age 70   | 35% reduction of benefits at age 65 and an additional 15% reduction at age 70   |
|                                    | Age reductions apply to the benefit amount after proof of good health.  | Age reductions apply to the benefit amount after proof of good health.  |
| Proof of good health               | <p>Required for life insurance amounts greater than:</p> <p>Under age 70: \$200,000</p> <p>Age 70 and over: \$10,000</p> <p>Guaranteed coverage may be limited to the amount insured under the prior carrier based upon the method of enrollment.</p> | <p>Required for life insurance amounts greater than:</p> <p>Under age 70: \$30,000</p> <p>Age 70 and over: \$10,000</p> <p>Guaranteed coverage may be limited to the amount insured under the prior carrier based upon the method of enrollment.</p>                            |

### Child life benefit

For eligible children 14 days of age or older, employees may elect coverage in the amount of:

- \$5,000, or
- \$10,000

For eligible children under 14 days of age, employees who elect child coverage receive \$1,000 of coverage.

Child benefits cannot exceed 100% of the employee's coverage.



# Accident Insurance

Accident insurance provides financial protection if you experience an accidental injury.

It pays a lump-sum cash benefit that can be used for expenses such as medical bills, lost income, or other out-of-pocket costs.



## Who Should Consider Accident Insurance?

Individuals with high-deductible health plans  
Active individuals or athletes  
Families with children  
Anyone seeking extra financial protection

## Key Features

Available for you, your spouse, and your children.  
Funds are paid directly to you—no lengthy paperwork required.

## Covered Injuries

Typical injuries covered include:

Burns

Comas

Concussions

Dislocations

Fractures

Internal injuries



### 1. Purchase benefit through your employer

Buy this coverage through your company for either yourself, your spouse, or your child at a lower group rate that comes straight out of your paycheck.



### 2. File your claim

If you or an insured dependent are harmed with one of the covered injuries, you can easily submit your claim online. Learn more about [how to submit a claim](#).



### 3. Receive the benefit

If your claim is approved, you'll receive a lump-sum payment that you can use for any expense that pops up so you can focus on recovery.

# Accident Insurance

| Eligibility  |   |                                 |
|--|---|---------------------------------|
| Eligible employees   | All active, full-time employees working at least 20 hours a week  |                                 |
| Benefits if you or your spouse are accidentally injured off the job  |   |                                 |
| Injury <sup>1</sup>  | Benefit   |                                 |
| Burn   |   |                                 |
| 2nd degree up to 25% of body   | \$500   |                                 |
| 2nd degree over 25% of body  | \$1,500   |                                 |
| 3rd degree up to 25% of body   | \$2,500   |                                 |
| 3rd degree over 25% of body  | \$5,000   |                                 |
| Coma   | \$15,000  |                                 |
| Concussion   | \$500   |                                 |
| Dental injury  | \$500   |                                 |
| Dislocation <sup>2</sup>   | Open reduction (surgical)   | Closed reduction (non-surgical) |
| Hip  | \$7,500   | \$3,750                         |
| Knee   | \$5,000   | \$2,500                         |
| Ankle, collarbone, elbow, foot (excluding toes), hand (excluding fingers), lower jaw, shoulder, wrist                              | \$3,000   | \$1,500                         |
| Eye injury with surgical repair  | \$500   |                                 |
| Fracture <sup>2</sup>  | Open reduction (surgical)   | Closed reduction (non-surgical) |
| Hip, skull (depressed), thigh (femur)  | \$10,000  | \$5,000                         |
| Lower leg (fibula, tibia), pelvis, skull (non-depressed), vertebrae  | \$5,000   | \$2,500                         |
| Ankle, arm, collarbone, elbow, facial bones, foot (excluding toes), hand (excluding fingers), jaw, knee cap, shoulder blade, wrist | \$3,000   | \$1,500                         |
| Sternum, vertebral processes   | \$2,000   | \$1,000                         |
| Rib, tailbone (coccyx)   | \$1,000   | \$500                           |
| Injuries not specifically listed   | \$100   |                                 |
| Internal injury  | \$1,500   |                                 |
| Knee cartilage injury with surgical repair   | \$1,500   |                                 |
| Ruptured disc with surgical repair   | \$1,500   |                                 |
| Additional benefits:   |   |                                 |
| Wellness   | If you or your covered dependent has a covered screening test performed, you each may receive a \$100 benefit, once per calendar year. Make sure to file your claim within a year of the date of service. |                                 |
| Portability  | If you no longer qualify for coverage, you may be able to continue coverage for yourself and your covered dependents.   |                                 |

# Accident Insurance



Taylor is an avid bicycle rider. On the way home from work, Taylor was hit by a car and thrown from the bike.

