

China Spring ISD 2026-2027 BENEFITS GUIDE



SCAN ME



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BENEFIT CONTACT INFORMATION

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Employee Benefits Center

A guide to your benefits!

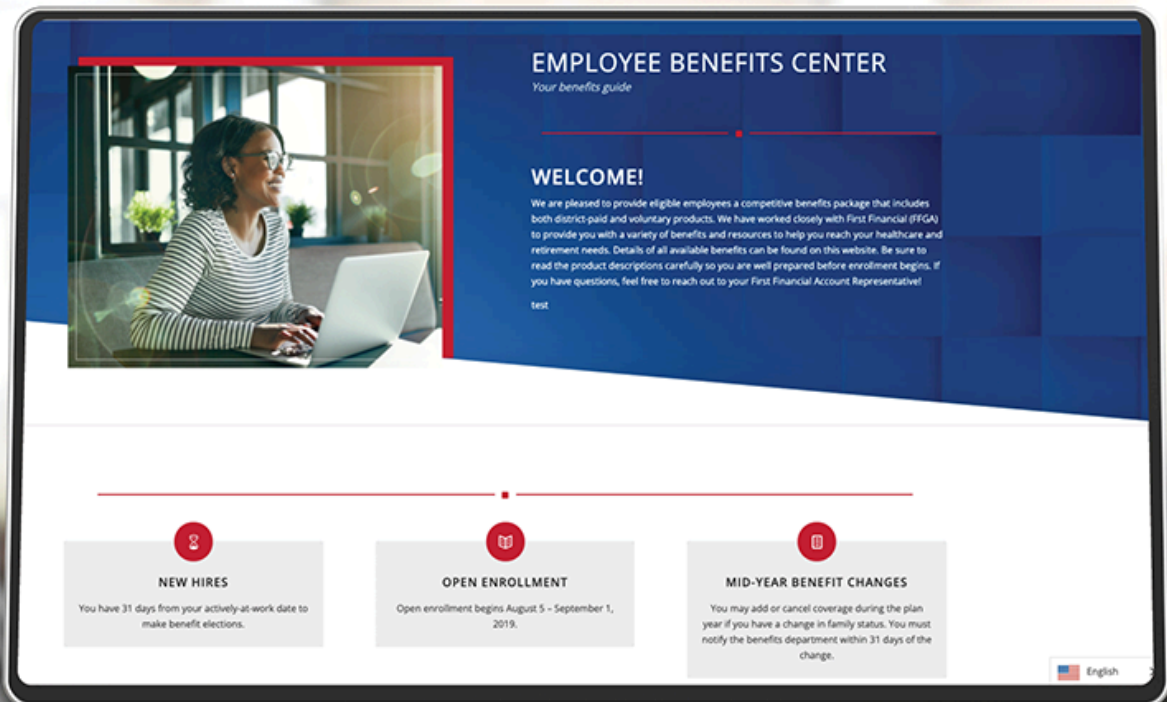
China Spring ISD and FFGA are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer as well as find claim forms, important phone numbers and enrollment information.

There's no need to register for site access. Simply type the URL below into your browser and you will be directed to your Employee Benefits Center.



Scan the QR code to learn more about the plans that are available this year!

<https://ffbenefits.ffga.com/chinaspringisd>



How to Enroll

Benefits Enrollment

On-Site Enrollment

When it's time to enroll in your benefits, your FFGA Account Representative will be on-site to assist you with making your elections. Visit your EBC for more information.

Online Enrollment

To begin online enrollment, visit <https://ffga.benselect.com/Enroll/login.aspx>.

Enroll Now

Username & Password

Username

- The Username is either your social security number or your Employee ID.

Password

- Instructions to access your initial password will be provided to you prior to open enrollment.
- Upon initial login, the password will be required to be changed.
- Remember your password as you will use this to sign your enrollment confirmation form and to login in the future.

View Current Benefits

After logging in, you will arrive at the welcome screen. Your current benefits and premium deductions will be listed on this screen.

View/Add Dependents

Click next to view your dependents. It is very important to make sure the social security numbers and birth dates listed are correct. If you plan to add dependents, you will need to enter their legal name, social security numbers and birth dates.

Begin Elections

Click next again to begin making your benefit elections. Remember, no changes to your elections can be made during the plan year unless you have either a qualified mid-year change under Section 125 or a special enrollment event.

Enrollment Assistance Center Instructions

Call 855-765-4473 and follow the prompts to be connected to your local FFGA branch office. Hours of operation are 8 a.m. to 5 p.m. (local time) Monday through Friday. There is an option to leave a voice message for a representative to call you back. Phone calls will be returned as soon as possible or the next business day if it is after hours.

Benefit Eligibility & Coverage

Employee Coverage

Eligibility

Eligible employees must be actively at work on the plan effective date for new benefits to be effective.

New Employees

You have 31 days from your actively-at-work date to make benefit elections. Insurance coverage becomes effective on the first day of the month that follows a waiting period of 30 calendar days.

Existing Employees

When it's time to enroll in your benefits, your FFGA Account Representative will be available to assist you with making your elections. Your elections can be made anytime during annual enrollment online from your work or home computer. Before enrollment, take time to educate yourself on the available benefits and what options would work best for you and your family by visiting the Employee Benefits Center.

Mid-year Benefit Changes

You may add or cancel coverage during the plan year if you have a change in family status. You must notify the benefits department within 31 days of the change.

Qualifying Life Events Include:

- Changes in household, including marriage, divorce, legal separation, annulment, death of a spouse, birth, adoption, placement for adoption or death of a dependent child
- Loss of health coverage, attributable to your spouse's employment, losing existing health coverage including job-based, individual and student plans, losing eligibility for Medicare, Medicaid, or CHIP, turning 26 and losing coverage through a parent's plan

Declining Coverage

If you are eligible for benefits, but wish to **DECLINE** coverage, please complete the online enrollment either on your work or home computer. Under each option, you will need to select "waive." **You must still complete the beneficiary information.**

Section 125 Plans

Section 125 Plan Information & Rules

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

Here’s How It Works

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you’re already eligible – all you must do is enroll.

