

Bluegrass

Health Partners

2025 EMPLOYEE BENEFITS GUIDE



WELCOME

EMPLOYEE BENEFITS ENROLLMENT GUIDE

As a new Bluegrass employee, I want to welcome you to a new career with our company. You can take pride in the fact that you are now a team member of a premier provider of skilled health care services. Bluegrass strives to provide excellent care for our residents and will help you attain excellence in your career with us.

An important part of your compensation package is the employee benefits made available to all eligible employees the first of the month following 60 days of employment. This guide will give you an overview of all the available insurance benefit choices. Our H.R./Benefits Team has worked hard to provide you with a broad choice of insurance benefits to protect you and your family in time of need. Please take the time to review the important information in this guide so you can make informed choices when selecting your benefits.

Please note, it is your decision whether to participate in any of the benefits offered. It is mandatory to go through the benefit offering interview to hear about your benefit choices. You can then enroll or decline any or all of the offerings.

To make the interview process as easy as possible, we have a dedicated enrollment firm with counselors who are available to help you understand how each benefit can work for you. During the month prior to your benefit eligibility, you must find a time to call the enrollment center at **(855) 639-9109**. The call center is open 9 AM through 6 PM Eastern Time. You can have your benefit interview at that time if a counselor is available, or schedule an appointment for a future time. It's that simple.

Again, welcome aboard! Wishing you much success!

Sincerely,

Valerie Pate
Director of Human Resources

**In this Guide, we use the term company to refer to Bluegrass Health Partners. This Guide is intended to describe the eligibility requirements, enrollment procedures and coverage effective dates for the benefits offered by the company. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While this Guide is a tool to answer most of your questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will be used.*

CONTENTS

It's time to enroll in your benefits!

This guide will walk you through your choices, and help you to decide which plans are best for you and your family.

Benefits Overview

Key Terms & Definitions	4
Eligibility & Enrollment	5
Carrier Contact Page	6
Employee Assistance Program (EAP)	7

Health Benefits

Medical Insurance	8
Pharmacy Benefit	11
Dental Insurance	12
Vision Insurance	13

Supplemental Benefits

Group Accident	14
Critical Illness	15
Hospital Indemnity	16
Lifetime Benefit Term	17
Short-Term Disability	18
Long-Term Disability	19
Employer Paid Life and AD&D	20
Supplemental & Dependent Life	21
Legal Services	22
Identity Theft Protection	23
Home & Auto Insurance	24
Pet Insurance	25

Key Terms & Definitions

COINSURANCE

The amount or percentage that you pay for certain covered health care services under your health plan. This is typically the amount paid after a deductible is met and can vary based on the plan design.

COPAYMENT

A flat fee that you pay toward the cost of covered medical services.

DEDUCTIBLE

A qualified health plan that combines very low monthly premiums in exchange for higher deductibles and maximum out-of-pocket.

MAXIMUM OUT-OF-POCKET

The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance for in-network care and services, your health plan pays 100% of the costs of covered benefits.

PREAUTHORIZATION

A decision by your health plan that a service, plan, prescription drug or durable medical equipment is medically necessary and if it will be approved to be paid. Provider Care Ticket assists in making sure your preauthorization goes through smoothly with the insurance company, please refer to the page titled “How to Use Your Health Plan” for details.

PLAN YEAR

A plan year is the 12-month period your benefits coverage lasts, at the end one plan year and start of another deductibles, max out of pocket, and allowances reset. All benefits in this guide run in a plan year that coincides with the calendar year except as noted. If you start midway through the year such as a new employee or through a qualifying event your plan year will still end with the group’s plan year.

GUARANTEED ISSUE

For many benefits listed in this guide, the first time a benefit is available to you, to the amounts listed, you and your family automatically qualifies benefit without having to answer health questions. You will continue to carry this for as long as you maintain the policy.

PORTABILITY OF COVERAGE

Portability allows you to continue your coverage under the same group policy by paying your premiums directly to the insurance company in the event you no longer qualify for the benefit such as due to retirement (age limitations may apply).

Eligibility & Enrollment

ELIGIBILITY

Employees are eligible on 1st of the month following 60 days of full time employment. Your employer reserves the right to request proof of marriage and birth certificates in order to add dependents.

HOW TO ENROLL OR UPDATE YOUR BENEFITS AND BENEFICIARIES

Online: [Metlife.benselect.com/bluegrass](https://www.metlife.com/benselect.com/bluegrass)

Your user name is your social security number with no dashes, and your pin is the last 4 digits of your social plus the last 2 digits of the year you were born.

EXAMPLE: If the last 4 of your SSN is 9876 and you were born in 1954, your pin would be 987654.

Phone: Speak to a benefit enrollment counselor at 855-639-9109 9am-6pm EST M - F

QUALIFYING LIFE EVENTS (QLE) THINGS TO CONSIDER

Eligible employees may enroll or make changes to their benefits elections during the annual open enrollment period. As with most benefits, once you elect an option you are bound to that choice for the entire plan year unless you experience a “Qualifying Event”.

QLE include, but not limited to:
Changes in employment status, legal marital status or number of dependents, taking an unpaid leave of absence, Dependent satisfies or ceases to satisfy eligibility requirement, a COBRA-qualifying event, Entitlement to Medicare or Medicaid, or a change in the place of residence of the employee, resulting in the current carrier not being available.

Consider your personal situation and the difference between the plan options and their costs when making your decision. You may also elect to waive coverage.