Even though Taylor always wears a helmet, the impact of the landing knocked it off, resulting in multiple serious injuries.

Taylor was airlifted to the emergency room at an area trauma center. She was admitted to the hospital for 10 days before being released to a rehabilitation facility for an additional 10 days.

When released, Taylor required a wheelchair and crutches. Over several months, Taylor followed up with a family physician and received regular physical therapy.

Taylor's accident insurance provided benefits for the skull fracture, thigh fracture, and abdominal surgery that she received from the accident. This coverage helped Taylor pay for medical expenses and focus on getting better. Here's a breakdown of Taylor's coverage:

| Injury/treatment/service               | Benefit amount  |
|--|-----------------|
| Skull fracture (non-depressed, closed) | \$2,500         |
| Thigh fracture (open)                  | \$10,000        |
| Abdominal surgery                      | \$3,000         |
| <b>Total benefit:</b>                  | <b>\$15,500</b> |



# Hospital Indemnity Insurance

It can be hard to plan for all of life's curve balls. But when it comes to the health of you and your family, the stress of how to pay for expenses from unexpected hospital stays shouldn't be a concern.

And while health insurance helps pay for some medical costs, do you know how you'd cover the rest?



Hospital indemnity insurance can help alleviate out-of-pocket expenses that arise during an unforeseen hospital stay by providing a cash benefit so you can focus on recovering.

## Who Should Consider It?

This insurance is particularly beneficial for:

- Individuals with chronic health conditions
- Growing families
- Those with high-deductible health plans
- Families with children

By providing a safety net for unexpected medical expenses, hospital indemnity insurance helps individuals focus on recovery without the added stress of financial burdens.



### 1. Purchase benefit through your employer

Buy this coverage through your company at a lower group rate that comes straight out of your paycheck.



### 2. File your claim

If you're admitted to the hospital for a sickness or injury after your benefits start, you can easily submit your claim online. Learn more about [how to submit a claim](#).



### 3. Receive your cash benefit

If your claim is approved, you'll receive a direct payment that can be used for anything, regardless of other insurance coverage or actual expenses incurred.

# How Hospital Indemnity Can Help



When the day came for Harper to have her baby, the delivery went well, and she was excited to welcome a healthy girl. While Harper recovered from the birth, her daughter was placed in the newborn nursery.

With the help of Harper’s hospital indemnity insurance, she was able to focus on her growing family and not worry about her hospital bills. Here’s a breakdown of her coverage:

| Benefit             | Benefit amount | Days payable | Total   |
|---------------------|----------------|--------------|---------|
| First hospital day  | \$1,000        | 1            | \$1,000 |
| Daily hospital care | \$100          | 1            | \$100   |
| Newborn care        | \$100          | 1            | \$100   |
| Total benefit:      |                |              | \$1,200 |

## Guaranteed coverage at enrollment.

When you purchase hospital indemnity insurance during your employer’s annual enrollment, you’ll automatically receive coverage without a health exam. That means no doctor appointments and quick approval—no medical questions asked.



