

2025 BENEFITS OPEN ENROLLMENT



It's Open Enrollment!

- November 6th –November 20th
 - One time each year you can make changes for any reason
 - Switch to a different plan
 - Add or drop coverage
 - Add or drop dependents
 - Re-enroll in flexible spending accounts (FSAs)

ALL Eligible EE's must make elections this year. No elections will carry over from 2024. If you do not make elections you will NOT have coverage this year for 2025



Who's Eligible For Benefits?

- **Employees**
 - All full-time employees, who work a minimum of 30 hrs per week
 - Part-time employees (working less than 30 hours a week) are eligible for most voluntary benefits such as Pet Benefits, LegalEASE, Accident, Critical Illness, Hospital indemnity and more.
 - Some exceptions do apply such as vision insurance.
- **Dependents**
 - Spouse or domestic partner, natural, adopted or stepchildren up to age 26
 - Domestic partner's children are eligible up to age 26
 - Disabled dependent children over age 26
 - Children named in a support order

Everyone will be required to make an election for 2025. Your 2024 elections will NOT rollover for 2025. If you do not make an election you will not have coverage for 2025

ENROLLING FOR BENEFITS



<https://workforcenow.adp.com>

DO I NEED TO ENROLL?

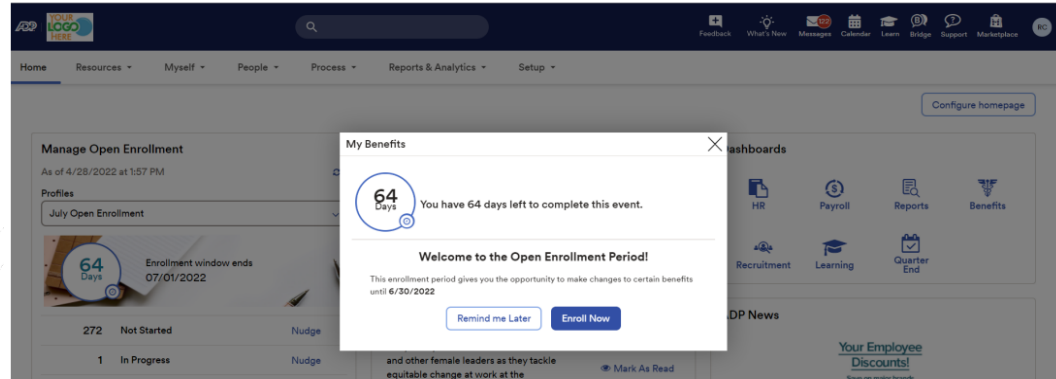
YES, All eligible employees are required to actively enroll in or waive all coverages being offered for Open Enrollment this year.

Also new hires must elect coverage within 31 days of their date of hire

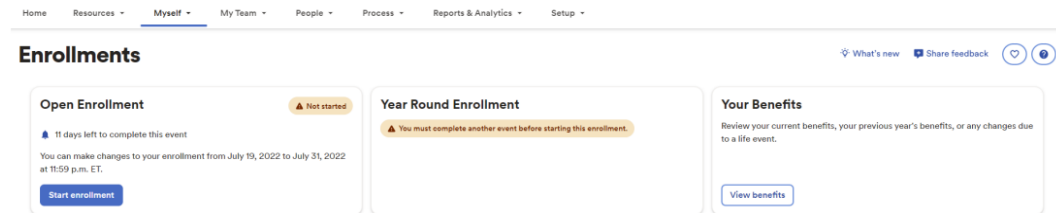


Upon logging in, you will be presented with a pop-up showing important information about this Open Enrollment period. You can click **Enroll Now** or **Remind Me Later**.

Note: This pop-up is displayed each time you log in during the Open Enrollment period. 24-hours after submitting your selections the pop-up will no longer display.



Selecting **Enroll Now** will bring you to the Myself – Benefits – Enrollments screen where you can click **Start Enrollment**.



Changing Your Benefits Outside of Open Enrollment

Qualifying Events:

When it's not open enrollment, you can ONLY change your benefits if you have a change in:

- marital status
- number of dependents or dependent eligibility
- employment that affects eligibility (you or dependents)
- residence that affects access to network providers
- health coverage due to spouse's employment
- eligibility for Medicare or Medicaid



- **You have 30 days to submit changes**

What's New or Changing for 2025?

What is Staying the Same?

- UHC Dental will remain the same for 2025
- HB will continue to fund the HRA for the first \$3000 EE and \$6000 FAM for those enrolled in the Aetna HRA \$5000 plan.
- HB will continue their current HSA contribution of \$1000 EE and \$2000 FAM enrolled in the Aetna HDHP plan
- Legal will remain with LegaleASE
- Pet Insurance will remain with Pet Assure and PetPlus

What is Changing?

- Medical is changing from UHC to Aetna – Same plan designs
- Vision is changing to VSP
- Life and Disability is changing from UHC to Reliance Standard with a “New” open enrollment for Guaranteed Issue amounts
- Employee Assistance Program (EAP) is changing to Reliance Standard
- Critical Illness, Hospital Indemnity and Accident are moving from UHC to Hartford
- Addition of Group Auto Home discount program through Confie
- Addition of ID Theft coverage through Allstate

Need Help With Your Benefits?

Get help from an Alliant Benefit Advocate, who are trained professionals with extensive benefits and insurance experience

- Benefit questions and clarifications
- Enrollment and eligibility questions
- Appeal of denied claims
- Open enrollment support
- Prescription issues
- HSA and FSA questions
- COBRA
- Medicare questions
- Other general healthcare-related questions

Email

benefitsupport@alliant.com

Phone

1-800-489-1390





HEALTH COVERAGES

- Aetna Medical Insurance “New”
- UHC Dental Insurance “Same”
- VSP Vision Insurance “New”
- Wex Flexible Spending Accounts “Same”

Medical Plans – Aetna

- Aetna HRA \$5000
- Aetna \$750
- Aetna HDHP

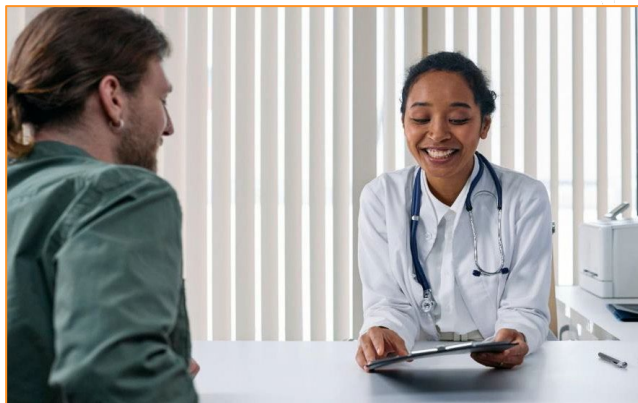
Medical coverage includes:

- Preventive and emergency care
- Doctor visits
- Prescription drugs



Words to know

Learn
the words that will help you
understand how your plan works.



DEDUCTIBLE: The amount of healthcare costs you have to pay for with your own money before your plan will start to pay anything.

COINSURANCE: After the deductible (if applicable), you and the plan share the cost. For example, if the plan pays 80%, your coinsurance share of the cost is 20%. You are billed for your coinsurance after your visit.

COPAY: A set fee you pay instead of coinsurance for some healthcare services, for example, a doctor's office visit. You pay the copay at the time you receive care.

OUT-OF-POCKET MAXIMUM: Protects you from big medical bills. Once costs "out of your own pocket" reach this amount, the plan pays 100% of most eligible expenses for the rest of the plan year.

IN-NETWORK /OUT-OF-NETWORK: In-network services will always be the lowest cost option. Out-of-network services will cost more or may not be covered. Check your plan's website to find doctors, hospitals, labs, and pharmacies that belong to the network.

Which Plan Is Right for You?