Ask yourself the following questions

- Will your current doctor be in or out-of-network?
- Do you have any planned surgeries this year?
- How many family members will you cover?
- How often do you visit the doctor?
- Are you planning to have a baby this year?

By reading this guide cover to cover, you will become familiar with your benefits options. After enrolling, verify that your payroll deductions are correct. If not, please contact your payroll representative.

This enrollment booklet is a summary description of your benefits. If there is a discrepancy between these summaries and the written legal plan documents, the plan documents shall prevail. This booklet and plan summaries do not constitute a contract of employment. These plans are provided by your employer and employer’s insurance broker. Although every effort has been made to provide complete and accurate information, we make no warranties, express or implied, or representations as to the accuracy of content on this booklet. We assume no liability or responsibility for any error or omissions in the information contained in the booklet.

Carrier Contact Information

Medical

MultiPlan through APA
1-888-624-6300
online.apatpa.com

Pharmacy

ProactRx
1-877-635-9545
proactrx.com

Hospital Indemnity

CHUBB
1-866-445-8874
chubb.com/workplacebenefitsclaims

Long-Term Disability

Reliance Matrix
1-800-351-7500
reliancematrix.com

Legal Services

MetLife
800-821-6400
members.legalplans.com

Pet Insurance

MetLife
1-800-438-6388
metlifepetinsurance.com

Enrollment Center

BenManage
1-855-639-9109
metlife.benselect.com/bluegrass

Dental

Delta Dental
1-800-955-2030
deltadentalky.com

Group Accident

CHUBB
1-866-445-8874
chubb.com/workplacebenefitsclaims

Lifetime Benefit Term

CHUBB
1-855-241-9891
chubb.com

Employer Paid Life and AD&D

Reliance Matrix
1-800-351-7500
reliancematrix.com

Identity Protection

MetLife
833-552-2131
support@aura.com

Vision

Anthem
1-866-723-0515
anthem.com

Critical Illness

CHUBB
1-866-445-8874
chubb.com/workplacebenefitsclaims

Short-Term Disability

CHUBB
1-866-445-8874
chubb.com/workplacebenefitsclaims

Supplemental & Dependent Life

Reliance Matrix
1-800-351-7500
reliancematrix.com

Home & Auto Insurance

Farmer's
800-438-6381
farmers.com/groupselect

Life comes with challenges.

Reach out to your Assistance Program for short-term counseling, financial coaching, caregiving referrals and a wide range of well-being benefits to reduce stress, improve mental health and make life easier.

The following services are free to use, 100% confidential, and available 24/7 to you and your family members:

Mental Health Sessions

Up to 3 telephonic sessions to help manage stress, anxiety and depression, resolve conflict, improve relationships, overcome substance abuse and address any personal issues.

Life Coaching

To help reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and build balance.

Financial Consultation

To help build financial wellness related to budgeting, buying a home, paying off debt, managing taxes, preventing identify theft, and saving for retirement or tuition.

Legal Consultation

To help with a variety of personal legal matters including estate planning, wills, real estate, bankruptcy, divorce, custody, and more.

Life Management

To provide information and referrals when seeking childcare, adoption, special needs support, eldercare, housing, transportation, education, and pet care.

Personal Assistant

To help manage everyday tasks and give back time by providing information and referrals for home services, repairs, travel, entertainment, dining and personal services.

Medical Advocacy

To help navigate insurance, obtain doctor referrals, secure medical equipment or transportation, and plan for transitional care and discharge.

Member Portal and App

Access benefits 24/7/365 with online requests, chat options, & explore thousands of articles, webinars, podcasts and tools covering total well-being.



Help is always at your fingertips.

Contact AllOne Health:
Call 855-RSL-HELP (855-775-4357)
or visit allonehealth.com/reliance-matrix.
Code: RSLI859

Medical Benefits



Plan Details	CORE PLAN	ENHANCED PLAN
Deductible Individual / Family	\$1,750 / \$5,250	\$1,000 / \$2,000
Co-Insurance	20%	20%
Max Out-of-Pocket Individual / Family	\$6,000 / \$12,000	\$5,000 / \$10,000
All copayment and coinsurance costs shown in this chart are after your deductible has been met, if a deductible applies.		
Doctor's Office Visit		
Primary care visit to treat injury or illness	\$30 Copay/visit deductible does not apply	\$20 Copay/visit deductible does not apply
Specialist visit	\$50 Copay/visit deductible does not apply	\$40 Copay/visit deductible does not apply
Preventive care/screening/immunization	No Charge	No Charge
Imaging and Testing		
Lab Test	No Charge Office Based 20% Coinsurance Facility Based	No Charge Office Based 20% Coinsurance Facility Based
X-Ray	\$30 Copay	\$20 Copay
Imaging (CT/PET scans, MRIs)	\$75 Copay	\$75 copay Deductible does not apply
Outpatient Surgery		
Facility fee	20% Coinsurance	20% Coinsurance
Physician/surgeon fees	20% Coinsurance	20% Coinsurance
Prescription Coverage <small>Covers up to a 30-day supply (retail subscription); 31-90 day supply (mail order prescription).</small>		
Generic Drugs retail / mail order	\$10 / \$10	\$10 / \$10
Preferred Brand retail / mail order	\$30 / \$75	\$30 / \$75
Non-Preferred Brand retail / mail order	\$60 / \$180	\$60 / \$180
Specialty Drugs	Not Covered	Not Covered
More information about prescription drug coverage is available at www.proactrx.com		
Immediate Medical Attention		
Emergency room care <small>Copay Waived if admitted Coverage is limited to Urgent Emergency Room visits only</small>	\$250 Copay / 20% Coinsurance Deductible does not apply	\$200 Copay / 20% Coinsurance Deductible does not apply
Emergency Medical Transportation	20% Coinsurance	20% Coinsurance
Urgent care	\$75 copay / visit	\$75 Copay / visit

