

# LIVE YOUR BEST LIFE

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This site includes tools and information on all our benefits! Your well-being is about more than just physical health. It includes your emotional, financial, and social wellness too. No matter where you are on your health and wellness journey, we are here to support you.





# 2025 Annual Benefits Enrollment

# Take time to look through this guide and learn about all of your benefits for 2025. If you don't find all the details you need here, just let us know.

At etrailer, your health and well-being is our top priority. That's why we offer a comprehensive benefits program to meet your needs and your budget.

#### Our benefits are designed to help you:

- Ensure you have access to quality medical and mental healthcare when you need it
- Provide coverage options for your dependents
- Grow your finances with Health Savings Account and 401(k) contributions
- Protect your income with company-paid life and short-term disability insurance
- Provide funds to help you continue your education

# etrailer......

We want you to live your best life.



# Enroll Now for Benefits Beginning January 1, 2025

If you want benefit coverage for 2025, enroll between November 4 and November 18, 2024. The elections you make during Open Enrollment will be in effect during all of 2025 unless you have a qualifying Life Event like getting married, divorced or having a child. If that happens, contact Your Benefits Team within 30 days of the event so you can make changes.

# How to Enroll

Complete your enrollment in Paycom no later than November 18, 2024.

- Log in to Paycom through a Laptop, iPad, PC, or through the Paycom mobile app
- 2 Go to the **Benefits** tab
- 3 Click Benefits Enrollment
- 4 Click Start 2025 Enrollment
- 5 Follow the prompts and make individual selections
- 6 Review and finalize

# **Medical Insurance Terms**

#### Coinsurance

The plan's share of the cost of covered services which is calculated as a percentage of the allowed amount. This percentage is applied after the deductible has been met. You pay any remaining percentage of the cost until the out-of-pocket maximum is met. Coinsurance percentages will be different between in-network and nonnetwork services.

#### Copay

A fixed amount you pay for a covered healthcare service. Copays can apply to office visits, urgent care or emergency room services. Copays will not satisfy any part of the deductible. Copays are not required for in-network preventive services, which are 100% covered.

#### Deductible

The amount of money you pay before services are covered. Services subject to the deductible will not be covered until it has been fully met. Preventive services are covered 100% and not subject to the deductible.

#### **Network Provider**

A provider who has a contract with your health insurer or plan to provide services at set fees. These contracted fees are usually lower than the provider's normal fees for services.

#### **Out-of-Pocket Maximum**

The most you will pay during a set period of time before your health insurance begins to pay 100% of the allowed amount. The deductible, coinsurance and copays are included in the out-of-pocket maximum.

#### Preauthorization

A process by your health insurer to determine if any service, treatment plan, prescription drug or durable medical equipment is medically necessary. This is sometimes called prior authorization, prior approval or precertification.

#### UCR (Usual, Customary and Reasonable)

The amount paid for medical services in a geographic area based on what providers in the area usually charge for the same or similar service.

#### **Voluntary Benefits**

Optional benefits that employers offer to teammates to purchase at group rates, in addition to their standard benefits package.



# **Medical Plans**



UNITEDHEALTHCARE UMR.COM/MEMBER 800-826-9781

We offer 3 UnitedHealthcare medical plans for you to choose from. They all provide you with:

- access to the UnitedHealthcare Choice Plus network
- in-network preventive care at 100%
- pharmacy coverage through SmithRx

Consider the highlights of each medical plan before you make a choice. Check to make sure your doctor participates in the network. To find a provider, go to <u>UMR.com</u> > click on *Find a Provider* > select the *United Health Care Choice Plus Network* > click to View *Providers* > *change your location* > and start searching.

#### Take a Closer Look

It's important to consider what your healthcare costs will be for the next year and select a plan that meets your financial needs. Here's an overview of the plan benefits and cost.

UHC CHOICE PLUS (CALENDAR YEAR)			
	\$1,000 PPO PLAN	\$3,000 PPO PLAN	\$5,000 HDHP/HSA PLAN
	IN-NETWORK		
Annual Deductible (Ind. / Fam.)	\$1,000 / \$2,000	\$3,000 / \$6,000	\$5,000 / \$10,000
Coinsurance (Member Pays)	20% after deductible	20% after deductible	0% after deductible
Out-of-Pocket Maximum (Ind. / Fam.)	\$4,000 / \$8,000	\$6,000 / \$12,000	\$5,000 / \$10,000
<b>Office Visits</b> Preventative Primary Care Specialist	Covered at 100% \$30 copay \$60 copay	Covered at 100% \$30 copay \$60 copay	Covered at 100% 0% after deductible 0% after deductible
Hospital and Emergency Services Outpatient Inpatient Urgent Care Emergency Room (waived if admitted)	20% after deductible 20% after deductible \$75 copay 20% after deductible		0% after deductible 0% after deductible 0% after deductible 0% after deductible
<b>Other Services</b> Diagnostic X-Rays / Labs Major Diagnostic (CT, MRI, etc.) Chiropractor Services (office visit) Therapy performed in an office setting	20% after deductible 20% after deductible 50% after deductible \$30 / \$60 copay		0% after deductible 0% after deductible 0% after deductible 0% after deductible
<b>Prescription Drugs (30 day Supply</b> Generic (Tier 1) Preferred (Tier 2) Brand Name (Tier 3)	\$10 copay \$40 copay \$75 copay		0% after deductible



#### Your Medical Coverage at Work

Sometimes it's easier to make a choice regarding a medical plan by seeing all the details. **The next three pages** show different scenarios to help you determine which medical plan is the right fit for you and your family.