AETNA MEDICAL	Aetna HRA \$5000	Aetna \$750	Aetna HDHP
Plan type	PPO/HRA (OAMC)	PPO (OAMC)	PPO/HSA (OAMC)
Out-of-network coverage?	Yes	Yes	Yes
Primary Care Physician (PCP) required?	No	No	No
Preventive Care Covered	Yes – 100%	Yes – 100%	Yes 100%
Can I have a Health Savings Account (HSA)?	No	No	Yes
Other Features	<ul style="list-style-type: none"> Plan pays amount upfront (first \$3000 EE or \$6000 Fam) then member is responsible for a portion before the plan kicks back in – “Donut Hole” approach Flexibility to see any provider You pay more out-of-network No referrals required 	<ul style="list-style-type: none"> Flexibility to see any provider You pay more out-of-network No referrals required More predictable out-of-pocket costs 	<ul style="list-style-type: none"> You must meet a deductible Flexibility to see any provider You pay more out-of-network No referrals required Compatible with tax-free health savings account (HSA)

Medical Plan Comparison – In Network*

	Aetna HRA \$5000	Aetna \$750	Aetna HDHP
Annual Deductible	Individual: \$5,000 Family: \$10,000	Individual: \$750 Family: \$2,250	Individual: \$3,300 Family: \$6,600
HRA / HSA Harvard Funding	Individual: First \$3,000 Family: First \$6,000	N/A	Individual: \$1,000 Family: \$2,000
Annual Out-of-Pocket Maximum	Individual: \$7,350 Family: \$14,700	Individual: \$4,000 Family: \$8,000	Individual: \$6,000 Family: \$12,000
Member Coinsurance	0% after deductible	20% after deductible	20% after deductible
Routine Preventive Care	Covered in Full	Covered in Full	Covered in Full
Primary Office Visit	\$30 copay	\$30 copay	20% after deductible
Specialist Office Visit	\$50 Copay	\$30 copay	20% after deductible
Emergency Room	\$250 Copay, waived if admitted	20% after deductible	20% after deductible
Urgent Care	\$50 copay	\$30 copay	20% after deductible
Hospitalization	0% after deductible	20% after deductible	20% after deductible
Most Other Services	0% after deductible	20% after deductible	20% after deductible

*Subject to contractual rates – providers cannot balance bill over the contractual rates — refer to your summary plan description for full plan details.

For Internal Use Only

Medical Plan Comparison – Out of Network (OON)*

	Aetna HRA \$5000	Aetna \$750	Aetna HDHP
Annual Deductible	Individual: \$8,000 Family: \$16,000	Individual: \$3,000 Family: \$9,000	Individual: \$3,300 Family: \$6,600
Annual Out-of-Pocket Maximum	Individual: \$14,500 Family: \$29,000	Individual: \$9,000 Family: \$18,000	Individual: \$6,000 Family: \$12,000
Member Coinsurance	20% after deductible	20% or 40% after deductible, varies	20% or 40% after deductible, varies
Routine Preventive Care	20% after deductible	20% after deductible	20% after deductible
Primary Office Visit	20% after deductible	20% after deductible	40% after deductible
Specialist Office Visit	20% after deductible	20% after deductible	40% after deductible
Emergency Room	\$250 copay, waived if admitted	20% after deductible	20% after deductible
Urgent Care	20% after deductible	20% after deductible	40% after deductible
Hospitalization	20% after deductible	40% after deductible	40% after deductible
Most Other Services	20% after deductible	20% or 40% after deductible, varies	Mostly 40% after deductible, except preventative care & ER

*Subject to reasonable and customary charges – Member may be responsible above plan benefits - refer to your summary plan description for full plan details.

For Internal Use Only

Prescription Drug Comparison*

	Aetna HRA \$5000	Aetna \$750	Aetna HDHP
Rx Deductible	None	None	Included in Medical deductible
Annual Out-of-Pocket Maximum	Included in Medical out-of-pocket limit	Included in Medical out-of-pocket limit	Included in Medical out-of-pocket limit
Preventive Care Waiver	N/A	N/A	All meds under the HDHP are subject to deductible before transitioning to copays. Exceptions are federally required preventive drugs and other preventive meds for various preventive health issues
Retail-per 30 day supply	Generic: \$20 Preferred: \$40 Non-Preferred: \$70 Specialty: \$70	Generic: \$10 Preferred: \$35 Non-Preferred: \$70 Specialty: \$70	Generic: \$10 Preferred: \$35 Non-Preferred: \$60 Specialty: \$60
Mail Order-per 90 day supply	Generic: \$50 Preferred: \$100 Non-Preferred: \$175 Specialty: \$175	Generic: \$25 Preferred: \$87.50 Non-Preferred: \$175 Specialty: 175	Generic: \$25 Preferred: \$87.50 Non-Preferred: \$150 Specialty: \$150

*Subject to reasonable and customary charges – Member may be responsible above plan benefits - refer to your summary plan description for full plan details.

For Internal Use Only



Aetna Enhanced Maternity ProgramTM

You can count on us for support — wherever you are in your maternity journey.



This program supports all women throughout their entire experience, whether they have risk factors or not.

Special program features include:

- A fertility advocate* to be your care manager and provide support if you're facing infertility
- Predictive data to help us identify pregnancies early on so we can provide timely, more responsive outreach to you
- Preeclampsia prevention by providing education and resources, if needed
- Guided genetic counseling and screening services, backed by medical expertise
- Education and resources to help close racial gaps in health care and support women of color

*While only your doctor can diagnose, prescribe or give medical advice, our fertility advocates/care managers can provide information on a variety of maternity-related topics.

CVS Health Virtual Care™

From therapy appointments to quick care, we've got you covered. You'll have access to 24/7 on-demand care and mental health services by appointment. CVS Health Virtual Care™ is in addition to your traditional network of providers. Access is included in your medical plan, made available through Aetna®, a CVS Health® company. Another way healthier happens together™.

Getting the care you need just got easier.

- Here's what's included:
- **On-demand care:**
- **Access 24/7 quick care** with licensed providers for common illnesses (cough, colds, flu), common infections (ear, sinus, skin, urinary) and one-time medication refill
- **Mental health services:**
- • Take charge of your mental well-being. Appointments available **7 days a week including evenings**. Counseling with a therapist for anxiety, stress, grief and psychiatry services for prescriptions and medication management.
- **Additional benefits:**
- Option to extend virtual visits to in-person care with in-network providers or at 1,100+ MinuteClinic® locations* nationwide.
- Access your health information, lab results and personalized tips from anywhere with your health dashboard.
- **What's next?**
- Activating your account takes just minutes and ensures you will be ready to use CVS Virtual Care when you need it.
- Go to www.CVS.com/virtual-care to learn more about virtual care services or register to set up your account for future care needs.
- Limitations and restrictions may apply to certain services and locations.

*MinuteClinic in-person services are not included with this product and are subject to plan benefit.

**Members enrolled in qualified high-deductible health plans must meet their deductible before receiving covered non-preventive services at no cost-share.

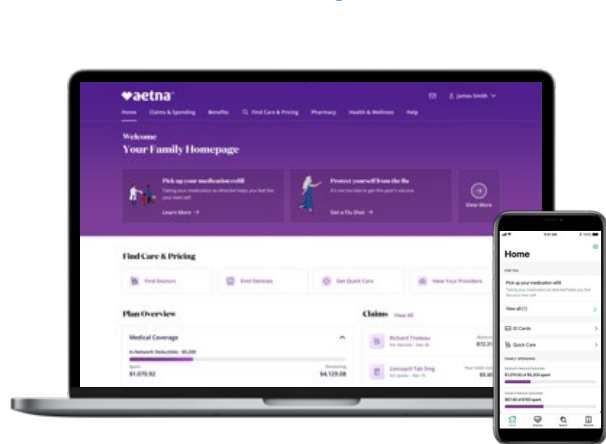
Product disclaimer: Aetna® and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health® family of companies. Aetna is not responsible for services received at MinuteClinic locations.

Take charge of your health care

with the Aetna® member website and the Aetna HealthSM app

Find everything you need, all in one place

Set up your account to manage your benefits and more at home or on the go.



Just visit **Aetna.com** to create an account and log in to your member website.

App screens are a composite of real situations.
All names and other identifying information are fictional.

A smarter, simpler, more convenient way to take charge of your health care and benefits



Manage your plan

- Check your plan summary for detailed information on what's covered by your plan.
- Track your spending and understand your progress toward meeting your individual and family deductibles.
- Easily access your digital ID card anytime.



Connect to care

- Use tools to help you choose quality, in-network and local providers, pharmacies and facilities, including convenient retail clinics and urgent care.
- Get cost estimates for visits and procedures before getting care.
- Talk to a doctor anytime by phone or video chat from home.



View claims

- Check up to two years of claims for your whole family.
- Pay claims.



Improve your health

- Receive personalized reminders to improve your health.