Is It Right For Me?

The savings you may experience with a Section 125 Plan are outlined in the example below. For instance, you could potentially take home about \$70 more each month if you participated in your employer’s Section 125 Plan – that’s a savings of \$840 a year!

You cannot change your benefit elections for the plan year unless the benefits office receives notification in writing within 31 days of the status change. If the benefits office is not notified within 31 days of the status change, no benefit change can be made until the next annual open enrollment.

- IRS specified changes in family status include:
- Change in legal married status
 - Change in number of dependents
 - Termination or commencement of employment
 - Dependent satisfies or ceases to satisfy dependent eligibility requirements
 - Change in residence or worksite that affects eligibility for coverage

Section 125 Plan Sample Paycheck		
	Without S125	With S125
Monthly Salary	\$2,000	\$2,000
Less Medical Deductions	-N/A	-\$250
Tax Gross Income	\$2,000	\$1,750
Less Taxes (Fed/State at 20%)	-\$400	-\$350
Less Estimated FICA (7.65%)	-\$153	-\$133
Less Medical Deductions	-\$250	-N/A
Take Home Pay	\$1,197	\$1,267

You could save \$70 per month in taxes by paying for your benefits on a pre-tax basis!

**The figures in the sample paycheck above are for illustrative purposes only.*

Medical Coverage

TRS-ActiveCare



Your medical plans are offered through TRS. From in- and out-of-network options to comprehensive prescription drug coverage and special health and wellness programs, TRS-ActiveCare has been designed to flexibly meet the needs of nearly half a million public education employees.

Blue Cross Blue Shield of Texas | <https://www.bcbstx.com/trsactivecare/> | 1-866-355-5999

TRS-ActiveCare Primary

- Copays for doctor visits and generic prescriptions before you meet deductible
- Statewide Network
- Participants must select a primary care provider who will make referrals to specialists
- No out-of-network coverage
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

TRS-ActiveCare HD

- Must meet deductible before plan pays for non-preventive care
- In-network and out-of-network benefits – separate out-of-network deductible/out-of-pocket maximum
- Nationwide network
- Deductible applies to medical and pharmacy
- No requirement for PCP or referrals
- Compatible with health savings account (HSA)
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

TRS-ActiveCare Primary +

- Copays for many services and drugs
- Statewide Network
- Participants must select a primary care provider who will make referrals to specialists
- No out-of-network coverage
- Employee will receive 2 ID cards (BCBS & Express Scripts)

TRS-ActiveCare 2 - Closed to New Enrollees

- Copays for many drugs and services
- Nationwide network with out-of-network coverage
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

TRS-ActiveCare Plan Prescription Benefits

Express Scripts | <https://info.express-scripts.com/trsactivecare/> | 1.844.367.6108

When you enroll in a BCBSTX Plan, you automatically receive prescription drug coverage through Express Scripts which gives you access to a large, national network of retail pharmacies.

TRS ActiveCare Medical Premiums

Medical Monthly Premiums				
	Primary	Primary+	HD	AC2
Employee Only	\$205	\$304	\$220	\$663
Employee + Spouse	\$1,149	\$1,351	\$1,001	\$2,052
Employee + Children	\$594	\$762	\$619	\$1,157
Employee + Family	\$1,537	\$1,809	\$1,588	\$2,491

Monthly Premiums shown above include the Employer contribution of \$350

For more information, please refer to the TRS-ActiveCare website.





TRS is committed to accessibility. If you have trouble accessing this content, contact TRS at WebAccessibility@trs.texas.gov to request an alternative format.

LEARN THE TERMS

- **PREMIUM:** The monthly amount you pay for health care coverage.
- **DEDUCTIBLE:** The annual amount for medical expenses you're responsible to pay before your plan begins to pay.
- **COPAY:** The set amount you pay for a covered service at the time you receive it. The amount can vary based on the service.
- **COINSURANCE:** The portion you're required to pay for services after you meet your deductible. It's often a specified percentage of the costs; e.g., you pay 20% while the health care plan pays 80%.
- **TIERING:** Grouping doctors and facilities into tiers based on quality, cost and best practice clinical guidelines. This helps you compare choices. Tier 1 providers and facilities offer top performance and best value. You pay less when you choose Tier 1 and may pay more when you choose Tier 2.
- **OUT-OF-POCKET MAXIMUM:** The maximum amount you pay each year for medical costs. After reaching the out-of-pocket maximum, the plan pays 100% of allowable charges for covered services.

2026-27 TRS-ActiveCare Plan Highlights

Sept. 1, 2026 – Aug. 31, 2027



All TRS-ActiveCare participants have **three plan options**. Each includes a wide range of wellness benefits.

How to Calculate Your Monthly Premium

Total Monthly Premium

➖ Your Employer Contribution

===== Your Premium

Ask your Benefits Administrator for your district's specific premiums.

Being Healthy is Easy

- \$0 preventive services
- One-on-one health coaches
- Weight loss programs and nutrition
- TRS Virtual Health
- Member Rewards is even better. Now you'll get a check when you use Member Rewards and choose low-cost, high-quality doctors and facilities – up to \$599* per tax year.
- Airrosti Remote Recovery gives you in-home virtual physical therapy to relieve common aches and pains at no cost.*

** Eligibility rules may apply.*

See the Annual Enrollment Guide for more details.