Plan Details Continued	CORE PLAN	ENHANCED PLAN
Hospital Stay		
Facility fee (e.g., hospital room)	20% Coinsurance	20% Coinsurance
Physician/surgeon fees	20% Coinsurance	20% Coinsurance
Pregnancy		
Office visits	\$30 Copay / initial visit only Deductible does not apply	\$20 Copay / initial visit only Deductible does not apply
Childbirth/delivery professional services	20% Coinsurance	20% Coinsurance
Childbirth/delivery facility services	20% Coinsurance	20% Coinsurance
Mental Health Care		
Outpatient services	\$30 Copay / visit	\$20 Copay / visit Deductible does not apply
Inpatient services	20% Coinsurance	20% Coinsurance
Recovery Assistance		
Home health care	20% Coinsurance	20% Coinsurance
Rehabilitation services	\$30 Copay / visit deductible does not apply	\$20 Copay / visit deductible does not apply
Habilitation services	Not covered	Not Covered
Skilled nursing care	20% Coinsurance	20% Coinsurance
Durable medical equipment	20% Coinsurance	20% Coinsurance
Hospice services	20% Coinsurance	20% Coinsurance
Out-of-Network Coverage		
Deductible Individual / Family	\$3,500 / \$10,500	\$2,000 / \$4,000
Co-Insurance	40% Coinsurance	40% Coinsurance
Max Out-of-Pocket Individual / Family	\$12,000 / \$24,000	\$10,000 / \$20,000

Medical Benefits



We have partnered with Benefits All In to introduce a new feature called the 'Household Needs Assessment.' This is an optional survey at enrollment that we highly encourage you to assist counselors with gathering the information they need so they can identify additional resources that may be available to you.

Your financial wellbeing and employee satisfaction are priorities for us, therefore you may receive a phone call from a Benefits All In specialist to discuss coverage both in and outside of our employer plans.



Dear Member,

We would like to introduce ourselves as the Administrators of your Health Benefit Plan. We are committed to providing you with the best possible service, and we ask that you call us at any time should you have any questions about your coverage.

Additionally, we encourage you to review the next page about ProAct Pharmacy, the Pharmacy Plan, so that you familiarize yourself with all the benefits that are available.

Should you need to verify whether a specific physician and ancillary provider are participating in the Network, please call Multiplan at: **(877) 952-7427** or visit www.multiplan.com/phcspracanc

If you have any questions or concerns please do not hesitate to call us at: **(888) 624-6300**, our staff is ready to assist you.

Yours truly,

American Plan Administrators

Mail Order

ProAct's mail order program is a reliable, cost effective way to securely receive maintenance medications at the convenience of your doorstep.

Enroll in two easy steps:

1. Setup your Mail Order profile online at proactrx.com/mailorder/1/#register or by calling **866-287-9885**.
2. Submit your prescription(s) request here: proactrx.com/programs/rtm/enroll/

ProAct will coordinate with your physician(s) to gather your prescription(s) on your behalf.

International Mail Order

Your prescription benefit plan allows you to receive select brand name maintenance medications through ProAct's international mail order program, CARNAX. CARNAX is a safe and voluntary option for obtaining brand name drugs when a generic alternative is not available. CARNAX currently offers a list of approximately 400 brand name drugs at a \$0 copay for a 90 day supply. Plus, shipping is free!

www.carnaxsabingsprogram.com

Prior Authorization

Some medications, due to cost, type of medication, or plan benefit will require prior authorization. ProAct is committed to helping you avoid any delays in getting your medications.

Here's what you should know:

If you need a prior authorization to continue filling your prescription, don't worry! In order to provide a smooth transition and prevent members from experiencing a lapse in therapy, ProAct has a **one-time override*** policy for claims the may require prior authorization.

Upon receiving notification of rejection at a local or mail order pharmacy, due to prior authorization, call the ProAct Help Desk.

Call the Help Desk: **877-635-9545**

ONE-TIME OVERRIDE

Contact your provider to initiate the Prior Authorization Process

**This process does not apply to any excluded medications. If a drug is not included within your formulary, it is not a covered benefit.*

Online Resources

ProAct's member portal at www.proactrx.com contains a variety of resources to support your pharmacy benefit needs, such as:

- Dashboard
- Benefit Overview
- View Claims History
- Transfer Prescriptions to Mail Order
- Manage Mail Order Prescriptions
- View and Print Temporary ID Cards
- Drug Pricing Tool
- Pharmacy Finder
- Formulary Look Up
- ProAct Messenger