Download the
Aetna Health app

24-Hour Nurse Line

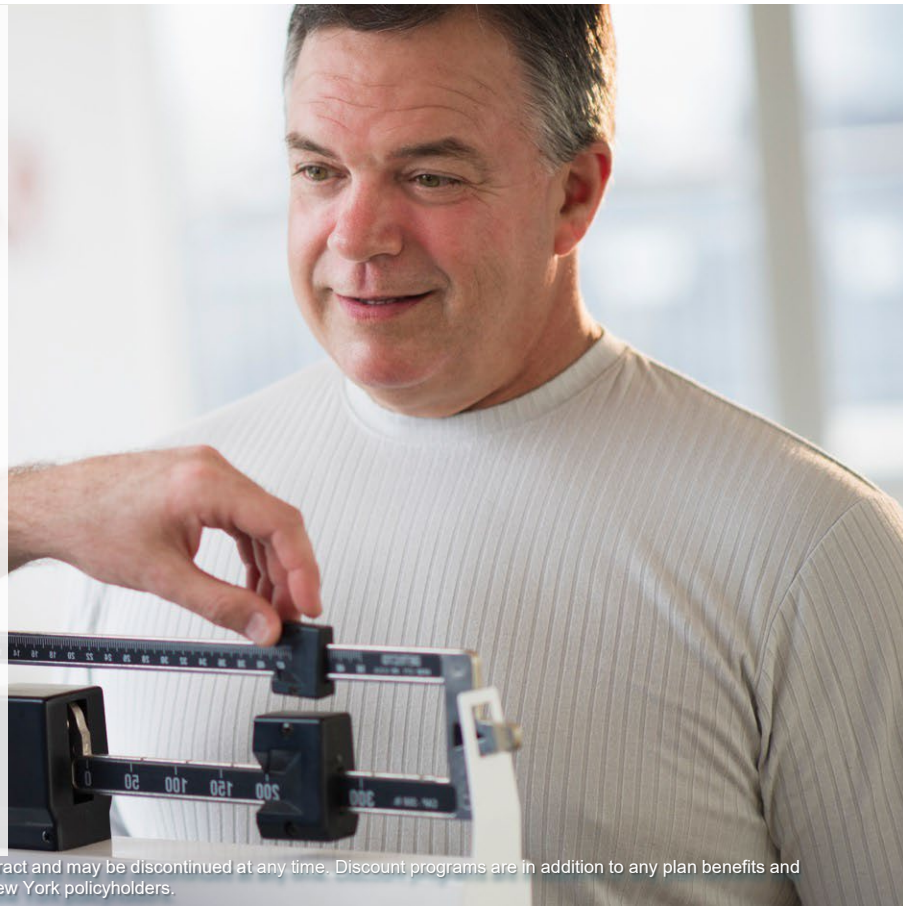
Health information is
a phone call away

- Get information on a wide range of health and wellness topics
- Make better health care decisions
- Find out more about a medical test or procedure
- Get help preparing for a visit to your doctor
- Receive emails with links to videos related to your question or topic



Count on savings with the Aetna® Discount Program*

- Fitness
- Books
- Natural products and services
- Oral health
- Hearing
- Weight management
- Vision
- At-home products



* Discount programs are NOT insurance and program features are not guaranteed under the plan contract and may be discontinued at any time. Discount programs are in addition to any plan benefits and may require a separate charge to access such programs. Discount programs are NOT available to New York policyholders.

It's simple to get started with Aetna®



Enroll during your open enrollment period.



Review the drug list and work with your doctor if you're taking any medicine that needs approval.

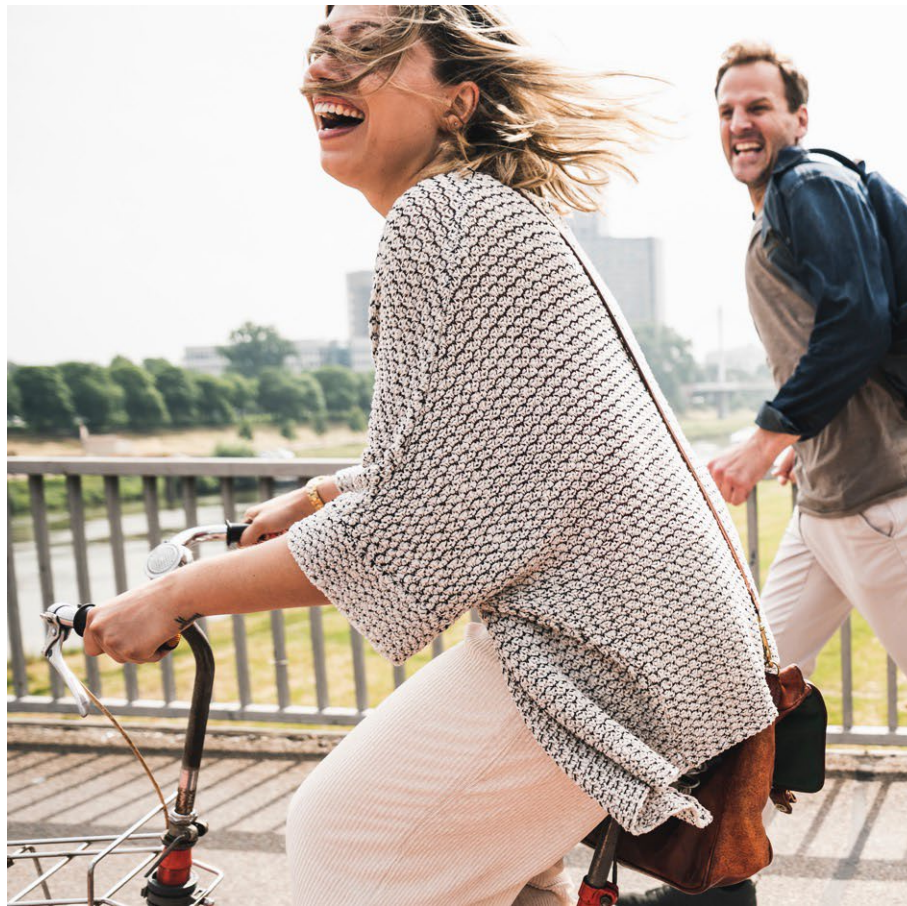
After your effective date:
Visit [Aetna.com](https://www.aetna.com) to create an account and log in to your member website.

Download the Aetna HealthSM app



Apple, the Apple logo, iPhone and Apple Watch are trademarks of Apple, Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc.

Google Play and the Google Play logo are trademarks of Google, LLC. The app is available on Google Play.



Money-saving tips while you get healthy



- Use **urgent care centers** for nonemergency, after-hours care



- Use your **preventive benefits** — get recommended screenings and checkups



- Consider using **generic drugs**, if appropriate



- Use **cost tools** on your member website to make smart choices

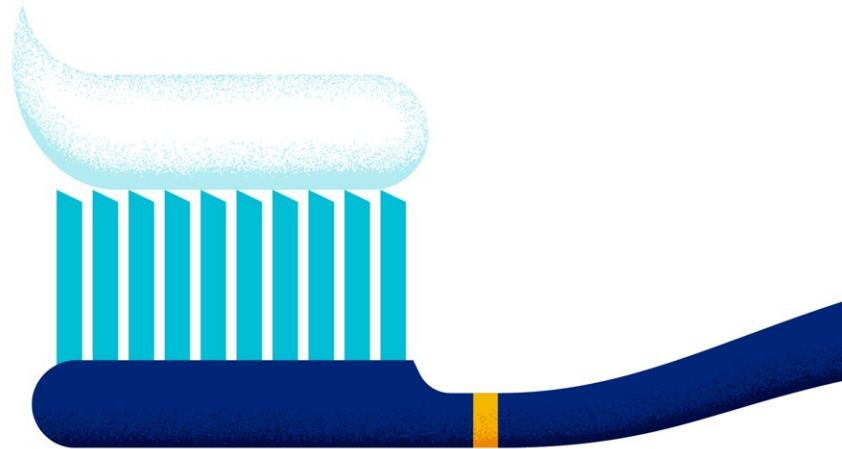
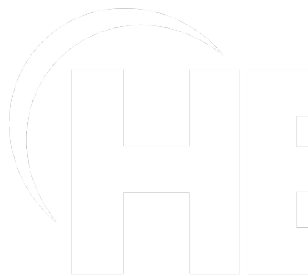
Dental Plan Overview – No changes

UHC DENTAL	IN NETWORK	OUT OF NETWORK
Annual Plan Deductible	Individual: \$25 Family: \$75	Individual: \$25 Family: \$75
Annual Plan Maximum**	\$2,000	\$2,000
Diagnostic & Preventive	Covered at 100% no deductible	Covered at 100% no deductible
Basic Services	Deductible then covered at 80 %	Deductible then covered at 80 %
Major Services	Deductible then covered at 50 %	Deductible then covered at 50 %
Orthodontia	Covered at 50%, not subject to deductible \$1,500 lifetime max (Child up age 19 Only)	Covered at 50%, not subject to deductible \$1,500 lifetime max (Child up to age 19 Only)
Maximum Rollover	Claims Threshold: \$1,000 Rollover Amount: \$500 In-Network Only Rollover: \$100 add'l - Account Limit: \$2,000	Claims Threshold: \$1,000 Rollover Amount: \$500 Account Limit: \$2,000

