



Employee Benefits Program

October 01, 2025 to September 30, 2026





NOTICE

*The following is strictly a summary of the benefits package provided to you by your employer, **Orland Unified School District.***

For a more detailed explanation of your benefits plan, please refer to the benefits booklet that has been provided by the carriers.

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Important Items to Remember

NEW HIRE WAITING PERIOD

New employees are eligible for district insurance benefits: The first of the month following their date of hire.

TERMINATION OF BENEFITS

Please contact the HR Manager for information on your benefit termination date.

DEPENDENT CHILDREN

Children under the age of 26 are eligible to be covered under the benefits. They will be taken off of the plan at the end of the month in which they turn 26

OPEN ENROLLMENT

You can make changes to your plans (enroll in coverage, waive coverage, add/drop dependents, etc..) during this time period each year. Open enrollment occurs 30 days prior to your plan renewal. All changes made during this time period will take effect on the renewal date

MAKING PLAN CHANGES DURING THE YEAR

If you've had a major life event (getting married, having a child, getting divorced, losing coverage, becoming eligible for Medicare, etc...) during the year, you're able to make coverage changes to your plan even though it's outside of the Open Enrollment window. Please turn in all paperwork within 30 days of your Qualifying Event to ensure it will be processed timely and any claims incurred will be paid. PLEASE NOTE: If adding a newborn baby to your plan, the baby's social security number will not be available right away. Please submit the paperwork without it, and provide it once it's available

COBRA

PLEASE NOTE: In the event your employment is terminated with the district , you will receive a packet in the mail giving you the opportunity to continue your Medical, Dental and Vision benefits for up to 18 months. This is called COBRA coverage. Your employer DOES NOT contribute to this coverage as they may when you are employed with them. You will be responsible for 102% of the actual cost of the insurance if you wish to continue with it.

STAY IN NETWORK

To obtain the best benefits, it's important to stay in the insurance carrier's network. Always check online or verify over the phone that a doctor or hospital is in network BEFORE your visit. Also, when having a procedure done in a hospital/facility, ask the hospital staff to make sure EVERY doctor/nurse/radiologist/anesthesiologist/etc... is in your network

EXPLANATION OF BENEFITS

Commonly referred to as an "EOB". The EOB is a very useful document as it explains how the insurance carrier processed your claim. It shows the billed charges from the provider, the network discount applied, and what the resulting Negotiated Rate is. (Provider Charge - Network Discount = Negotiated Rate) It also shows whether the service was applied to your deductible or paid as a co-pay. It is not a bill, but merely an explanation of how the insurance carrier paid your claim.

NEED A NEW ID CARD OR ANOTHER ID CARD FOR A DEPENDENT?

You can register for the insurance carrier's website where you can print out temporary ID cards and order new cards, or you can contact your HR Manager, Jeremy Benjamin. Email: jbenjamin@orlandusd.net or call: 530-865-1200 ext. 1003

HAVE QUESTIONS ABOUT AN INSURANCE CLAIM?

PLEASE HAVE COPIES OF YOUR EXPLANATION OF BENEFITS ALONG WITH A COPY OF YOUR BILL(S) READY & CONTACT: your HR Manager, Jeremy Benjamin. Email: jbenjamin@orlandusd.net or call: 530-865-1200 ext. 1003

Insurance Terms and Definitions

PPO (PREFERRED PROVIDER ORGANIZATION)

A PPO is a type of insurance network. In this type of network, you may choose to obtain care in or out of your network. If you choose to visit a "Preferred", or "In-Network", provider, your out of pocket expense will be significantly less than if you visit a provider outside your network. The reason for this is the In-Network provider agrees to accept set, contracted rates as payment in full for their services in return for being part of the insurance carrier's Preferred Provider network.

DEDUCTIBLE

The amount you pay before the insurance carrier starts sharing the expense of your medical care. Major medical expenses apply to the deductible like inpatient/outpatient surgeries, MRI's, CT Scans, etc...

EMBEDDED DEDUCTIBLE

This only applies to employees who have dependents enrolled on their plans. In an Embedded deductible, no member of the family unit can satisfy more than the single deductible during the deductible period. Even though the family is subject to the family deductible as a whole, no one person can satisfy more than the single deductible.

DEDUCTIBLE PERIOD

This is the 12 month time period in which all medical expenses that would apply to your deductible accumulate. Your deductible will reset after this period ends. This time period is important to note, because it does not always align with your plan year

DEDUCTIBLE CREDIT

If your Deductible Period and Plan Year are not the same with your new health insurance carrier, the new carrier will give you "credit" for the portion of the deductible you've satisfied with the old health insurance carrier during the most recent Deductible period. In order to obtain this credit, please supply your Plan Administrator with your most recent Explanation of Benefits (EOB) from the old carrier.

CO-INSURANCE

After you've reached your deductible for the year, the insurance carrier will split the balance of the major medical expense with you. They pay a percentage and you pay a percentage of your medical expense until you've reached your Out of Pocket Maximum

OUT OF POCKET MAXIMUM

This is the maximum amount you will pay for covered medical expenses during your deductible period

CO-PAYS

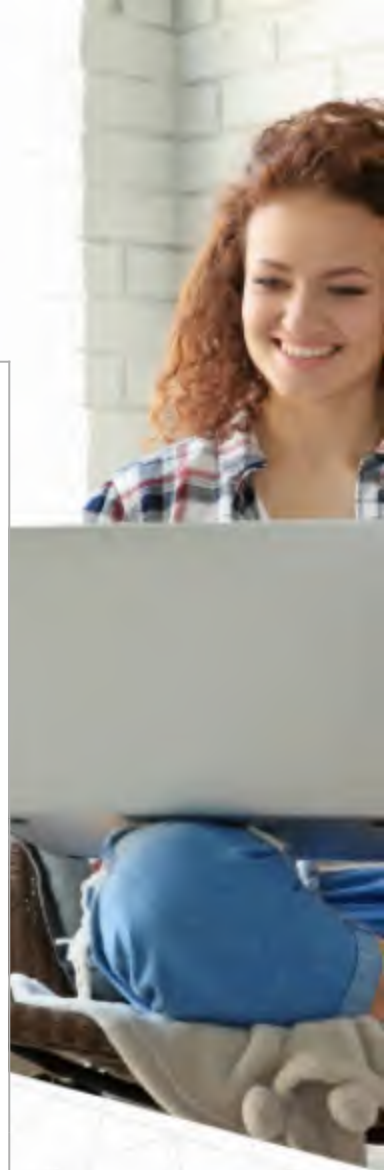
This is a set Dollar amount you pay when you receive medical care from a PCP, Specialist, Urgent Care, Emergency Room, or Pharmacy. It's called a CO-pay, because you pay the set dollar amount and your insurance carrier pays the rest of the actual charge from the doctor/facility. Co-pays DO NOT apply to the deductible

NEGOTIATED RATE (CONTRACTED RATE)

When a Provider (doctor, facility, pharmacy or hospital) contracts with an insurance carrier, they are considered In-Network. Part of the contract states that the provider will accept a lower payment (lower than what they normally charge) from the insurance carrier as payment in full. This lower payment is the Negotiated Rate.

EXPLANATION OF BENEFITS

Commonly referred to as an "EOB". The EOB is a very useful document as it explains how the insurance carrier processed your claim. It shows the billed charges from the provider, the network discount applied, and what the resulting Negotiated Rate is. (Provider Charge - Network Discount = Negotiated Rate) It also shows whether the service was applied to your deductible or paid as a co-pay. It is not a bill, but merely an explanation of how the insurance carrier paid your claim.





Medical

High Plan Option

Medical

Personify | High Plan

Plan Explanation

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

IN & OUT-OF-NETWORK		
DEDUCTIBLES - COMBINED	IN-NETWORK	OUT-OF-NETWORK
Individual	\$150	\$150
Family	\$150	\$150
COINSURANCE		
Individual	0%	30%
IN & OUT-OF-NETWORKS OUT-OF-POCKET LIMITS - NOT COMBINED		
Individual	\$3,000	\$15,000
Family	\$6,000	\$30,000
COMMONLY USED SERVICES		
Primary Care		
Physician/Specialist/Urgent Care (In Person & Virtual)	\$20/visit (deductible waived)	30% coinsurance
LiveHealth Online Telemedicine - Medical/Behavioral	\$20/session (deductible waived)	No coverage
Emergency Room	\$150 copay (after deductible)	30% coinsurance
Emergency Medical Transportation	No charge	No charge
PREVENTIVE CARE		
Preventive Services	No charge (deductible waived)	30% coinsurance
MAJOR MEDICAL EXPENSES		
Outpatient Surgery - Precertification may be required	0% (after deductible)	30% coinsurance
Inpatient Hospitalization / Surgery - Precertification required	0% (after deductible)	30% coinsurance
CT scan, PT scan, MRI - Precertification may be required	0% (after deductible)	30% coinsurance
Hospital Newborn Delivery	0% (after deductible)	30% coinsurance
MENTAL DISORDERS AND SUBSTANCE ABUSE		
Inpatient	0% (after deductible)	30% coinsurance
Outpatient	Office setting \$20 Copay/Other services 0% (deductible waived)	30% coinsurance

Disclaimer

Disclaimer: This is a partial listing of your covered benefits. For a complete accurate listing of covered benefits, limitations and exclusions, refer to your certificate of coverage.

Medical

Personify | High Plan Continued

Plan Explanation

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

OTHER SERVICES

Livongo Diabetes Management Program (Eligible Members Only)	0% (deductible does not apply)	No coverage
Acupuncture - \$250 Calendar Year Max	0%	30% coinsurance
Chiropractic Care - Limit 18 visits/\$4,000 CYM	0%	30% coinsurance
Diagnostic Testing, X-ray & Lab - includes Pre-Admission Testing	0%	30% coinsurance
Dialysis First 3 months after commencement of treatment/Thereafter	0% / then 80% of 125% of current Medicare Allowable	30% coinsurance/30% coinsurance
Durable Medical Equipment	0%	30% coinsurance
Foot Orthotics	0%	30% coinsurance
Home Health Care	0%	30% coinsurance
Allergy injections, serum and testing	0%	30% coinsurance
Infertility Benefits - Coverage for care, supplies and services related to the diagnosis of infertility only.	0%	30% coinsurance
Organ Transplant - Benefits are based on place and type of service	0%	30% coinsurance
Organ Transplant - Travel and Accommodations for donor/recipient	Plan pay maximum \$10,000 per transplant	Plan pay maximum \$10,000 per transplant
Physical Therapy	0%	30% coinsurance
Pregnancy - Benefits are based on place and type of service	0%	30% coinsurance
Prosthetics	0%	30% coinsurance
Prosthetic Bra - limited to two in 1st year following mastectomy, 1 every year after	0%	30% coinsurance
Skilled Nursing Facility - facility's semiprivate room	0%	30% coinsurance
Speech Therapy	0%	30% coinsurance
Surgical - Second Opinion	0%	30% coinsurance

Disclaimer

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Medical Pharmacy

Personify | High Plan Pharmacy

Plan Explanation

Tier 2, Tier 3, and Tier 4 drugs are subject to the Pharmacy deductible.

Amounts listed below are what YOU WILL PAY.

PHARMACY DEDUCTIBLE & OUT-OF-POCKET LIMIT		
	IN-NETWORK	OUT-OF-NETWORK
Prescription Deductible	\$100	Not covered
Individual Out-of-Pocket Limit	\$3,600	Not covered
Family Out-of-Pocket Limit	\$7,200	Not covered
COSTCO PHARMACY		
RETAIL - 30 DAY SUPPLY		
Generic (Tier 1)	\$5/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$40/prescription	Not covered
Non-Preferred (Tier 3)	\$80/prescription	Not covered
COSTCO PHARMACY		
MAIL ORDER - 90 DAY SUPPLY		
Generic (Tier 1)	\$10/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$50/prescription	Not covered
Non-Preferred (Tier 3)	\$100/prescription	Not covered
NON-COSTCO PHARMACIES		
RETAIL - 30 DAY Supply		
Generic (Tier 1)	\$12/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$50/prescription	Not covered
Non-Preferred (Tier 3)	\$100/prescription	Not covered
LUMINCERA		
Specialty (Tier 4)	\$100/prescription	
ALL SPECIALTY DRUGS	All specialty drugs must be obtained from the Access Guidance from Lumicera Health Services. This will eliminate copays when manufacturer rebates are available	
IMPORTANT PRESCRIPTION NOTICE!! PLEASE READ!!!		
MAINTAINANCE PRESCRIPTIONS	1 Fill leniency period then member MUST fill at Costco Mail Order OR Costco Retail. Initial 30-day supply may be obtained at a NON-COSTCO Pharmacy.	

Disclaimer

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Medical

Middle Plan Option

Medical

Personify | Middle Plan

Plan Explanation

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

IN & OUT-OF-NETWORK		
DEDUCTIBLES - COMBINED	IN-NETWORK	OUT-OF-NETWORK
Individual	\$500	\$500
Family	\$1,500	\$1,500
COINSURANCE		
Member's %	20%	30%
IN & OUT-OF-NETWORKS OUT-OF-POCKET LIMITS - NOT COMBINED		
Individual	\$3,000	\$15,000
Family	\$6,000	\$30,000
COMMONLY USED SERVICES		
Primary Care Physician/Specialist/Urgent Care (In Person & Virtual)	\$20/visit (deductible waived)	30% coinsurance
LiveHealth Online Telemedicine - Medical/Behavioral	\$20/session (deductible waived)	No coverage
Emergency Room	\$150 copay (after deductible)	30% coinsurance
Emergency Medical Transportation	20% coinsurance	30% coinsurance
PREVENTIVE CARE		
Preventive Services	No charge (deductible waived)	30% coinsurance
MAJOR MEDICAL EXPENSES		
Outpatient Surgery - Precertification may be required	20% coinsurance	30% coinsurance
Inpatient Hospitalization / Surgery - Precertification required	20% coinsurance	30% coinsurance
CT scan, PT scan, MRI - Precertification may be required	20% coinsurance	30% coinsurance
Hospital Newborn Delivery	20% coinsurance	30% coinsurance
MENTAL DISORDERS AND SUBSTANCE ABUSE		
Inpatient	20% coinsurance	30% coinsurance
Outpatient	Office setting \$20/visit (deductible waived) / Other services 20% coinsurance	30% coinsurance

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Medical

Personify | Middle Plan Continued

Plan Explanation

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

OTHER SERVICES

Livongo Diabetes Management Program (Eligible Members Only)	0% (deductible does not apply)	No coverage
Acupuncture - \$250 Calendar Year Max	20% coinsurance	30% coinsurance
Chiropractic Care - Limit 18 visits/\$4,000 CYM	20% coinsurance	30% coinsurance
Diagnostic Testing, X-ray & Lab - includes Pre-Admission Testing	20% coinsurance	30% coinsurance
Dialysis First 3 months after commencement of treatment/Thereafter	20% coinsurance/then 80% of 125% of current Medicare Allowable	30% coinsurance/30% coinsurance
Durable Medical Equipment	20% coinsurance	30% coinsurance
Foot Orthotics	20% coinsurance	30% coinsurance
Home Health Care	20% coinsurance	30% coinsurance
Allergy injections, serum and testing	20% coinsurance	30% coinsurance
Infertility Benefits - Coverage for care, supplies and services related to the diagnosis of infertility only.	20% coinsurance	30% coinsurance
Organ Transplant - Benefits are based on place and type of service	20% coinsurance	30% coinsurance
Organ Transplant - Travel and Accommodations for donor/recipient	20% coinsurance/Plan pay maximum \$10,000 per transplant	30% coinsurance/ Plan pay maximum \$10,000 per transplant
Physical Therapy	20% coinsurance	30% coinsurance
Pregnancy - Benefits are based on place and type of service	20% coinsurance	30% coinsurance
Prosthetics	20% coinsurance	30% coinsurance
Prosthetic Bra - limited to two in 1st year following mastectomy, 1 every year after	20% coinsurance	30% coinsurance
Skilled Nursing Facility - facility's semiprivate room	20% coinsurance	30% coinsurance
Speech Therapy	20% coinsurance	30% coinsurance
Surgical - Second Opinion	20% coinsurance	30% coinsurance

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Medical Pharmacy

Personify | Middle Plan Pharmacy

Plan Explanation

Tier 2, Tier 3, and Tier 4 drugs are subject to the Pharmacy deductible.