Mental Health

You have in-office and virtual benefits:

- TRS-ActiveCare Primary Plan: \$30 copay for office visits or \$0 with Teladoc
- TRS-ActiveCare Primary+ Plan: \$15 copay for office visits or \$0 with Teladoc
- TRS-ActiveCare HD Plan: 30% coinsurance after deductible or \$42 with Teladoc
- TRS-ActiveCare 2 Plan: \$20 copay for office visits or \$12 with Teladoc

	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD
Plan Summary	• Lowest premium of the three available plans • Copays for doctor visits before you meet your deductible • Statewide network • Primary Care Provider referrals required to see specialists • Not compatible with a Health Savings Account • No out-of-network coverage	• Highest premium of the three available plans • Copays for many services and drugs • Lower deductible than the HD and Primary plans • Statewide network • Primary Care Provider referrals required to see specialists • Not compatible with a Health Savings Account • No out-of-network coverage	• Higher premium of the three available plans • Must meet your deductible before plan pays for non-preventive care • Nationwide network with out-of-network coverage • No requirement for Primary Care Providers or referrals • Compatible with a Health Savings Account

Monthly Premiums	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium
Employee Only	\$555	\$350	\$205	\$654	\$350	\$304	\$570	\$350	\$220
Employee and Spouse	\$1,499	\$350	\$1,149	\$1,701	\$350	\$1,351	\$1,539	\$350	\$1,001
Employee and Children	\$944	\$350	\$594	\$1,112	\$350	\$762	\$969	\$350	\$619
Employee and Family	\$1,887	\$350	\$1,537	\$2,159	\$350	\$1,809	\$1,938	\$350	\$1,588

Plan Features				
Type of Coverage	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$1,200/\$2,400	\$3,400/\$6,800	\$6,800/\$13,600
Coinsurance	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible
Individual/Family Maximum Out of Pocket	\$8,050/\$16,100	\$6,900/\$13,800	\$8,300/\$16,600	\$20,500/\$41,000
PCP Required	Yes	Yes	No	

Doctor Visits				
Primary Care	\$30 copay	\$15 copay	You pay 30% after deductible	You pay 50% after deductible
Specialist	\$70 copay	\$70 copay	You pay 30% after deductible	You pay 50% after deductible

Immediate Care				
Urgent Care	\$50 copay	\$50 copay	You pay 30% after deductible	You pay 50% after deductible
Emergency Care	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	
TRS Virtual Health-RediMD™	\$0 per medical consultation	\$0 per medical consultation	\$30 per medical consultation	
TRS Virtual Health-Teladoc®	\$12 per medical consultation	\$12 per medical consultation	\$42 per medical consultation	

Prescription Drugs			
Drug Deductible	Integrated with medical	\$200 deductible per participant (brand drugs only)	Integrated with medical
Generics (31-Day Supply/90-Day Supply)	\$15/\$45 copay; \$0 copay for certain generics	\$15/\$45 copay	You pay 20% after deductible; \$0 coinsurance for certain generics
Preferred (Max does not apply if brand is selected and generic is available)	You pay 30% after deductible	You pay 25% after deductible (\$100 max)/ You pay 25% after deductible (\$265 max)	You pay 25% after deductible
Non-preferred	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible
Specialty (31-Day Max) Call 1-844-367-6108 to see if your specialty medication is covered by SaveOnSP.	You pay 30% after deductible; \$0 if SaveOnSP eligible	You pay 20% after deductible (\$500 max); \$0 if SaveOnSP eligible	You pay 20% after deductible
Insulin Out-of-Pocket Costs	\$25 copay for 31-day supply; \$75 for 61- to 90-day supply	\$25 copay for 31-day supply; \$75 for 61- to 90-day supply	You pay 25% after deductible

This plan is closed to new enrollees. Current TRS-ActiveCare 2 participants can stay enrolled.

TRS-ActiveCare 2
• Closed to new enrollees • Current enrollees can choose to stay in the plan • Lower deductible • Copays for many services and drugs • Nationwide network with out-of-network coverage • No requirement for Primary Care Providers or referrals

Total Premium	Employer Contribution	Your Premium
\$1,013	\$350	\$663
\$2,402	\$350	\$2,052
\$1,507	\$350	\$1,157
\$2,841	\$350	\$2,491

In-Network	Out-of-Network
\$1,000/\$3,000	\$2,000/\$6,000
You pay 20% after deductible	You pay 40% after deductible
\$7,900/\$15,800	\$23,700/\$47,400
No	

Tier 1: \$20 copay Tier 2: \$40 copay	You pay 40% after deductible
Tier 1: \$55 copay Tier 2: \$85 copay	You pay 40% after deductible

\$50 copay	You pay 40% after deductible
You pay a \$250 copay plus 20% after deductible	
\$0 per medical consultation	
\$12 per medical consultation	

\$200 brand deductible
\$20/\$45 copay
You pay 25% after deductible (\$40 min/\$80 max)/ You pay 25% after deductible (\$105 min/\$210 max)
You pay 50% after deductible (\$100 min/\$200 max)/ You pay 50% after deductible (\$215 min/\$430 max)
You pay 30% after deductible (\$200 min/\$900 max); \$0 if SaveOnSP eligible
\$25 copay for 31-day supply; \$75 for 61- to 90-day supply

Questions?

Call a Personal Health Guide at **1-866-355-5999** for help with medical services.
Call Express Scripts® by Evernorth Pharmacy Benefit Services at **1-844-367-6108**
for help with your pharmacy benefits.

Compare Prices for Common Medical Services

Closed to new enrollees.