Dental health impacts your overall health

Gum disease may lead to inflammation and infection in the body, which may also be linked to:

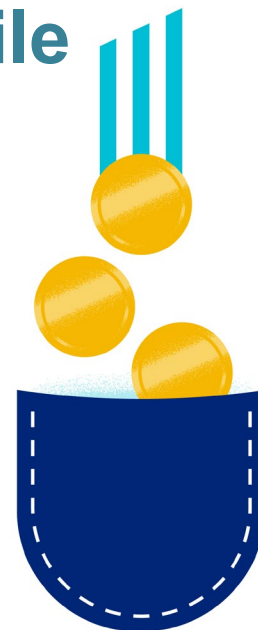
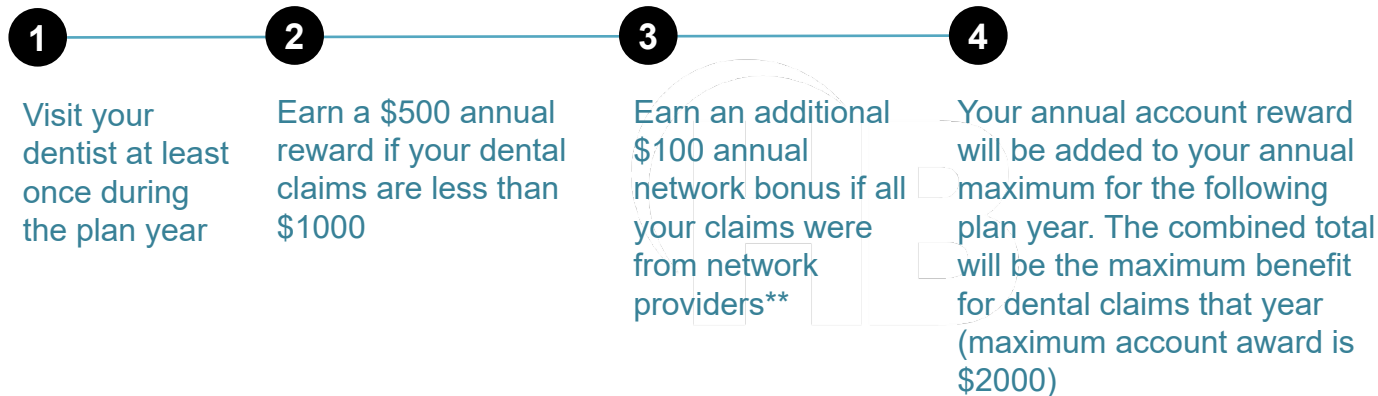
- Diabetes¹
- Heart disease²
- Rheumatoid arthritis²
- Pregnancy complications³
- Respiratory conditions⁴



¹ Xiaofeng Wang, Huiyu Wang, Tianfu Zhang, Lu Cai, Chenfei Kong, Jinting He. Front Endocrinol (Lausanne): "Current Knowledge Regarding the Interaction Between Oral Bone Metabolic Disorders and Diabetes Mellitus." Published online Aug. 7, 2020. Accessed February 2024. ² N. Fine, J.W. Chadwick, C. Sun, K.K. Parbhakar, N. Khoury, A. Barbour, M. Goldberg, H.C. Tenenbaum, M. Glogauer. Journal of Dental Research: "Periodontal Inflammation Primes the Systemic Innate Immune Response." First published Oct. 20, 2020. Accessed February 2024. ³ Johnson, Tracy C., Dental Care and Pregnancy. <https://www.webmd.com/oral-health/dental-care-pregnancy>. Reviewed March 5, 2020. Accessed February 2024. ⁴ Vittorio Moraschini, José de Albuquerque Calasans-Maia, Monica Diuana Calasans-Maia. Journal of Periodontology: "Association between asthma and periodontal disease: A systematic review and meta-analysis." First published Feb. 23, 2018. Accessed February 2024. [aap.onlinelibrary.wiley.com/doi/abs/10.1902/jop.2017.170363](http://onlinelibrary.wiley.com/doi/abs/10.1902/jop.2017.170363).

Get rewarded for taking care of your smile

Here's how the Consumer MaxMultiplier® works:



* If your plan has different network versus out-of-network maximums, we base the awards on the out-of-network maximum.

** Bonus not allowed in all states.

UnitedHealthcare dental coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Dental Benefit Providers, Inc., Dental Benefit Administrative Services (CA only), DBP Services (NY only), United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number DPOL.06.TX, DPOL.12.TX, DPOL.12.TX (Rev. 9/16) and DPOL.18.TX and associated COC form numbers DCOC.CER.06, DCOC.CER.IND.12.TX, DCERT.IND.12.TX and DCOC.18.TX. Plans sold in Virginia use policy form number DPOL.06.VA with associated COC form number DCOC.CER.06.VA, policy form number DPOL.12.VA with associated COC form number DCOC.CER.12.VA or policy form number DPOL.18.VA with associated COC form number DCOC.18.VA. This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company.

Benefits to help support your overall health

These services are covered at 100% when you see a network provider



Additional benefits during pregnancy

During pregnancy and for 3 months after delivery, get coverage on:

- Additional dental cleanings
- Non-surgical gum treatment
- Gum maintenance



Oral cancer screening

Receive one screening per plan year, including light-contrast technology



During pregnancy, people are more likely to have gum disease. Gum disease is associated with pregnancy complications.¹

Oral cancers are twice as common in men than women.²

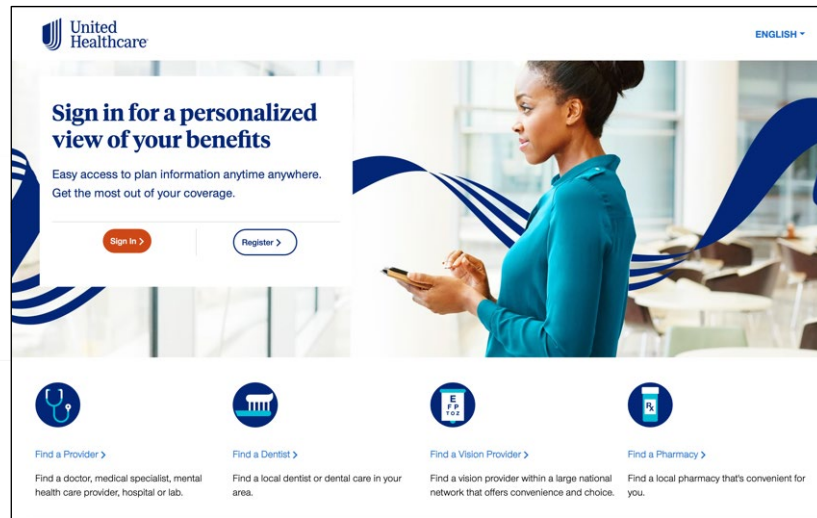
¹ Pregnancy, American Dental Association. Center for Scientific Information, ADA Science Institute. April 1, 2019, Web accessed February 2024.

² American Cancer Society. <http://www.cancer.org/cancer/oral-cavity-and-opharyngeal-cancer/causes-risks-prevention/risk-factors.html>, March 23, 2021.

Managing your Dental digitally

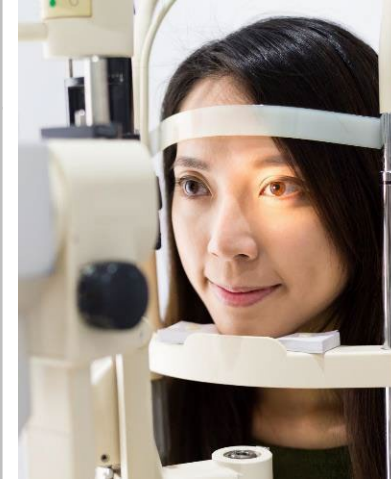
On myuhc.com® and the **UnitedHealthcare**® app:

- Search for providers
 - Find general dentists and specialists
- Explore plan resources
 - View your benefit summary
 - Look over the Explanation of Benefits (EOB)
 - View, print or order an ID card
 - Get answers to FAQs
- Get claims information
 - Access claim forms, status and history