Amounts listed below are what YOU WILL PAY.

PHARMACY DEDUCTIBLE & OUT-OF-POCKET LIMIT		
	IN-NETWORK	OUT-OF-NETWORK
Prescription Deductible	\$100	Not covered
Individual Out-of-Pocket Limit	\$3,600	Not covered
Family Out-of-Pocket Limit	\$7,200	Not covered
COSTCO PHARMACY		
RETAIL - 30 DAY SUPPLY		
Generic (Tier 1)	\$5/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$40/prescription	Not covered
Non-Preferred (Tier 3)	\$80/prescription	Not covered
COSTCO PHARMACY		
MAIL ORDER - 90 DAY SUPPLY		
Generic (Tier 1)	\$10/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$50/prescription	Not covered
Non-Preferred (Tier 3)	\$100/prescription	Not covered
NON-COSTCO PHARMACIES		
RETAIL - 30 DAY SUPPLY		
Generic (Tier 1)	\$12/prescription (deductible waived)	Not covered
Brand Name (Tier 2)	\$50/prescription	Not covered
Non-Preferred (Tier 3)	\$100/prescription	Not covered
LUMICERA		
Specialty (Tier 4)	\$100/prescription	
ALL SPECIALTY DRUGS	All specialty drugs must be obtained from the Access Guidance from Lumicera Health Services. This will eliminate copays when manufacturer rebates are available	
IMPORTANT PRESCRIPTION NOTICE!! PLEASE READ!!!		
MAINTAINANCE PRESCRIPTIONS	1 Fill leniency period then member MUST fill at Costco Mail Order OR Costco Retail. Initial 30-day supply may be obtained at a NON-COSTCO Pharmacy.	

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Medical

Low Plan Option

Medical

Personify | Low - HDHP Plan

Plan Explanation

Both the Deductible and the Out-of-Pocket Maximum for the Family Plan are EMBEDDED effective October 1, 2025.

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

IN & OUT NETWORKS		
DEDUCTIBLE COMBINED	IN-NETWORK	OUT-OF-NETWORK
Individual	\$3,000	\$3,000
Family	\$3,300 individual/\$6,000 family	\$3,300 individual/\$6,000 family
COINSURANCE		
Member's %	20%	30%
IN & OUT-OF-NETWORKS OUT-OF-POCKET LIMITS - NOT COMBINED		
Individual	\$5,000	\$15,000
Family	\$10,000	\$30,000
COMMONLY USED SERVICES		
Primary Care Physician/ Specialist/ Urgent Care (In Person & Virtual)	20% coinsurance	30% coinsurance
LiveHealth Online Telemedicine - Medical/Behavioral	\$20/session	No Coverage
Emergency Room - copayment waived if admitted	20% coinsurance	30% coinsurance
Emergency Medical Transportation	20% coinsurance	30% coinsurance
PREVENTIVE CARE		
Preventive Services	No charge (deductible waived)	30% coinsurance
MAJOR MEDICAL EXPENSES		
Outpatient Surgery - Precertification may be required	20% coinsurance	30% coinsurance
Inpatient Hospitalization / Surgery - Precertification required	20% coinsurance	30% coinsurance
CT scan, PT scan, MRI - Precertification may be required	20% coinsurance	30% coinsurance
Hospital Newborn Delivery	20% coinsurance	30% coinsurance
MENTAL DISORDERS AND SUBSTANCE ABUSE		
Inpatient	20% coinsurance	30% coinsurance
Outpatient	20% coinsurance	30% coinsurance

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Medical

Personify | Low HDHP Plan Continued

Plan Explanation

Both the Deductible and the Out-of-Pocket Maximum for the Family Plan are EMBEDDED effective October 1, 2025.

All medical services are subject to the medical deductible unless otherwise noted.

Amounts listed below are what YOU WILL PAY.

OTHER SERVICES

Livongo Diabetes Management Program (Eligible Members Only)	0% (deductible does not apply)	No coverage
Acupuncture - \$250 Calendar Year Max	20% coinsurance	30% coinsurance
Chiropractic Care - Limit 18 visits/\$4,000 CYM	20% coinsurance	30% coinsurance
Diagnostic Testing, X-ray & Lab - includes Pre-Admission Testing	20% coinsurance	30% coinsurance
Dialysis First 3 months after commencement of treatment/Thereafter	20% coinsurance/then 80% of 125% of current Medicare Allowable	30% coinsurance/30% coinsurance
Durable Medical Equipment	20% coinsurance	30% coinsurance
Foot Orthotics	20% coinsurance	30% coinsurance
Home Health Care	20% coinsurance	30% coinsurance
Allergy injections, serum and testing	20% coinsurance	30% coinsurance
Infertility Benefits - Coverage for care, supplies and services related to the diagnosis of infertility only.	20% coinsurance	30% coinsurance
Organ Transplant - Benefits are based on place and type of service	20% coinsurance	30% coinsurance
Organ Transplant - Travel and Accommodations for donor/recipient	20% coinsurance/Plan pay maximum \$10,000 per transplant	30% coinsurance/ Plan pay maximum \$10,000 per transplant
Physical Therapy	20% coinsurance	30% coinsurance
Pregnancy - Benefits are based on place and type of service	20% coinsurance	30% coinsurance
Prosthetics	20% coinsurance	30% coinsurance
Prosthetic Bra - limited to two in 1st year following mastectomy, 1 every year after	20% coinsurance	30% coinsurance
Skilled Nursing Facility - facility's semiprivate room	20% coinsurance	30% coinsurance
Speech Therapy	20% coinsurance	30% coinsurance
Surgical - Second Opinion	20% coinsurance	30% coinsurance

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Medical Pharmacy

Personify | Low HDHP Plan Pharmacy

Plan Explanation

All Prescriptions are Subject to Medical Deductible

Amounts listed below are what YOU WILL PAY.

PHARMACY DEDUCTIBLE	IN-NETWORK	OUT-OF-NETWORK
Prescription Deductible	Subject to Medical Deductible	Not covered
COSTCO PHARMACY		
RETAIL - 30 DAY SUPPLY		
Generic (Tier 1)	20% coinsurance	Not covered
Brand Name (Tier 2)	20% coinsurance	Not covered
Non-Preferred (Tier 3)	20% coinsurance	Not covered
COSTCO PHARMACY		
MAIL ORDER - 90 DAY SUPPLY		
Generic (Tier 1)	20% coinsurance	Not covered
Brand Name (Tier 2)	20% coinsurance	Not covered
Non-Preferred (Tier 3)	20% coinsurance	Not covered
NON-COSTCO PHARMACIES		
RETAIL - 30 DAY SUPPLY		
Generic (Tier 1)	20% coinsurance	Not covered
Brand Name (Tier 2)	20% coinsurance	Not covered
Non-Preferred (Tier 3)	20% coinsurance	Not covered
LUMICERA		
Specialty (Tier 4)	20% coinsurance	
ALL SPECIALTY DRUGS	All specialty drugs must be obtained from the Access Guidance from Lumicera Health Services. This will eliminate copays when manufacturer rebates are available	
IMPORTANT PRESCRIPTION NOTICE!! PLEASE READ!!!		
MAINTAINANCE PRESCRIPTIONS	1 Fill leniency period then member MUST fill at Costco Mail Order OR Costco Retail. Initial 30-day supply may be obtained at a NON-COSTCO Pharmacy.	

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LiveHealth Online

Medical & Behavioral Health

Have a video visit with a doctor or therapist at home

Using LiveHealth Online, you can have a private video visit on your smartphone, tablet or computer.



If you need care for a health issue, or support if you're feeling anxious or having trouble coping on your own, LiveHealth Online is ready to help. You can stay home and have a video visit with a board-certified doctor or licensed therapist on your smartphone, tablet or computer.

By using LiveHealth Online, you can

- **See a board-certified doctor in a few minutes with no appointment.** Doctors are available 24/7 to assess your condition and, if it's needed, they can send a prescription to your local pharmacy.¹ When your own doctor isn't available, use LiveHealth Online if you have pinkeye, a cold, the flu, a fever, allergies, a sinus infection or another common health condition.
- **Make an appointment with a licensed therapist in four days or less.**² You can have a video visit with a therapist from home, at work or on the go — evenings and weekend appointments are available too. Appointments can be scheduled online or over the phone at **1-888-548-3432** from 7 a.m. to 7 p.m., seven days a week. You can get help for anxiety, depression, grief, panic attacks and more.

What will a visit cost?

Your Anthem plan includes benefits for video visits using Live Health Online, so you'll just pay your share of the costs — usually \$20 copay for medical doctor visits, and a 45-minute therapy session usually costs the same as an office therapy visit.

For all customer support:

1-888.548.3432

Sign up for LiveHealth Online today – it's quick and easy

Go to livehealthonline.com or download the app and register on your phone or tablet.



LiveHealth
ONLINE

LiveHealth Online is the trade name of Health Management Corporation, a separate company providing telehealth services on behalf of Anthem Blue Cross.

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¹ Prescription availability is defined by physician judgment and state regulations. Visit the home page of livehealthonline.com to view the service map by state.

² Appointments subject to availability of a therapist.

Online counseling is not appropriate for all kinds of problems. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please call 1-800-784-2433 (National Suicide Prevention Lifeline) or 911 and ask for help. If your issue is an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services.

If you're a retiree or have coverage that complements your Medicare benefits, your employer sponsored health plan may not include coverage for online visits using LiveHealth Online. Check your plan documents for details. You can still use LiveHealth Online, but you may have to pay the full cost of a visit. Online visits using LiveHealth Online may not be a covered benefit for HRA and HIA+ members.



LiveHealth Online

What you need to know about video visits with a doctor, 24/7

What is LiveHealth Online?

LiveHealth Online lets you have a video visit with a board-certified doctor using your smartphone, tablet or computer with a webcam. No appointments, no driving and no waiting at an urgent care center. Doctors are available 24/7 to assess your condition and, if it's needed, they can send a prescription to your local pharmacy.*

Use LiveHealth Online if you have pinkeye, a cold, the flu, a fever, rashes, infections, allergies or another common health condition. It's faster, easier and more convenient than a visit to an urgent care center.

Why would I use LiveHealth Online instead of going to visit my doctor in person?

LiveHealth Online isn't meant to replace your primary care doctor. It's a convenient option for care when your doctor isn't available. LiveHealth Online connects you with a doctor in minutes. Plus, you can get a LiveHealth Online visit summary from the *MyHealth* tab at livehealthonline.com to print, email or fax to your primary care doctor.



LiveHealth Online should not be used for emergency care. If you have a medical emergency, call 911 right away.

When is LiveHealth Online available?

Doctors are available 24/7, 365 days a year.

How does LiveHealth Online work?

When you need to see a doctor, simply go to livehealthonline.com or use the LiveHealth Online mobile app. Pick the state you're in and answer a few questions.

Setting up an account allows you to securely store your personal and health information. Plus, you can easily connect with doctors in the future, share your health history and set up online visits at times that fit your schedule.

Once connected, you can talk with the doctor as if you were in a private exam room.

**Medical and Behavioral Health are covered
\$20 copay**

How much does it cost to use LiveHealth Online?

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs \$20 copay for a doctor visit.

Will I be charged more if I use LiveHealth Online on weekends, holidays or at night?

No, the cost is the same.

How do I pay for a LiveHealth Online visit?

You can use PayPal, American Express, Visa, MasterCard and Discover cards to pay for an online doctor visit. Keep in mind that charges for prescriptions aren't included in the cost of your visit.

Is there a LiveHealth Online app that I can download to my smartphone?

Yes, search for "LiveHealth Online" in the App Store® or on Google Play™. To learn what mobile devices are supported and get instructions, go to livehealthonline.com and select **Frequently asked questions** under the *How it works* tab.

What type of computer do I need to use LiveHealth Online?

You'll need high-speed Internet access, a webcam or built-in camera with audio. To learn what computer hardware and software you need, go to livehealthonline.com and select **Frequently asked questions** under the *How it works* tab.

Do doctors have access to my health information?

It depends on whether or not you set up an account. With a LiveHealth Online account, you can allow doctors to access and review your health information from past visits. Also, to help keep track of your own health information, you can record it at livehealthonline.com. Once you sign in, go to the *MyHealth* tab and then select **Health Record**.

How long is a LiveHealth Online visit?

A typical LiveHealth Online visit with a doctor lasts about 10 minutes.



Can I get online care from a doctor if I'm traveling or in another state?

Yes, just select the state you're in under **My Location** on livehealthonline.com or with the app, and you'll only see doctors licensed to treat you in that state. Don't forget to change the state back when you get home.

What if I still have questions about using LiveHealth Online?

Send an email to customersupport@livehealthonline.com or call toll free at **1-888-548-3432**.



* Prescription availability is defined by physician judgment and state regulations. Visit the home page of livehealthonline.com to view the service map by state.

LiveHealth Online is the trade name of Health Management Corporation, a separate company providing telehealth services on behalf of Anthem.

If you're a retiree or have coverage that complements your Medicare benefits, your employer sponsored health plan may not include coverage for online visits using LiveHealth Online. Check your plan documents for details. You can still use LiveHealth Online, but you may have to pay the full cost of a visit. Online visits using LiveHealth Online may not be a covered benefit for HRA and HIA+ members.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross name and symbol are registered marks of the Blue Cross Association.



1 (888) 548-3432

How to get started:

Rather than waiting to sign up when you're not feeling well, register today so you're ready for a visit when you need one.

To sign up, visit <https://livehealthonline.com/> or download the free LiveHealth Online app to your mobile device.

[Log in](#)

[Sign up](#)



What are my care options?

- Select from a variety of medical services for yourself and your loved ones.
- Consult with board-certified doctors, therapists, psychiatrists, and others.
- View a doctor's availability and experience before your visit.

[Create Account](#)

Already have an account? [Log in](#)

Sign Up

Please provide your email address to receive a link to sign up.

Email

Submit

Already have an account? [Log In](#)



Email Sent!