# Your Medical Coverage at Work

Sample #1 - Employee Only Coverage

#### MIA'S ACCIDENT (in-network emergency room visit and follow up care)

**This EXAMPLE event includes services like:** Emergency room care (including disease education), Diagnostic test (blood work), Durable medical equipment (crutches), Rehabilitation services (physical therapy)

\$1000 DEDUCTIBLE	PLAN	\$3000 DEDUCTIBLE	PLAN	\$5000 DEDUCTIBLE PLAN	
The Plan's Overall Deductible	\$1,000	The Plan's Overall Deductible	\$3,000	The Plan's Overall Deductible	\$5,000
The Plan's Max Out-of-pocket	\$4,000	The Plan's Max Out-of-pocket	\$6,000	The Plan's Max Out-of-pocket	\$5,000
Primary Copayment	\$30	Primary Copayment	\$30	Primary Copayment	N/A
Specialist Copayment	\$60	Specialist Copayment	\$60	Specialist Copayment	N/A
Hospital (facility) Coinsurance	20%	Hospital (facility) Coinsurance	20%	Hospital (facility) Coinsurance	N/A
Total Example Cost	\$2,800	Total Example Cost	\$2,800	Total Example Cost	\$2,800
		COST SHARIN	١G		
Deductibles	\$1,000	Deductibles	\$2,800	Deductibles	\$2,800
Copayments	\$0	Copayments	\$0	Copayments	\$0
Coinsurance	\$360	Coinsurance	\$0	Coinsurance	\$0
The Total that Mia would pay	\$1,360	The Total that Mia would pay	\$2,800	The Total that Mia would pay	\$2,800
Per Paycheck Premium	\$186.01	Per Paycheck Premium	\$85.88	Per Paycheck Premium	\$32.51
Annual Premium	\$4,836.26	Annual Premium	\$2,232.88	Annual Premium	\$845.26
etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	(\$750.00)
Actual Total Annual Cost	\$6,196.26	Actual Total Annual Cost	\$5,032.88	Actual Total Annual Cost	\$2,895.26





#### **Need Additional Help?**

We want to help teammates make the most informed decision when electing benefit coverage and have therefore partnered with **Nayya**, a benefit decision support tool, to help you choose the benefits that best meet your individual needs. This interactive decision support tool takes you through a 10-minute series of questions to learn more about your specific needs and delivers a personalized recommendation for enrollment. Scan the QR code now to get help.

# Your Medical Coverage at Work

Sample #2 - Employee Only Coverage

CRAIG'S NORMAL HEALTHY CALENDAR YEAR (regular physician check up visits, occasional prescriptions, and no major incidents)

#### This EXAMPLE event includes services like: Preventive Doctor Visits, Urgent Care Visit, and Antibiotic Generic Prescription

\$1000 DEDUCTIBLE	PLAN	\$3000 DEDUCTIBLE	PLAN	\$5000 DEDUCTIBLE PLAN	
The Plan's Overall Deductible	\$1,000	The Plan's Overall Deductible	\$3,000	The Plan's Overall Deductible	\$5,000
The Plan's Max Out-of-pocket	\$4,000	The Plan's Max Out-of-pocket	\$6,000	The Plan's Max Out-of-pocket	\$5,000
Primary Copayment	\$30	Primary Copayment	\$30	Primary Copayment	N/A
Specialist Copayment	\$60	Specialist Copayment	\$60	Specialist Copayment	N/A
Hospital (facility) Coinsurance	20%	Hospital (facility) Coinsurance	20%	Hospital (facility) Coinsurance	N/A
Total Example Cost	\$360	Total Example Cost	\$360	Total Example Cost	\$360
		COST SHARIN	NG		
Deductibles	\$0	Deductibles	\$0	Deductibles	\$360
Copayments	\$85	Copayments	\$85	Copayments	\$0
Coinsurance	\$0	Coinsurance	\$0	Coinsurance	\$0
The Total that Mia would pay	\$85	The Total that Mia would pay	\$85	The Total that Mia would pay	\$360
Per Paycheck Premium	\$186.01	Per Paycheck Premium	\$85.88	Per Paycheck Premium	\$32.51
Annual Premium	\$4,836.26	Annual Premium	\$2,232.88	Annual Premium	\$845.26
etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	(\$750.00)
Actual Total Annual Cost	\$4,921.26	Actual Total Annual Cost	\$2,317.88	Actual Total Annual Cost	\$455.26

#### **Need Additional Help?**



Let <u>Nayya</u> simplify your benefits experience. Just scan this QR code to get personalized help.

# Your Medical Coverage at Work

Sample #3 - Family Coverage

THE MARTINS CALENDAR YEAR (family of 3 – Mia has accident, Craig has a healthy year)					
\$1000 DEDUCTIBLE	PLAN	\$3000 DEDUCTIBLE	PLAN	\$5000 DEDUCTIBLI	PLAN
The Plan's Overall Family Deductible	\$2,000	The Plan's Overall Deductible	\$6,000	The Plan's Overall Deductible	\$10,000
The Plan's Family Max Out-of-pocket	\$8,000	The Plan's Max Out-of-pocket	\$12,000	The Plan's Max Out-of-pocket	\$10,000
Coinsurance	20%	Coinsurance	20%	Coinsurance	0%
	cc	ST SHARING – MIA'S ACCI	DENT COST \$2	,800	
Deductibles	\$1,000	Deductibles	\$2,800	Deductibles	\$2,800
Copayments	\$0	Copayments	\$0	Copayments	\$0
Coinsurance	\$360	Coinsurance	\$0	Coinsurance	\$0
The Total that Mia would pay	\$1,360	The Total that Mia would pay	\$2,800	The Total that Mia would pay	\$2,800
	COST	SHARING - CRAIG'S HEAI	THY YEAR COS	ST \$360	
Deductibles	\$0	Deductibles	\$0	Deductibles	\$360
Copayments	\$85	Copayments	\$85	Copayments	\$0
Coinsurance	\$0	Coinsurance	\$0	Coinsurance	\$0
The Total that Craig would pay	\$85	The Total that Craig would pay	\$85	The Total that Craig would pay	\$360
Total Together	\$1,445	Total Together	\$2,885	Total Together	\$3,160
Per Paycheck Premium For FAMILY	\$907.69	Per Paycheck Premium For FAMILY	\$698.47	Per Paycheck Premium For FAMILY	\$462.64
Annual Premium	\$23,599.94	Annual Premium	\$18,160.22	Annual Premium	\$12,028.64
etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	\$0	etrailer Annual HSA Contribution	(\$1,250.00)
Actual Total Annual Cost	\$25,044.94	Actual Total Annual Cost	\$21,045.22	Actual Total Annual Cost	\$13,938.64

### **Need Additional Help?**



Let <u>Nayya</u> simplify your benefits experience. Just scan this QR code to get personalized help.

# **Prescription Coverage**



SmithRx has over 83,000 in-network retail pharmacies. To find the pharmacy with the best price, use the Find My Meds tool in the member portal. Enter your medication name and location and the tool will show you the pharmacy with the best price available using your benefits. If you have questions, reach out to the SmithRx member support team by online chat at smithrx.com, email help@smithrx.com, or call 844-454-5201.