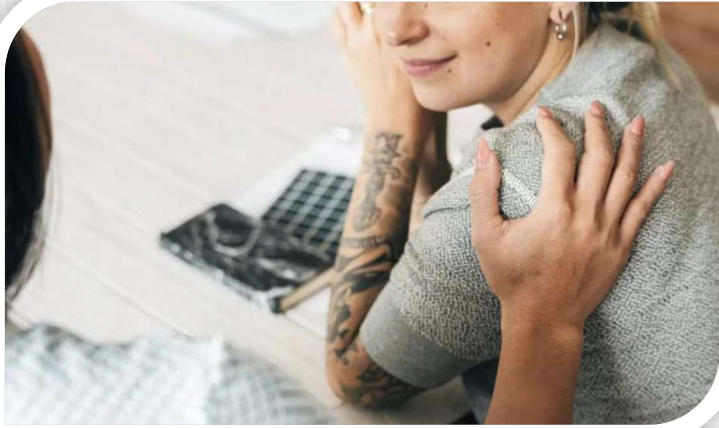


# Hospital Indemnity

| Features                        | Benefit                          | Details  |
|---------------------------------|----------------------------------|--|
| <b>Employee benefit</b>         | Benefits payable as listed below | Eligible employees include all active, full-time employees (except part-time, seasonal, temporary or contract employees) who work at least 30 hours per week. Employees must be enrolled before coverage can be offered to their dependents. |
| <b>Spouse benefit</b>           | 100% of employee benefit         | Eligible dependents include the employee's spouse. Additional eligibility requirements may apply.  |
| <b>Child(ren) benefit</b>       | 100% of employee benefit         | Eligible dependents include the employee's child(ren) under age 26. Additional eligibility requirements may apply.   |
| <b>Coverage type</b>            | 24 hour                          | Coverage for employees is for on and off-the-job accidents. Coverage for your spouse is for on and off-the-job accidents.  |
| <b>Pre-existing conditions</b>  | None                             |  |
| <b>Maternity coverage</b>       | Full maternity after 10 months   |  |
| <b>Health screening benefit</b> | \$50                             | Employees and their covered dependents who have a covered screening test performed may each be eligible for a benefit once per calendar year.  |
| <b>Portability</b>              | To age 70                        | If employees cease to meet the definition of an employee, they may be eligible to continue insurance for themselves and their covered dependents.  |
| <b>Open enrollment</b>          | Included                         | Any employee or dependent who didn't enroll within 31 days of being eligible can only enroll during an open enrollment period.   |
| <b>Employer contribution</b>    | 0%                               | Participation of 10% or 5 lives, whichever is greater.   |

| <b>Hospital confinement</b>  | <b>Employee benefit payable</b> | <b>Up to a maximum of:</b> |
|--|---------------------------------|----------------------------|
| To qualify for a benefit under this policy, the definition of the incurred sickness or injury must be satisfied while covered under the Hospital Indemnity policy, and policy provisions must be met. Hospital confinement benefits may vary by benefit payable amount for sickness or injury; however, the maximum days per year is not a separate days payable by hospital confinement type. |                                 |                            |
| <b>First day hospital - sickness</b>   | \$1,000                         | 1 day per year             |
| <b>First day hospital - injury</b>   | \$1,000                         | 1 day per year             |
| <b>First day ICU - sickness</b>  | \$1,000                         | 1 day per year             |
| <b>First day ICU - injury</b>  | \$1,000                         | 1 day per year             |
| <b>Daily hospital - sickness</b>   | \$100                           | 15 days per year           |
| <b>Daily hospital - injury</b>   | \$100                           | 15 days per year           |
| <b>Daily ICU - sickness</b>  | \$100                           | 15 days per year           |
| <b>Daily ICU - injury</b>  | \$100                           | 15 days per year           |
| <b>Newborn nursery</b>   | \$100                           | 1 day per year             |

# Critical Illness Insurance



A serious illness can happen to anyone. The last thing you want to worry about amid the physical and emotional toll is your financial situation.

Critical illness<sup>1</sup> insurance helps offer additional financial security beyond your medical and financial coverage. It provides a lump-sum cash benefit if you're diagnosed with a specific critical illness after your plan starts.

| Features                 | Benefit   | Details  |
|--------------------------|---|--|
| Employee increments      | \$5,000   | Benefits available in \$5,000 increments   |
| Employee minimum         | \$5,000   |  |
| Employee maximum         | \$30,000  | Eligible employees include all active, full-time employees living in the United States (except part-time, seasonal, temporary or contract employees). Employees must be enrolled before coverage can be offered to their dependents. |
| Employee guarantee issue | \$30,000  |  |
| Spouse benefit           | 100% of the employee benefit                      |  |
| Spouse increments        | \$2,500   | Benefits available in \$2,500 increments   |
| Spouse minimum           | \$2,500   |  |
| Spouse maximum           | \$30,000  | Eligible dependents include the employee's spouse. Additional eligibility requirements may apply.  |
| Spouse guarantee issue   | \$30,000  |  |
| Child(ren) benefit       | Automatically covered for 25% of employee benefit | Eligible dependents include the employee's child(ren) under age 26. Additional eligibility requirements may apply.   |



## 1. Purchase benefit through your employer

Buy this coverage through your company at a lower group rate that comes straight out of your paycheck.