OK

Didn't receive an email? [Resend](#)

We're excited to invite you to join LiveHealth Online. Signing up is quick and easy. Please accept the invitation below to begin your registration.

[Accept Invitation](#)

Thank you,
LiveHealth Online

You're receiving this email because you have an account with LiveHealth Online. If you need further assistance, please contact us at 1-888-LiveHealth (1-888-548-3432).



Keep Your Account Safe

Add another authentication method.



Google Authenticator or
similar



Phone



About You

Before we ask about your symptoms, we'd like to know more about you.

All fields are required unless listed as optional.

About Me

Legal first name




To schedule a visit or request on-demand care, tap the button below.

Set Up New Visit

Insurance

Adding your health insurance information may reduce the cost of your visit and allow you access to additional care options and specialty services. [Learn more.](#)

Insurance company
Anthem Blue Cross (CA) 

Member ID

I am the primary subscriber.

YES ☒

Continue

Who is this visit for?

We'll match them with the right type of clinician.

Me 

Continue

Where will you be located for this visit?

How we use your location

Address



Continue

Care Category

What type of care do you need today?



Urgent Care

Board-certified doctors are available 24/7 to assess your symptoms and provide a treatment plan, including prescriptions to your pharmacy, if needed.



Mental Health

Schedule a video visit with a licensed therapist or psychologist for talk therapy, or a board-certified psychiatrist for medication management.



Dermatology

A board-certified dermatologist can diagnosis without an appointment using an uploaded photo of hair, skin, or nail concerns. Get a treatment plan, including prescriptions sent to your pharmacy, if needed.

Step 1 of 8

Add details for the visit

Is there anything you'd like to share with the provider? Your response will not be reviewed until the start of the visit.

If you're experiencing a medical emergency, dial 911 immediately.

Add details for the provider

Add a photo (optional)

If you have any medical records, labs, or related forms please upload here.



Tap here to upload files

Continue



Anthem

Sydney Health App



Say hi to Sydney

Anthem's new app is simple, smart — and all about you

With Sydney, you can find everything you need to know about your Anthem benefits — personalized and all in one place. Sydney makes it easier to get things done, so you can spend more time focused on your health.

Get started with Sydney
Download the app today!



Simple

Ready for you to use quickly, easily, seamlessly — with one-click access to benefits info, Member Services, wellness resources and more.

Smart

Sydney acts like a personal health guide, answering your questions and connecting you to the right resources at the right time. And you can use the chatbot to get answers quickly.

Personal

Get alerts, reminders and tips directly from Sydney. Get doctor suggestions based on your needs. The more you use it, the more Sydney can help you stay healthy and save money.

With just one click, you can:

- Find care and check costs
- Check all benefits
- See claims
- Get answers even faster with our chatbot
- View and use digital ID cards

Already using one of our apps?

It's easy to make the switch. Simply download the Sydney app and log in with your Anthem username and password.



Receive virtual care and support 24/7 with our Sydney Health app

Now you can connect more easily to the care you need through our **SydneySM Health** mobile app. Have a video visit with a doctor on your mobile device or computer with a camera, 24/7.

Visit with a doctor for common health concerns

Doctors are available anytime, with no appointments or long wait times. They can help you with these types of conditions:

- COVID-19
- Flu
- Cold and fever
- Minor rashes
- Sore throat
- Headaches

During your video visit, the doctor will assess your condition, provide a treatment plan, and send prescriptions to the pharmacy of your choice, if needed.¹



What people say about virtual care visits²

89%

said the doctor they saw was professional and helpful

92%

thought the doctor understood their concerns

92%

were able to book a virtual visit sooner than an in-person visit

How to download our Sydney Health app:

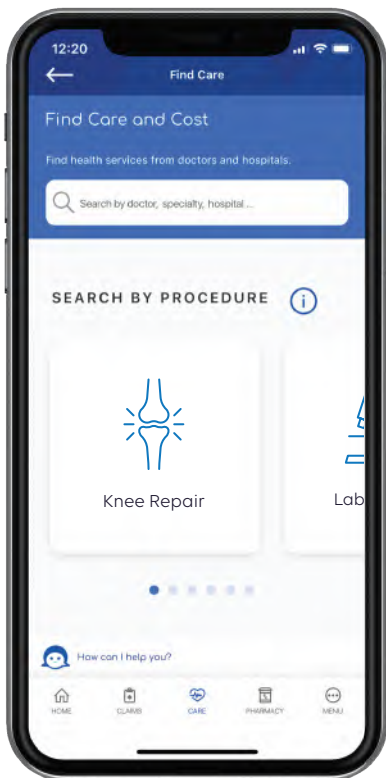


Scan the QR code with your phone's camera.



Find high-quality doctors nearby and compare costs

Choosing a doctor you trust is important — and choosing one in your plan’s network helps lower your costs. The **Find Care** tool on the SydneySM Health app and [anthem.com/ca](https://www.anthem.com/ca) can help you do both.



Helping you find the right care

The **Find Care** tool brings together details about doctors in your plan’s network. You can customize your search by name, location, specialty, or procedure. You also can compare information such as costs, languages spoken, and office hours.* To make sure a care provider is in your plan’s network, view the doctor or facility profile.

To help you find care providers who would be a good fit for you, we sort your search results and provide the top three matches using **Personalized Match**. There are more options available below your top three, and you can always re-sort these search results by distance or name.

After viewing your initial search results, you can filter your results by selecting the relevant boxes on the left or browsing by list or map views.



Search by name, specialty, or procedure.



Customize and refine results.



Compare doctors and costs.



Download the Sydney Health app

Scan the QR code to download the Sydney Health app. Choose **Find Care and Cost** from the *Care* menu.

¿Prefieres obtener información en español? Tienes opciones. Si tu teléfono móvil ya está configurado en español, la aplicación Sydney Health también estará en español. Si no es así, selecciona el **menú** dentro de la aplicación Sydney Health y elige el **idioma de la aplicación**. También puedes visitar [anthem.com/es/ca](https://www.anthem.com/es/ca).

* On-screen experiences may vary by user due to personalization experiences, benefit packages, and ongoing user-experience improvements.

Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

In addition to using a telehealth service, you can receive in-person or virtual care from your own doctor or another healthcare provider in your plan’s network. If you receive care from a doctor or healthcare provider not in your plan’s network, your share of the costs may be higher. You may also receive a bill for any charges not covered by your health plan.

Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

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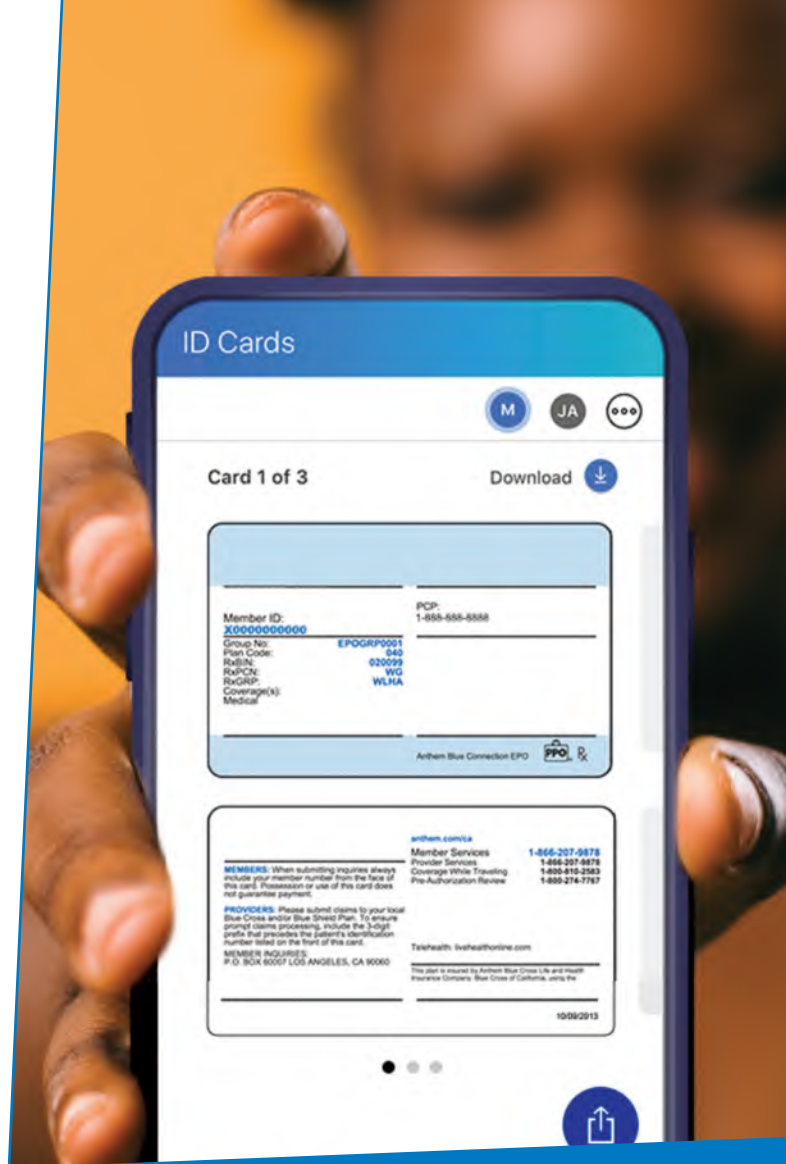
Choose digital for your member ID card

To make the most of your health plan benefits, think about choosing a digital ID card. It works just like a printed ID card, but it's more convenient to use when you need care.

A digital ID card makes it easier to access your benefits

- No need to wait for your printed card to come in the mail. Your digital ID card is available sooner.
- Using it is simple:
 - Print a copy anytime.
 - Email or fax it right from your computer or mobile device.
 - Share right from your phone with family members, doctors, and healthcare professionals.
 - Enlarge the view on your screen to read the details more easily.

Here's a tip: Download the card to your smartphone, so you'll always have it there even without a phone signal.



Sign up for your digital ID card today — in just a few steps:

1. Log in to the **Sydney Health** mobile app or **anthem.com/ca**.
2. Go to **Profile** and choose **Mobile ID Cards** under *Communication Preferences*.
3. Select **On**, and you will not receive a card by mail.

Be sure your profile includes the best email address to reach you so we can send you important plan and ID card updates.

If you need help, use the chat feature to connect with us or call the Member Services number on your ID card. If you need a printed copy, log in to **anthem.com/ca** to print it or request us to send you one.



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Pharmacy

Costco Mail Order



Experience the Benefits of Costco Prescription Mail Order Service

An easy and cost-effective way to get your drugs delivered to your doorstep.

With Costco's mail order service, you can get up to a 90-day supply of your maintenance drugs. Plus, you may save money too.



What are the benefits?

- You don't need to have a membership to use Costco Pharmacy
- 24/7 access to refills and updates
- **Quick turnaround time:** Costco ships within five business days after they get the prescription.
- **Same copay:** Pay the same price for a 90-day fill through Costco mail order or at your local Costco warehouse
- **Convenient Delivery:** Prescriptions are mailed directly to your preferred location

Your health is important. Taking preventive medications as directed by your health care provider can protect you from serious illness and high healthcare costs in the future.

Get Started!

It's easy to begin using Costco Mail Order Pharmacy.

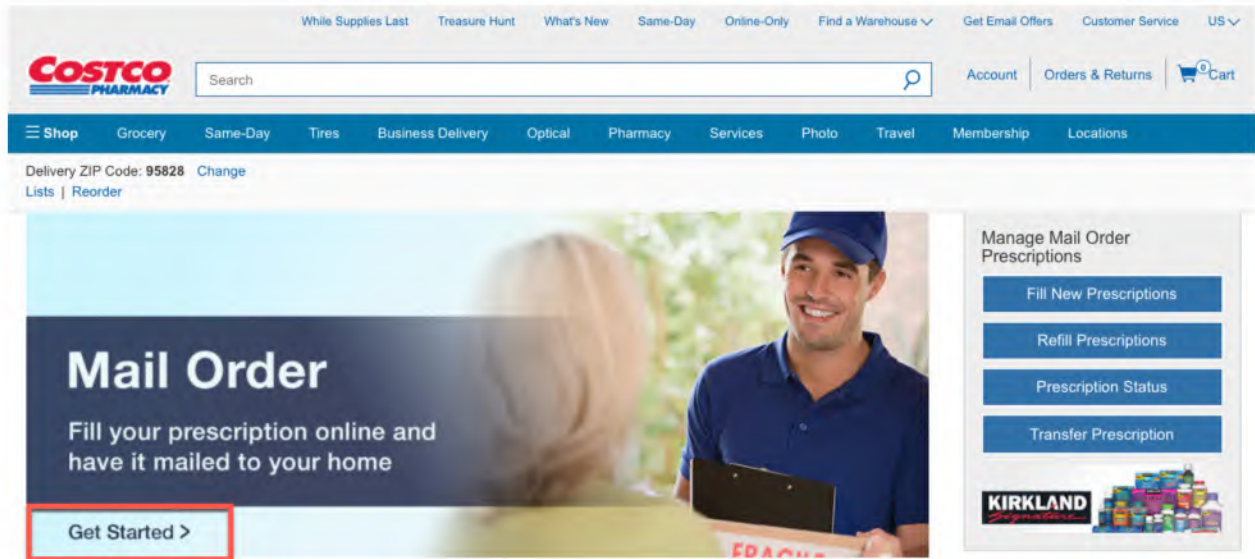


- Scan the QR code or go to pharmacy.costco.com to set up an online account. Once your account is registered, just move your prescriptions to Costco.
- Call Costco Mail Order at 800-607-6861. They can help you set up your prescriptions for mail order.

* This QR code may identify your IP/device information. However, your personal and health information is strictly confidential and will not be captured.
Mail Order: Costco Experience the Benefits of Mail Order Pharmacy Service.

Creating a Mail Order Account

1. Click Get Started from [Costco Mail Order Page](#) or [costco.com/pharmacy](#)



2. Click the Create Account button

Sign In

A screenshot of the Costco 'Sign In' form. It features two input fields: 'Email Address' and 'Password'. Below the password field is a 'Forgot Password?' link. There is a checkbox for 'Remember Me' with a 'See Details' link. A blue 'Sign In' button is positioned below these fields. At the bottom, a red box highlights the 'New to Costco?' section, which contains a grey 'Create Account' button.

3. Enter **required Information** and Click **Create Account**

Create Account

The screenshot shows the 'Create Account' form on the Costco website. It includes input fields for 'Email Address', 'Password', 'Confirm Password', and 'Membership Number (optional)'. There are eye icons for password visibility and a help icon for the membership number. A checkbox is checked for receiving promotional emails. A link 'Where can I find my membership number?' is provided. A disclaimer states that by creating an account, the user agrees to the Costco.com terms and conditions. A blue 'Create Account' button is at the bottom, and a link for existing users to 'Sign In' is below it.

Email Address

Password

Confirm Password

Membership Number (optional)

[Where can I find my membership number?](#)

☒ Yes, I would like to receive emails about special promotions and new product information from Costco. Costco will not rent or sell your email address.

By creating an account you agree to Costco.com [terms and conditions](#) of use.