Benefit	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD		TRS-ActiveCare 2	
	In-Network Only	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Diagnostic Labs	Office/Independent Lab: You pay \$0	Office/Independent Lab: You pay \$0	You pay 30% after deductible	You pay 50% after deductible	Office/Independent Lab: You pay \$0	You pay 40% after deductible
	Outpatient: You pay 30% after deductible	Outpatient: You pay 20% after deductible			Outpatient: You pay 20% after deductible	
High-Tech Imaging (like CT Scan, Mammogram and MRI)	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible	You pay 20% after deductible + \$100 copay per procedure	You pay 40% after deductible + \$100 copay per procedure
Outpatient (like colonoscopy, cataract surgery and steroid injections)	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible	You pay 20% after deductible (\$150 facility copay per incident)	You pay 40% after deductible (\$150 facility copay per incident)
Inpatient (like childbirth, complex joint replacement and cardiac surgery)	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible (\$500 facility per day maximum)	You pay 20% after deductible (\$150 facility copay per day)	You pay 40% after deductible (\$500 facility copay per incident)
Freestanding Emergency Room	You pay \$500 copay + 30% after deductible	You pay \$500 copay + 20% after deductible	You pay \$500 copay + 30% after deductible	You pay \$500 copay + 50% after deductible	You pay \$500 copay + 20% after deductible	You pay \$500 copay + 40% after deductible
Bariatric Surgery	Facility: You pay 30% after deductible	Facility: You pay 20% after deductible	Not Covered	Not Covered	Facility: You pay 20% after deductible (\$150 facility copay per day)	Not Covered
	Professional Services: You pay \$5,000 copay + 30% after deductible	Professional Services: You pay \$5,000 copay + 20% after deductible			Professional Services: You pay \$5,000 copay + 20% after deductible	
	Only covered if rendered at a BDC+ facility	Only covered if rendered at a BDC+ facility			Only covered if rendered at a BDC+ facility	
Annual Vision Exam (one per plan year)	Specialist: You pay \$70 copay	Specialist: You pay \$70 copay	You pay 30% after deductible	You pay 50% after deductible	Tier 1 Specialist: \$55 copay Tier 2 Specialist: \$85 copay	You pay 40% after deductible
Annual Hearing Exam (one per plan year)	PCP: \$30 copay Specialist: \$70 copay	PCP: \$15 copay Specialist: \$70 copay	You pay 30% after deductible	You pay 50% after deductible	Tier 1 PCP: \$20 copay Tier 2 PCP: \$40 copay Tier 1 Specialist: \$55 copay Tier 2 Specialist: \$85 copay	You pay 40% after deductible

Employee Assistance Program

Support Clinic | mysupportclinic.com | 800-475-3327

Life pulls us in many different directions. Between kids, personal relationships, extracurricular activities, and family time, it seems like we don't have enough time in a day to fit it all in. When life gets you stressed, call the employee assistance line provided by your employer. It offers 24/7 access to professionals who can help you successfully face emotional issues.

An employee assistance program, or EAP, is a free, voluntary program offered by your employer. With one phone call, you will have access to short-term counseling and confidential assessments whenever you have a personal or work-related problem.

Employee assistance programs address a wide range of issues including mental and emotional well-being, substance abuse and grief. Counselors are held to the highest ethical standard and are trained to keep your situation confidential. They work with you to determine the best way to address your needs and move you in a positive direction.





Prioritize your wellbeing

Whatever life brings, your program offers expert guidance for you and your family



Connect to care your way



- Reach a licensed clinician by phone 24/7/365 when you call for in-the-moment support
- Access no-cost short-term counseling in person or by video for concerns such as stress, anxiety, depression, burnout or substance use
- Message a Coach to boost your emotional fitness, learn healthy habits, increase resilience and more

Simplify your everyday life with work-life benefits



- Get expert consultations for financial and legal concerns
- Receive referrals for needs such as child or elder care, pet care, home improvement or auto repair



Prefer digital access? No problem!



The web platform and mobile app make it easy to connect to care and strengthen your wellbeing — anytime, anywhere.

- Create a personalized profile for resources tailored to your needs
- Understand your emotions and receive help with mental health check-ins
- Schedule sessions with a licensed clinician via in-person, video or text
- Attend anonymous group sessions for support and connection in a safe, text-based space
- Track your mood and journal to build self-awareness and notice progress

Access guided paths



Follow step-by-step programs on topics such as easing anxiety, building resilience and more with support at every stage of your mental health journey.



Strict confidentiality standards ensure no one will know you have accessed the program without your written permission, except as required by law.

Log in today to take the next step in your wellbeing journey

800-475-3327

mysupportlinc.com

group code: chinaspingsid



TeleHealth



Doctegritty | www.doctegritty.com | 877-342-5152

Studies show that more than 50 percent of doctor's office visits can be handled over the phone. With the Telehealth program, you can get a diagnosis quicker and spend less time in the waiting room.

Board Certified physicians will diagnose your illness, recommend treatment, and prescribe medication via telephone or video. You can contact them from anywhere – home, work, school, even while on vacation. They can treat common health issues like acid reflux, allergies, asthma, cold and flu, sinus infections, rashes, sore throat and more.

It's like having a doctor on call whenever you need medical advice. Access is only a call or click away!



Doctegritty

24/7/365 Nationwide eHealthcare

24/7/365 Telemedicine & Teletherapy

See a Doctor or Therapist, Anytime, Anywhere

Bilingual access to nationwide medical care, mental health support, pharmacy programs, pet services, and wellness discounts for the whole family



Doctegritty
Telemedicine

24/7/365 nationwide access to board-certified physicians with bilingual coverage. Phone or secure video. \$0 copay.



Doctegritty
Teletherapy

Short-term mental health therapy with licensed counselors via phone or secure video, with full follow-up with the same therapist. \$0 copay.



Doctegritty
LifeVitals

The future is now! Doctegritty LifeVitals takes your vitals from a selfie - no hardware or Bluetooth needed with up to 99% accuracy.



DoctegrittyRx
Pharmacy Program

\$0 acute medications available for collection at 70,000+ pharmacies nationwide.



DoctegrittyRx
Mailed Medications

Access 1,000+ maintenance medications at no cost - delivered straight to your door in 90-day supplies



Doctegritty
eVets

24/7 TeleVet through phone, video, or live chat with \$0 copay, plus discounts on Pet Rx and pet supplies like Chewy, Rover, and more.



Doctegritty
Perks

Savings on hearing, vision, dental, labs, and wellness. Plus financial, legal, coaching, and medical advocacy support.