## 2. File your claim

If you or an insured dependent are diagnosed with one of the covered illnesses, you can easily submit your claim online. Learn more about [how to submit a claim](#).



## 3. Receive your benefit

If your claim is approved, you'll receive a lump-sum payment that you can use however you choose.



# What's covered by critical illness insurance?

## Covered illnesses:<sup>(2)</sup>

- Alzheimer's disease<sup>(3)</sup>
- Amyotrophic lateral sclerosis<sup>(3)</sup>
- Benign brain tumor<sup>(3)</sup>
- Carcinoma in situ
- Coma<sup>(2)(3)</sup>
- Coronary artery disease
- Heart attack
- Invasive cancer
- Loss of hearing<sup>(2)(3)</sup>
- Loss of sight<sup>(2)(3)</sup>
- Loss of speech<sup>(2)(3)</sup>
- Major organ failure
- Multiple sclerosis<sup>(3)</sup>
- Occupational infectious disease<sup>(2)(3)</sup>
- Paralysis<sup>(2)(3)</sup>
- Parkinson's disease<sup>(3)</sup>
- Skin cancer<sup>(2)(3)</sup>
- Specified infectious disease
- Stroke

## Family care benefit:<sup>(4)</sup>

- Infertility<sup>(3)</sup>
- Complications of pregnancy

## Mental health disorders:<sup>(3)(5)</sup>

- Bipolar disorder I
- Post-traumatic stress disorder
- Schizophrenia

## Childhood conditions:<sup>(3)</sup>

- Cerebral palsy
- Cleft lip/palate
- Cystic fibrosis
- Down syndrome
- Muscular dystrophy
- Spina bifida

## Infectious disease benefit:<sup>(6)</sup>

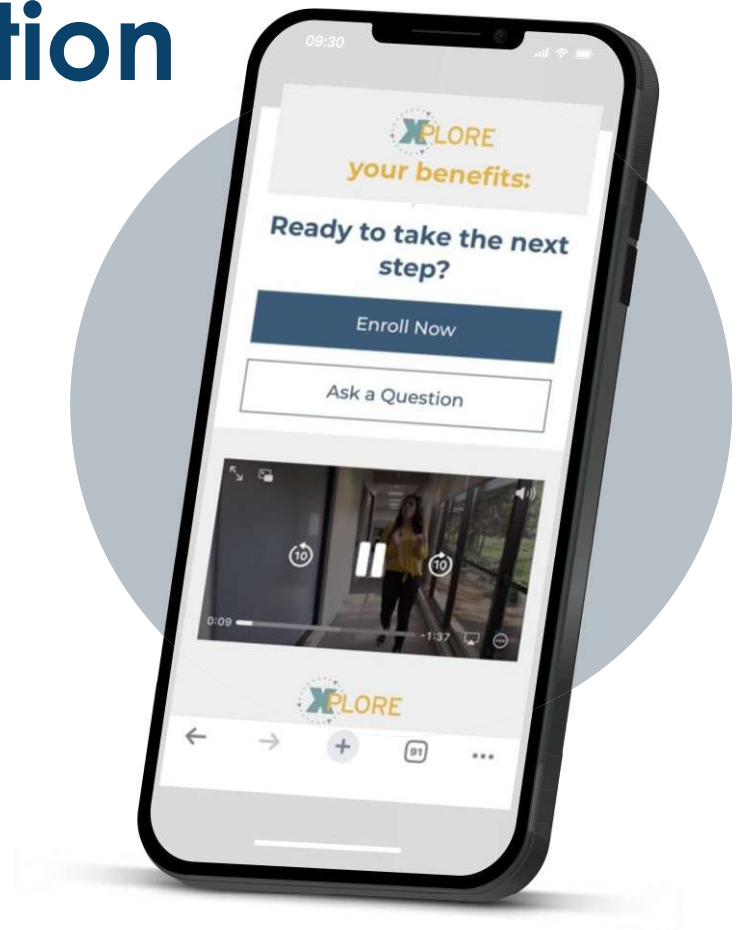
- COVID-19
- Diphtheria
- Encephalitis
- Legionnaire's disease
- Lyme disease
- Malaria
- Meningitis
- Methicillin-resistant staphylococcus aureus (MRSA)
- Necrotizing fasciitis
- Osteomyelitis
- Poliomyelitis
- Rabies
- Sepsis
- Tetanus
- Tuberculosis