Create Account

Already have an account? [Sign In](#)

4. Click the **Complete Patient Profile** button

The screenshot shows the 'Get Started with Mail Order' page on the Costco Pharmacy website. The page has a navigation bar with links like 'Shop All Departments', 'Grocery', 'Business Delivery', 'Optical', 'Pharmacy', 'Services', 'Photo', 'Travel', 'Membership', and 'Locations'. A search bar is at the top right. The main content area is titled 'Get Started with Mail Order' and includes instructions on how to get started, including completing a patient profile. A red box highlights the 'Complete Patient Profile' button. Below the button, there are sections for 'Ordering Options', 'New Prescriptions', and 'Transfer Prescriptions'.

Costco PHARMACY

Search Medications

My Account Orders & Returns Cart

Shop All Departments Grocery Business Delivery Optical Pharmacy Services Photo Travel Membership Locations

Delivery ZIP Code: 98027 Change

Lists | Reorder

Welcome, New User Mail Order Prescription Status In the last 48 hours: 0 Prescriptions Processing | 0 Prescriptions Shipping

Home / Get Started with Mail Order

Mail Order

Refill Prescriptions

Transfer Prescriptions

New Prescriptions

Prescription Status

Patient Profile

Drug Directory

Customer Service

Get Started with Mail Order

It's easy to get started with Costco Pharmacy Mail Order. First you'll complete your patient profile. Then you can order a new prescription.

Please be advised that some insurance plans are NOT contracted with Costco mail order which will prevent the claim from processing. To prevent any delay, please confirm your insurance is listed under the plan name in your patient profile and/or contact your insurance company for further instructions.

If you do not see your insurance plan on the dropdown menu, you may

1. Fill the prescription using your insurance at the local Costco pharmacy. We are committed to providing great service during these challenging times.
2. Fill the prescription at Costco Mail Order and NOT use your insurance.

Complete Patient Profile

Ordering Options

New Prescriptions
You can mail us your written prescription, or have your doctor contact us with your prescription details.

Transfer Prescriptions
If you have previously filled a prescription at a Costco Warehouse Pharmacy, you can transfer it to your Mail Order account for immediate refill.

5. Fill out **Account & Patient Information** and Click the **Next** button

Shop All Departments

Grocery

Business Delivery

Optical

Pharmacy

Services

Photo

Travel

Membership

Locations

Delivery ZIP Code: 98027

Change

Lists | Reorder

Welcome, New User

Mail Order Prescription Status

In the last 48 hours: 0 Prescriptions Processing | 0 Prescriptions Shipping

Home / Patient Profile

Mail Order

Refill Prescriptions

Transfer Prescriptions

New Prescriptions

Prescription Status

Patient Profile

Drug Directory

Customer Service

Patient Profile

Profile > Prescription Info > Confirm

New Patient: Please complete the Account & Patient Info, Insurance, Payment Method, Addresses, and Privacy tabs. Select "Complete Registration" when finished.

Account & Patient Info

Insurance

Payment Method

Addresses

Privacy

Patient Information

Information on this account pertains to the patient listed below. Please review and make changes as needed.

Patient First Name

M.I.

Patient Last Name

Date of Birth

Month

Day

Year

Gender

Male

Female

Account Information

Email Address Edit

Password Edit

Costco Membership Number

Add Membership Number

Next

6. Enter your Insurance Information

Patient Profile

Profile > Prescription Info > Confirm

New Patient: Please complete the Account & Patient Info, Insurance, Payment Method, Addresses, and Privacy tabs. Select "Complete Registration" when finished.

36

Account & Patient Info	Insurance	Payment Method	Addresses	Privacy
------------------------	------------------	----------------	-----------	---------

[Need Help?](#)

Would you like us to bill a prescription insurance plan?

☒ Yes ☐ No

Select plan name

Navitus Health Solutions

Prescription Insurance Card

Member ID#

Rx Group #

Policyholder Name

Relationship to Cardholder

Cardholder

Policyholder Date Of Birth

Plan Name

Navitus Health Solutions

Insurance Phone

(866) 333-2757

Save Changes

7. Enter your payment information

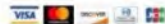
Account & Patient Info	Insurance	Payment Method	Addresses	Privacy
------------------------	-----------	-----------------------	-----------	---------

[Need Help?](#)

Payment Method (optional)

Only one online payment method may be stored at a time.

Card Number



Expiration Date

Cardholder Name

Add Card

Previous

Next

8. Add a Shipping and Billing address and select Next

My Address Book

Your Address Book is a list of frequently-used billing and shipping addresses. To add a new address, select "Add New Address". To edit, delete, or make one of the listed addresses your default billing or shipping address, select the appropriate link below. Your prescription will be shipped to your Default Shipping Address, which is identified with a check mark.

Shipping

Billing

+

Add New Address

Previous

Next

9. Read and Acknowledge the Privacy Notice

You authorize Costco to use and disclose personal health information as stated below and in Costco's Health Centers Notice of Privacy Practices.

1

Costco Health Centers Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Effective Date: September 15, 2015

General Information About This Notice

What is protected?

Use of Disclosures of PHI

2

☐ I have reviewed the Costco Health Center Notice of Privacy Practices effective September 15, 2015 (the "Notice") and understand that all my medical information will be used by Costco in accordance with the Notice.

3

Complete Profile

Previous



Diabetes Management Program

Livongo



Modern diabetes management, at no cost to you



Livongo helps you stay on top of your health. It comes with an advanced meter, unlimited strips and lancets, and on-demand coaching.

Program benefits

- An advanced blood glucose meter
- Unlimited strips and lancets
- Personalized insights
- One-on-one coaching
- Guidance on healthy habits

Get started

Text **"GO HEALTHCOMP"** to 85240 to learn more and join

You can also join by visiting Join.Livongo.com/HEALTHCOMP/register or call **800-945-4355** and use registration code: **HEALTHCOMP**

Las comunicaciones del programa Livongo están disponibles en español. Al inscribirse, podrá configurar el idioma que prefiera para las comunicaciones provenientes del medidor y del programa. Para inscribirse en español, llame al (800) 945-4355 o visite bienvenido.livongo.com/HEALTHCOMP
The program is offered at no cost to members and covered dependents with diabetes with coverage through the health plan.



Eat a **rainbow** of foods for better health

Nature offers vegetables and fruits in an incredible array of colors. There are the vivid reds of berries and beets, the brilliant yellows of squashes and citrus fruits and the deep purples of eggplant, cauliflower and cabbage. Finding your favorite color should be a breeze.

With the bold colors comes important phytonutrients that give plants their rich colors, distinctive tastes and aromas.¹

Phytonutrients strengthen a plant's immune system. They protect the plant from threats in their natural environment, such as disease and excessive sun.

When we eat plants, their phytonutrients also protect us. Research suggests that eating fruits and vegetables helps our immune systems protect us from many chronic diseases, including cardiovascular disease and certain types of cancers.¹

Every day,² adults should eat



cups of vegetables



cups of fruit

Rainbow nutrients

The more color you eat, the better. Each hue offers different nutrients and benefits, so be generous when assembling the rainbow on your plate. And leave the skins on. In foods like apples, peaches, potatoes and eggplants, the skin contains beneficial nutrients and fiber.

Green

Rich in beta-carotene and lutein, these boost eye and heart health and help protect against cancer.¹

Try spinach, kale, broccoli, brussels sprouts, collard greens, lettuce and artichokes.

Orange and yellow

Beta-carotene supports your immune system, vision, skin and bone health.¹

Try carrots, sweet potatoes, pumpkin, winter squash and apricots.

Blue and purple

Containing powerful anthocyanins, they help keep your blood vessels healthy.¹

Try blueberries, blackberries, plums and radishes.



Pink and red

Lycopene, found in crimson-hued delights, fights gene-damaging free radicals, protecting against prostate cancer and promoting heart health.¹

Try strawberries, tomatoes, pink grapefruit, cherries, red onions and red bell peppers.

Brown and white

This diverse group boasts anthoxanthins, a powerful antioxidant.¹

Try onions, garlic, ginger, parsnips, turnips, cauliflower and mushrooms.

Improve your microbiome

Eating a wide variety of vegetables and fruits helps keep your microbiome healthy. This collection of bacteria and other microorganisms that live in your intestines influences your body's physiology, metabolism, immunity and nutrition.³

Fruits and vegetables, especially the high-fiber ones, feed this organ and keep it healthy.

Fermented foods give your body probiotics and work to maintain the balance of the microflora in your digestive system. Consider naturally fermented foods like pickles, sauerkraut and kimchi as supercharged veggies and add them to your daily diet. Other probiotic foods with live active cultures include yogurt, kefir, kombucha, tempeh, miso and some cheeses.⁴

**Taste the rainbow in the following recipes.
Your body will thank you.**



Spicy pickled vegetables

Makes 8 servings | Prep: 15 min | Total: 3-5 days

These spicy pickles are inspired by escabeche, a cooking technique from the Mediterranean and Latin America.³ This quick fermentation method leaves the vegetables crispy. Feel free to substitute in your favorite veggies.

Ingredients

- 2 cups filtered water
- 1 Tbsp sea salt
- 2 Tbsp apple cider vinegar
- 1 jalapeño or a few small hot chilies, sliced
- 1 large carrot cut into ¼ inch rounds
- 2 cups chopped cauliflower or small cauliflower florets
- 3 small stalks celery, cut into 1-inch sticks
- 1 bay leaf
- 1 cabbage leaf, rinsed

Preparation

Warm the water. Stir in sea salt until it dissolves completely. Set aside to cool. Add the vinegar just before using. This brine can be made ahead of time and stored in a sealed glass jar on the counter to use when ready to pickle.

Set a quart-size canning jar in the sink and fill it with boiling water to sterilize. Empty the jar and tightly pack the vegetables and bay leaf inside. Leave one to two inches from the top of the jar. Pour the brine over the vegetables, stopping one inch from the top of the jar. Wedge the cabbage leaf over the top of the vegetables and tuck it around the edges to hold the vegetables beneath the liquid.

Set the jar on the counter and cover it with a fermentation lid. (Alternatively, use a standard lid. Loosen it a bit each day for the first few days, then every other day, to allow gasses to escape.) Let pickle for three to five days, depending on the indoor temperature. Check the taste after a couple of days using clean utensils. Vegetables will pickle faster in warmer rooms. Make sure the vegetables stay packed beneath the level of the liquid. Add salted water (two teaspoons sea salt dissolved in one cup warm water) as needed.

When the vegetables are pickled to your liking, seal the jar with a regular lid and refrigerate. Vegetables will continue to slowly pickle in the refrigerator. Taste for saltiness before serving and, if desired, rinse gently to remove excess salt. They will keep for about one month.

Nutrition

Serving size: ⅓ of container



Calories: 12 | total fat: 0 g | saturated fat: 0 g | sodium: 707 mg | cholesterol: 0 mg
total carbs: 2 g | fiber: 1 g | sugars: 1 g | protein: 0 g | potassium: 135 mg

Korean avocado kimchi salad cups

Makes 8 servings | Prep: 15 min

This handheld salad offers the double benefit of fermented vegetables and good fats in one delicious bite.⁵ If you're looking for more protein, add shredded chicken, salmon, tofu cubes or edamame.

Ingredients

- 2 avocados (diced)
- 2 cups kimchi, prepared
- 1 large head butter (bibb) lettuce, leaves separated
- 1 large carrot (grated)
- 1 cup red cabbage (shredded)
- 2 green onions (sliced)
- 1 Tbsp toasted sesame seeds
- 1 lemon (quartered)



Preparation

In a medium bowl, mix the diced avocado, kimchi, carrot and cabbage. To serve, top butter lettuce leaves with avocado-kimchi mixture. Top with chopped green onions and a sprinkle of toasted sesame seeds. Serve with lemon wedge.

Nutrition

Serving size: ½ cup



Calories: 65 | total fat: 4 g | saturated fat: 0 g | sodium: 200 mg | cholesterol: 0 mg
total carbs: 5 g | fiber: 3 g | sugars: 1 g | protein: 1 g | potassium: 292 mg

Learn how Livongo can help support you on your wellness journey. To sign up or learn more, go to Go.Livongo.com.

¹<https://fruitsandveggies.org/stories/what-are-phytochemicals/>

²<https://www.heart.org/en/healthy-living/healthy-eating/add-color/fruits-and-vegetables-serving-sizes>

³<https://www.health.harvard.edu/blog/fermented-foods-for-better-gut-health-2018051613841>

⁴<https://www.health.harvard.edu/nutrition/prebiotics-understanding-their-role-in-gut-health>

⁵<https://recipes.heart.org/en/recipes/hcm-korean-avocado-kimchi-salad-cups>

Dental

Sun Life Financial
\$3,000 Annual Maximum

CALENDAR YEAR MAXIMUM	IN-NETWORK	OUT-OF-NETWORK
Type II, III (Basic and Major Services)	\$3,000 per person	\$3,000 per person
Type IV Ortho Service	\$1,000 annual child and adult	\$1,000 annual child and adult

Type I Preventive Services do not count toward your Calendar Year maximum.

Services performed by in-network and out-of-network providers share the same deductible application and benefit maximums.

CALENDAR YEAR DEDUCTIBLE

PROCEDURE	IN-NETWORK	OUT-OF-NETWORK
Type I Preventive Services	N/A	N/A
Type II, III (Basic and Major Services)	\$0 individual	\$0 individual
Type IV Ortho Services	N/A	N/A

THE PLAN PAYS THE FOLLOWING PERCENTAGE FOR PROCEDURES

PROCEDURE	IN-NETWORK	OUT-OF-NETWORK
Type I Preventive Services	100%	100%
Type II Basic Services	100%	100%
Type III Major Services	50%	50%
Type IV Ortho Services	50%	50%

SERVICES

Type I Preventive Dental Services, including:

- Oral evaluations – 2 in any calendar year
- Routine dental cleanings – 2 in any calendar year
- Fluoride treatment – 2 in a calendar year.
- Sealants – no more than 1 per tooth in any 36 month period, only for permanent molar teeth. *Only for children under age 14*
- Space maintainers – *only for children under age 19*
- Bitewing x-rays – 2 in any calendar year
- Intraoral complete series x-rays – 1 in any 60 month period
- Genetic test for susceptibility to oral diseases
- Biopsy (including brush biopsy)
- Dental implants – subject to 5 year replacement limit

Type II Basic Dental Services, including:

- New fillings, including posterior composites
- Simple extractions, incision and drainage
- Surgical extractions of erupted teeth, impacted teeth, or exposed root
- Endodontics (includes root canal therapy) – 1 per tooth in any 24 month period
- General anesthesia/IV sedation – medically required
- Minor gum disease (non-surgical periodontics)
- Scaling and root planing – 1 in any 24 month period per area
- Periodontal maintenance – 2 in any calendar year

- Localized delivery of antimicrobial agents
- Stainless steel crowns – *only for children under age 19*
- Inlay, onlay, and crown restorations – 1 per tooth in any 5 year period
- Major gum disease (surgical periodontics)

Type III Major Dental Services, including:

- Dentures and bridges – subject to 5 year replacement limit

Type IV Ortho Services, including:

- No orthodontic treatment age limitation

Waiting Periods

For a complete description of services and waiting periods, please review your plan document. If you were covered under your employer's prior plan the wait will be waived for any type of service covered under the prior plan and this plan.