Vision Plan

VSP - VISION SERVICE PLAN	In-Network ¹	Out-of-Network ²
COPAY Your vision checkup is fully covered after your Exam copay.	Exam: \$10 Materials: \$25 Contact Lens Fitting & Eval: up to \$60	Exam: Reimbursed up to \$45 Materials: Reimbursed as shown below Contact Lens Fitting & Eval: Included in contact lens allowance
COVERED SERVICES After your Materials copay, the plan provides an allowance for frames, lenses, and elective contact lenses. An allowance is a set amount of money the plan covers toward your purchase.	Frames: \$150 allowance + 20% discount Walmart: \$150 allowance Costco: \$80 Allowance Single, Bifocal, Trifocal lenses: \$25 Lined Bifocal Lenses: \$25 Trifocal Lenses: \$25 Progressives: \$25 Lenticular: \$25 Contact Lenses (Elective)³: \$150 allowance, no copay Contact Lenses (Necessary)³: \$170 Retinal Imaging: \$20 per exam	Frames: Up to \$70 Single Vision Lenses: Up to \$30 Lined Bifocal Lenses: Up to \$50 Trifocal Lenses: Up to \$65 Progressives: up to \$50 Contact Lenses (Elective)³: Up to \$105 Contact Lenses (Necessary)³: Up to \$210
FREQUENCY How often your plan will pay a benefit for services or materials.	Exam: Once every 12 months Frames: Once every 24 months Lenses: Once every 12 months Contacts (Elective): Once every 12 months	Exam: Combined with in-network Frames: Combined with in-network Lenses: Combined with in-network Contacts (Elective): Combined with in-network



¹ Network benefits provided through Vision Service Plan (VSP)

² In-network copays apply to out-of-network providers. Members must then submit a claim for the cost of the services and will be reimbursed up to the limits shown in the table

³ Contacts may be purchased in lieu of the eyeglass frames/lenses benefit

Your VSP Plan Snapshot: Choice Plan

Frequency

Exam: Every Calendar Year
Frame: Every Calendar Year
Lenses: Every Calendar Year

Copays

\$10 WellVision Exam®
\$25 Glasses
\$60 Contact lens exam

Allowances

\$150 frame
\$150 contacts
(instead of glasses)

VSP® members save an average annual savings of **\$471***

*Check out the Member Benefit Summary for details. Savings based on state and national averages for eye exams and most commonly purchased brands. This number represents average savings for a VSP member at an in-network provider. Your actual savings will vary depending on the eyewear you choose, your plan and the eye doctor you visit.

Great Eye Care with a Hefty Side of Savings

Vision Care
is Essential



Savings that Really
Stack Up



Thousands of
In-Network
Choices



Founded by
Doctors
Focused on
You



Vision Care is Essential

Did you know an eye exam is the only non-invasive way to view blood vessels in your body?

Signs of more than 270 health conditions can be detected during an eye exam*

Your eye doctor can be the first to detect certain conditions, like diabetes*

heart disease + **stroke** + cardiovascular + Alzheimer's + hypertension + aneurysm + **diabetes** + **brain tumor** + high blood pressure + cancers of blood, tissue, skin + **high cholesterol** + Lyme disease + multiple sclerosis + lupus + sickle cell disease + stroke + **thyroid disease** + vascular disease + brain tumor + melanoma + squamous cell + **Lymphoma** + **leukemia** + rheumatoid arthritis + giant cell arteritis + **medication toxicities** + myasthenia gravis + sarcoidosis + sjögren's syndrome + **vitamin a deficiency**

270+

Your VSP Plan Snapshot: Lens Enhancements - Choice Plan

Lenses

Fully covered single vision, lined bifocal, lined trifocal lenses, and impact resistant lenses for children

Lens Enhancements

Fully covered standard progressives

Average savings of **30%** on other lens enhancements

VSP[®] members save an average annual savings of **\$471***

*Check out the Member Benefit Summary for details. Savings based on state and national averages for eye exams and most commonly purchased brands. This number represents average savings for a VSP member at an in-network provider. Your actual savings will vary depending on the eyewear you choose, your plan and the eye doctor you visit.



Retinal Screening

- Digital imaging is key to early detection and intervention
 - Images of the inside of the eye
 - Baseline documentation of a healthy eye
 - Screen for potential disease(s)
 - Can be compared year after year to monitor even the most subtle changes in the eyes
 - No more than **\$39** copay
 - **\$0** copay for members with diabetes

Essential Medical Eye Care

- Fully covered retinal screening for members with diabetes.
- Exams and services to treat immediate issues like pink eye and sudden changes in vision.
- Treatment options to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.
- \$20 per exam for additional exams and services.



"My husband burned his eyes welding, and without this benefit we would have had to pay out of pocket or waited days to get prior authorization from his health insurance."



Savings Beyond Benefits

- 50%** ▶ Save 50% on additional pairs of glasses and sunglasses at Visionworks®
- \$250** ▶ Average savings at Eyeconic®, plus free shipping and returns

Plus, VSP members get access to Exclusive Member Extras

- \$20** ▶ Extra \$20 on Featured Frame Brands
- 60%** ▶ Save up to 60% on hearing aids with TruHearing®*
- \$1,200** ▶ Save up to \$1,200 on Lasik
- \$300** ▶ Get up to \$300 in contact lens rebates

Offers vary based on state and benefit plan. Brands and offers subject to change.

*VSP is providing information to its members but does not offer or provide any discount hearing program. VSP makes no endorsement, representations or warranties regarding any products or services offered by TruHearing, a third-party vendor. TruHearing is not insurance and not subject to state insurance regulations. For additional information, please visit vsp.com/offers/special-offers/hearing-aids/truhearing. For questions, contact TruHearing directly. Not available directly from VSP in the states of Washington and California.



The Choice is Yours

It's easy to choose the care that's right for you.



Private Practice
locations



Retail
locations



Online at
Eyeconic®

**Your benefits go further
when you visit a
VSP Premier Edge™
location, including
private practice doctors
and Visionworks®!**

vsp
PREMIER
edge

Get more
at preferred
in-network
doctor locations

private
practice
doctors

Visionworks

Participating
Retail Chains
like these –
and more

COSTCO
OPTICAL

Walmart
Vision Center

sam's club

Rxoptical
The people who care for your eyes.

Clarkson
Eyecare
DOCTORS • GLASSES • CONTACTS • LASIK

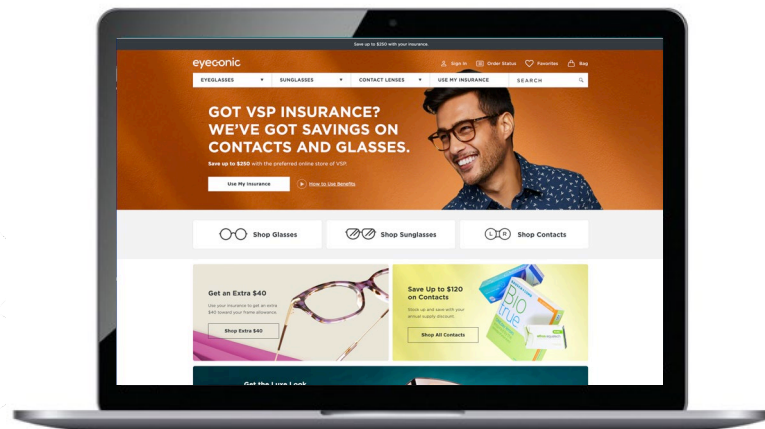
COHEN'S
Fashion Optical

Eyewear Shopping Online at Eyeconic

Eyeconic is the VSP online eyewear store that seamlessly connects your VSP vision benefits to your account. You'll get:

- A huge selection of contact lenses and designer frames 24/7 – and the Virtual Try-On Tool.
- Free shipping and returns.
- 20% off any out-of-pocket expenses on eyewear after your frame allowance is applied.
- Specialty sizes that fit your needs.

Find your product, customize your order and we do the rest. Start saving today at **eyeconic.com**® today.



eyeconic
a vsp vision company

The Right Doctor for You

Using the Find a Doctor tool on **vsp.com** is easy

Visit **vsp.com/eye-doctor** (or navigate from **vsp.com** home page)
Enter the preferences that are meaningful to you like:

- Location
- Gender
- Language
- Frame brands
- Specialty
- Services
- Hours & Scheduling

The screenshot shows the 'Find an Eye Doctor' search tool on the VSP website. At the top, there's a navigation bar with 'Members', 'Log In / Create an Account', and 'Choose Language'. Below this is a menu with 'FIND A DOCTOR' (highlighted), 'BENEFITS', 'OFFERS', 'EYEWEAR AND WELLNESS', 'PLAN OPTIONS', and 'SHOP'. The main section is titled 'Find an Eye Doctor' with a background image of a smiling man with glasses. It includes instructions: 'To ensure you see an in-network eye doctor for your plan, Create an Account or Log In before you search. You'll get more and save more in-network!'. Below this is a search filter section with 'EDIT SEARCH +' and 'CLEAR FILTERS' buttons. The filters are organized into two rows of dropdown menus: 'Doctor Network Choice' (with a link to 'about doctor network'), 'Type of Doctor', 'Products' (with a link to 'about products'), 'Services' (with a link to 'about services'), 'Frame Brands', 'Hours & Scheduling', 'Gender', and 'Language'. At the bottom of the filters is a 'Distance (in miles)' slider with markers at 5, 10, 25, 50, and 100. An 'Apply Filters' button is located to the right of the slider.