## Product details

- To qualify for benefits, the critical illness diagnosis must occur after your coverage effective date.
- Infectious disease benefit<sup>(6)</sup>
  - › To receive the benefit, you must be confined to the hospital for at least three continuous days.
  - › Benefits are payable at 25% of the benefit payable if an infectious disease benefit occurs.
- Family care benefit<sup>(4)</sup>
  - › First occurrence of infertility for employee and covered spouse<sup>(7)</sup> at 25% of the benefit payable.
  - › Complications of pregnancy for any covered individual that present up to 12 weeks postpartum at 25% of the benefit payable. Requires at least two consecutive days of hospitalization.
- Children are automatically covered for 25% of the benefit at no additional cost. You can also choose to enroll your spouse<sup>(7)</sup> for up to 100% of the benefit.
- For further product specifications, please reference your booklet provided by your employer.

# Benefit Information on YOUR Time

- Benefit overviews
- Video tutorials
- Premium costs and important plan documents
- Tips & valuable hacks to get the most out of your plan
- Access MB Perks discount program
- Contact information for the MB Advocate Team



Use this QR code to  
access your benefits  
24/7, whenever and  
wherever you are

# McGOHAN BRABENDER **ADVOCATE TEAM**

## WHAT WE DO

- Research
- Problem Solve
- Communicate
- Educate

## HOW IT WORKS

If you've contacted your physician or carrier and weren't satisfied with the response, our MB Advocates are there to step in on your behalf.

### Issues we can assist with:

- Claim Issues (Medical, Dental & Vision)
- Provider Billing Questions
- Coordination of Benefits
- Pre-authorization Help

## HELP US GET STARTED BY PROVIDING:

- Employer name
- Employee name
- Date of Birth
- Patient Name/Date of Birth
- Insurance Member ID or SSN
- Service Date
- Provider Name/Contact Information
- Summary of Issue
- For Prescription Issues, include medication name, dosage, quantity, pharmacy name/phone number, prescribing physician's name/phone number

## CONTACT US

Monday-Friday, 8 a.m. to 5 p.m. EST

p: 937.260.4300 or 877.635.5372

f: 937.499.1160

e: [mbadvocates@mbbenefits.com](mailto:mbadvocates@mbbenefits.com)



10/03/2023



# QUALIFYING LIFE EVENTS

A QUALIFYING LIFE EVENT (QLE) ALLOWS YOU TO MAKE CHANGES TO YOUR HEALTH INSURANCE PLAN OUTSIDE OF THE REGULAR ENROLLMENT PERIOD. THIS MEANS YOU CAN ADJUST YOUR COVERAGE RIGHT AWAY TO FIT YOUR NEW LIFESTYLE INSTEAD OF WAITING UNTIL THE OPEN ENROLLMENT PERIOD. QUALIFYING LIFE EVENTS CAN INCLUDE:



**REMEMBER, YOU ONLY HAVE A LIMITED AMOUNT OF TIME TO MAKE CHANGES, USUALLY ONLY 30 DAYS, SO IT'S IMPORTANT TO CONTACT YOUR HEALTH INSURANCE COMPANY IMMEDIATELY WHEN A QUALIFYING LIFE EVENT HAPPENS.**



**▼ Your Information**

Annual doctor visits ②  
6

Annual prescriptions ②  
6

Other medical expenses ②  
\$ 850

**▼ HSA Information**

Annual contribution ②  
\$ 3,150

**▼ HDHP Information**

Monthly premium ②  
\$ 200

Annual deductible ②  
\$ 3,000

**▼ Traditional Information**

**Health Savings Account (HSA) vs Traditional Health Plan**

| HDHP Qualified Plan Cost | Traditional Plan Annual Cost |
|--------------------------|------------------------------|
| \$ 4,040.50              | \$ 6,080.00                  |

Using a High Deductible Health Plan along with a Health Savings Account will save you \$2,039.50 annually. You will also have \$1,220.00 remaining in your HSA at the end of the year, which can be rolled over into the following year.