#### **Specialty Drugs**

Members can identify specialty drugs using the Formulary Lookup tool on the member portal. Have your doctor send your specialty prescription to either Kroger Specialty Pharmacy or Senderra Rx. Then simply call either of the pharmacies to enroll. Many specialty medications require prior authorization, so call SmithRx Member Support to check coverage and start any necessary authorization processes.

- Kroger Specialty Pharmacy: Patients can reach Kroger Specialty Pharmacy for enrollment assistance by calling 888-355-4191. Prescribers can visit krogerspecialtypharmacy.com and fill out the appropriate forms.
- Senderra Rx: Patients can reach Senderra for enrollment assistance by calling 888-777-5547. Doctors can visit www.senderrarx.com/prescribers and fill out the appropriate forms.

#### **Checking Medication Prices**

UnitedHealthcare members can access the *Find My Meds* pricing tool by registering for the SmithRx member portal at mysmithrx.com. Within the tool, you will enter various drug details (ex: name, strength, quantity, and day supply) and the price of the drug at pharmacies within a selected zip code or city.

#### **Mark Cuban Cost Plus Drugs**

For select medications, Mark Cuban Cost Plus Drugs offers highly competitive pricing and is integrated with your plan with SmithRx. See whether your medications are available at costplusdrugs.com/ medications.

> Included with your UHC medical plan



Find self-serve tools and resources in the SmithRx Member Portal by scanning this QR Code.



# **Prescription Coverage**



SMITHRX CONNECT 360 CONNECT@SMITHRX.COM 844-385-7612

SmithRx can lower your drug costs by helping you navigate various cost savings programs and obtain medications for little or no copay. There is no cost to participate in SmithRx Connect as long as you are enrolled with SmithRx's pharmacy benefits plan. Prescriptions obtained through this service could be free for you and your dependents. Sometimes a copay or out-of-pocket amount will be required, but this cost may be substantially less than what you are paying now.

Our Member Support Specialists can help you find coverage information for your medications, including if your medication is eligible for Connect 360. Your medication may require prior authorization before being eligible for Connect 360. Reach out to Connect Patient Support for help.

#### Here is the growing list of Connect 360 Programs

#### Access

 Capture manufacturer coupon savings on traditional and specialty medications.
 Members have a low or \$0 copay on prescriptions while also helping employers save on pharmacy benefit costs.

#### **Access Plus**

 Leverages advocacy foundations and grant programs to reduce cost when a high-cost specialty medication is not covered under the pharmacy benefit. We assist members in navigating and applying to these different programs.

#### Assist

 No more pre-shopping for the best price or printing coupons! Your member ID has all the information that your pharmacy needs to find the best deals for you at the point of sale.

#### Mark Cuban Cost Plus Drugs

 Mark Cuban Cost Plus Drugs is building an innovative pharmacy model that delivers medications at cost, plus a straightforward 15% markup, along with a \$3 dispensing fee and shipping. Mark Cuban Cost Plus Drugs carries over 1,000 medications and is continuing to expand their drug list weekly.

#### Autoimmune (Mark Cuban Cost Plus Drugs)

 Yusimry, a biosimilar for Humira, is now available to SmithRx members at Mark Cuban Cost Plus Drugs. Yusimry offers a more affordable option for members with autoimmune diseases.

#### **Multiple Sclerosis (MS)**

(Mark Cuban Cost Plus Drugs)

 The lowest-cost Multiple Sclerosis products on the market through Cost Plus Drugs; typically generic or biosimilars, offering upfront savings to the health plan instead of having to wait for rebates.

#### Low-Cost Insulin

 The lowest-cost insulin products on the market; typically a generic or biosimilar insulin offering upfront savings to the health plan instead of having to wait for rebates.

#### **Diabetes Non-Insulin (DNI)**

 Eli Lilly and Company's low-cost insulin biosimilar products (and more) are now preferred on the SmithRx formularies.

# **Prescription Coverage**



#### **Mail Order Prescription Services**

Members can utilize our mail order partner pharmacies for convenience and savings. Our standard mail order partner is Amazon, but some members might end up using Walmart Home Delivery if they are on particular drugs, and that will be communicated to them by the Connect team.

#### **Amazon Pharmacy**

If covered by your plan, most non-specialty (traditional) medications can be filled through Amazon Pharmacy Home Delivery.

Visit amazon.com/smithrx and click on *"Get Started"*. If you are an Amazon customer, follow the pharmacy sign-up process. If you're not yet an Amazon customer you'll need to sign-up, validate yourself and then follow the instructions.

Included with your UHC medical plan



Add your insurance information. **Reminder:** Have your member ID card ready.

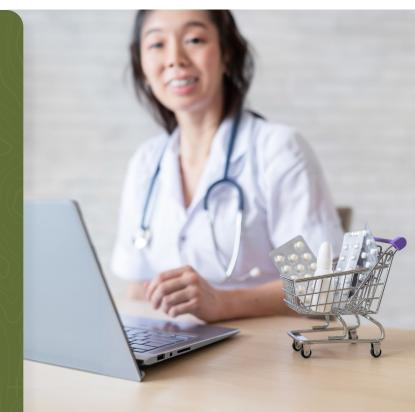
Request your doctor or prescriber send a 90-day supply of your new prescription to Amazon Pharmacy via electronic prescribing (e-scribe) or via phone/fax.

- Name/E-scribe: Amazon Pharmacy Home Delivery
- Fax: 512-884-5981
- Address: 4500 S Pleasant Valley Road, Suite 201, Austin, TX 78744-2911
- Prescriber and pharmacy line: 855-206-3605

#### Walmart Home Delivery

There are some medications that Amazon does not dispense (e.g., Schedule II controlled substances, Access Program medications, etc.) If you need a medication that's not available from Amazon Pharmacy, your doctor or provider can send a 90-day supply of your new prescription to Walmart Home Delivery.

- Search Walmart Pharmacy Fax: 800-406-8976
- Address: 1025 W Trinity Mills Rd. Carrollton, TX, 75006
- Prescriber and Pharmacy line: 800-273-3455 (Monday-Friday 7AM- 7PM CST, Saturday-Sunday 8AM - 4PM CST)
- 😣 Email: wmsrx@wal-mart.com
- 😣 Website: walmart.com/cp/1042239



# Health Savings Account (HSA)



HSA BANK HSABANK.COM 877-848-0241

Teammates who choose the \$5000 HSA plan for medical insurance are eligible for a Health Savings Account that includes a contribution from etrailer. Any money that goes in the account is deposited tax-free, grows tax-free, and can be used for qualified medical, dental, vision and mental health expenses. Invest your HSA funds and potentially grow your savings. Your balance rolls over year-after-year. You own the account, even if you leave the company.