A sliding distance bar makes finding a match nearby easy. You can even opt to view locations on a map.

Using Your Benefit is Easy

Once you've enrolled...

1. Create an account at **vsp.com** and review your personalized benefit information.
2. Find a VSP in-network doctor by visiting **vsp.com** or calling **800.877.7195**.
3. Simply tell your eye doctor's office that you have VSP—and we'll take care of the rest!



YOUR 2025 BI-WEEKLY BENEFIT COSTS

The total amount that you pay for your benefits coverage depends on the plans you choose and which dependents you cover. Your healthcare costs are deducted from your pay on a pre-tax basis—before federal, state, and social security taxes are calculated—so you pay less in taxes.

“NEW AETNA PLANS”

MEDICAL	Aetna HRA \$5000	Aetna \$750	Aetna HDHP
Employee Only	\$94.36	\$177.35	\$76.94
Employee + 1	\$181.85	\$341.78	\$148.28
Employee + Family	\$281.55	\$529.17	\$229.46

“SAME UHC PLAN”

DENTAL	UHC PPO Dental
Employee Only	\$5.22
Employee + 1	\$10.69
Employee + Family	\$17.33

“NEW VSP PLAN”

VISION	VSP Choice
Employee Only	\$3.54
Employee + Spouse	\$5.66
Employee + Child(ren)	\$5.78
Family	\$9.32

*Please note that above costs represent costs for Eligible FT employees

Please note that unless your domestic partner is your tax dependent as defined by the IRS, contributions for domestic partner coverage must be made after-tax. Similarly, the company contribution toward coverage for your domestic partner and his/her dependents will be reported as taxable income on your W-2. Contact your tax advisor for more details on how this tax treatment applies to you. Notify Veritas Prime if your domestic partner is your tax dependent.

For Internal Use Only

Healthcare Account(s)

- Health Savings Account (HSA)
- Flexible Spending Account (FSA)
- Dependent Care Account (DCA)



Health Savings Account (HSA)



Reasons to look into the HSA:

- Personal savings account for healthcare expenses—office visits, labs, dental, vision, prescriptions, and more
- Tax-free contributions, expenses, earnings
- It's portable, the money is yours to keep even if you leave the company
- Unlimited rollover of unused balance
- Use for spouse and tax-dependent children even if not on your health plan
- Extra retirement savings! After 65, use HSA for healthcare expenses (tax-free) or regular living expenses (taxable).

Rules about the HSA:

- You must be enrolled in a HDHP in order to contribute to an HSA
- You cannot be enrolled in Medicare
- You cannot simultaneously be enrolled in a non HDHP
- Maximum annual contributions for 2025: Ind: \$4,300/family: \$8,550
 - This includes employer contributions
 - If age 55 or older you may do a \$1,000 "catch up contribution"
- If you use funds on non-qualified items, you will pay income tax and 20% penalty
- You own the account, so it is your sole responsibility to manage contributions and utilization

Bonus:

Harvard
Bioscience helps
you save!

If you are
enrolled in the
Aetna HDHP
plan HB will fund
\$1,000 for EE
only and \$2,000
for Family into
your account

*Administered by Aetna

Healthcare Flexible Spending Account (FSA)

“WEX” – Same Vendor as Current

5 reasons to look into the FSA:

- Tax-free account for healthcare expenses
- Pay for eligible healthcare expenses—office visits, lab tests, dental and vision care, prescriptions, over-the-counter medicines
- Use for spouse and tax-dependent children even if they are not covered by your health plan
- Funded by pre-tax contributions from your paycheck—up to **\$3,300** for 2025
- Funds available on first day of plan year
- Eligible expenses must be incurred during the plan year and submitted for reimbursement no later than **March 31st, 2025**

YOU CANNOT HAVE AN FSA IF YOU ARE ENROLLED IN A HDHP PLAN WITH A HEALTH SAVINGS ACCOUNT (HSA)

YOU DO NOT NEED TO BE ENROLLED IN HARVARD BIOSCIENCE MEDICAL PLANS IN ORDER TO HAVE AN FSA

YOU MUST ACTIVELY RE-ENROLL IN THE FSA EACH YEAR



Estimate Carefully!

You may roll over up to **\$660** of unused funds to the following year, but any amount in excess of that will be forfeited at the end of the plan year.

What Expenses Are Allowed for an HSA or FSA?

Common Eligible Expenses

- 
- Acupuncture
 - Ambulance
 - Artificial limbs
 - Artificial teeth*
 - Birth control treatment
 - Blood sugar test kits for diabetics
 - Breast pumps, lactation supplies
 - Chiropractor
 - Contact lenses and solutions*
 - Crutches
 - Dental treatments*
 - Doctor's office visits and copays
 - Drug addiction treatment
 - Drug prescriptions
 - Eyeglasses (Rx and reading)*
 - Fluoride treatments*
 - Hearing aids and batteries
 - Infertility treatment
 - Inpatient alcoholism treatment
 - Insulin
 - Laboratory fees
 - Laser eye surgery*
 - Menstrual care products
 - Orthodontics*
 - Orthotic inserts
 - Over-the-counter medications without a prescription
 - Prescription drugs
 - Speech therapy
 - Surgery, excluding cosmetic
 - Telehealth visits
 - Vasectomy
 - Vision exam*
 - Walker, cane, wheelchair

Common Ineligible Expenses

- Aromatherapy
- Baby bottles and cups
- Baby oil
- Baby wipes
- Cosmetics and skin care
- Cosmetic surgery
- Cotton swabs
- Dental floss
- Deodorants
- Hair re-growth supplies & services
- Health club membership dues
- Humidifier
- Lotion
- Low-calorie foods
- Mouthwash
- Petroleum jelly
- Shampoo and conditioner

Dependent Care Flexible Spending Account (FSA)

How it works

- Funded by pre-tax contributions from your paycheck—up to \$5,000 per household per year
- Election is binding unless you have a change in status
- FSA and/or dependent care tax credit?
Talk to a tax advisor
- Use it or lose it: No rollover! No spending on healthcare FSA!
- Eligible expenses must be incurred during the plan year and submitted for reimbursement no later than March 31st, 2025

3 reasons to look into the dependent care FSA

- You pay for preschool, day care, before/after school programs, and/or summer day camp so you and your spouse can work.
- You have children under 13 and/or adult dependents who need day care.
- You want to save on taxes.

IMPORTANT NOTES:

- You must re-enroll every year for the Veritas Prime DP Care FSA.
- You do NOT need to be enrolled in Veritas Prime medical plans in order to elect DP Care
- You may have DP Care even if you have an HSA

LIFE & DISABILITY INSURANCE

- Fill financial gaps
- Continue income during recovery from pregnancy, injury or illness
- Provide for family after a loss
- Employee Assistance Program (EAP)



Basic Life and AD&D Insurance – “NEW”

Employer Paid Basic Life and AD&D: Life Benefit=AD&D benefit	
Employee Benefit Amount	2 x BAE + Commissions to a maximum of \$500K
Guarantee Issue	\$500K
Age Reduction Schedule	
Age Band	Benefit Reduction
65	35%
75	50%



**Don't forget to
update your
beneficiary
information!!!**

Supplemental Term Life Insurance “NEW”

Supplemental Life and AD&D: Life Benefit=AD&D benefit	
Employee Benefit Amount	\$10,000 increments to a maximum of \$500,000 – not to exceed 5 times salary plus commissions
Spouse Benefit Amount	\$5,000 increments to a maximum of \$250,000, not to exceed employee supplemental amount
Child (ren) Benefit Amount Age 14 days to age 26	Increments of \$1,000 up to \$20,000
Guarantee Issue	
Employee Guarantee Issue	\$200,000
Spouse Guarantee Issue	\$25,000
Child (ren) Guarantee Issue	Full election (\$20k)
Age Band	Benefit Reduction
65	35%
70	50%



You can only purchase supplemental coverage for your spouse and/or children if you have supplemental coverage for yourself

Also important to note, there is a new Open Enrollment for 2025 which means you can buy up to the GI amounts no questions asked!