**Annual Cost of HDHP vs Traditional Health Plan**

Chart | Table

Dollars

8k  
6k  
4k  
2k  
0

HDHP Annual Cost Traditional Health Plan Annual Cost

Health Savings Accounts (HSA) offer an opportunity for you to build tax-free savings to pay for current and future qualified medical expenses. Used in

**Health Plan Decision Support**

**HSA Savings Calculator**

**Life Insurance Needs Calculator**

**Disability Needs Calculator**

**Get started today and take control of your health and financial future with our easy-to-use decision support tools!**

## Advantages

- Personalized Insights
- Informed Decisions
- Time-Saving
- Peace of Mind







## The right plan for where you are now. The right partner for where you want to go.

Everyday, we help people just like you by serving as a trusted resource for Medicare and individual health plans.

### Who We Are

RetireMed is your go-to resource for Medicare and individual health insurance plans. We provide personalized guidance and expertise to help individuals find the right health coverage so they can do more of what matters most to them.

### Who We Help

We work directly with individuals in Ohio, Kentucky, Indiana, and Florida who want to explore their health insurance options and find a plan that meets their unique needs and goals. This includes those who are:

- **Any Pre-65 Individuals** - needing family or individual health insurance plans.
- **Turning 65** - whether retiring or continuing to work and want to compare their employer coverage to Medicare.
- **Over 65** - whether retiring or continuing to work and want to compare their employer coverage to Medicare.
- **Already on Medicare** - looking to evaluate their plan options

We provide personalized guidance and expertise, all at no cost or obligation to you.

### How We Help

We empower individuals by providing them with clarity and confidence in their health coverage decisions now and in the road ahead. By understanding you first, we can monitor coverage options, premiums, and additional benefits to provide proactive services that ensures your Medicare or individual health plan meets your changing needs.

Our lasting and trusted partnerships with people is our difference. Your needs change, and we'll be there at every turn.

Our lifelong support includes:

- One-on-one education.
- Assistance with billing questions or issues.
- Confirming your prescription drug coverage.
- Confirmation of network status of specific physicians and specialists.
- Providing plan assessment if needed during Medicare's Annual Enrollment Period ...and more.

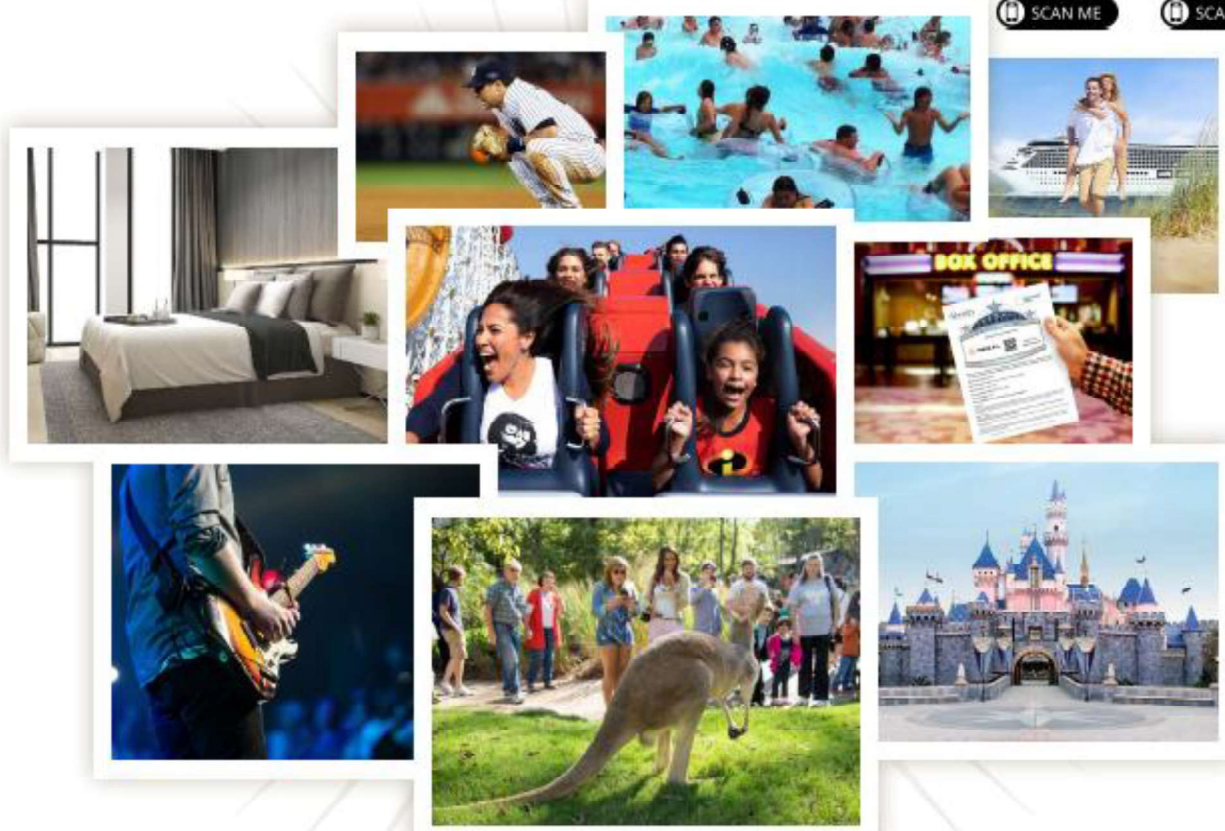
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# MB PERKS