PPO Plan Details	PPO Dentist	Premium Dentist & Out-of-Network Dentist
Deductible:	\$25 Deductible per person total per Benefit Year limited to a maximum Deductible of \$75 per family per Benefit Year. The Deductible does not apply to diagnostic and preventive services, emergency palliative treatment, brush biopsy, X-rays, sealants, cephalometric films, photos, diagnostic casts and orthodontic services (including surgical repositioning of teeth).	
Maximum Payment	\$1,500 per person total per Benefit Year on all services, except cephalometric films, photos, diagnostic casts and orthodontic services (including surgical repositioning of teeth). \$2,000 per person total per lifetime on cephalometric films, photos, diagnostic casts and orthodontic services (including surgical repositioning of teeth).	
Diagnostic and Preventive	100%	100%
Examinations & Cleanings	Emergency Palliative Care	Fluoride & Sealants
Space Maintainers	Brush Biopsy	Radiographs (x-rays)
Basic Services	80%	50%
Minor Restorative Services & Denture Repair	Endodontic Services	Occlusal Guard / Adjustments
Major Services	50%	50%
Periodontic Services	Oral Surgery	Major Restorative Services
Other Basic Services	Relines and Rebase	Fixed Prosthodontic Repair
Implant Repair	Adjustments to Dentures	Prosthodontic Services
Orthodontic Services No Age Limit	50%	50%
	Braces	

Vision Benefits



Plan Details

Benefits	In-Network	Out-of-Network this plan pays:
Eye Exam Once every calendar year	\$10 copay	Up to \$42 reimbursement
Retinal Imaging	Up to \$39	
Materials / Eye-Wear		
Frames Once every 2 calendar years	\$130 allowance 20% off remaining balance	Up to \$45 reimbursement
Single Lenses	\$10 Copay	Up to \$40 reimbursement
Bifocal Lenses	\$10 Copay	Up to \$60 reimbursement
Trifocal Lenses	\$10 Copay	Up to \$80 reimbursement
Polycarbonate Lenses dependent children under age 19	\$0 Copay	No Allowance
Transition Lenses dependent children under age 19	\$0 Copay	No Allowance
Factory Scratch Coating	\$0 Copay	No Allowance
Contact Lenses (instead of eyeglasses)		
Elective Conventional Contacts Once every calendar year	\$130 allowance 15% off remaining balance	Up to \$105 reimbursement
Elective Disposable Contacts Once every calendar year	\$130 allowance	Up to \$105 reimbursement
Necessary Contacts Once every calendar year	Covered in Full	Up to \$210 reimbursement
Optional In-Network Savings from Blue View Vision		In-Network Member Cost
Transitions Lenses (adults)		\$75
Polycarbonate Lenses (adults)		\$40
Tint (solid and gradient)		\$15
UV Coating		\$15
Progressive Lenses¹		Up to \$110
Anti-Reflective Coating²		Up to \$68
Other Add-Ons		20% off retail price
Complete Pair of Additional Eyeglasses		40% off retail price
Eyeglasses Materials Purchased Separately		20% off retail price
Eyewear Accessories non-prescription sunglasses, lens cleaning supplies, contact lens solutions, eyeglass cases, etc.		20% off retail price
Standard Contact Lens Fitting		Up to \$55
Premium Contact Lens Fitting³		10% off retail price
Conventional Contact Lenses⁴ (materials only)		15% off retail price

¹ Please ask your provider for their recommendation as well as the available progressive brands by tier.

² Please ask your provider for their recommendation as well as the available coating brands by tier.

³ Standard fitting includes spherical clear lenses for conventional wear and planned replacement. Examples include but are not limited to disposable and frequent replacement.

⁴ Premium fitting includes all lens designs, materials and specialty fittings other than standard contact lenses. Examples include but are not limited to toric & multifocal.

Accidents can be costly expenditures, and not everyone has a rainy-day fund ready for use. Accident insurance is worth it if you are looking for extra financial support when an unexpected event happens.

Benefit Amounts

\$50 Wellness Benefit payable when certain preventive services are performed

Initial Care

Emergency Room	\$200
Urgent Care	\$125
Initial Doctor Visit	\$125

Hospital / Facility

Standard Hospital Admission	\$1,000
ICU Hospital Admission	\$2,000
Hospital Confinement per day up to 365 days	\$200
ICU Confinement per day up to 30 days	\$400
Rehab Confinement per day up to 30 days	\$75

Additional Benefits

Accidental Death		
Employee		\$50,000
Spouse as % of Employee		\$50,000
Child as % of Employee		\$25,000
Common Carrier		2X
Ambulance Air / Ground		\$1,000 / \$200
Appliance		\$100
Blood / Plasma / Platelets		\$100
Burns	Second Degree at least 36% of body	\$1,000
	Third Degree (9 - 34 square inches)	\$7,500
	Third Degree (35 or more square inches)	\$20,000
	Skin Graft 25%	25%
Coma		\$10,000
Dislocations (up to)		\$6,000
Emergency Dental	Crown	\$150
	Extraction	\$50
	Dentures	\$150
	Implants	\$150
Eye Injury		\$250
Follow-Up Treatment (per visit) 3 visit max		\$30
Fractures (up to)		\$8,000
Herniated Disc Surgery		\$400
Knee Cartilage - Torn		\$400
Lacerations		\$25 - \$400
Lodging per night, 100 or more miles, 30 mile max		\$100
Loss of Hands, Feet, Sight		\$25,000
Loss of Fingers or Toes		\$1,250
Major Diagnostic Exam CT, MRI, etc.		\$200

Benefit Features

- **Conditional Renewability** - Coverage is automatically renewed.
- **Portability** - Employees can keep their coverage if they change jobs or retire while the Policy is in force.
- **HSA Compliant** - Accident benefits do not disqualify employees from having a Health Savings account.
- **Wellness Benefit** - Receive a \$50 wellness benefit payable when certain preventive services are performed.