#### How an HSA works

Contribute to your HSA by payroll deduction, online banking transfer or personal check. Then pay for qualified medical expenses for yourself, your spouse and your dependents. Both current and past expenses are covered if they are from after you opened your HSA. Use your HSA Bank Health Benefits Debit Card to pay directly or pay out of pocket for reimbursement or to grow your HSA funds.

#### What's covered?

You can use your HSA funds to pay for any IRSqualified medical expenses, like doctor visits, hospital fees, prescriptions, dental exams, vision appointments, over-the-counter medications and more. Visit hsabank.com/QME for a full list of eligible expenses.

#### Are you eligible for an HSA?

You're most likely eligible to open an HSA if:

- You have a qualified high-deductible health plan (HDHP).
- You're not covered by any other non-HSAcompatible health plan, like Medicare Parts A and B.
- You're not covered by TriCare.
- No one (other than your spouse) claims you as a dependent on their tax return.

#### How much can I contribute?

The IRS limits how much you can contribute to your HSA every year. This includes contributions from your employer, spouse, parents and anyone else.

2025 HSA CONTRIBUTION LIMITS			
	IRS MAXIMUM CONTRIBUTION (EE + ER)	ETRAILER COMPANY CONTRIBUTION	YOUR CONTRIBUTION MAX.
Employee	\$4,300	\$750/annually (\$28.85/paycheck)	\$3,550
Employee + Spouse	\$8,550	\$750/annually (\$28.85/paycheck)	\$7,800
Employee + Children	\$8,550	\$1,250/annually (\$48.08/paycheck)	\$7,300
Family	\$8,550	\$1,250/annually (\$48.08/paycheck)	\$7,300
Catch-up 55 or older	\$1,000	\$0	\$1,000

etrailer

contributes to

your Health

Savings

Account

# Health Savings Account (HSA)



HSA BANK HSABANK.COM 877-848-0241

#### **Catch-up contributions**

You may be eligible to make a \$1,000 HSA catch-up contribution if you're:

- Over 55
- An HSA accountholder
- Not enrolled in Medicare (if you enroll mid-year, annual contributions are prorated)

#### HSA Triple Tax Savings

A huge way that HSAs can benefit you is they let you save on taxes in three ways.

- 1 You don't pay federal taxes on contributions to your HSA.
- 2 Earnings from interest and investments are tax-free.
- 3 Distributions are tax free when used for qualified medical expenses.

etrailer contributes to your Health Savings Account

#### Tips to Save on Your Healthcare Expenses

- Stay in the network: The doctors and facilities in the network may have agreed to provide services at a discount — so visiting an out-ofnetwork provider could end up costing you more for care or may not be covered at all. Sign in to myuhc.com and navigate to the *Find Care & Costs* tab where you can locate labs, hospitals, mental health professionals and network providers.
- Manage your prescription cost: Visit smithrx.com to learn how to reduce the cost of your medications.
- Shop around: With such a wide variety of healthcare services and program, it's a good idea to check out all of the resources available to you from etrailer. starting on page 11.

# Where to Go for Care

Understanding your care options can have a big impact on the amount you pay out of pocket when seeking care. Consider these different options when you're not feeling well, but if it's an emergency call 911 or go to the closest Emergency Room.



#### **TELEMEDICINE**

	TELEMEDICINE	DOCTORS OFFICE	URGENT CARE	EMERGENCY ROOM
WHEN TO GO	When you have a non-emergency health condition and don't want to leave your home or office, a virtual doctors visit is an option. Telemedicine lets you visit with a board-certified doctor at your convenience on your phone, tablet or computer.	When you have any medical concern, your primary doctor knows you best. Your doctor oversees your care and can provide routine services and preventative exams. Your doctor can help you manage your medication and refer you to a specialist if needed.	When you need care quickly, but it is not an emergency and your primary doctor may not be available. Urgent care centers offer treatment for non-life-threatening injuries or illness.	When you need immediate treatment of a very serious or critical condition. The ER is for the treatment of a life-threatening or a very serious condition that requires immediate medical attention.
TYPE OF CARE	<ul> <li>Cold/Flu</li> <li>Fever</li> <li>Rash</li> <li>Sinus Infection</li> <li>Pink Eye</li> <li>Ear Infection</li> </ul>	<ul> <li>Preventative services</li> <li>Immunizations</li> <li>Routine check ups</li> <li>Manage your overall health</li> <li>Ongoing health issue</li> </ul>	<ul> <li>Common Infections (Strep Throat)</li> <li>Minor skin conditions (Poison Ivy)</li> <li>Flu or Fever (below 104)</li> <li>Ear Ache/Sore Throat</li> </ul>	<ul> <li>Heavy bleeding</li> <li>Shortness of breath</li> <li>Chest pain</li> <li>Large open wounds</li> <li>Major burns</li> <li>Severe head injury</li> <li>Broken bone</li> </ul>
COST & WAIT	<ul> <li>Often requires a copay/coinsurance</li> <li>Usually available 24/7 with very little wait time</li> </ul>	<ul> <li>Often requires a copay/ coinsurance</li> <li>Requires appointment</li> <li>Little wait time with a scheduled appointment</li> </ul>	<ul> <li>S S</li> <li>Often requires a copay/coinsurance that is higher than a regular office visit</li> <li>Walk-in patients are welcome, but waiting periods may be longer as patients with more urgent needs will be treated first.</li> </ul>	<ul> <li>S S S</li> <li>Often requires a much higher copay/ coinsurance</li> <li>Open 24/7, but waiting periods may be longer as patients with life-threatening emergencies will be treated first.</li> </ul>

# TYPE OF CARE

# **Employee Assistance Program (EAP)**



OPTUM EAP LIVEANDWORKWELL.COM 855-205-9185

When you're dealing with the pressures of everyday life, it can be easy to simply smile and say, "I'm fine." But sometimes, emotions like stress, sadness or even anger can linger. In those moments, Emotional Wellbeing Solutions from Optum is here for you. And it's available to all members of your household, including children living away from home—**at no cost to you.** 

Call anytime to speak confidentially with an Emotional Wellbeing Specialist who'll listen to your needs and connect you with resources that can help. This includes referrals, seeing network providers, access to **liveandworkwell.com**, and initial consultations with mediators or financial and legal experts. Emotional Wellbeing Specialists are available by phone to provide help with a range of life concerns and stressors, including:

- Relationship problems
- Workplace conflicts and changes
- Parenting and family issues
- Eldercare support
- Stress, anxiety and depression
- Legal and financial concerns

You can also access 6 counseling visits either in person or virtually with a provider in our large network — at no cost. All conversations are confidential, and we never share your personal records with your employer or anyone else without your permission.