## Member Perks

Visit <https://mbperks.com>



**Get the deepest discounts with no hidden fees.**

Save up to 40% on movies, theme park tickets, concerts, hotels, and thousands of family entertainment destinations.



### Get The Perks App

Download for quick access to nearby offers, savings alerts, movie showtimes, & more!



### No Hidden Fees

We've cut out the middleman so members save more. Enjoy quick eTicket delivery and no hidden fees!



### Travel Savings

Enjoy up to 25% off your next car rental, and up to 60% off hotel bookings with wholesale rates you can't find online.

All discount offers are subject to change at any time without notice. Log in regularly to view the latest discounts available. Abenity, Inc. Copyright 2022.

 McGohan Brabender



### IMPORTANT NOTICES RELATING TO YOUR BENEFITS COVERAGE

#### **NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT (NMHPA)**

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mothers or newborns attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not more than 48 hours (or 96 hours).

#### **WOMENS HEALTH AND CANCER RIGHTS ACT OF 1998 (WHCRA)**

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for: All stages of reconstruction of the breast on which the mastectomy was performed; Surgery and reconstruction of the other breast to produce a symmetrical appearance; Prostheses; and Treatment of physical complications of the mastectomy, including lymphedema. These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan.

#### **HIPAA SPECIAL ENROLLMENT NOTICE**

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents other coverage). However, you must request enrollment within 30 days after your or your dependents other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent because of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

Finally, you and/or your dependents may have special enrollment rights if coverage is lost under Medicaid or a State health insurance (SCHIP) program, or when you and/or your dependents gain eligibility for state premium assistance. You have 60 days from the occurrence of one of these events to notify the company and enroll in the plan.

#### **MEDICAID AND THE CHILDRENS HEALTH INSURANCE PROGRAM (CHIP)**

If you or your dependent(s) are not currently enrolled in Medicaid or CHIP and you think your dependents might be eligible, you can contact the Ohio Medicaid or CHIP office or dial 1-877-KIDS-NOW or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependent(s) are eligible for premium assistance under Medicaid or CHIP, your employer's health plan is required to permit your dependent(s) to enroll in the plan if you and your dependents are eligible, but not already enrolled in the employer's plan. You have 60 days to request coverage after it is determined you are eligible for premium assistance.

**THE STATE BASED EXCHANGES** Under the PPACA a federally operated Exchange, or Marketplace, was established for individuals to purchase health insurance. Your company provides employee healthcare benefits that meet the minimum value and affordability standards of the PPACA. Therefore, if you are eligible for healthcare benefits, you will not qualify for federal subsidies or tax credits through Marketplace enrollment.

#### **UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT**

Your right to continue participation in the Plan during leaves of absence for active military duty is protected by the Uniformed Services Employment and Reemployment Rights Act (USERRA).

Accordingly, if you are absent from work due to a period of active duty in the military for less than 31 days, your Plan participation will not be interrupted. If the absence is for more than 31 days and not more than 12 weeks, you may continue to maintain your coverage under the Plan by paying premiums.

If you do not elect to continue to participate in the Plan during an absence for military duty that is more than 31 days or if you revoke a prior election to continue to participate for up to 12 weeks after your military leave began, you and your covered family members will have the opportunity to elect COBRA Continuation Coverage only under the medical insurance policy for the 24-month period that begins on the first day of your leave of absence. You must pay the premiums for Continuation Coverage with after-tax funds, subject to the rules that are set out in that plan.