Eligibility

- **Employee** - Working at least 30 hours per week, age 18 and older, waiting period of 60 days
- **Spouse** - Includes legally married spouse, domestic partner and civil union partner. Age 18 and older.
- **Children** - Ages 0 through 26, no student status required.



Organ Loss		
Paralysis	Two Limbs (paraplegia or hemiplegia)	\$5,000
	Four Limbs (quadriplegia)	\$10,000
Post-Traumatic Stress Disorder 6 visit max		\$200
Prosthetics		\$500
Tendon, Ligament, Rotator Cuff Repair		\$400
Therapy - Physical, Occupational, Speech 6 visit max		\$30
Transportation per trip, 100 or more miles, 3 trip max		\$300
Traumatic Brain Injury		\$200
X-Ray		\$125

Critical Illness

CHUBB®

Critical illness insurance is a valuable investment for anyone who wants to protect themselves and their finances from the unexpected. While nobody likes to think about the possibility of being diagnosed with a serious illness, critical illness insurance provides a sense of security and peace of mind.



Plan Benefits

Face Amount: \$10,000 or \$30,000
50% Face Amount for Dependents

Critical Illness

Benign Brain Tumor Breast Cancer Carcinoma In Situ Cancer (except skin cancer) End Stage Renal Failure Heart Attack Major Organ Failure Stroke Sudden Cardiac Arrest	100%
---	------

Carcinoma In Situ Coronary Artery Obstruction	25%
--	-----

Skin Cancer Benefit once per person per year	\$250
--	-------

Recurrence Benefit

Benefits are payable for a subsequent diagnosis of Benign Brain Tumor, Cancer, Coronary Artery Obstruction, Heart Attack, Major Organ Failure, Stroke, or Sudden Cardiac Arrest.	100%
--	------

Advocacy Package

Best Doctors, Physician Referrals. Ask the Expert Hotline provides 24 hour advice from experts about a particular medical condition. In-Depth Medical Review offers a full review of diagnosis and treatment plan.	Yes
--	-----

Additional Benefits

Waiver of Premium Waives Premium while insured is totally disabled	Yes
---	-----

Wellness Benefits once per person per year	\$50
--	------

Benefit Limitations

Continuity of Coverage (Takeover)	Yes
Pre-Existing Condition Limitation	None

Benefit Features

Wellness Benefit

This policy pays a \$50 wellness benefit when certain preventive services are performed.

No Lifetime Maximum

When someone is diagnosed with a covered condition and makes a claim, we send out a check. It's that simple. If they get sick again, they're still covered.

Recurrence

Once Chubb pays a Critical Illness benefit, if the condition recurs, Chubb will pay a recurrence benefit as long as the insured was treatment free for 6 months. For a recurrence of Cancer, Chubb will pay the recurrence benefit as long as the insured was treatment free for 12 months and is in Complete Remission.

Advocacy

Because money isn't always enough – Chubb offers personal and confidential assistance from professionals. Finding the best medical care gives employees ongoing support throughout their recovery.

Eligibility

Spouse and Child Coverage is available.

Portability

Employees can keep their coverage if they change jobs or retire while the Policy is in force.

Employee

Working at least 30 hours per week, age 18 and older, waiting period of 60 days

Spouse

Includes legally married spouse, domestic partner and civil union partner. Age 18 and older.

Children

Ages 0 through 26, no student status required.

Chubb Hospital Indemnity is designed to help you deal with the cost of a hospitalization by providing benefits that can be used to offset out-of-pocket costs associated with hospital admission and confinement.

Benefit Features

- Continuity of Coverage - Included
- No Pre-Existing Condition Limitation
- No Childbirth Limitation
- Mental, Nervous and Substance Abuse included in most benefits
- Spouse and Child Coverage available

Hospital Indemnity Benefits

Benefits	Coverage & Limitations
Emergency Room	\$75 per day 3 days per calendar year
Hospital Admission This benefit is for admission to a hospital or hospital sub-acute intensive care unit.	\$500 Max 1 benefit per calendar year
Hospital Confinement This benefit is for admission to a hospital or hospital sub-acute intensive care unit.	\$100 / day 31 day max per confinement 31 day max per calendar year
Hospital Confinement ICU The benefit for confinement in a hospital intensive care unit.	\$200 / day 10 day max per confinement 10 day max per calendar year
Observation Unit This benefit is for treatment in a hospital observation unit for a period of less than 20 hours.	\$50 Max 1 benefit for calendar year
Rehabilitation Unit Confinement This benefit is for confinement in a rehabilitation unit.	\$50 Per Day Payable / day for days 2 through 16 15 day max per confinement 15 day max per calendar year
Diagnostic Test Rider This benefit is for a diagnostic test.	\$100 / day 1 day max per calendar year
Chiropractic / Osteopathic Services This benefit is for chiropractic/osteopathic care services following a confinement.	\$10 / day 2 day max per confinement 2 day max per calendar year
Doctor's Office Visit / Telemedicine This benefit is for a treatment by a physician in an office or via telemedicine services following a confinement or treatment in an emergency room or observation room.	\$25 / day 3 day max per confinement 3 day max per calendar year
Prescription Drug The benefit is for filling a prescription for medication following a confinement.	\$20 / day 5 day max per confinement 5 day max per calendar year

Lifetime Benefit Term Life

CHUBB®

Term Life Benefit Amounts	
Covered Individual	Coverage Limits
Employee	Up to \$250,000
Spouse	Up to 50% of Employee's election
Child(ren)	Up to \$25,000 as long as the Employee has equal or greater coverage
Guaranteed Issue	
Employee	Guaranteed Issue (GI) up to \$100,000 Conditional Guaranteed Issue (CGI) of \$150,000
Spouse	GI: \$50,000 CGI: \$75,000

Conditional Guaranteed Issue

Conditional Guaranteed Issue requires a few extra qualifications over guaranteed issue limits such as questions regarding recent work history, hospitalizations, and diagnoses.