Scan & Download our App!



No App? No Problem!

Speak to a Doctor or Therapist:

877-342-5152



*No insurance needed!
Available to any and all employees!
You and your whole family have access!
No co-pays or surprise bills!*

Doctegritty

MADE EASY



1

WELCOME EMAIL

Click "Access Benefit" and create a password

2

OPEN DOCTEGRITY APP

Click "Login"

3

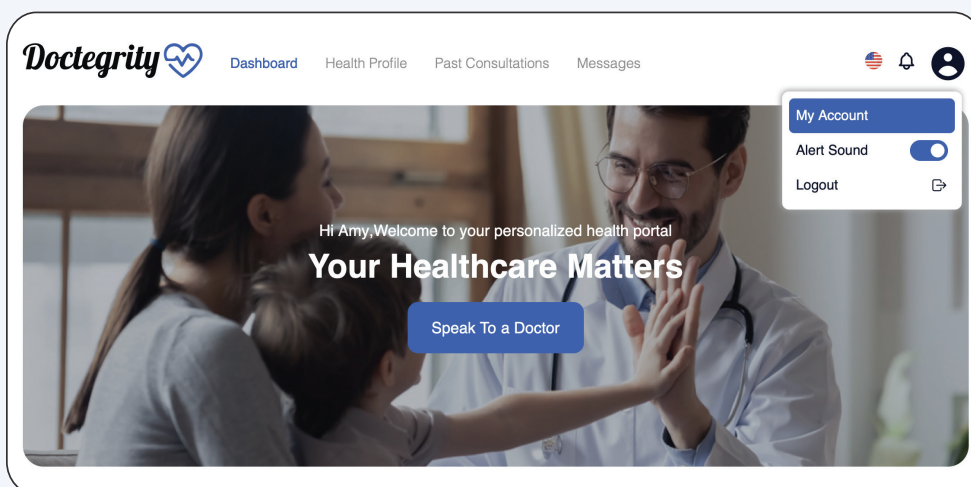
ENTER CREDENTIALS

Enter the email address associated with your account & password

4

SCHEDULE!

You're done! Easily schedule telemedicine & teletherapy consultations & more!



Click the "My Account" icon to access your personal profile to:

- **ADD DEPENDENTS**
- **CHOOSE YOUR PREFERRED PHARMACY**
- **CHANGE YOUR PASSWORD AND PERSONAL INFORMATION**

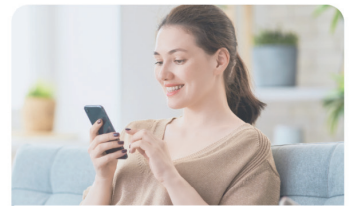
MANAGE YOUR ACCOUNT

[Dashboard](#)[Health Profile](#)[Past Consultations](#)[Messages](#)

Manage Your Account

[Speak To a Doctor](#)

In a life threatening emergency **Please call 911**

[Personal Info](#)[Dependents](#)[Pharmacy](#)[Password Management](#)

PERSONAL INFO:

This is where you can update your personal information. Be sure to review and confirm that all changes are accurate before hitting 'Save'.

DEPENDENTS:

This is where you can add dependents to your account. Click: "Add New Member" and you can fill out your dependent's information.

PHARMACY:

Here you can enter and edit the information for your preferred pharmacy.

PASSWORD MANAGEMENT:

Here you can edit and manage your password information.

SPEAK TO A DOCTOR:

Click the "Speak to a Doctor" button to be directed to a physician. You can also call us at: (877) 342-5152

NEED ADDITIONAL HELP?

Just click the "Need Help" button on any page of the app. Or, you can contact us via phone, or e-mail.

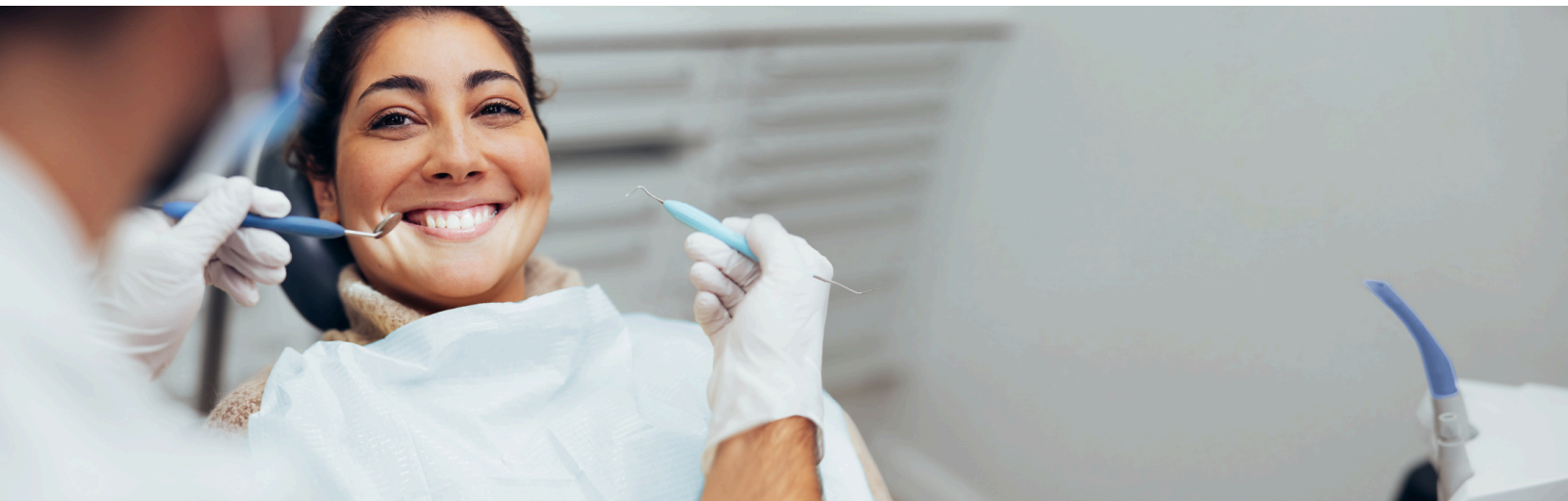
(877) 342-5152

hello@doctegritty.com

app.doctegritty.com/login

Dental Insurance

Plan Choices



Ameritas | www.ameritas.com | 800-487-5553

Taking care of your oral health is not a luxury, it is a necessity to long-term optimal health. Dental insurance can greatly reduce your costs when it comes to preventative, restorative, and emergency procedures. Review the plan benefits to see which option is best for you and your family’s dental needs. A range of procedures may be covered, such as:

- Comprehensive Exams
- Cleanings
- X-Rays
- Fillings
- Tooth Extractions
- General Anesthesia
- Crown
- Root Canals

Dental Monthly Premiums	
	Basic
Employee Only	\$35.36
Employee + Family	96.26

China Spring ISD

Dental Highlight Sheet



Dental Plan Summary

Effective Date: 9/1/2026

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	50%
Deductible	\$50 Lifetime Type 2,3 Waived Type 1 No Family Maximum
Maximum (per person)	\$1,000 per calendar year
Allowance	90th U&C
Waiting Period	None
Annual Open Enrollment	Included

Orthodontia Summary - Adult and Child Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per person)	\$1,000
Waiting Period	None
Takeover Benefit	Initial Insureds & New Enrollees

Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
• Routine Exam (1 in 6 months) • Bitewing X-rays (1 in 12 months) • Full Mouth/Panoramic X-rays (1 in 5 years) • Periapical X-rays • Cleaning (1 in 6 months) • Fluoride for Children 13 and under (1 in 12 months) • Sealants (age 16 and under) • Space Maintainers	• Fillings for Cavities • Restorative Composites (anterior and posterior teeth) • Simple Extractions • Anesthesia	• Onlays • Crowns (1 in 10 years per tooth) • Crown Repair • Endodontics (nonsurgical) • Endodontics (surgical) • Periodontics (nonsurgical) • Periodontics (surgical) • Denture Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 10 years) • Complex Extractions

Monthly Rates

Employee Only (EE)	\$35.36
EE + Family	\$96.26

Ameritas Information

We're Here to Help: Our customer relations associates will be pleased to assist you 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to ameritas.com.

Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance. To receive this Rx discount, Ameritas plan members just need to visit us at ameritas.com and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

Eyewear Savings

Ameritas plan members may receive up to 10% off eyewear frames and lenses purchased at any Walmart Vision Center nationwide. Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium. To receive the eyewear savings identification card, Ameritas plan members can visit ameritas.com and sign-in (or create) a secure member account. Members must present the Ameritas Eyewear Savings Card at time of purchase to receive the discount.

Orthodontia - Initial Insureds and New Enrollees

Ameritas will provide coverage on current orthodontic treatment programs and pay up to Ameritas' orthodontic maximum minus any benefits the member has received from the prior carrier.

Dental Network Information

To find a provider, visit ameritas.com and select **FIND A PROVIDER**, then **DENTAL**. Enter your criteria to search by location or for a specific dentist or practice. California Residents: When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553. Your provider network is Ameritas Classic and Plus Network.

Dental Network

In Texas, our network and plans are referred to as the Ameritas Classic and Plus Dental Network.

Pretreatment

While we don't require a pretreatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it's best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pretreatment estimate to our customer relations department. We'll inform both you and your dentist of the exact amount your insurance will cover and the amount that you will be responsible for. That way, there won't be any surprises once the work has been completed.

Open Enrollment

If a member does not elect to participate when initially eligible, the member may elect to participate at the policyholder's next enrollment period. This enrollment period will be held each year and those who elect to participate in this policy at that time will have their insurance become effective on September 1. If you do not enroll during your company's open enrollment period, then you will be subject to the Late Entrant Provision.

Late Entrant Provision

We strongly encourage you to sign up for coverage when you are initially eligible. If you choose not to sign up during this initial enrollment period, you will become a late entrant. Late entrants will be eligible for only exams, cleanings, and fluoride applications for the first 12 months they are covered.

Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

Dental Cost Estimator

Members can use our dental cost estimator at any time to find average procedure charges in their area. The estimates do not include network discounts or plan benefits. Find the dental cost estimator at ameritas.com/applications/group/estimator.

After coverage begins, members can view average in-network charges in their secure member account. Members also may ask their dentist's office to submit a pretreatment estimate so they can see exactly how a proposed service would be covered and avoid any surprises. The pretreatment estimate is based on their plan benefits.

Worldwide Support

If a member has a dental emergency outside the U.S., AXA Assistance can help. AXA provides credible provider referrals and can even help with making the appointment. Providers referred by AXA are not members of the Ameritas network. AXA contact information is available in the secure member account.

Language Services

We recognize the importance of communicating with our growing number of multilingual customers. That is why we offer a language assistance program that gives you access to: Spanish-speaking claims contact center representatives, telephone interpretation services in a wide range of languages, online dental network provider search in Spanish and a variety of Spanish documents such as enrollment forms, claim forms and certificates of insurance.

This document is a highlight of plan benefits provided by Ameritas Life Insurance Corp. as selected by your employer. It is not a certificate of insurance and does not include exclusions and limitations. For exclusions and limitations, or a complete list of covered procedures, contact your benefits administrator.

Vision Insurance

Eyemed | www.eyemed.com | 866-939-3633

Proper vision care is essential to your overall well-being. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come.