#### You don't need to belong to an etrailer medical plan for you or your household members to use the Optum EAP.





Provided

by etrailer

at no cost

to you.

# Support for everyday life

To learn more, scan the QR code or visit **liveandworkwell.com**. Register with your HealthSafe ID or enter your company access code: etrailer



# **Additional Health Resources**

for UnitedHealthcare members



TELADOC VIRTUAL VISITS TELADOCHEALTH.COM 800-835-2362

Skip the trip to the ER or urgent care for nonemergency problems, avoid long wait times and save money by seeing a clinician within minutes by phone or video. Our Teladoc Health benefit gives you access to compassionate care from U.S. board certified clinicians, anytime, anywhere. Providers are available in all 50 states, and you can meet with them 24/7 by phone or video.

Teladoc Health provides healthcare for every day, non-emergency health needs like prescription refills, coughs, colds, UTIs, sinus, allergies and much more. If needed, the Teladoc Health providers can prescribe medications as well.

Your cost for a Teladoc visit varies based on the UnitedHealthcare plan you're in. If you do have to pay, you will see your cost before you finish requesting your visit. You can pay with a credit card, prepaid debit card, HSA (Health Savings Account), or by PayPal.



To sign up for Teladoc Health, scan the QR code to download the app, call **800-835-2362**, or visit the website. There is no time limit on how long the visit is.

## **UMR Member Portal**

Not registered yet? Create your account online at <u>umr.com/register</u> or scan the QR code to download the app.





The CancerCare+ Program is a free, fully integrated cancer solution included in the UnitedHealthcare medical plan that supports you from the first day of your diagnosis well into the stages of aftercare.

A newly diagnosed active plan participant is immediately paired via TPA with a CancerCARE+ care coordinator to ensure their diagnosis is confirmed and properly staged. The coordinator will:

- Coordinate a second opinion with renowned national centers of excellence
- Promote the utilization of clinical pathways prior to treatment planning
- Ensure the most evidence-based and cost-effective treatment protocol is implemented quickly
- Help the patient navigate all aspects of care
- Connect the patient to the Cancer Centers of Excellence Network for complex treatment needs
- Facilitate access to oncology experts who work to improve care and reduce costs

#### **Day One Help**

The day you receive a cancer diagnosis is overwhelming. Our CancerCARE professionals will answer questions about your diagnosis and help you evaluate your treatment options. They will also help maximize your health benefits and minimize your out-of-pocket expenses. Register online or by phone within 72 hours of diagnosis for the highest care impact.



- 1 Scan the QR code.
- Clink the link that appears on your screen.

3 Use the online form to register for the program.

Teammate Benefits Guide 2025



# **Additional Health Resources**

for UnitedHealthcare members



#### HUSK NUTRITION MARKETPLACE.HUSKWELLNESS.COM PARETOHEALTH 800-294-1500

HUSK is an online platform that provides access to discounted gym memberships at popular fitness, weight loss, and wellness programs nationwide and encourages teammates to take a proactive approach to their health and well-being.

- Gyms & Fitness Centers: Access savings and flexible membership options to a variety of facilities.
- Home Equipment & Tech: Exclusive equipment and wearable technology.
- HUSK Nutrition: Meet with a registered dietitian to implement and complete a nutrition program designed specifically for you.
- On-Demand Fitness: Group exercise classes in the comfort of your own home.
- Mental Health: HUSK Mental Health connects you with licensed therapists through technology.

Go to Marketplace.huskwellness.com/paretohealth and click on *Activate Benefit* to register for the program and unlock your discounts and exclusive offers. Be sure to use "HS00652" as your Eligibility ID number to register. If you have questions, call the Customer Support team at 800-294-1500.



When you learn that you will need orthopedic surgery, general surgery, a colonoscopy, an MRI, a CT scan, or a PET scan, a KISx Card nurse will introduce you to the highest quality, closest, and most affordable facility for your procedure.

If you decide to use a KISx Card provider within KISx's direct provider "non" network, you will be rewarded with a cash incentive and voucher to cover every out-of-pocket expense associated with the procedure.



#### EHEALTH EHEALTHINSURANCE.COM/PARETO 888-744-0647

eHealth's referral program helps you explore, compare, and enroll in cheaper alternatives to COBRA if you leave etrailer. Search their online Health Insurance Exchange at ehealthinsurance.com/pareto to explore your options.

> Provided by UHC at no cost to you.



# **Dental Plan**



PRINCIPAL <u>PRINCIPAL.COM</u> 800-247-4695

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. All active, full-time teammates may purchase dental coverage at group rates from Principal. If you're covered, you can buy coverage for your dependents.

PRINCIPAL DENTAL PLAN				
DEDUCTIBLE				
Single	\$	50		
Family	\$	150		
Preventive care	100%	covered		
CO-INSURANCE	IN-NETWORK	OUT-OF-NETWORK		
Preventive	100%	100%		
Basic	100%	80%		
Endodontic	100%	80%		
PERIODONTAL				
Non-Surgical	100%	80%		
Surgical	100%	80%		
Oral Surgery	100%	80%		
Major	70%	50%		
Annual Maximum (Per Individual)	\$1,500			
Orthodontic (Children thru Age 19)	\$1,500	50%		
Maximum Roll Over Available	YES			
Customary for Out of Network	90th Percentile			



# **Vision Plan**



Having an annual eye exam is one of the best ways to make sure you are keeping your eyes health. Eye exams can help prevent and treat easily correctable vision problems which can cause permanent vision impairment. Full-time active teammates have the option to enroll in the Vision Plan through Principal to save money on eligible vision care expenses such as an eye exam, glasses, and contact lenses. If you're covered, you can also buy coverage for your dependents.