- No waiting period for preventive, basic or major services
- No waiting period for orthodontic services

Frequently asked questions

How does a PPO work?

PPO stands for Participating Provider Organization. With a dental PPO plan, dental providers agree to participate in a dental network by offering discounted fees on most dental procedures. When you visit a provider in the network, you could see lower out-of-pocket costs because providers in the network agree to these pre-negotiated discounted fees on eligible claims.

How do I find a dentist?

Simply visit www.sunlife.com/findadentist. Follow the prompts to find a dentist in your area who participates in the PPO network. You do not need to select a dentist in advance. The PPO network for your plan is the Sun Life Dental Network® with 130,000+ unique dentists³.

Do I have to choose a dentist in the PPO network?

No. You can visit any licensed dentist for services. However, you could see lower out-of-pocket costs when you visit a dentist in the network.

Are my dependents eligible for coverage?

Yes. Your plan offers coverage for your spouse⁴ and dependent children. An eligible child is defined as a child to age 26.⁵

What if I have already started dental work, like a root canal or braces, that requires several visits?

Your coverage with us may handle these procedures differently than your prior plan. To ensure a smooth transition for work in progress, call our dental claims experts before your next visit at 800-442-7742.

Do I have to file the claim?

Many dentists will file claims for you. If a dentist will not file your claim, simply ask your dentist to complete a standard American Dental Association (ADA) claim form and mail it to:

Sun Life
P.O. Box 2940
Clinton, IA 52733-2940

How can I get more information about my coverage or find my dental ID card?

After the effective date of your coverage, you can view benefit information online at your convenience through your Sun Life account. To create an account go to www.sunlife.com/account and register. You can also access this information from our mobile app—*Benefit Tools*, which is available for Apple and Android devices. Or you can call Sun Life's Dental Customer Service at 800-442-7742. You can also call any time, day or night, to access our automated system and get answers to

common questions when it's convenient for you.

What value added benefits does my plan include?

Your plan includes our Lifetime of Smiles® program, with benefits many people prefer, such as tooth-colored fillings for back teeth and brush biopsies for the early detection of oral cancer.

Your plan also includes Preventive Max Waiver® which allows covered dental expenses for preventive services to not apply to the annual maximum.

CONSIDER A PRE-DETERMINATION OF BENEFITS

They allow us to review your provider's treatment plan to let you know before treatment is started how much of the work should be covered by the plan, and how much you may need to cover. We recommend them for any dental treatment expected to exceed \$500.

1. American Academy of Periodontology <https://www.perio.org/consumer/gum-disease-and-other-diseases> (accessed 07/21).

2. American Academy of Periodontology <https://www.perio.org/newsroom/periodontal-disease-fact-sheet> (accessed 07/21).

3. Zelis Network Analytics data as of January 2022 and based on unique dentist count. Sun Life's dental networks include its affiliate, Dental Health Alliance, L.L.C.® (DHA), and dentists under access arrangements with other dental networks. Nationwide counts are state level totals.

4. If permitted by the Employer's employee benefit plan and not prohibited by state law, the term "spouse" in this benefit includes any individual who is either recognized as a spouse, a registered domestic partner, or a partner in a civil union, or otherwise accorded the same rights as a spouse.

5. Please see your employer for more specific information.

Read the *Important information* section for more details including limitations and exclusions

DENTAL

Tips for using your dental plan

Your dentist office will want to know that you are a Sun Life plan member at your next visit. Simply share a copy of your new dental ID card with them. You can access a copy of your dental ID card through your **Sun Life account** or via our mobile app, **Benefit Tools**. Quick references to register and access these tools are included on this page. Please note that printed dental ID cards are not provided and/or mailed to your home.

Check out our short video for step-by-step instructions



on downloading your dental ID card at sunlife.com/dentalIDCard.

Android download



Apple download



Online services

Your Sun Life account gives you access to everything you need to know about your dental plan, including your dental ID card, benefit schedule and more. To complete your registration, you will need your Social Security number or member ID, and date of birth. Register today at sunlife.com/account.

Benefit Tools mobile app

Benefit Tools takes your access to information, including your dental ID card and find a dentist, on the go! Available for Apple and Android devices, find the app at sunlife.com/mobileapps.

Find a dentist

If your plan leverages one of our networks, you can easily search for a dentist online or through our mobile app Benefit Tools. Your network is listed on the back of your dental ID card. To find a participating dentist online, visit sunlife.com/findadentist.

Is your dentist not in our network?

Nominate your dentist at sunlife.com/findadentist!



Dental Health Center

Get the most from your dental plan by visiting our Dental Health Center. Learn more about dental treatments, average costs, and you can even pose questions through ask-a-dentist. Take control of your dental health at sunlife.com/dentalhealthcenter.

We look forward to providing you and your family with dental benefits and great service!

This dental plan does not provide coverage for pediatric oral health services that satisfies the requirements for "minimum essential coverage" as defined by the Patient Protection and Affordable Care Act. ("PPACA").

Administrative Services Only services for self-funded dental plans are administered by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states except New York. In New York, they are administered by Sun Life and Health Insurance Company (U.S.) (Lansing, MI).

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GDFL-6866-ASO-b (10/22)



Vision


EyeMed Frequency:
12/12/24
(Exam/Lenses/Frames)

Orland Unified School

(Insight CA Network)



SUMMARY OF BENEFITS

VISION CARE SERVICES	 IN-NETWORK MEMBER COST AT PLUS PROVIDERS	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSEMENT
EXAM SERVICES			
Exam	\$0 copay	\$0 copay	Up to \$40
Retinal Imaging	Up to \$39	Up to \$39	Not covered
CONTACT LENS FIT AND FOLLOW-UP			
Fit and Follow-up - Standard	Up to \$40	Up to \$40	Not covered
Fit and Follow-up - Premium	10% off retail price	10% off retail price	Not covered
FRAME			
Frame - Retail	\$0 copay; 20% off balance over \$230 allowance	\$0 copay; 20% off balance over \$180 allowance	Up to \$126
Frame - Wholesale*	Not covered	\$0 copay; 100% of balance over \$126 allowance	Up to \$126
LENSES			
Single Vision	\$0 copay	\$0 copay	Up to \$30
Bifocal	\$0 copay	\$0 copay	Up to \$50
Trifocal	\$0 copay	\$0 copay	Up to \$70
Lenticular	\$0 copay	\$0 copay	Up to \$70
Progressive - Standard	\$0 copay	\$0 copay	Up to \$50
Progressive - Premium	\$10 - 110 copay	\$10 - 110 copay	Up to \$50
LENS OPTIONS			
Anti Reflective Coating - Standard	\$45	\$45	Not covered
Anti Reflective Coating - Premium Tier 1 - 2	\$57 - 68	\$57 - 68	Not covered
Anti Reflective Coating - Premium Tier 3	20% off retail price	20% off retail price	Not covered
Photochromic - Non-Glass	\$0 copay	\$0 copay	Up to \$38
Polycarbonate - Standard	\$40	\$40	Not covered
Polycarbonate - Standard < 19 years of age	\$0 copay	\$0 copay	Up to \$20
Scratch Coating - Standard Plastic	\$15	\$15	Not covered
Tint - Solid and Gradient	\$15	\$15	Not covered
UV Treatment	\$15	\$15	Not covered
All Other Lens Options	20% off retail price	20% off retail price	Not covered
CONTACT LENSES			
Contacts - Conventional	\$0 copay; 15% off balance over \$180 allowance	\$0 copay; 15% off balance over \$180 allowance	Up to \$126
Contacts - Disposable	\$0 copay; 100% of balance over \$180 allowance	\$0 copay; 100% of balance over \$180 allowance	Up to \$126
Contacts - Medically Necessary	\$0 copay	\$0 copay	Up to \$300
OTHER			
Hearing Care from Amplifon Network	Up to 64% off hearing aids; call 1.877.203.0675	Up to 64% off hearing aids; call 1.877.203.0675	Not covered
LASIK or PRK from U.S. Laser Network	15% off retail or 5% off promo price; call 1.800.988.4221	15% off retail or 5% off promo price; call 1.800.988.4221	Not covered
FREQUENCY			
	ALLOWED FREQUENCY - ADULTS	ALLOWED FREQUENCY - KIDS	
Exam	Once every 12 months from the date of service	Once every 12 months from the date of service	
Lenses	Once every 12 months from the date of service	Once every 12 months from the date of service	
Frame	Once every 24 months from the date of service	Once every 24 months from the date of service	
Contact Lenses	Once every 12 months from the date of service	Once every 12 months from the date of service	

(Plan allows the member to receive either contacts and frame, or frame and lens services.)

*Available at wholesale providers, such as Costco Optical; discounts do not apply. View the provider locator to find wholesale providers. Fees charged by a Provider for services other than a covered benefit and any local, state or Federal taxes must be paid in full by the Insured Person to the Provider. Such fees, taxes or materials are not covered under the Policy. Allowances provide no remaining balance for future use within the same Benefit Frequency. Some provisions, benefits, exclusions or limitations listed herein may vary by state. No benefits will be paid for services or materials connected with or charges arising from: medical or surgical treatment, services or supplies for the treatment of the eye, eyes or supporting structures; Refraction, when not provided as part of a Comprehensive Eye Examination; services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; any Vision Examination or any corrective Vision Materials required by a Policyholder as a condition of employment; safety eyewear; solutions, cleaning products or frame cases; non-prescription sunglasses; plano (non-prescription) lenses; plano (non-prescription) contact lenses; two pair of glasses in lieu of bifocals; electronic vision devices; services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order; lost or broken lenses, frames, glasses, or contact lenses that are replaced before the next Benefit Frequency when Vision Materials would next become available. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer. Member receives a 20% discount on items not covered by the plan at In-Network locations. Discount does not apply to Provider's professional services or contact lenses. Plan discounts cannot be combined with any other discounts or promotional offers. In certain states members may be required to pay the full retail rate and not the negotiated discount rate with certain participating providers. Please see the online provider locator to determine which participating providers have agreed to the discounted rate. Discounts on vision materials may not be applicable to certain manufacturers' products. The Plan reserves the right to make changes to the products on each tier and to the member out-of-pocket costs. Fixed tier pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Services and amounts listed above are subject to change at any time. Discounts are not insured benefits. Underwritten by Fidelity Security Life Insurance Company of Kansas City, Missouri, Policy number VC-19, form number M-9083, or Policy number VC-146, form number M-9184, in New York underwritten by Fidelity Security Life Insurance Company of New York, Policy Number VCN-1, form number MN-1, or Policy Number VCN-19, form number MN-28.

Savings plus convenience plus choice

PLUS Providers add another
layer of coverage

\$230

Frame - Retail allowance

Staying in-network helps you save money on eye exams, frames and lenses. Visiting a PLUS Provider is designed to help you save even more.

And since PLUS Providers are already in our network, the additional perks are built right into your vision benefits. No promo codes, no coupons, no paperwork. The same vision benefits, plus a little more savings.

eye
Med



The choice is yours

Find plenty of in-network eye doctors – including PLUS Providers – on our Provider Locator. Just look for the PLUS.

Need extra assistance? Contact us at 866.804.0982 or visit eyemed.com.

INDEPENDENT
PROVIDER
NETWORK



LENSCRAFTERS®

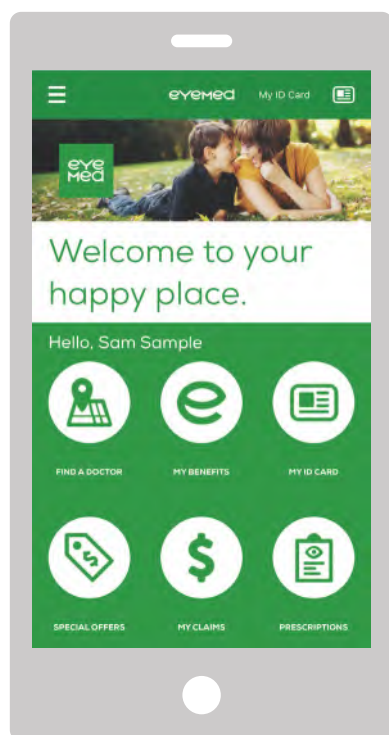
PEARLE
VISION

OPTICAL

On the go? Now your benefits are, too.

NEW LOOK. FRESH FEATURES. SAME GREAT BENEFITS, WHENEVER YOU NEED THEM.

Our revamped EyeMed Mobile App brings you fresh new features to help you get the most from your EyeMed experience – anytime, anywhere.



The features you love plus new features to explore

- See benefits and eligibility at-a-glance
- Track your claims
- Grab special offers to help you save more
- Find an in-network eye doctor with the Provider Locator
- View your ID card at-a-shake
- Set upcoming exam and contact lens replacement reminders
- Get answers to your FAQs
- Access interactive vision guides to help you see and live your best
- Use Facial recognition, Touch ID and Apple Wallet for Apple users

USING THE OLD APP?

Make sure you download the newest version of the app to keep up with our latest features, as older versions will no longer be supported. Download the new app, enter your existing login info (no need to re-register) and you're all set.

Check out the App Store or Google Play to download the new app

This information is available broadly and is not plan or state specific. Offers are not valid in the state of Texas.

**INDEPENDENT
PROVIDER
NETWORK**



LENSCRAFTERS™

**PEARLE
VISION**

OPTICAL™



EXPERIENCE MORE: ONLINE ACCESS

HOW TO: enjoy your own eye site

MEMBER WEB ON EYEMED.COM

Your vision plan is like a friendly smile – it doesn't do any good if it's hidden away. Member Web at eyemed.com is here, there and everywhere. It's your vision plan control center. A place to manage the details of every visit and every claim. Instantly. Easily. Smile-ly.

START MANAGING YOUR BENEFITS IN A FEW EASY STEPS:

1. Visit eyemed.com and click on Member Login.
2. If you're a new user, click on Create an Account.
3. Register using your member ID or the last four digits of your social security number (You'll get an email asking to confirm your account.).*
4. Finish setting up your new account with your email address and a password (To keep it secure, we list some password "musts.").
5. Come back anytime to change your password, email address and billing preferences (It's all under Manage Profiles.).

LOG IN 24/7 TO:

- View your benefit details
- Confirm eligibility
- Check claim status
- Print replacement ID cards
- Locate a provider
- Schedule an appointment online**
- View health and wellness information
- Get special offers



SEE THE GOOD STUFF

Register on eyemed.com or grab the member app (App Store or Google Play) now

* Depends on how your benefit administrator entered you into the system.

** Most, but not all, network providers offer this.

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INDEPENDENT
PROVIDER
NETWORK



LENSCRAFTERS®

PEARLE
EST. 1961
VISION

OPTICAL

PDF-1801-M-134

Find your best fit



These eye doctors are nearby – which is right for you? Check the Provider Locator on eyemed.com or the EyeMed Members App (App Store or Google Play) for a more advanced search. And keep an eye out for PLUS Providers, who can help you boost your benefits.