Your employer provides you with a vision plan to take care of you and your family’s needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

- Eye Exams
- Eyeglasses
- Contact lenses
- Eye surgeries
- Vision correction

Vision Monthly Premium	
Plan Name Here	
Employee Only	\$6.48
Employee + Spouse	\$11.07
Employee + Children	\$12.96
Employee + Family	\$16.24



China Spring ISD

Vision benefits as you've never seen before



Get the most out of your vision insurance plan with these EyeMed highlights:

- Eye360 features a \$0 eye exam, additional dollars to spend on materials at PLUS providers.¹
- Separate contact lens fit & follow-up coverage (leaving the entire allowance for materials)

Plus, with us, you always get—

NETWORK

The largest network with the right mix of providers

- America's largest vision network² with the right mix of independent eye doctors and national and regional retail providers—so members can go where they want, when they want.
- In-network options for buying eyewear online at [glasses.com](https://www.glasses.com), [contactsdirect.com](https://www.contactsdirect.com), [lenscrafters.com](https://www.lenscrafters.com), [oakley.com](https://www.oakley.com), [targetoptical.com](https://www.targetoptical.com), [nuanceaudio.com](https://www.nuanceaudio.com) and [rayban.com](https://www.rayban.com) – with benefits applied directly in the shopping cart.
- Members save more at PLUS Providers¹— in-network locations that add value on top of existing benefits



BENEFITS

Freedom of choice and maximum value

- The freedom to choose any ophthalmic frame, lens or contact lens without restrictions at any of our retail providers, independent provider locations or online.
- Complimentary HealthyEyes wellness program keeps the focus on eye health with exam reminders and leading technology.
- Members can use their benefit on Nuance Audio glasses – a breakthrough dual hearing and vision solution.
- Members enjoy exclusive savings on LASIK, including up to \$1000 off at preferred providers or 5% off the in-store promotional price.³



EXPERIENCE

Simple and transparent member experience with an eye on savings

- Cost transparency with our Know Before You Go cost estimator.
- Digital Tools like online scheduling⁴, a mobile app and personalized text alerts.
- Welcome kits, ID cards and open enrollment support to ensure employees understand their benefits.



We can't wait to work with you—

Contact Taylor Rudolph at trudolph@eyemed.com with questions

¹ Not available in all states

² Based on the EyeMed Insight network, Spring 2022.

³ Preferred lasik providers include LasikPlus, TLC Laser Eye Centers and The LASIK Vision Institute

⁴ At select locations

China Spring ISD

BENEFITS

- 1 EE 130/150 24 C
- Exam & Materials
- Insight network
- Fully Insured
- Employee Paid

MONTHLY RATES

- Subscriber \$6.48
- Subscriber + Spouse \$11.07
- Subscriber + Child(ren) \$12.96
- Subscriber + Family \$16.24

SUMMARY OF BENEFITS

VISION CARE SERVICES	IN-NETWORK MEMBER COST AT PLUS PROVIDERS	IN-NETWORK MEMBER COST	OUT-OF-NETWORK REIMBURSEMENT
EXAM SERVICES once every plan year			
Exam	\$0 copay	\$10 copay	Up to \$40
FRAME in lieu of contacts once every other plan year			
Frame	\$0 copay; 20% off balance over \$180 allowance	\$0 copay; 20% off balance over \$130 allowance	Up to \$65
STANDARD PLASTIC LENSES in lieu of contacts once every plan year			
Single Vision	\$25 copay	\$25 copay	Up to \$30
Bifocal	\$25 copay	\$25 copay	Up to \$50
Trifocal/Lenticular	\$25 copay	\$25 copay	Up to \$70
Progressive - Standard	\$90 copay	\$90 copay	Up to \$50
Progressive - Premium Tier I, II, or III	\$110, \$120, \$135 copay	\$110, \$120, \$135 copay	Up to \$50
Progressive - Premium Tier IV	\$210 copay	\$210 copay	Up to \$50
Progressive - Premium Tier V	\$250 copay	\$250 copay	Up to \$50
LENS OPTIONS			
Anti Reflective Coating - Standard	\$45 copay	\$45 copay	Up to \$23
Anti Reflective Coating - Premium Tier I, II, or III	\$57, \$68, or \$85 copay	\$57, \$68, or \$85 copay	Up to \$23
Polycarbonate - Std < 19 years of age	\$0 copay	\$0 copay	Up to \$20
CONTACT LENSES in lieu of frame and lenses once every plan year			
Contacts - Conventional	\$0 copay; 15% off balance over \$200 allowance	\$0 copay; 15% off balance over \$150 allowance	Up to \$75
Contacts - Disposable	\$0 copay; 100% of balance over \$200 allowance	\$0 copay; 100% of balance over \$150 allowance	Up to \$75
Contacts - Medically Necessary	\$0 copay; paid-in-full	\$0 copay; paid-in-full	Up to \$300
ADDITIONAL GLASSES ALLOWANCE once every other plan year			
Glasses Allowance	40% off retail*; 100% of balance over \$100	40% off retail*; 100% of balance over \$50	Up to \$40

*Complete pair (frame & lens with or without lens options) purchase required to receive 40% discount. 20% discount applied if complete pair not purchased.

All plans are based on a 48 month contract and 48 month rate guarantee. Monthly Rate is subject to adjustment even during a rate guarantee period in the event of any of the following events: changes in benefits, employee contributions, the number of eligible employees, or the imposition of any new taxes, fees or assessments by Federal or State regulatory agencies. The Plan reserves the right to make changes to the products available on each tier.