Short-Term Disability (STD) – “NEW”

SHORT TERM DISABILITY	Employer Paid Benefit Annual Salary of \$100K or less	Employer Paid Benefit Annual Salary of \$101K or more
Basic Benefit Amount	60% of your weekly earnings	60% of your weekly earnings
Maximum Benefit Amount	Up to \$1,200 per week	Up to \$2,500 per week
Elimination Period	7 calendar days	7 calendar days
Benefit Duration	12 weeks	12 weeks



Income Replacement for Limited-Duration Issues

- Prolonged illness or injury
- Surgery and recovery time
- Pregnancy issues and childbirth recovery



Long-Term Disability (LTD) – “NEW”

DISABILITY-RELIANCE

Income replacement for longer-duration issues

LONG TERM DISABILITY	Employee Paid Benefit Earnings up to \$100K	Employee Paid Benefit Earnings of \$100K or more
Basic Benefit Amount	60% of your monthly earnings	60% of your monthly earnings
Maximum Benefit Amount	Up to \$5,000 per month	Up to \$10,000 per month
Elimination Period	90 days	90 days
Benefit Duration	SSNRA (normal social security retirement age)	SSNRA (normal social security retirement age)

Value-Added Services

Employee Support and Assistance

- Our Employee Assistance Program (EAP) offers
- comprehensive services to support employees where and when they need it most.
- The program includes up to 3
- face-to-face visits to support
- behavioral health as well as
- options for telephonic or Zoom,
- in addition to a wealth of
- support through the online
- portal and mobile app.
- For more information, contact
- ACI at 855-775-4357

rsli@acieap.com

<http://rsli.acieap.com>

Employee Health

Behavioral Health Sessions

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

Medical Advocacy

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

Legal Consultations

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

Bereavement Counseling

Included 3 face to face sessions and 60 minutes legal counseling for deeds, will prep, trusts, and estate planning

Additional Information

To learn more about your EAP Program, scan the QR code below



Services provided in partnership with ACI Specialty Benefits, a division of All One Health

Employee Productivity

Employee 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.

Life Coaching

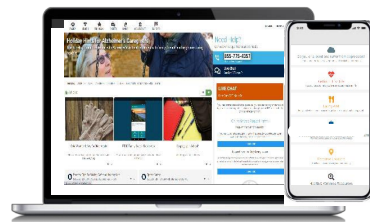
To help reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and build balance.

Lifestyle Management

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

Dedicated Member Portal and Mobile App

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



Travel Assistance

24 Hour, worldwide travel assistance for employees and dependents traveling more than 100 miles from home.

Services are available whether traveling for business or leisure.

If you need assistance, contact On Call International at:

USA – 800-456-3893

Worldwide – 603-328-1966

Travel Assistance services provided in partnership with On Call International.

Your 24-hour travel emergency companion with round-the-clock travel assistance services.



Medical Assistance

- Emergency Evacuation
- Medically Necessary Repatriation
- Visit by Family Member or Friend
- Medical Referrals for Local Physicians or Dentists
- Medical Case Monitoring
- Prescription Assistance
- Convalescence Arrangements



Safety and Security

- Urgent Message Relay
- Emergency Travel Arrangements
- Return of a Traveling Companion
- Return of Vehicle
- Recovery of stolen items
- Recovery of lost items
- Legal Assistance
- Bail Bond



Travel Support

- Interpretation services
- Translation services
- Passport/Visa requirements
- Currency Exchange Rates
- Weather Information
- Inoculation requirements
- Health Hazard Advisory
- Consulate/Embassy Referral

Accident Insurance – The Hartford

HOW DOES IT WORK?

Accident insurance pays cash benefits for the treatments and injuries associated with an accidental injury, on or off the job, such as fractures, dislocations, burns, emergency room or urgent care visits, and physical therapy. If you or a covered family member suffers an accident, the plan will pay a lump sum benefit based on a predetermined schedule of benefits.

By enrolling in the Accident plan, you and your enrolled dependents are also eligible to receive an annual **\$50 Wellness Benefit** for keeping up with your preventive care.



The benefit schedule shown is a sample of benefit payouts included in the plan. Please review your carrier materials for the full list of covered benefits.

BENEFIT TYPE	BENEFIT AMOUNT
Ambulance	\$500 ground, \$2,500 air
Concussion	\$300
Organized Child Sport Benefit	25% increase to benefit payment
Diagnostic Testing (Major)	\$400
Dislocation	Schedule up to \$10,000
Emergency Room Treatment	\$200
Follow-up Treatment	\$150 per visit, up to 3 visits per accident
Fracture	Schedule up to \$10,000
Hospital Admission	\$1,500
Hospital Confinement	\$400 per day, up to 365 days
Laceration	Schedule up to \$1,000
Physical Therapy	\$100 per visit, up to 10 visits
AD&D / Paralysis	\$75,000
Urgent Care or Doctor Visit	\$200
X-ray	\$150
Wellness Benefit	\$50 per insured, per year

Accident Insurance – The Hartford

HOW MUCH DOES IT COST?

	Bi-Weekly (Per Paycheck) Premium
EMPLOYEE ONLY	\$4.13
EMPLOYEE + SPOUSE	\$6.51
EMPLOYEE + CHILDREN	\$7.05
EMPLOYEE + FAMILY	\$11.04

DON'T FORGET!

Each member enrolled is eligible for a \$50 Wellness Benefit when they receive a covered wellness test, health screening, and/or preventive care exam.



Meet Christine

Christine's son injured himself while football at school and suffered a serious concussion. Although Christine had good medical coverage, the out-of-pocket costs kept adding up. Thankfully, she and her family were enrolled the Accident plan. She was able to use the money she received under the plan to offset her medical deductible and applicable copays.

CHRISTINE'S BENEFIT PAYOUT

Ambulance	\$500
Emergency Room	\$200
Major Diagnostic Testing	\$400
Concussion	\$300
Sports Injury Rider	25% Increase
TOTAL BENEFIT	\$1,750

Critical Illness Insurance – The Hartford

HOW DOES IT WORK?

Critical Illness insurance can help fill a financial gap if you experience a serious illness such as cancer, heart attack or stroke. Upon diagnosis of a covered illness, a lump-sum benefit is paid directly to you.



The benefit schedule shown is a sample of benefit payouts included in the plan. Please review your carrier materials for the full list of covered benefits.

BENEFIT TYPE	BENEFIT AMOUNT
Employee	\$10,000, \$20,000, or \$30,000
Spouse	100% of employee's election
Child	50% of employee's election
BENEFIT TYPE	PERCENTAGE OF BENEFIT PROVIDED
Cancer	100%
Carcinoma in Situ	25%
Severe Stroke	100%
Moderate Stroke	25%
Mild stroke	10%
Heart Attack	100%
Aneurysm	100%
End Stage Renal Failure	100%
Major Organ Failure	100%
Coma	100%
Paralysis	100%

Critical Illness Insurance – The Hartford

- Reoccurrence Benefit is included after a 180-day separation period
- Additional Illness Benefit is included after a 30-day separation period

HOW MUCH DOES IT COST?

\$10,000 Benefit Bi-Weekly Premium*	Age 35	Age 45	Age 55
EMPLOYEE	\$1.98	\$4.71	\$9.28
SPOUSE	\$1.98	\$4.71	\$9.28

Children have a separate cost

**Please see your benefit summary for the full premium rate chart, based on age, benefit election, and covered dependents.*

A GREAT BENEFIT!

There are NO pre-existing exclusions or medical questions for this coverage.

Meet Mike



Mike has a history of cancer in his family, so he enrolled in the Critical Illness plan and elected \$20,000 in benefits. A few months later, he was diagnosed with cancer. After filing a claim, Mike was able to use his benefit to help cover medical costs, pay for additional childcare and cover some of his lost income.

MIKE'S BENEFIT PAYOUT

Cancer	\$20,000
TOTAL BENEFIT	\$20,000

Hospital Indemnity Insurance – The Hartford

HOW DOES IT WORK?

A hospital stay can be costly, even if you have medical coverage. Hospital Indemnity insurance can help cover your medical deductible or coinsurance if you are hospitalized by paying a lump-sum benefit directly to you.

There are no pre-existing conditions. If you are admitted to the hospital after your effective date, you are covered

BENEFIT TYPE BENEFIT AMOUNT	
Hospital Admission	\$1,000 per admission
Hospital Confinement	\$150 per day, up to 360 days
Hospital ICU Admission	\$2,000 per admission
Hospital ICU Confinement	\$300 per day, up to 90 days

HOW MUCH DOES IT COST?

	Bi-Weekly Premium
EMPLOYEE ONLY	\$5.78
EMPLOYEE + SPOUSE	\$12.52
EMPLOYEE + CHILDREN	\$10.77
EMPLOYEE + FAMILY	\$18.33



MEET ALEXIS

Alexis and her husband eagerly awaited the birth of their child. Alexis was enrolled in the Hospital Indemnity plan, which provided benefits for her hospital admission and stay. The money she received under the plan allowed her to take an extra week of unpaid maternity leave to bond with her little boy.