Locations and PLUS Providers near 95963 for the Insight CA network

WILLOWS EYE CARE
1070 W WOOD ST
STE B
WILLOWS, CA 95988
530-934-3373

DOUGLAS R MYERS OD INC
119 YELLOWSTONE DR
CHICO, CA 95973
530-891-1146

CHICO EYE CENTER
605 W EAST AVE
CHICO, CA 95926
530-895-1727

NORTH VALLEY EYE CARE
114 MISSION RANCH BLVD
STE 50
CHICO, CA 95926
530-891-1900

FAMILY EYE CARE OPTOMETRY
2565 CEANOTHUS AVE
STE 155
CHICO, CA 95973
530-899-3939

WALMART VISION CENTER
2044 FOREST AVE
CHICO, CA 95928
530-899-1078

CHICO VISION CARE OPT GROUP
2109 FOREST AVE
STE 50
CHICO, CA 95928
530-342-9644

BRIAN OWEN HAUGEN MD
530 MAIN ST
RED BLUFF, CA 96080
530-529-1750

RIDGE EYE CARE
5889 CLARK RD
PARADISE, CA 95969
530-877-2020

CHICO EYE CENTER
6585 CLARK RD
STE 340
PARADISE, CA 95969
530-872-3519

WALMART VISION CENTER
465 CAL OAK RD
OROVILLE, CA 95965
530-353-6079

OROVILLE VISION OPTOMETRIC
GRP
1550 MYERS ST
STE A
OROVILLE, CA 95965
530-533-6604

TABLE MOUNTAIN EYE CARE
2585 ORO DAM BLVD E
OROVILLE, CA 95966
530-891-1900

MICHAEL K FARRAR OD
3650 MAIN ST
STE C
COTTONWOOD, CA 96022
530-347-7347

WALMART VISION CENTER
5000 RHONDA RD
ANDERSON, CA 96007
530-378-2446

Eye exams offered by DPA/DTA or DEA-certified optometrists and ophthalmologists. All certifications are verified by an NCOA-accredited credentials verification organization.



LENSCRAFTERS



Let's answer some FAQs



A LOOK AT YOUR BENEFITS

How do I find out what my EyeMed benefits cover?

If you're thinking about EyeMed, you'll want to connect with your employer to learn about the benefit options. Already a member? The easiest way to find your benefit information is to create a member account on eyemed.com/member or grab the EyeMed App (App Store or Google Play).

Does EyeMed offer any added discounts?

Absolutely. Your benefits already help you save on your copay and allowance, but EyeMed also brings you special offers and discounts¹—easily accessible when you log into Member Web. And for an extra level of savings, check out some of our in-network providers (called PLUS Providers) who offer a \$0 exam copay and extra frame allowance. Find them with our Provider Locator on Member Web.

Can I use my EyeMed benefits online?


Instantly apply your in-network benefits at checkout with free shipping, free returns and no paperwork at these participating providers: lenscrafters.com, targetoptical.com, ray-ban.com, glasses.com and contactsdirect.com. The best part? All of these online options are PLUS Providers, too.

MEMBER HOW-TO TIPS

How do I find an eye doctor in my network?

The Provider Locator on Member Web and in the EyeMed App has thousands of in-network eye doctors to choose from. Filter your search to find providers near you with the brands, hours and services you want. And keep an eye out for PLUS Providers since they offer even more savings.

What is a PLUS Provider?

Certain in-network providers offer an extra level of savings built right into your vision care—like an enhanced frame allowance. Providers with the  are PLUS Providers—look for this symbol when choosing a provider.

How do I use my benefits?

At EyeMed, we're all about easy. Just choose an in-network eye doctor from our Provider Locator, schedule your visit and go in for care or eyewear. You don't even need your ID card—just give them your name and birthday. When you stay in-network, we'll handle all the paperwork.



How do I get on-the-go access?

The EyeMed App can do almost everything Member Web can. Find a provider (including PLUS Providers), set an appointment,* review your benefits, check claims, estimate costs, find special offers, show your ID card — even store your vision prescriptions and set exam reminders. Download it through the App Store or Google Play.

How do I submit a claim?

When you see one of our in-network eye doctors, there's no need to submit a claim — we'll handle the paperwork on our end. If you go out-of-network, then you'll need to file an out-of-network claim using our out-of-network claim form. Log into your Member Web account to find one.

How do I get an ID card replacement or extra cards?

If you lose your card or need extras for your family, log into Member Web at eyemed.com/member to print a replacement, or log into your account on the app to access your ID card digitally. Here's a tip: you don't even need the card when you visit your eye doctor.

VISION AND YOUR HEALTH

I don't wear glasses and can see fine.

Do I still need an eye exam?

Getting an eye exam isn't just about needing glasses. It's also about your health. An eye exam can detect eye health problems like glaucoma or cataracts, but it can also help identify signs of some diseases, like high blood pressure, diabetes and high cholesterol.² Choose an in-network eye doctor to save on an eye exam—and choose a PLUS Provider to save even more.

How often should I get an eye exam?

Vision changes can happen so slowly, you may not even notice them. Annual eye exams are the norm unless your doctor suggests more frequent checks. We suggest making it part of your regular preventive care routine.

At what age should my child first visit the eye doctor?

The American Academy of Ophthalmology recommends having a newborn's eyes checked for basic indicators of eye health and a second screening between 6 and 12 months for healthy eye alignment and movement. The doctor may check for nearsightedness, farsightedness, astigmatism, amblyopia (or "lazy eye"), proper eye movement and eye alignment, and how the eye reacts to light and darkness. They also recommend an exam between the ages of 3 and 5, and every year after that.³

My child gets a vision screening at school, so there's no need for an eye exam, right?

A vision screening does not take the place of an eye exam. School screenings generally check for color blindness and your child's ability to see far away. A comprehensive exam will evaluate the entire structure of the eye.



Thinking of becoming a member? Learn more at eyemed.com/enroll

Looking to keep your vision healthy? Learn how at eyesiteonwellness.com

Already a member? Manage benefits at eyemed.com/member

*Not available at all locations

¹Discounts are not insurance. Available at participating in-network providers. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Additional limitations and exclusions may apply. Log into your member account for full details.

²Mukamal R; "20 Surprising Health Problems an Eye Exam Can Catch"; American Academy of Ophthalmology; aao.org; April 29, 2022.

³Gudgel D; "Eye Screening for children"; American Academy of Ophthalmology; aao.org; March 23, 2021.

This information is available broadly and is not plan or state specific. Offers are not valid in the state of Texas.

Employer Paid Life/AD&D

Unum
Benefit Amount: \$15,000



Term Life with Accidental Death & Dismemberment (AD&D) Insurance



How does it work?

You keep coverage for a set period of time, or “term.” If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more. AD&D Insurance is also available, which can pay a benefit if you survive an accident but have certain serious injuries. It can pay an additional amount if you die from a covered accident.

Why Choose Unum?

Your employer is offering you this coverage at no cost to you.

What else is included?

Waiver of premium

Your cost may be waived if you are totally disabled for a period of time.

Portability

You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.

Who can get Term Life coverage?

If you are actively at work at least 30 hours per week, you can receive coverage for:

You:	You can receive a benefit amount of \$15,000. You can get up to \$15,000 with no medical underwriting.
------	--

Who can get Accidental Death & Dismemberment (AD&D) coverage?

You:	You can receive an AD&D benefit amount of \$15,000.
------	---

No medical underwriting is required for AD&D coverage.

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage.

Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths that are caused by suicide occurring within 24 months after the effective date of coverage or the date that increases to existing coverage becomes effective. This exclusion standardly applies to all medically written amounts and contributory amounts that are funded by the employee including shared funding plans.

AD&D specific exclusions and limitations:

Accidental death and dismemberment benefits will not be paid for losses caused by, contributed to by, or resulting from:

- Disease of the body; diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane or self-inflicted injury while insane
- War, declared or undeclared, or any act of war
- Active participation in a riot
- Committing or attempting to commit a crime under state or federal law
- The voluntary use of any prescription or non-prescription drug, poison, fume or other chemical substance unless used according to the prescription or direction of your doctor. This exclusion does not apply to you if the chemical substance is ethanol.
- Intoxication – "Being intoxicated" means your blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.

Delayed effective date of coverage

Employee: Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Age reduction

Coverage amounts for Life and AD&D Insurance for you will reduce to 65% of the original amount when you reach age 65, and will reduce to 42% of the original amount when you reach age 70. Coverage may not be increased after a reduction.

Termination of coverage

Your coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

Life Planning Financial & Legal Resources services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

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Voluntary Life/AD&D

Unum
Gaurantee Issue: \$130,000



Term Life and Accidental Death & Dismemberment (AD&D) Insurance



How does it work?

You choose the amount of coverage that's right for you, and you keep coverage for a set period of time, or "term." If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more.

AD&D Insurance is also available, which pays a benefit if you survive an accident but have certain serious injuries. It pays an additional amount if you die from a covered accident.

Why is this coverage so valuable?

If you buy a minimum of \$10,000 of coverage now, you can increase your coverage in the future up to \$130,000 to meet your growing needs. There would be no medical underwriting to qualify for coverage.

What else is included?

A 'Living' Benefit — If you are diagnosed with a terminal illness with less than 12 months to live, you can request 100% of your life insurance benefit (up to \$250,000) while you are still living. This amount will be taken out of the death benefit, and may be taxable. **These benefit payments may adversely affect the recipient's eligibility for Medicaid or other government benefits or entitlements, and may be taxable.** Recipients should consult their tax attorney or advisor before utilizing living benefit payments.

Waiver of premium — Your cost may be waived if you are totally disabled for a period of time.

Portability — You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.

Who can get Term Life coverage?

If you are actively at work at least 30 hours per week, you may apply for coverage for:

You:	Choose from \$10,000 to \$500,000 in \$10,000 increments, up to 5 times your earnings. You can get up to \$130,000. This is the amount of coverage you can qualify for with no medical underwriting.
Your spouse:	Get up to \$500,000 of coverage in \$5,000 increments. Spouse coverage cannot exceed 100% of the coverage amount you purchase for yourself. Your spouse can get up to \$30,000 with no medical underwriting, if eligible (see delayed effective date).
Your children:	Get up to \$10,000 of coverage in \$2,000 increments if eligible (see delayed effective date). One policy covers all of your children until their 26th birthday. The maximum benefit for children live birth to 6 months is \$1,000.

Who can get Accidental Death & Dismemberment (AD&D) coverage?

You:	Get up to \$500,000 of AD&D coverage for yourself in \$10,000 increments to a maximum of 5 times your earnings.
Your spouse:	Get up to \$500,000 of AD&D coverage for your spouse in \$5,000 increments, if eligible (see delayed effective date).
Your children:	Get up to \$10,000 of coverage for your children in \$2,000 increments if eligible (see delayed effective date).

No medical underwriting is required for AD&D coverage.

How much coverage can I get?

Calculate your costs

1. Enter the coverage amount you want.
2. Divide by the amount shown.
3. Multiply by the rate.
Use the rate table (at right) to find the rate based on age.
(Choose the age you will be when your coverage becomes effective. See your plan administrator for your plan effective date. **To determine your spouse rate, choose the age the spouse will be when coverage becomes effective.** See your plan administrator for your plan effective date.)
4. Enter your cost.

	1	2	3	4
Employee	\$____,000	÷ \$1,000 = \$____	X \$____	= \$____
Spouse	\$____,000	÷ \$1,000 = \$____	X \$____	= \$____
Child	\$____,000	÷ \$1,000 = \$____	X \$____	= \$____
Total cost				

Employee monthly rate		Spouse monthly rate	Child monthly rate
Age	Per \$1,000 of coverage	Per \$1,000 of coverage	\$0.480 per \$1,000 of coverage
	Cost	Cost	
15-24	\$0.048	\$0.048	
25-29	\$0.060	\$0.060	
30-34	\$0.072	\$0.072	
35-39	\$0.108	\$0.108	
40-44	\$0.120	\$0.120	
45-49	\$0.180	\$0.180	
50-54	\$0.276	\$0.276	
55-59	\$0.516	\$0.516	
60-64	\$0.720	\$0.720	
65-69	\$1.344	\$1.344	
70-74	\$2.472	\$2.472	
75+	\$2.472	\$2.472	

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1. Enter the AD&D coverage amount you want.
2. Divide by the amount shown.
3. Multiply by the rate.
Use the AD&D rate table (at right) to find the rate.
4. Enter your cost.

AD&D				
	1	2	3	4
Employee	\$____,000	÷ \$1,000 = \$____	X \$0.024	= \$____
Spouse	\$____,000	÷ \$1,000 = \$____	X \$0.024	= \$____
Child	\$____,000	÷ \$1,000 = \$____	X \$0.048	= \$____
Total cost				

AD&D monthly rates		
	Coverage amount	Rate
Employee	per \$1,000 of coverage	\$0.024
Spouse	per \$1,000 of coverage	\$0.024
Child	per \$1,000 of coverage	\$0.048

Billed amount may vary slightly.

If you apply for coverage above the guaranteed issue amount, you may be subject to medical underwriting which may affect your ability to get the larger coverage amount. In order to purchase coverage for your dependents, you must buy coverage for yourself. Coverage amounts cannot exceed 100% of your coverage amounts.

Exclusions and limitations

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

An unmarried handicapped dependent child who becomes handicapped prior to the child's attainment age of 26 may be eligible for benefits. Please see your plan administrator for details on eligibility.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage. Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths caused by suicide occurring within 24 months after the effective date of coverage. The same applies for increased or additional benefits.

AD&D specific exclusions and limitations:

Accidental death and dismemberment benefits will not be paid for losses caused by, contributed to by, or resulting from:

- Disease of the body; diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane or self-inflicted injury while insane
- War, declared or undeclared, or any act of war
- Active participation in a riot
- Committing or attempting to commit a crime under state or federal law
- The voluntary use of any prescription or non-prescription drug, poison, fume or other chemical substance unless used according to the prescription or direction of your or your dependent's doctor. This exclusion does not apply to you or your dependent if the chemical substance is ethanol.
- Intoxication – "Being intoxicated" means your or your dependent's blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Delayed Effective Date: if your spouse or child has a serious injury, sickness, or disorder, or is confined, their coverage may not take effect. Payment of premium does not guarantee coverage. Please refer to your policy contract or see your plan administrator for an explanation of the delayed effective date provision that applies to your plan.

Age Reduction

Coverage amounts for Life and AD&D Insurance for you and your dependents will reduce to 67% of the original amount when you reach age 70, and will reduce to 45% of the original amount when you reach age 75. Coverage may not be increased after a reduction.

Termination of coverage

Your coverage and your dependents' coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

In addition, coverage for any one dependent will end on the earliest of:

- The date your coverage under a plan ends
- The date your dependent ceases to be an eligible dependent
- For a spouse, the date of a divorce or annulment
- For dependents, the date of your death

Unum will provide coverage for a payable claim that occurs while you and your dependents are covered under the policy or plan.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

Life Planning Financial & Legal Resources services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by:

Unum Life Insurance Company of America, Portland, Maine

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Unum Voluntary Employee Life/AD&D Monthly Schedule

Guarantee Issue threshold. Elections over \$130,000 require EOI.

If you declined coverage at your initial eligibility, any elected amount will require EOI.

If you are already enrolled, you can increase your benefit amount up to \$130,000 without EOI.