Restoration Rider

When the Lifetime Benefit Term Death Benefit is reduced below the Restoration Face Amount by the Accelerated Death Benefit for Long Term Care Rider, this Rider restores the Lifetime Benefit Term Death Benefit up to the Restoration Face Amount while this Rider is in force.

Accelerated Death Benefit for Long Term Care Rider

Death benefits will be reduced if an Accelerated Death Benefit is paid. The Accelerated Death Benefit or lien, if applicable, and the balance of the death benefit provided by the Certificate shall constitute full settlement on death of the Insured as provided under the Certificate.

This Rider provides that you may elect to receive a portion of the Death Benefit provided by the Certificate and shown on the Certificate Schedule. You can make this election when the Insured becomes eligible for benefits. The Insured must be certified as Chronically Ill and be confined to a Nursing or Assisted Living Facility or be receiving Home health or Adult Day Care. All other conditions of this Rider must also be met. Benefits are not payable under this Rider once the Insured has died.

- An Initial Guaranteed Death Benefit until the latter of 25 years after the Coverage Date or age 70, but not beyond age 100. After this initial Period, a Reduced Guaranteed Death Benefits of 50% of the Initial Guaranteed Death Benefit is provided until age 121.
- Guaranteed Paid-Up Term benefits upon termination of payments after premiums have been paid for 10 full Coverage Years.
- Non-Guaranteed Paid-Up Term Benefits that may increase the Guaranteed Paid-Up Term benefit upon termination of premium payments after premiums have been paid for 10 full Coverage Years.
- After the Initial Guaranteed Death Benefit period, non-guaranteed One Year term Insurance which may increase the Reduced Guaranteed Death Benefit up to the Initial Guaranteed Death Benefit.
- Level Guaranteed Premiums payable to age 100.
- The Policy is non-participating and provides no cash surrender values or loan values.

Chubb Disability Income (DI) was developed to craft solutions to protect employees from the physical and financial consequences of a disability that keeps them from earning a paycheck.

- Portable
- Premium Rates based on age at time of issue without increasing due to age
- HSA Compliant
- Coverage is renewable until age 72
- Integration with other sources of income
- Disabilities caused by organ donation are covered as sickness with no elimination period

Short Term Disability Benefits

Benefit Period	6 months
Elimination Period	14 days
Minimum Benefit Amount	\$300 per month
Maximum Benefit Amount	60% of income up to \$5,000 per month
Waiver of Premium	Disabled for 90 or more consecutive days
Partial Disability Benefit	Up to 50% of Max Benefit Amount
Pre-Existing Condition Limitation	3 / 12

Plan Features

Partial Disability

Up to 50% of Maximum Benefit Amount. Disability earnings must be less than 50% of the employee's monthly earnings. The sum of the Partial Disability benefit, the salary earned while receiving Partial Disability benefits, and income from all other sources may not exceed 60% of the employee's pre-disability earnings.

Total Disability

An employee is considered totally disabled if unable to perform the material duties of their own occupation for the first 24 months and any occupation after 24 months. Recurrent disabilities resulting from the same or related causes within 6 months will be considered one period of total disability.

Elimination Period

Refers to the time period between an injury and you start receiving benefit payments.

Pre-Existing Condition Limitation

Benefits will not be paid for any Disability caused by, contributed to by, or the result of a Pre-Existing Condition which begins within the first 12 months following Your Certificate Effective Date.

Pre-Existing Condition Limited Benefit

Designed to cover conditions excluded by the pre-existing conditions limitation. It pays a reduced disability benefit after satisfying the elimination period. Payable for up to 3 months.

Integration

Benefits may be reduced by the following sources of income: Deduction of Social Security Disability Benefit, State Disability, Individual Disability, Auto, Military, Government, Group Insurance, 3rd Party, Salary Continuation, Federal Government (tied to social security), Employee Retirement, Employment, Unemployment, Worker's Compensation. The total of all benefits received from this disability plan and above sources of income may not exceed 80% of income prior to disability.

Long-Term Disability



Disability income protection insurance provides a benefit for long term disability resulting from a covered injury or sickness. Benefits begin at the end of the elimination period and continue while you are disabled up to the maximum benefit duration.

- Own Occupation Coverage
- Rehabilitation Provision
- Residual & Partial Disability
- Specific Indemnity Benefit
- Survivor Benefit - 3 months
- Transfer of Coverage
- Work Incentive & Childcare Provision
- Worksite Modification Benefit

Long-Term Disability Benefits

Benefit Period	24 months
Elimination Period	180 days of consecutive disability
Benefit Amount	60% of income up to \$5,000 per month
Partial Disability Benefit	Up to 50% of Max Benefit Amount
Pre-Existing Condition Limitation	3 / 12
Interruption & Recurrence Provision	30 trial work days, 6 month recurrence

Plan Features

Offsets

Your benefit may be reduced by other income sources such as, but not limited to, Social Security, Workers Compensation, State Disability Plans.