ALEXIS' BENEFIT PAYOUT

Hospital Admission	\$1,000
Hospital Stay (2 Days)	\$300
TOTAL BENEFIT	\$1,300



Wellness Benefit Tests:

Covered conditions include but are not limited to:

- Annual Examinations by Physicians
- A Harvard Bioscience-sponsored wellness or biometric screening
- Immunizations
- Cholesterol and Diabetes Screenings
- Cancer Screenings
- Cardiovascular Function Screening
- Imaging Studies
- And More!

Utilizing Your Wellness Benefit

HOW DOES IT WORK?

Your new Accident and Critical Illness benefits offer an annual \$50 Wellness Benefit – available to each enrolled member!

The Hartford will pay this benefit when you receive services that you're likely already accessing as part of your preventive care routines. By simply filing a claim after receiving these benefits, you will receive \$50 per insured, per year, so be sure to leverage this benefit when looking at your out-of-pocket premium costs for these plans.

EXAMPLE

Terry enrolled in the Accident plan for the coming year. He sees that he can get a \$50 benefit paid for receiving care that he already has scheduled with his doctor! Using that money to offset the cost of annual premium, he realizes the coverage can be even more affordable than he originally planned – **less than \$4 per month** to provide a financial safety net when he might need it the most.

Employee only Accident coverage is \$8.95 per month, or \$107.40 annually.

After receiving his covered preventive services, Terry submits a Wellness Benefit claim and receives \$50 from Unum.

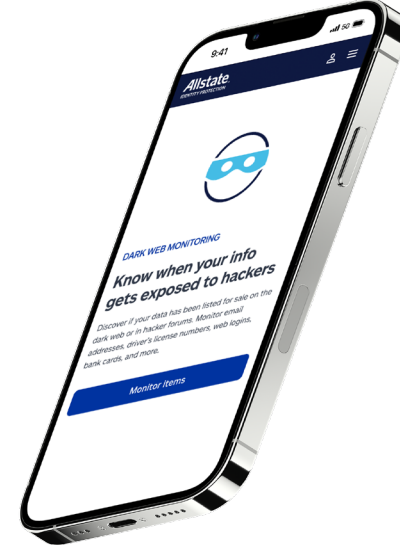
After factoring in this benefit, his adjusted annual premium is only \$4.78 per month, or \$57.40 annually!



Identity Theft Protection - Allstate

Allstate Identity Protection Pro+ Cyber

- Allstate Digital Footprint®, our proprietary privacy tool, shows where your data lives online and how it might be exposed
- Allstate Security Pro® delivers updates and education on scams and emerging threats relevant to you
- Identity Health Status gives you at-a-glance insight into your risk
- Cyber protection tools for up to five enrolled devices, including:
 - Malware and anti-virus protection
 - Safe browsing
 - Missing and stolen device tools (Android and Windows)
 - Safe pay (Windows)
 - Webcam protection (Windows)
 - Firewall (Windows)
 - Anti-tracker (Windows, macOS, iOS)
 - Phishing protection (Windows, Android, iOS)
 - Android smart watch protection
 - File shredder (Windows)
- Premium VPN with 4000+ servers to stay safe without slowing down
- Military-standard encrypted password manager
- Dark web monitoring
- High-risk transaction monitoring
- Financial transaction monitoring
- Financial account monitoring
- Student loan activity alerts
- Auto-on tri-bureau credit monitoring* with annual reporting and credit score
- Lock your TransUnion credit report in a click and get credit freeze assistance
- Lost wallet protection
- Robocall blocker†
- Ad blocker†
- Social media account takeover monitoring
- Data breach notifications‡
- Sex offender alerts‡
- Solicitation reduction‡
- Protect yourself and your family (everyone that's under your roof or wallet)⁴
- Senior family coverage for parents, in-laws, and grandparents age 65+⁴, plus access our Elder Fraud Center with specialized scam support
- Family digital safety tools‡ that monitor 30+ apps and websites for signs of danger such as cyberbullying⁴
- Full-service U.S.-based restoration support
- Fraud resolution tracker
- Unemployment Fraud Center
- Stolen tax refund advance
- Up to \$5 million reimbursement for identity theft expenses and stolen funds† with an individual plan, includes coverage for:
 - 401(k)/HSA fraud
 - Deceased family member fraud⁴
 - Home title fraud
 - Professional fraud expense reimbursement
 - Personal ransomware⁵ expense reimbursement



PLAN PRICING:

Allstate Identity Protection Pro+ Cyber
\$4.82 per person / paycheck
\$8.75 per family / paycheck

QUESTIONS?

Call 1.800.789.2720
Or visit myaip.com

Home and Auto – InsureOne Platform

- Access to over 150 personal lines carriers in auto, home, and more, serving all 50 states
- Online multi-carrier shopping tool to compare and contrast quotes
- Website: <https://alliantautohome.insureonepremier.com/>
- Direct phone number: 1-877-755-1667

InsureOne LifeBalance

Questions? Call Us 877-690-3573

Total Coverage. One Source

For All Your Insurance Needs

Select a product to start:

Auto

Homeowners

*Please select a product to continue

Zip Code **Begin My Quote**

Best Offer

- \$59.99 monthly
- \$65.20 monthly
- \$85.13 monthly
- \$102.37 monthly

Why Choose Insure One

Best in Class Service

We strive to provide a personalized experience you won't find anywhere else.

Customized Insurance Packages

We provide you with a tailored package to meet your insurance needs.

Convenience - Anytime, Anywhere

We're available online, over the phone, or in person at our conveniently-located offices.

We Do the Shopping for You

We work with a number of top national and regional insurance carriers to help you obtain quality insurance coverage. We compare quotes from top insurance carriers to ensure you get the best coverage and great rates. Here are some of our partners:

Liberty Mutual

Safeco

Travelers

Progressive

Foremost

Kemper

Bristol West

The Hartford

National General

Voluntary Benefits – NO
CHANGE

Legal Insurance - LegalEASE

HOW DOES IT WORK?

A group legal plan can ease two of the biggest stresses – finding and paying for legal expertise when you need it most.

LegalEASE offers a legal insurance plan that provides support and protection for unexpected personal legal issues.

You'll save time and costly legal fees. You'll also have access to one of the largest networks of attorneys to help navigate common individual or family legal issues. Most importantly, you'll gain peace of mind while minimizing a stressful and time-consuming process.

HOW MUCH DOES IT COST?

Bi-Weekly Premium

EMPLOYEE + FAMILY

\$8.18



A Legal Insurance Plan Can Assist During Life

Employees In their 30s

- Will and Estate Planning
- Buying/Selling/Refinancing Your Primary Residence
- Adoptions

Employees Getting Married

- Name Change
- Purchase of Primary Residence
- Guardianship/Conservatorship
- Governmental Agency Adoption

Employees With Teenagers

- Traffic Matters
- Misdemeanor Defense
- Consumer Dispute

Employees In their 50s

- General Power of Attorney
- Living Will
- Guardianship/Conservatorship
- Living Trust Document

Employees In their 20s

- Tenant Dispute
- Traffic Matters

Employees That are Expecting

- Will and Estate Planning
- Purchase/Sale of Primary Residence
- Name Change

Employees In their 40s

- Living Trust Document
- Foreclosure
- Guardian/Conservatorship

Employees In their 60s

- Will and Estate Planning
- Living Trust Document
- Sale of Primary Residence
- Health Care Power of Attorney
- General Power of Attorney



For Internal Use Only

Your dedicated site for information (and enrollment):

<https://www.petbenefits.com/land/harvardbio>

Pet Insurance

- Two different discount programs are available:
- **Pet Assure- Veterinary Discount Plan**
 - Save 25% on all in-house medical services at **participating** vets, no exclusions! Even pre-existing conditions are covered.
- **PetPlus Product and Prescription Discount Plan**
 - Save up to 40% off on products you're already buying for your pets, including prescriptions, preventatives, food, treats, toys and more! Shipping is always free
 - 24/7 Pet Telehealth



Veterinary Discount Plan

\$8.00/month for one pet or
\$11.00/month for a family plan.



Product and Rx Discount Plan


\$3.75/month for one pet or
\$7.50/month for a family plan.

Enrollment Checklist

Open enrollment ends **November 20, 2024**

You need to enroll on <https://workforcenow.adp.com> and take action on the following:

- Enroll for coverage and make your 2025 benefit elections
- Dropping coverage or switching plans
- Contributing to a healthcare or dependent care flexible spending account
- Enrolling in voluntary coverages
- Adding a dependent to your plan (will need their Social Security Number and Date of Birth)
- Update your beneficiary designations



**YOU MUST TAKE ACTION
THIS YEAR – NO ROLLOVER
OF BENEFITS FOR 2025**



Thank You!