PRINCIPAL VISION PLAN			
VSP NETWORK	IN-NETWORK	FREQUENCY	
Routine Eye Exam	\$10 copay	Once every 12 months	
EYEGLASS FRAMES (INSTEAD OF CONTA	ACTS)		
	\$150 allowance; 20% off amount over allowance	1 set per 24 months	
EYEGLASS LENSES (INSTEAD OF CONTA	(CTS)		
Single Vision	\$25 copay	1 pair per 12 months	
Bifocal	\$25 copay	1 pair per 12 months	
Trifocal	\$25 copay	1 pair per 12 months	
Lenticular	\$25 copay	1 pair per 12 months	
CONTACT LENSES (INSTEAD OF LENS AN	ND FRAMES)		
Elective Conventional	Up to \$60 copay (F&E); \$150 allowance	1 pair per 12 months	
Elective Disposable	Up to \$60 copay(F&E); \$150 allowance 1 pair per 12 months		
Non-Elective (medically necessary)	\$25 copay (F&E); covered in full 1 pair per 12 months		

#### Your Dental and Vision ID Card

Access your ID card for dental and vision through Principal. Here's how:

**1** Go

Go to principal.com/create-account or download the Principal app.

Register as an "Individual."

Create an account by entering your Social Security Number in place of the ID number.

To view your ID card, click *"View Details"* underneath the benefit coverage.

Download the Principal app in English or Spanish and see for yourself. To download the app, scan the QR code or visit your app store.



\*Apple users: Sync the app to your Apple Watch for an even more streamlined experience.



# **Personal Benefits**



#### **Gear Garage Program**

You can borrow gear for your next outdoor adventure, including but not limited to:

- Rooftop tents and a Blackstone stove for your next camping trip
- Kayaks and racks you need to get to the water
- Road trip storage, bike racks, towing mirrors and more

#### **Borrowing Stuff is Easy!**



Scan the QR code and click "Start Now."

Select your stuff! Browse the catalog or select "*Help Me Pick Something Out*" to find your best solution.



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Enter the dates you need the item(s), when you'll pick them up and when you'll return them.



You'll receive a follow-up email from the team to confirm your details and item availability. We'll even help you install it! We only ask that you share your experience with us!



#### **Your Wellness Program**

We're introducing a new Wellness Program that provides you with education around nutritional and financial health.

- Quarterly nutrition seminars hosted by Erin with Mindset Nutrition
- Monthly 401(k) and financial education webinars presented by Gallagher Retirement Plan Consultants
- In person discussions available throughout the year with our local financial institution partners
- The Race reimbursement of \$25 per race up to \$50 per year for race entry fees.

#### We Help Teammates Fund

We know that life throws us challenges and it can be hard to ask for help, but we've found that sometimes teammates need an extra fist bump, and we want to create safe spaces where teammates can help teammates. So we created a *We Help Teammates Fund* to provide support when a teammate is experiencing an unforeseen or extreme situation which causes financial hardship.

#### How You Can Help

All donations collected through the e-shirt program in the Vehicle Consultation Center (VCC) will go towards our *We Help Teammates Fund.* Donations of \$10 or more will receive an e-shirt of their choice.



Scan to donate to the *We Help Teammates Fund.* 



Scan here to apply for assistance.



## **Tuition Reimbursement**

One of our core values at etrailer is always learning. To live out this value, we offer tuition reimbursement up to \$5,000 per calendar year to help you further your education when it relates to your career path at etrailer. For more information email **alwayslearning@etrailer.com**.

# **Personal Benefits**

#### **Teammate Referral Program**

Help us find the best talent for our team. If you're working for etrailer full-time and refer an applicant who is selected and successfully hired for an open position, you'll receive a referral bonus after they've worked at etrailer for a specified time period.

#### **Eligibility and Participation**

- Applicants are considered persons not currently or previously employed with the company. All full-time teammates are eligible to receive a referral bonus.
- To be eligible for a referral bonus, the applicant must include the referrer's name in their online application before submitting it.
- Referral bonus will be paid in one lump sum after the referral has successfully completed 6 months of employment

Have you had a referral apply? Have a question about the referral program? Send us an email at startyourjourney@etrailer.com and let us know.

POSITION	PAYOUT*	WHEN
	(PER REFERRAL)	
Software Developers	\$1,500	After the referred
All Other Full- Time Positions	\$500	teammate completes 6 months of
Seasonal/ Part Time	\$250	employment

\*Taxes will be withheld from gross bonus amount outlined above. Both the referral and current teammate must be in good standing at the time of payout and active with etrailer at the time of the bonus payout. There is no maximum referral bonus payout on the number of referrals a teammate can receive. Program is subject to change at any time without notice.

#### **Teammate Discounts**

When you visit <u>etrailer.com</u> and see an item you'd like to purchase, complete the dealer application. You will be emailed a username and password. Then you can log in and view your teammate pricing and place your own orders. Since we have limited CSRs setting up dealer accounts, please wait until your NEXT order to complete the dealer account.

Please keep in mind, **we're not allowed under any circumstance** to resell the products, repost images/content, or profit monetarily or by other means on items purchased with our teammate discounts. Violating this policy could lead to termination, in addition to us protecting our copyright materials.

#### Dealer applications available at:

Customer Service Page > Your Account > Create Dealer Account

Once you have your username and password, and are ready to place an order go to:

Customer Service Page > Your Account > Login





# 401(k) Retirement Plan



EMPOWER EMPOWERMYRETIREMENT.COM 800-338-4015

You can enroll in our 401(k) retirement program after 12 months of full-time employment. etrailer offers immediate vesting and matches 100% of the first 3% contribution and 50% of next 2% contribution for a maximum of a 4% match. You can modify your investment contribution at any time.

#### Stay one step ahead of life

It's important to save for your retirement because there will be a time when you want to stop working, relax and enjoy yourself and your family. But it takes financial stability to make that happen without the worry of how you'll pay the bills. That's why saving for retirement needs to be a priority—no matter what stage in life you're at. And it's important to protect the financial foundation you've built for your family.

Company match funded by etrailer for you.

Take the time to review your contributions—any time of the year—and make sure your funds are invested the best way possible to grow your retirement nest egg. Refer to the official plan documents for additional information on coverage and exclusions.