Coverage Amounts	AD&D Cost	Age and Life Cost											
		<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	\$0.24	\$0.48	\$0.60	\$0.72	\$1.08	\$1.20	\$1.80	\$2.76	\$5.16	\$7.20	\$13.44	\$24.72	\$24.72
\$20,000	\$0.48	\$0.96	\$1.20	\$1.44	\$2.16	\$2.40	\$3.60	\$5.52	\$10.32	\$14.40	\$26.88	\$49.44	\$49.44
\$30,000	\$0.72	\$1.44	\$1.80	\$2.16	\$3.24	\$3.60	\$5.40	\$8.28	\$15.48	\$21.60	\$40.32	\$74.16	\$74.16
\$40,000	\$0.96	\$1.92	\$2.40	\$2.88	\$4.32	\$4.80	\$7.20	\$11.04	\$20.64	\$28.80	\$53.76	\$98.88	\$98.88
\$50,000	\$1.20	\$2.40	\$3.00	\$3.60	\$5.40	\$6.00	\$9.00	\$13.80	\$25.80	\$36.00	\$67.20	\$123.60	\$123.60
\$60,000	\$1.44	\$2.88	\$3.60	\$4.32	\$6.48	\$7.20	\$10.80	\$16.56	\$30.96	\$43.20	\$80.64	\$148.32	\$148.32
\$70,000	\$1.68	\$3.36	\$4.20	\$5.04	\$7.56	\$8.40	\$12.60	\$19.32	\$36.12	\$50.40	\$94.08	\$173.04	\$173.04
\$80,000	\$1.92	\$3.84	\$4.80	\$5.76	\$8.64	\$9.60	\$14.40	\$22.08	\$41.28	\$57.60	\$107.52	\$197.76	\$197.76
\$90,000	\$2.16	\$4.32	\$5.40	\$6.48	\$9.72	\$10.80	\$16.20	\$24.84	\$46.44	\$64.80	\$120.96	\$222.48	\$222.48
\$100,000	\$2.40	\$4.80	\$6.00	\$7.20	\$10.80	\$12.00	\$18.00	\$27.60	\$51.60	\$72.00	\$134.40	\$247.20	\$247.20
\$110,000	\$2.64	\$5.28	\$6.60	\$7.92	\$11.88	\$13.20	\$19.80	\$30.36	\$56.76	\$79.20	\$147.84	\$271.92	\$271.92
\$120,000	\$2.88	\$5.76	\$7.20	\$8.64	\$12.96	\$14.40	\$21.60	\$33.12	\$61.92	\$86.40	\$161.28	\$296.64	\$296.64
\$130,000-GI	\$3.12	\$6.24	\$7.80	\$9.36	\$14.04	\$15.60	\$23.40	\$35.88	\$67.08	\$93.60	\$174.72	\$321.36	\$321.36
\$140,000	\$3.36	\$6.72	\$8.40	\$10.08	\$15.12	\$16.80	\$25.20	\$38.64	\$72.24	\$100.80	\$188.16	\$346.08	\$346.08
\$150,000	\$3.60	\$7.20	\$9.00	\$10.80	\$16.20	\$18.00	\$27.00	\$41.40	\$77.40	\$108.00	\$201.60	\$370.80	\$370.80
\$160,000	\$3.84	\$7.68	\$9.60	\$11.52	\$17.28	\$19.20	\$28.80	\$44.16	\$82.56	\$115.20	\$215.04	\$395.52	\$395.52
\$170,000	\$4.08	\$8.16	\$10.20	\$12.24	\$18.36	\$20.40	\$30.60	\$46.92	\$87.72	\$122.40	\$228.48	\$420.24	\$420.24
\$180,000	\$4.32	\$8.64	\$10.80	\$12.96	\$19.44	\$21.60	\$32.40	\$49.68	\$92.88	\$129.60	\$241.92	\$444.96	\$444.96
\$190,000	\$4.56	\$9.12	\$11.40	\$13.68	\$20.52	\$22.80	\$34.20	\$52.44	\$98.04	\$136.80	\$255.36	\$469.68	\$469.68
\$200,000	\$4.80	\$9.60	\$12.00	\$14.40	\$21.60	\$24.00	\$36.00	\$55.20	\$103.20	\$144.00	\$268.80	\$494.40	\$494.40
\$210,000	\$5.04	\$10.08	\$12.60	\$15.12	\$22.68	\$25.20	\$37.80	\$57.96	\$108.36	\$151.20	\$282.24	\$519.12	\$519.12
\$220,000	\$5.28	\$10.56	\$13.20	\$15.84	\$23.76	\$26.40	\$39.60	\$60.72	\$113.52	\$158.40	\$295.68	\$543.84	\$543.84
\$230,000	\$5.52	\$11.04	\$13.80	\$16.56	\$24.84	\$27.60	\$41.40	\$63.48	\$118.68	\$165.60	\$309.12	\$568.56	\$568.56
\$240,000	\$5.76	\$11.52	\$14.40	\$17.28	\$25.92	\$28.80	\$43.20	\$66.24	\$123.84	\$172.80	\$322.56	\$593.28	\$593.28
\$250,000	\$6.00	\$12.00	\$15.00	\$18.00	\$27.00	\$30.00	\$45.00	\$69.00	\$129.00	\$180.00	\$336.00	\$618.00	\$618.00
\$260,000	\$6.24	\$12.48	\$15.60	\$18.72	\$28.08	\$31.20	\$46.80	\$71.76	\$134.16	\$187.20	\$349.44	\$642.72	\$642.72
\$270,000	\$6.48	\$12.96	\$16.20	\$19.44	\$29.16	\$32.40	\$48.60	\$74.52	\$139.32	\$194.40	\$362.88	\$667.44	\$667.44
\$280,000	\$6.72	\$13.44	\$16.80	\$20.16	\$30.24	\$33.60	\$50.40	\$77.28	\$144.48	\$201.60	\$376.32	\$692.16	\$692.16
\$290,000	\$6.96	\$13.92	\$17.40	\$20.88	\$31.32	\$34.80	\$52.20	\$80.04	\$149.64	\$208.80	\$389.76	\$716.88	\$716.88
\$300,000	\$7.20	\$14.40	\$18.00	\$21.60	\$32.40	\$36.00	\$54.00	\$82.80	\$154.80	\$216.00	\$403.20	\$741.60	\$741.60
\$310,000	\$7.44	\$14.88	\$18.60	\$22.32	\$33.48	\$37.20	\$55.80	\$85.56	\$159.96	\$223.20	\$416.64	\$766.32	\$766.32
\$320,000	\$7.68	\$15.36	\$19.20	\$23.04	\$34.56	\$38.40	\$57.60	\$88.32	\$165.12	\$230.40	\$430.08	\$791.04	\$791.04
\$330,000	\$7.92	\$15.84	\$19.80	\$23.76	\$35.64	\$39.60	\$59.40	\$91.08	\$170.28	\$237.60	\$443.52	\$815.76	\$815.76
\$340,000	\$8.16	\$16.32	\$20.40	\$24.48	\$36.72	\$40.80	\$61.20	\$93.84	\$175.44	\$244.80	\$456.96	\$840.48	\$840.48
\$350,000	\$8.40	\$16.80	\$21.00	\$25.20	\$37.80	\$42.00	\$63.00	\$96.60	\$180.60	\$252.00	\$470.40	\$865.20	\$865.20
\$360,000	\$8.64	\$17.28	\$21.60	\$25.92	\$38.88	\$43.20	\$64.80	\$99.36	\$185.76	\$259.20	\$483.84	\$889.92	\$889.92
\$370,000	\$8.88	\$17.76	\$22.20	\$26.64	\$39.96	\$44.40	\$66.60	\$102.12	\$190.92	\$266.40	\$497.28	\$914.64	\$914.64
\$380,000	\$9.12	\$18.24	\$22.80	\$27.36	\$41.04	\$45.60	\$68.40	\$104.88	\$196.08	\$273.60	\$510.72	\$939.36	\$939.36
\$390,000	\$9.36	\$18.72	\$23.40	\$28.08	\$42.12	\$46.80	\$70.20	\$107.64	\$201.24	\$280.80	\$524.16	\$964.08	\$964.08
\$400,000	\$9.60	\$19.20	\$24.00	\$28.80	\$43.20	\$48.00	\$72.00	\$110.40	\$206.40	\$288.00	\$537.60	\$988.80	\$988.80
\$410,000	\$9.84	\$19.68	\$24.60	\$29.52	\$44.28	\$49.20	\$73.80	\$113.16	\$211.56	\$295.20	\$551.04	\$1,013.52	\$1,013.52
\$420,000	\$10.08	\$20.16	\$25.20	\$30.24	\$45.36	\$50.40	\$75.60	\$115.92	\$216.72	\$302.40	\$564.48	\$1,038.24	\$1,038.24
\$430,000	\$10.32	\$20.64	\$25.80	\$30.96	\$46.44	\$51.60	\$77.40	\$118.68	\$221.88	\$309.60	\$577.92	\$1,062.96	\$1,062.96
\$440,000	\$10.56	\$21.12	\$26.40	\$31.68	\$47.52	\$52.80	\$79.20	\$121.44	\$227.04	\$316.80	\$591.36	\$1,087.68	\$1,087.68
\$450,000	\$10.80	\$21.60	\$27.00	\$32.40	\$48.60	\$54.00	\$81.00	\$124.20	\$232.20	\$324.00	\$604.80	\$1,112.40	\$1,112.40
\$460,000	\$11.04	\$22.08	\$27.60	\$33.12	\$49.68	\$55.20	\$82.80	\$126.96	\$237.36	\$331.20	\$618.24	\$1,137.12	\$1,137.12
\$470,000	\$11.28	\$22.56	\$28.20	\$33.84	\$50.76	\$56.40	\$84.60	\$129.72	\$242.52	\$338.40	\$631.68	\$1,161.84	\$1,161.84
\$480,000	\$11.52	\$23.04	\$28.80	\$34.56	\$51.84	\$57.60	\$86.40	\$132.48	\$247.68	\$345.60	\$645.12	\$1,186.56	\$1,186.56
\$490,000	\$11.76	\$23.52	\$29.40	\$35.28	\$52.92	\$58.80	\$88.20	\$135.24	\$252.84	\$352.80	\$658.56	\$1,211.28	\$1,211.28
\$500,000	\$12.00	\$24.00	\$30.00	\$36.00	\$54.00	\$60.00	\$90.00	\$138.00	\$258.00	\$360.00	\$672.00	\$1,236.00	\$1,236.00

Unum Voluntary Spouse Life/AD&D Monthly Schedule

Guarantee Issue (GI) threshold. Elections over \$30,000 require EOI.

If you declined coverage at your initial eligibility, any elected amount will require EOI.

If you are already enrolled, you can increase your benefit amount up to \$30,000 without EOI.