Elimination Period

Refers to the time period between an injury and you start receiving benefit payments.

Pre-Existing Condition Limitation

Benefits will not be paid for any Disability caused by, contributed to by, or the result of a Pre-Existing Condition which begins within the first 12 months following Your Certificate Effective Date.

Maximum Benefit Duration	
Age at Disablement	Duration of Benefits
61 or younger	to age 65
62	3 1/2 years
63	3 years
64	2 1/2 years
65	2 years
66	1 3/4 years
67	1 1/2 years
68	1 1/4 years
69 or older	1 year

Employer Paid Basic Coverage

Basic Life and Accidental, Death, & Disability protection is provided to you by Bluegrass Healthcare Partners.

Employer Paid Accidental Death & Dismemberment

Benefit Amount

Starting at \$10,000, see plan document for more details

Employer Paid AD&D

Accidental Loss of	Amount Payable
Life	100%
Both Hands	100%
Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and Sight of One Eye	100%
One Foot and Sight of One Eye	100%
Speech and Hearing	100%
One Hand	50%
One Foot	50%
Sight of One Eye	50%
Speech	50%
Hearing	50%

Benefit Reduction Due to Age

Age	Benefit Reduced To
65	65%
70	45%
75	30%
80	20%

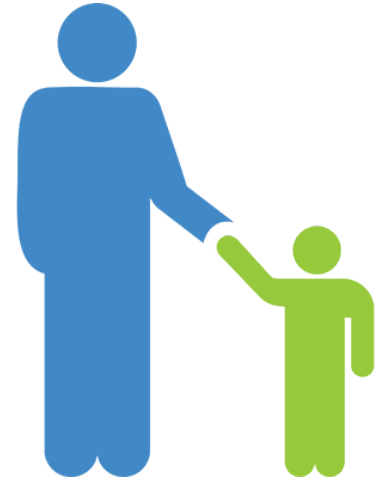


Supplemental & Dependent Life



Additional Coverage

Guaranteed issue of up to \$150,000 additional life and Accident, Death, & Disability coverage for you and additional coverage for your spouse and your dependent children. This benefit is portable and can convert into an individual policy allowing you to keep it with you to protect you and your family.



Supplemental Life Benefit Amounts

Employee	\$10,000 to \$500,000 in increments of \$10,000. Not to exceed 5x earnings for amount over \$250,000
Spouse	\$5,000 to \$250,000 in increments of \$5,000. Not to exceed 50% of employee amount
Child(ren) <small>birth to age 26</small>	\$5,000 to \$10,000 in increments of \$5,000. Not to exceed employee amount

Guaranteed Issue Initial eligibility period only

Employee	Age 70 and under: \$150,000
Spouse	Age 70 and under: \$50,000
Child(ren)	\$5,000 or \$10,000

Supplemental AD&D

Accidental Loss of	Amount Payable
Life	100%
Two or More Members	100%
Speech and Hearing	100%
One Member	50%
Speech or Hearing	50%
Thumb and Index of Same Hand	25%

*Member refers to foot, hand or eye

Plan Features

- Living Benefit
- Conversion Privilege
- FMLA / MSLA Extension
- Portability
- Waiver of Premium

Unlike other voluntary benefits which are purchased as a safety net (with the hope that you never have to use them), the more you use a Legal Plan, the more you benefit. Like it or not, laws permeate every aspect of our lives. So, it's helpful to have an advocate in your corner dealing with expensive legal issues like identity theft or debt.

Plan features

Money Matters	Debt Collection Defense Financial Education Programs Identity Theft Defense	Identity Restoration Services Negotiations with Creditors Personal Bankruptcy	Promissory Notes Tax Audit Representation Tax Collection Defense
Home & Real Estate	Boundary & Title Disputes Mortgages Security Deposit Assistance Deeds	Property Tax Assessments Tenant Negotiations Eviction Defense Refinancing & Home Equity Loan	Zoning Applications Foreclosure Sale or Purchase of Home
Estate Planning	Codicils Living Wills	Revocable & Irrevocable Trusts Complex Wills	Complex Wills Powers of Attorney
Family & Personal	Adoption Guardianship Prenuptial Agreement Affidavits Immigration Assistance Protection from Domestic Violence	Conservatorship Juvenile Court Defense, Review of ANY Personal Legal Demand Letters Including Criminal Matters Document Divorce (20 hours)	Name Change School Hearings Garnishment Defense Parental Responsibility Matters Personal Properties Issues
Civil Lawsuits	Administrative Hearings Disputes Over Consumer Goods & Services	Pet Liabilities Civil Litigation Defense	Small Claims Assistance Incompetency Defense
Elder-care Issues	Consultation & Document Review for Issues Related to Your Parents: Medicaid Powers of Attorney	Medicare Prescription Plans Deeds Notes	Wills Leases Nursing Home Agreements
Traffic & Other Matters	Defense of Traffic Tickets Driving Privileges Restoration	Habeas Corpus Repossession	License Suspension Due to DUI

Identity Theft Protection



Meet Aura

An all-in-one, easy to use online security solution designed to protect the entire family

Identity Theft Protection

Aura monitors your personal information and alerts you if any threats are detected.