	401(K) RETIREMENT PLAN
Eligibility & Entry	1 year of service with monthly entry
Employer Match	100% up to 3% plus 50% of deferrals on 4%-5% of compensation (max 4%)
Vesting Schedule	Immediate
Roth Saving Opportunities	Consider whether it's allowed and helpful to pay taxes on this income now.
Rollover Opportunities	Does it make sense for you to roll money from other retirement savings accounts into this one?
Catch-Up Contributions	lf you are 50 and older, can you afford to make an additional contribution to your retirement plan?
Current IRS Limits	\$23,000 with an additional \$7,500 catch-up contributions for 50+

# Accident Insurance\*



PRINCIPAL PRINCIPAL.COM 800-245-1522

Off-the-job Accident Insurance will pay you a lump sum amount if you are in an accident or injured—whether it is a simple sprain or something more serious, such as an injury from a car accident. The plan will pay you a benefit for an emergency room treatment, stitches, crutches, injury-related surgery, and many other accident-related expenses. The money is paid directly to you, and you decide how to spend it.

And if you have a Health Savings Account, Accident Insurance pair wells with your account by providing additional coverage for medical expenses that might not be fully covered by your high-deductible health plan (HDHP)—essentially filling in gaps in coverage and helping you manage out-of-pocket healthcare costs.

ACCIDENT PLAN - SAMPLE BENEFITS		
INJURY	BENEFIT PAID TO YOU	
Burn	Up to \$5,000	
Coma	\$15,000	
Concussion	\$500	
Dislocations Schedule	Up to \$7,500	
Fractures Schedule	UP TO \$10,000	
Injuries not specifically listed	\$100 per injury	
Internal Injury	\$1,500	
Hospital/ICU Confinement Benefit	Included in benefit	

\*For more information about the Accident Plan benefits, refer to the Teammate Benefits Hub.



## Get a \$50 Wellness Benefit from Principal

Principal's Accident, Hospital Indemnity, and Critical Illness insurance plans each include a \$50 wellness benefit. This benefit is provided annually when you or your covered dependents complete a covered health screening test.

Eligible health screenings can include tests like **blood tests for triglycerides**, **mammograms, routine dental exams, and more.** This benefit encourages preventive care and helps cover the costs associated with these screenings. If you have any specific questions about your coverage or need assistance with the claim process, feel free to contact Principal.



# Critical Illness Insurance \*



If you're diagnosed with an illness that is covered by this insurance plan, you can receive a lump sum benefit payment. You can use the money however you want. The money can help you pay out-of-pocket medical expenses, like copays and deductibles or everyday living expenses. When you purchase coverage for yourself, your children are automatically covered for 25% of your benefit at no additional cost. And you can purchase coverage for yourself.

#### Who can buy coverage?

Active, full-time employees can purchase coverage. If you have a qualifying life event (marriage, birth of a child, etc.), you may enroll or increase coverage up to the guaranteed issue amount within 31 days without having to provide health information. If you're covered, your children are automatically covered for 25% of your benefit at no additional cost. And you may buy coverage for your spouse, if they're not confined at home, in a hospital or skilled nursing facility.

#### What does Critical Illness cover?

It provides cash benefits after you receive services or procedures related to a diagnosis of a covered illness. Benefits are paid directly to you (or your beneficiary) for diagnoses including:

- Heart attack / Stroke
- Alzheimer's / Parkinson's
- Major organ failure
- Invasive cancer / skin cancer
- Sepsis/Meningitis
- Blindness
- Paralysis
- And more

CRITICAL ILLNESS			
FEATURES	BENEFIT	DETAILS	
Your benefit (increment / maximum)	\$5,000 / \$100,000	Select a benefit based on the increment amount and up to the maximum.	
Your guarantee issue	\$30,000	Amount of coverage you may buy without providing health information.	
Spouse benefit	\$2,500 / \$50,000	Select a benefit for your spouse based on the increment amount and up to the maximum.	
Spouse guarantee issue	\$15,000	Amount of coverage you may buy without providing health information.	
Child(ren)	25% of your benefit	Your eligible children up to age 26 are automatically covered.	

For more information about the Critical Illness Plan benefits, refer to the Teammate Benefits Hub.

# Hospital Indemnity Insurance\*



Be better prepared financially for the unexpected before it happens. This coverage pays a cash benefit that helps cover your unplanned expenses but is not a replacement for medical insurance.

FEATURES	BENEFIT	DETAILS
Your benefit	Benefits payable as listed below	Coverage for you is on and off-the-job.
Spouse benefit	100% of your benefit	Coverage for your spouse is on and off-the-job.
Child(ren)	100% of your benefit	

#### Who can buy coverage?

Active, full-time employee working at least 30 hours a week. You must enroll within 31 days of being eligible. If you don't, you'll have to wait until the next open enrollment period, unless you have a qualifying life event (marriage, birth of a child, etc.).

If you're covered, you may buy coverage for your dependents, if they're not confined at home, in a hospital or skilled nursing facility. Additional eligibility requirements may apply.

#### Am I eligible for benefits if I'm pregnant?

If you or your covered dependent experience complications because of your pregnancy or childbirth, benefits will be treated as any other sickness. Benefits would not be payable for a normal pregnancy or childbirth unless you or your covered dependent, have coverage in force for one full day after completion of 10 consecutive months.

# I've already received a benefit, can I receive another benefit?

If you're hospitalized again for the same or related condition and a confinement benefit was paid, your benefit may be payable again. If you're confined to the ICU again for the same or related condition and your confinement benefit was paid, your benefit may be payable again.

#### **Additional features**

- Health screening benefit: If you or your covered dependent have a covered screening test performed, you each may be eligible for a \$50 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.

#### **HOSPITAL CONFINEMENT**

BENEFIT PAYABLE

#### UP TO A MAXIMUM OF:

To qualify for a benefit under this policy, you must incur a sickness or injury 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. Minimum of 18 consecutive hours of confinement is required for hospitalization benefits.

First day hospital (sickness/injury)	\$1,000	2 days per year
First day ICU (sickness/injury)	\$2,000	1 day per year
Daily hospital (sickness/injury)	\$100	15 days per year
Daily ICU (sickness/injury)	\$100	30 days per year

\*This benefit summary is a summary only. For a complete list of benefit information and limitations, refer to the Teammate Benefits Hub.

# **Short-Term Disability**



RELIANCE MATRIX RELIANCEMATRIX.COM 800-351-7500

Disability coverage replaces a portion of your pre-disability income during the initial weeks of a non-work related illness or injury. etrailer pays for this benefit for you.

Provided by etrailer at no cost to you.