Coverage Amounts	AD&D Cost	Age and Life Cost											
		<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	\$0.24	\$0.48	\$0.60	\$0.72	\$1.08	\$1.20	\$1.80	\$2.76	\$5.16	\$7.20	\$13.44	\$24.72	\$24.72
\$20,000	\$0.48	\$0.96	\$1.20	\$1.44	\$2.16	\$2.40	\$3.60	\$5.52	\$10.32	\$14.40	\$26.88	\$49.44	\$49.44
\$30,000-GI	\$0.72	\$1.44	\$1.80	\$2.16	\$3.24	\$3.60	\$5.40	\$8.28	\$15.48	\$21.60	\$40.32	\$74.16	\$74.16
\$40,000	\$0.96	\$1.92	\$2.40	\$2.88	\$4.32	\$4.80	\$7.20	\$11.04	\$20.64	\$28.80	\$53.76	\$98.88	\$98.88
\$50,000	\$1.20	\$2.40	\$3.00	\$3.60	\$5.40	\$6.00	\$9.00	\$13.80	\$25.80	\$36.00	\$67.20	\$123.60	\$123.60
\$60,000	\$1.44	\$2.88	\$3.60	\$4.32	\$6.48	\$7.20	\$10.80	\$16.56	\$30.96	\$43.20	\$80.64	\$148.32	\$148.32
\$70,000	\$1.68	\$3.36	\$4.20	\$5.04	\$7.56	\$8.40	\$12.60	\$19.32	\$36.12	\$50.40	\$94.08	\$173.04	\$173.04
\$80,000	\$1.92	\$3.84	\$4.80	\$5.76	\$8.64	\$9.60	\$14.40	\$22.08	\$41.28	\$57.60	\$107.52	\$197.76	\$197.76
\$90,000	\$2.16	\$4.32	\$5.40	\$6.48	\$9.72	\$10.80	\$16.20	\$24.84	\$46.44	\$64.80	\$120.96	\$222.48	\$222.48
\$100,000	\$2.40	\$4.80	\$6.00	\$7.20	\$10.80	\$12.00	\$18.00	\$27.60	\$51.60	\$72.00	\$134.40	\$247.20	\$247.20
\$110,000	\$2.64	\$5.28	\$6.60	\$7.92	\$11.88	\$13.20	\$19.80	\$30.36	\$56.76	\$79.20	\$147.84	\$271.92	\$271.92
\$120,000	\$2.88	\$5.76	\$7.20	\$8.64	\$12.96	\$14.40	\$21.60	\$33.12	\$61.92	\$86.40	\$161.28	\$296.64	\$296.64
\$130,000	\$3.12	\$6.24	\$7.80	\$9.36	\$14.04	\$15.60	\$23.40	\$35.88	\$67.08	\$93.60	\$174.72	\$321.36	\$321.36
\$140,000	\$3.36	\$6.72	\$8.40	\$10.08	\$15.12	\$16.80	\$25.20	\$38.64	\$72.24	\$100.80	\$188.16	\$346.08	\$346.08
\$150,000	\$3.60	\$7.20	\$9.00	\$10.80	\$16.20	\$18.00	\$27.00	\$41.40	\$77.40	\$108.00	\$201.60	\$370.80	\$370.80
\$160,000	\$3.84	\$7.68	\$9.60	\$11.52	\$17.28	\$19.20	\$28.80	\$44.16	\$82.56	\$115.20	\$215.04	\$395.52	\$395.52
\$170,000	\$4.08	\$8.16	\$10.20	\$12.24	\$18.36	\$20.40	\$30.60	\$46.92	\$87.72	\$122.40	\$228.48	\$420.24	\$420.24
\$180,000	\$4.32	\$8.64	\$10.80	\$12.96	\$19.44	\$21.60	\$32.40	\$49.68	\$92.88	\$129.60	\$241.92	\$444.96	\$444.96
\$190,000	\$4.56	\$9.12	\$11.40	\$13.68	\$20.52	\$22.80	\$34.20	\$52.44	\$98.04	\$136.80	\$255.36	\$469.68	\$469.68
\$200,000	\$4.80	\$9.60	\$12.00	\$14.40	\$21.60	\$24.00	\$36.00	\$55.20	\$103.20	\$144.00	\$268.80	\$494.40	\$494.40
\$210,000	\$5.04	\$10.08	\$12.60	\$15.12	\$22.68	\$25.20	\$37.80	\$57.96	\$108.36	\$151.20	\$282.24	\$519.12	\$519.12
\$220,000	\$5.28	\$10.56	\$13.20	\$15.84	\$23.76	\$26.40	\$39.60	\$60.72	\$113.52	\$158.40	\$295.68	\$543.84	\$543.84
\$230,000	\$5.52	\$11.04	\$13.80	\$16.56	\$24.84	\$27.60	\$41.40	\$63.48	\$118.68	\$165.60	\$309.12	\$568.56	\$568.56
\$240,000	\$5.76	\$11.52	\$14.40	\$17.28	\$25.92	\$28.80	\$43.20	\$66.24	\$123.84	\$172.80	\$322.56	\$593.28	\$593.28
\$250,000	\$6.00	\$12.00	\$15.00	\$18.00	\$27.00	\$30.00	\$45.00	\$69.00	\$129.00	\$180.00	\$336.00	\$618.00	\$618.00
\$260,000	\$6.24	\$12.48	\$15.60	\$18.72	\$28.08	\$31.20	\$46.80	\$71.76	\$134.16	\$187.20	\$349.44	\$642.72	\$642.72
\$270,000	\$6.48	\$12.96	\$16.20	\$19.44	\$29.16	\$32.40	\$48.60	\$74.52	\$139.32	\$194.40	\$362.88	\$667.44	\$667.44
\$280,000	\$6.72	\$13.44	\$16.80	\$20.16	\$30.24	\$33.60	\$50.40	\$77.28	\$144.48	\$201.60	\$376.32	\$692.16	\$692.16
\$290,000	\$6.96	\$13.92	\$17.40	\$20.88	\$31.32	\$34.80	\$52.20	\$80.04	\$149.64	\$208.80	\$389.76	\$716.88	\$716.88
\$300,000	\$7.20	\$14.40	\$18.00	\$21.60	\$32.40	\$36.00	\$54.00	\$82.80	\$154.80	\$216.00	\$403.20	\$741.60	\$741.60
\$310,000	\$7.44	\$14.88	\$18.60	\$22.32	\$33.48	\$37.20	\$55.80	\$85.56	\$159.96	\$223.20	\$416.64	\$766.32	\$766.32
\$320,000	\$7.68	\$15.36	\$19.20	\$23.04	\$34.56	\$38.40	\$57.60	\$88.32	\$165.12	\$230.40	\$430.08	\$791.04	\$791.04
\$330,000	\$7.92	\$15.84	\$19.80	\$23.76	\$35.64	\$39.60	\$59.40	\$91.08	\$170.28	\$237.60	\$443.52	\$815.76	\$815.76
\$340,000	\$8.16	\$16.32	\$20.40	\$24.48	\$36.72	\$40.80	\$61.20	\$93.84	\$175.44	\$244.80	\$456.96	\$840.48	\$840.48
\$350,000	\$8.40	\$16.80	\$21.00	\$25.20	\$37.80	\$42.00	\$63.00	\$96.60	\$180.60	\$252.00	\$470.40	\$865.20	\$865.20
\$360,000	\$8.64	\$17.28	\$21.60	\$25.92	\$38.88	\$43.20	\$64.80	\$99.36	\$185.76	\$259.20	\$483.84	\$889.92	\$889.92
\$370,000	\$8.88	\$17.76	\$22.20	\$26.64	\$39.96	\$44.40	\$66.60	\$102.12	\$190.92	\$266.40	\$497.28	\$914.64	\$914.64
\$380,000	\$9.12	\$18.24	\$22.80	\$27.36	\$41.04	\$45.60	\$68.40	\$104.88	\$196.08	\$273.60	\$510.72	\$939.36	\$939.36
\$390,000	\$9.36	\$18.72	\$23.40	\$28.08	\$42.12	\$46.80	\$70.20	\$107.64	\$201.24	\$280.80	\$524.16	\$964.08	\$964.08
\$400,000	\$9.60	\$19.20	\$24.00	\$28.80	\$43.20	\$48.00	\$72.00	\$110.40	\$206.40	\$288.00	\$537.60	\$988.80	\$988.80
\$410,000	\$9.84	\$19.68	\$24.60	\$29.52	\$44.28	\$49.20	\$73.80	\$113.16	\$211.56	\$295.20	\$551.04	\$1,013.52	\$1,013.52
\$420,000	\$10.08	\$20.16	\$25.20	\$30.24	\$45.36	\$50.40	\$75.60	\$115.92	\$216.72	\$302.40	\$564.48	\$1,038.24	\$1,038.24
\$430,000	\$10.32	\$20.64	\$25.80	\$30.96	\$46.44	\$51.60	\$77.40	\$118.68	\$221.88	\$309.60	\$577.92	\$1,062.96	\$1,062.96
\$440,000	\$10.56	\$21.12	\$26.40	\$31.68	\$47.52	\$52.80	\$79.20	\$121.44	\$227.04	\$316.80	\$591.36	\$1,087.68	\$1,087.68
\$450,000	\$10.80	\$21.60	\$27.00	\$32.40	\$48.60	\$54.00	\$81.00	\$124.20	\$232.20	\$324.00	\$604.80	\$1,112.40	\$1,112.40
\$460,000	\$11.04	\$22.08	\$27.60	\$33.12	\$49.68	\$55.20	\$82.80	\$126.96	\$237.36	\$331.20	\$618.24	\$1,137.12	\$1,137.12
\$470,000	\$11.28	\$22.56	\$28.20	\$33.84	\$50.76	\$56.40	\$84.60	\$129.72	\$242.52	\$338.40	\$631.68	\$1,161.84	\$1,161.84
\$480,000	\$11.52	\$23.04	\$28.80	\$34.56	\$51.84	\$57.60	\$86.40	\$132.48	\$247.68	\$345.60	\$645.12	\$1,186.56	\$1,186.56
\$490,000	\$11.76	\$23.52	\$29.40	\$35.28	\$52.92	\$58.80	\$88.20	\$135.24	\$252.84	\$352.80	\$658.56	\$1,211.28	\$1,211.28
\$500,000	\$12.00	\$24.00	\$30.00	\$36.00	\$54.00	\$60.00	\$90.00	\$138.00	\$258.00	\$360.00	\$672.00	\$1,236.00	\$1,236.00

Unum Voluntary Child(ren) Life/AD&D Monthly Schedule

Coverage Amount	Life Rate = \$0.96 per \$2,000 Life Cost	AD&D Rate = \$.096 per \$2,000 AD&D Cost
\$2,000	\$0.96	\$0.10
\$4,000	\$1.92	\$0.19
\$6,000	\$2.88	\$0.29
\$8,000	\$3.84	\$0.38
\$10,000	\$4.80	\$0.48

Online evidence of insurability — finally made easy with a post-enrollment link

Employees need a simple way to complete benefits enrollment, and you need a simple way to help them. With our online evidence of insurability (EOI) process employees can complete this essential enrollment step quickly and easily — and you can get on with your day.

A straightforward process for you and your employees

When employees need to submit EOI, you send them the link to securehealth.unum.com. They log in to complete their EOI application. Unum notifies you of the details on your administrative platform. If an employee's email address is given during enrollment, we can email instructions directly to them.

Here's how it works

1. We send you a link

After you submit employee enrollments, we determine who needs to submit EOI. We send you a list and a link to our EOI website.

2. You send an email

You forward the link to each employee on the list.

3. Employees log in

On the site, employees will find that their basic information is already entered. All they need to do is answer a few health questions. About 85% of the time, they'll receive an instant coverage decision. For the other 15%, we'll let them know what additional information is needed.¹

4. You relax

The EOI process is complete. You can rest assured knowing that your employees have done all that's required to apply for coverage. You'll be notified once coverage decisions have been made.



Simple

Employees answer health questions online after enrollment. No more handing out (or chasing down) bulky paper forms.



Accurate

Missing information is impossible. No more forms returned as incomplete.



Fast

Most employees get coverage decisions in seconds. Not weeks.

For all enrollments and employees

You can use this process year-round for all new enrollments,* re-enrollments, late entrants and new hires.

**Better benefits
at work.™**

unum.com

¹ Unum internal data, 2021

*Enrollments meeting an approved timeline.

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MK-3659-2 FOR EMPLOYERS (6-23)



Employee Assistance Program

Unum Work/Life Balance Services



Help, when you need it most

With your Employee Assistance Program and Work/Life Balance services, confidential assistance is as close as your phone or computer.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

Your EAP is designed to help you lead a happier and more productive life at home and at work. Call for confidential access to a Licensed Professional Counselor* who can help you.

A Licensed Professional Counselor can help you with:

- Stress, depression, anxiety
- Relationship issues, divorce
- Anger, grief and loss
- Job stress, work conflicts
- Family and parenting problems
- And more



WORK/LIFE BALANCE

You can also reach out to a specialist for help with balancing work and life issues. Just call and one of our Work/Life Specialists can answer your questions and help you find resources in your community.

Ask our Work/Life Specialists about:

- Child care
- Elder care
- Financial services, debt management, credit report issues
- Identity theft
- Legal questions
- Even reducing your medical/dental bills!
- And more

Who is covered?

Unum's EAP services are available to all eligible partners and employees, their spouses or domestic partners, dependent children, parents and parents-in-law.

Always by your side

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver™ — helps you save on medical bills

Help is easy to access:

Phone support: 1-800-854-1446

Online support: unum.com/lifebalance

In-person: You can get up to three visits, available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support.

**Better
benefits
at work.™**

unum.com

* The counselors must abide by federal regulations regarding duty to warn of harm to self or others. In these instances, the consultant may be mandated to report a situation to the appropriate authority. Unum's Employee Assistance Program and Work/Life Balance services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details. Insurance products are underwritten by the subsidiaries of Unum Group.

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EN-2058-1 FOR EMPLOYEES (10-20)



Emergency Medical Transport

MASA Voluntary Emergent Plus Plan

Stay prepared with MASA® Emergent Plus

**Coverage for medical transportation
and care in the event of an emergency**

Plan includes:



Emergency Ground Ambulance Coverage

MASA provides coverage for emergency ground transportation in the U.S. or Canada to a medical facility.



Emergency Air Ambulance Coverage

MASA provides coverage up to \$20,000 for emergency air transportation in the U.S. or Canada to a medical facility.



Hospital to Hospital Ambulance Coverage

If specialized care is required but not available at the initial emergency facility in the U.S. or Canada, MASA provides coverage for ground medical transfer or up to \$20,000 for air ambulance transfer to the nearest appropriate medical facility.



Repatriation Near Home Coverage

If you're traveling in the U.S. or Canada and experience an emergency that requires extensive inpatient care and your care provider has approved continued care at a hospital nearer to your home, MASA coordinates your transfer and provides coverage for medical transportation to the approved medical facility.



Did you know?

54.1M

**medical emergencies
occur each year in the U.S.**

Source: NEMSIS, 2024 (National EMS
Information Systems)

About MASA

MASA is coverage and care you can count on to protect you from the unexpected — no network needed. Simply send us your emergency transport bill when it arrives, and we'll work to resolve the claim and provide your coverage. Plus, we offer expert coordination services to manage many of the complex needs that can arise after an emergency.

How to use your MASA benefits

Transportation coordination services

Access transport services for the following benefits:

- Repatriation Near Home Coverage
- Child, Pet, and Vehicle Return Coverages
- Companion Transportation Coverage
- Hospital Visitor Transportation Coverage
- Patient Return Transportation Coverage
- Sick While Away from Home Expense Protection
- Organ Retrieval & Organ Recipient Transport Coverage
- Mortal Remains Transportation Coverage



When to access:

During or immediately following your emergency care treatment.



How to access:

Call 800-643-9023.

The MASA Transport Team is available 24/7/365 to assist you and will begin making the necessary arrangements, including working with your medical team.

Note: If you are traveling out of the U.S., please submit your dates of travel through the member portal or to travel@masaglobal.com.



View your benefits online at: masaaccess.com/member or through the MASA app.

Claims

Benefits that you submit claims for include:

- Emergency Ground Ambulance Coverage
- Emergency Air Ambulance Coverage
- Hospital to Hospital Ambulance Coverage
- Post-Admission Continued Care Transportation Coverage



When to file your claim:

When you receive the ambulance bill.

Note: Be sure to file within 180 days of the transport.



How to file your claim:

Online: masaaccess.com/member

Email: ambulanceclaims@masaglobal.com

Fax: (877) 681-2399

Mail: MASA Global / ATTN: Claims

1250 S. Pine Island Road, Suite 500

Plantation, FL 33324

Include your member number

Note: To process your claim, in addition to the invoice we may require your health insurance claim form (HICFA) and explanation of benefits (EOB), the ambulance run notes, and the ambulance provider's W9. MASA claim specialists will advise you on how to obtain these.



Check the status of your claim at: masaaccess.com/member, through the MASA app, or call (800) 643-9023.

MASA connections



Member services: (800) 643-9023



Member site: masaaccess.com/member



MASA app





Contact Information

Carrier Contacts

Medical TPA

Personify #E70

www.healthcomp.com

800-442-7742

Claims: scanform@healthcomp.com

Dental

Sun Life #955839

www.sunlife.com/us

800-442-7742

Base and Voluntary Life/AD&D

Unum #473398/473399

www.unum.com

800-275-8686

Emergency Medical Transportation

MASA #B2BOUSD

www.masaaccess.com/member

800-643-9023

Pharmacy

Costco

www.pharmacy.costco.com

800-607-6861

Vision

EyeMed #1039839

www.eyemed.com

844-409-3401

Employee Assistance Program

UNUM

www.unum.com/lifebalance

800-854-1446

Employer Paid - Diabetes Management Program

Livongo

join.livongo.com/healthcomp/register

800-945-4355

Your Human Resource and InterWest Benefits Team

OUSD Human Resource Manager

Jeremy Benjamin

jbenjamin@orlandusd.net

530-865-1200 ext. 1003

InterWest Benefits Broker

Bruce Thomas

bthomas@iwins.com

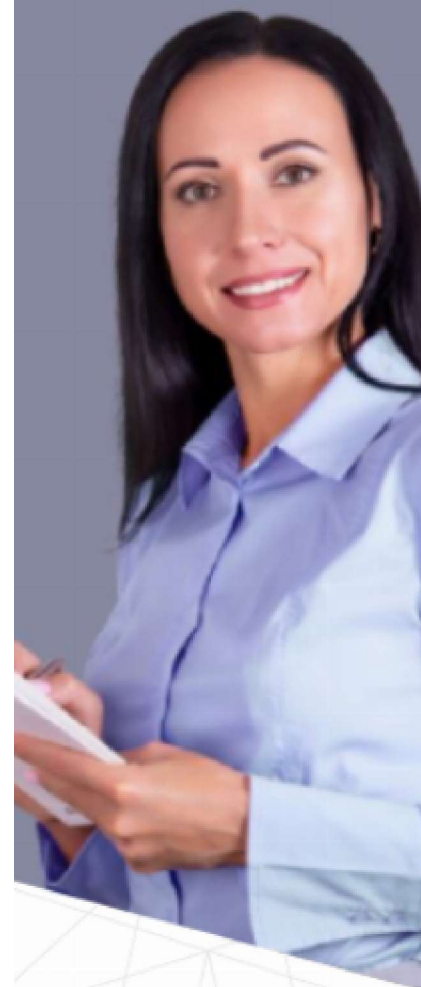
530-897-3181

InterWest Benefits Account Manager

Jennifer Campbell

jbcampbell@iwins.com

530-897-3183



Provided by:



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