Financial Fraud Protection

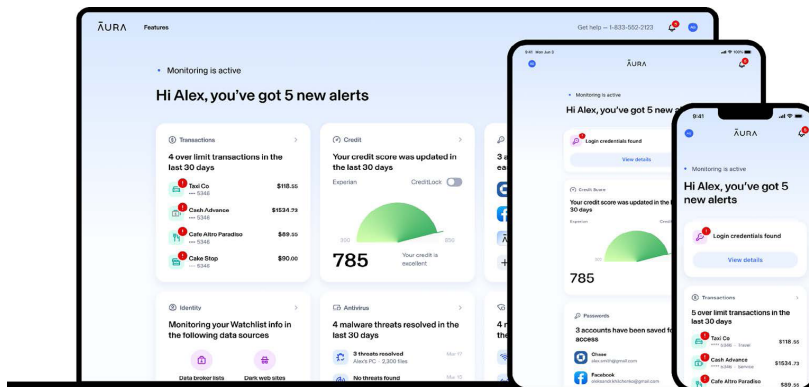
Aura monitors your credit, financial accounts, and property titles and alerts you to any suspicious activity.

Privacy and Device Security

Get intelligent safety tools— like VPN, antivirus, password manager, and more – to protect your online privacy.

Family Safety

Loved ones with integrated parental controls, elder fraud prevention tools, and more.



In today's digital world, employees are spending more time online than ever which could put their personal information in the hands of cyber criminals.

Aura protects you and your families from fraud by helping to ensure your private information is not anywhere it shouldn't be.

**24/7/365
Customer Support**

Aura's 100% US-based Customer Support team is available 24/7/365.

**White Glove
Fraud Resolution**

Aura's White Glove Resolution Specialists guide fraud victims through every step of the remediation process.

**\$5,000,000 Insurance
Policy**

Each enrolled adult is backed by a generous \$5M insurance policy* to cover eligible losses and expenses.

**Features at your
fingertips**

With Aura's easy to use mobile app, members enjoy a consistent experience across devices.

Protection Plan

- 1 Bureau credit monitoring & alerts
- 2 Device limit: Anti-virus, Wifi Scanning & VPN

Individual \$ 6.45 per pay period
Family \$12.45 per pay period

Protection Plus Plan

- 3 Bureau credit monitoring & alerts
- Up to 10 Devices: Anti-virus, Wifi Scanning & VPN
- Social Media Monitoring & Takeover Alerts
- Expirian Credit Lock

Individual \$9.95 per pay period
Family \$16.55 per pay period



FARMERS
INSURANCE

Home & Auto Insurance

Insure what's important while enjoying saving

- **Automated payment options and discounts**
- **Claim-free driving rewards**
- **Multi-policy savings**
- **Roadside assistance**
- **24/7 claim reporting**

Access to quality insurance to protect your valuables, to help protect against personal liability, and that can help feel financially secure with 24/7 professional support they need to bounce back, if the unexpected happened. This program helps choose policies to fit your needs and that fit your budget with special savings based on where you work, among other discounts.

Auto Insurance

Comprehensive coverage? Collision coverage? Deductibles? Medical Payments? Where to begin? Your local Farmers agent can take the mystery out of selecting the right Car insurance coverage for your needs and budget. Get started with an online Auto insurance quote and learn about our insurance discounts that can help you save money.

Home Insurance

Your home is perhaps your most valuable possession, so you'll want to make sure your insurer has withstood the test of time. Farmers® has been providing insurance products for over 80 years, and will be there in the event disaster strikes and your home is damaged in a fire or due to another covered cause of loss. Plus, get competitive rates with our multi-line insurance discounts. Get a Home insurance quote now.

Renters Insurance

Your landlord may have an insurance policy, but if there's a fire in your building, that policy may not cover your possessions. That's why there's Renters insurance. Get a Renters insurance quote to see how affordable it is to protect your personal belongings: about the price of a movie and popcorn once a month.

Umbrella Insurance

You work hard for the things that are important to you. For added coverage above and beyond the liability limits of your Auto or Home insurance policies, a Personal Umbrella insurance policy can provide added protection for your assets and future earnings

MetLife Pet Insurance is committed to helping pet parents experience the joys of parenthood by providing them the confidence to care for their pet. Pet insurance helps to reimburse pet parents for covered unexpected veterinary expenses for their furry family members. This will help to give you the confidence that you can pay for treatment for your pets if they become sick or have an accidental injury.

Freedom of Comprehensive coverage

Flexibility to select various levels of coverage with no breed exclusions or upper age limits; ability to include multiple pets on one policy through our innovative family plans

- Optional wellness coverage (preventive care) included in annual limit
- Competitive rates with discounts, healthy pet incentive and the only provider offering family plans (i.e., multiple pets covered by one policy)
- Coverage of pre-existing conditions when switching providers, no initial exam or previous vet records to apply

Simple and delightful experience

Your home is perhaps your most valuable possession, so you'll want to make sure your in New mobile app experience that allows for easy claim submission & track claims with most claims processed within 10 days

- Team of pet advocates to assist with enrollment and service, access to telehealth concierge service.
- No waiting period for orthopedic coverage and among the industry's shortest wait period for accident and illness coverage.

Backed by MetLife's unmatched track record

Simple set up with no additional costs to you and a seamless integration across MetLife benefits. Ongoing support with customizable employee communications & tools.

Umbrella Insurance

You work hard for the things that are important to you. For added coverage above and beyond the liability limits of your Auto or Home insurance policies, a Personal Umbrella insurance policy can provide added protection for your assets and future earnings