#### SHORT-TERM DISABILITY BENEFIT SCHEDULE

FEATURES	DESCRIPTION			
Benefit amount	\$2,000			
Maximum weekly benefit	15% of weekly benefit, \$50 minimum			
Minimum benefit	8th day for sickness or injury			
Benefits begin	12 weeks			
Maximum benefit duration	Partial Disability, with zero day residual			
Definition of disability	No			
Are occupational disabilities covered	None			
Pre-existing conditions	None			

# **Long-Term Disability**



RELIANCE MATRIX RELIANCEMATRIX.COM 800-351-7500 Long-Term Disability replaces a portion of your pre-disability income during long-term recovery from a non-work related illness or injury. If you did not enroll in LTD for 2024, you will be able to enroll for 2025 with Evidence of Insurability,

VOLUNTARY LONG-TERM DISABILITY BENEFIT SCHEDULE				
FEATURES	DESCRIPTION			
Benefit amount	60% of monthly earnings			
Maximum weekly benefit	\$7,000			
Benefits begin	90 days			
Maximum benefit duration	Extended-ADEA-B*			
Workplace modification benefit	Up to \$2,000			
Definition of disability	2-year own occupation			
Pre-existing conditions**	3/12			
Are occupational disabilities covered?	No			

\*Long-term disability benefits will continue beyond the standard period. This extension ensures that older teammates receive adequate support in case of long-term disability.

\*\*A pre-existing condition is an illness or injury for which you received treatment or where symptoms were present within 3 months prior to your effective date of coverage. A disability that begins in the first 12 months after your effective date will not be covered if it results from a pre-existing condition.

# **Basic Life Insurance**



RELIANCE MATRIX RELIANCEMATRIX.COM 800-351-7500

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you die while employed by etrailer. The company provides basic life insurance of \$25,000 at no cost to you.

# Voluntary Life and AD&D



RELIANCE MATRIX RELIANCEMATRIX.COM 800-351-7500

You may purchase life insurance in addition to the company-provided coverage. You may also purchase life insurance for your dependents if you purchase additional coverage for yourself. You are guaranteed coverage up to \$150,000—and up to \$50,000 for your spouse—without answering medical questions if you enroll when you are first eligible.

- Employee—Up to \$500,000 in increments of \$10,000
- Spouse—Up to \$150,000 in increments of \$5,000
- Child(ren)—Up to \$10,000 in increments of \$1,000 from birth to age 26

If your currently covered, you will automatically be approved for the amount you are currently enrolled in. You can increase your current coverage by \$50,000 up to the GI of \$150,000 without medical questions. Spouses also have the ability to increase by \$10,000 up to the GI of \$50,000.

**Example:** Currently have \$75,000 you can increase coverage to \$125,000 without EOI.

Provided by etrailer at no cost to you.

## **Teammate Rates**

MEDICAL, DENTAL, VISION AND VOLUNTARY PLANS (BI-WEEKLY PAYROLL DEDUCTION)								
	MEDICAL	MEDICAL	MEDICAL	DENTAL VISION		VOLUNTARY		
TIER	\$1,000 PPO	\$3,000 PPO	\$5,000 HDHP		ACCIDENT	HOSPITAL INDEMNITY	CRITICAL ILLNESS	
Employee Only	\$186.01	\$85.88	\$32.51	\$15.78	\$2.55	\$3.21	\$7.17	
Employee + Spouse	\$624.97	\$480.93	\$318.54	\$31.23	\$5.32	\$5.15	\$21.04	Teammate rates are calculated in
Employee + Child(ren)	\$471.52	\$362.84	\$242.97	\$43.59	\$5.51	\$6.29	\$12.42	Paycom
Family	\$907.69	\$698.47	\$462.64	\$59.04	\$8.87	\$9.75	\$27.28	

LONG-TERM DISABILITY (BI-WEEKLY PAYROLL DEDUCTION)		SUPPLEMENTAL GROUP TERM LIFE, ACCIDENTAL DEATH AND DISMEMBERMENT, DEPENDENT LIFE RATES			
AGE	RATE PER \$100 OF MONTHLY BENEFIT	COVERAGE	AGE BANDS	PER PAYCHECK RATE PER \$1,000	
Under 25	\$0.33		Under 25	\$0.048	
25-29	\$0.33		25-29	\$0.048	
30-34	\$0.33	Supplemental Life/AD&D Employee	30-34	\$0.060	
25 20			35-39	\$0.072	
35-39	\$0.99		40-44	\$0.096	
40-44	\$1.35		45-49	\$0.156	
45-49	\$1.82		50-54	\$0.276	
50-54	\$2.48	and Spouse (based on	55-59	\$0.492	
55-59	\$2.98	employee age)	60-64	\$0.744	
60-64	\$2.73		65-69	\$1.212	
65-69	\$2.73		70-74	\$1.212	
			Over 74		
70-74	\$2.73		Supplemental	\$0.100	
Over 74	\$2.73		Dependent Child(ren)	<b>Φ</b> Ū. 100	

# DEATH TES

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# **Benefit Contacts**

BENEFIT	CARRIER	PHONE	WEBSITE
Medical	UMR/ UnitedHealthcare	800-826-9781	member.umr.com/tpa-ap-web/
Prescriptions*	SmithRx	844-454-5201	smithrx.com
Amazon Pharmacy		855-206-3605	amazon.com/smithrx
Walmart Home Delivery	SITIUTIKX	800-273-3455	walmart.com/cp/1042239
Mark Cuban Cost Plus Drugs			costplusdrugs.com/medications
Prescription Discounts*	Smith Rx Connect 360	844-385-7612	connect@smithrx.com
Health Savings Account (HSA)	HSA Bank	877-848-0241	hsabank.com
Employee Assistance Program (EAP)	Optum	855-205-9185	Liveandworkwell.com
Virtual Visits*	Teladoc Health	800-835-2362	TeladocHealth.com
Cancer Care Coordination*	CancerCare+	877-640-9610	cancercareprogram.com
Nutrition, Mental Health & Fitness*	HUSK	800-294-1500	marketplace.huskwellness.com/ paretohealth
Surgical Expenses*	KISx Card	877-GET-KISX	getkisx.com
COBRA Alternatives*	eHealth	888-744-0647	ehealthinsurance.com/pareto
Dental	Dringing	800-247-4695	www.principal.com
Vision	Principal	800-986-3343	www.principal.com
401(k) Retirement Plan	Empower	800-338-4015	empowermyretirement.com
Voluntary Accident, Critical Illness & Hospital Indemnity	Principal	800-245-1522	www.principal.com
Life AD&D and Disability	Reliance Matrix	800-351-7500	www.reliancematrix.com

\*For UnitedHealthcare/UMR members



This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/Benefits Department. BG\_etrailer\_MM\_06186