China Spring ISD

BENEFITS

- 1 EE 130/150 24 C
- Exam & Materials
- Insight network
- Fully Insured
- Employee Paid

MONTHLY RATES

- Subscriber \$6.48
- Subscriber + Spouse \$11.07
- Subscriber + Child(ren) \$12.96
- Subscriber + Family \$16.24

Plan Details

Quote for group situated in the State of TX and will be valid until the 09/01/2026 implementation date. Date Quoted 10/06/2025. Rates are valid only when the quoted plan is the sole stand-alone vision plan offered by the group. Percentage discounts are not part of the insurance benefit. Underwritten by Fidelity Security Life Insurance Company® of Kansas City, Missouri, except in New York. Fidelity Security Life Policy number VC-146, form number M-9184. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Plan Exclusions/Limitations

No benefits will be paid for services or materials connected with or charges arising from: medical or surgical treatment, services or supplies for the treatment of the eye, eyes or supporting structures; Refraction, when not provided as part of a Comprehensive Eye Examination; services provided as a result of any Workers Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; orthoptic or vision training, subnormal vision aids and associated supplemental testing; Aniseikonic lenses; any Vision Examination or any corrective Vision Materials required by a Policyholder as a condition of employment; safety eyewear; solutions, cleaning products or frame cases; non-prescription sunglasses; plano (non-prescription) lenses; plano (non-prescription) contact lenses; two pair of glasses in lieu of bifocals; electronic vision devices; services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order; or lost or broken lenses, frames, glasses, or contact lenses that are replaced before the next Benefit Frequency when Vision Materials would next become available. Fees charged by a Provider for services other than a covered benefit and any local, state or Federal taxes must be paid in full by the Insured Person to the Provider. Such fees, taxes or materials are not covered under the Policy. Allowances provide no remaining balance for future use within the same Benefit Frequency. Some provisions, benefits, exclusions or limitations listed herein may vary by state.

By signing below, the Group agrees to receive all documents and correspondence electronically and that the Group can access the internet or the email address provided. The Group understands that the Group may revoke this authorization or request specific paper documents without revoking this authorization by contacting EyeMed by mail, email, or telephone. If China Spring ISD has chosen this benefit design, attach this document to the group application and sign here

SIGNATURE

DATE

China Spring ISD



*We're committed to keeping
money in our members' pockets*

That's why we offer our members additional discounts above the proposed plan benefits

VISION CARE SERVICES IN-NETWORK MEMBER COST

EXAM SERVICES

Retinal Imaging	Up to \$39
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CONTACT LENS FIT AND FOLLOW-UP

Fit and Follow-Up – Standard	Up to \$40
Fit and Follow-Up – Premium	10% off retail price

LENS OPTIONS

Photochromic – Non-Glass	\$75
Polycarbonate – Standard	\$40
Scratch Coating – Standard Plastic	\$15
Tint – Solid or Gradient	\$15
UV Treatment	\$15
All Other Lens Options	20% off retail price

40%OFF



additional pairs of glasses

20%OFF



any item not covered by the plan,
including non-prescription sunglasses

15%OFF



retail price or 5% off promotional price
for Lasik or PRK from US Laser Network

UP TO 66%OFF



hearing aids, with an extended
warranty and free batteries through
Amplifon Hearing Health Care Network



Members can get exclusive additional discounts and deals that are often stackable with their vision benefits at eyemed.com/member⁴

DISCOUNT DETAILS

Discounts are not insured benefits. Member receives a 20% discount on items not covered by the insurance plan at EyeMed In-Network locations. Plan discounts cannot be combined with any other discounts or promotional offers. In certain states members may be required to pay the full retail rate and not the negotiated discount rate with certain participating providers. Please see EyeMed's online provider locator to determine which participating providers have agreed to the discounted rate. Discounts on vision materials may not be applicable to certain manufacturers' products. The Plan reserves the right to make changes to the products on each tier and the member out-of-pocket costs. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Service and amounts listed above are subject to change at any time.

⁴ Special offers not valid in the State of Texas.

Flexible Spending Accounts

First Financial Administrators, Inc. | www.ffga.com
1-866-853-3539 P.O. Box 161968 | Altamonte Springs, FL 32716

Medical FSA

A Medical Flexible Spending Account (Medical FSA) is an IRS-approved program to help you save taxes and pay for out-of-pocket medical expenses not covered under your medical plan. If your plan includes a grace period option, you have additional 2 ½ month grace to incur and claim against unused funds in the new plan year. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule.

Your maximum contribution amount for 2026 is \$3,400.

Medical FSA Highlights

- Contributions are automatically deducted from your paycheck on a pre-tax basis, which helps reduce your taxable income and increase your spendable income.
- Your full election will be available to you at the beginning of the plan year.
- Be conservative – any money left in your account at the end of the plan year will be forfeited.
- Use your benefits card to pay for qualified expenses upfront without spending money out of pocket.
- Keep all receipts in case you need to substantiate a claim for tax purposes.

NOTE: The IRS requires proof that all expenses are eligible. Keep all receipts in case you need to substantiate a claim for tax purposes. Your receipt must include the date of purchase or service, amount you were required to pay after insurance, description of the product or service, merchant or provider name, and the patient's name.

Dependent Care FSA

With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like childcare, babysitters, and adult day care.

You may allocate up to \$7,500 per tax year for reimbursement of dependent care services.

If you are married and file a separate tax return, the limit is \$3,750.

Dependent Care FSA Highlights

- Eligible dependents must be claimed as an exemption on your tax return.
- Eligible dependents must be children under age 13 or an adult dependent incapable of self-care.
- Funds become available as contributions are made to your account.
- Keep all receipts in case you need to substantiate a claim for tax purposes.
- Balances will be forfeited at the end of the runoff or grace period.

FSA Resources

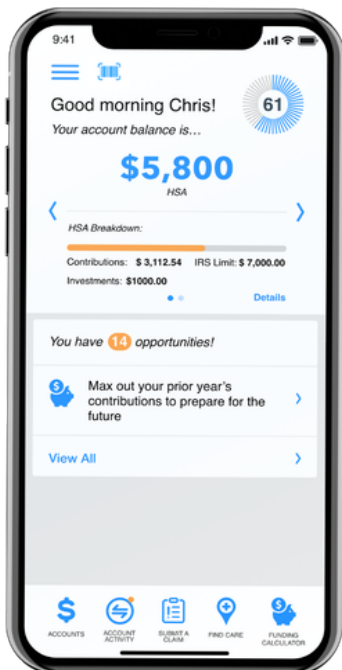
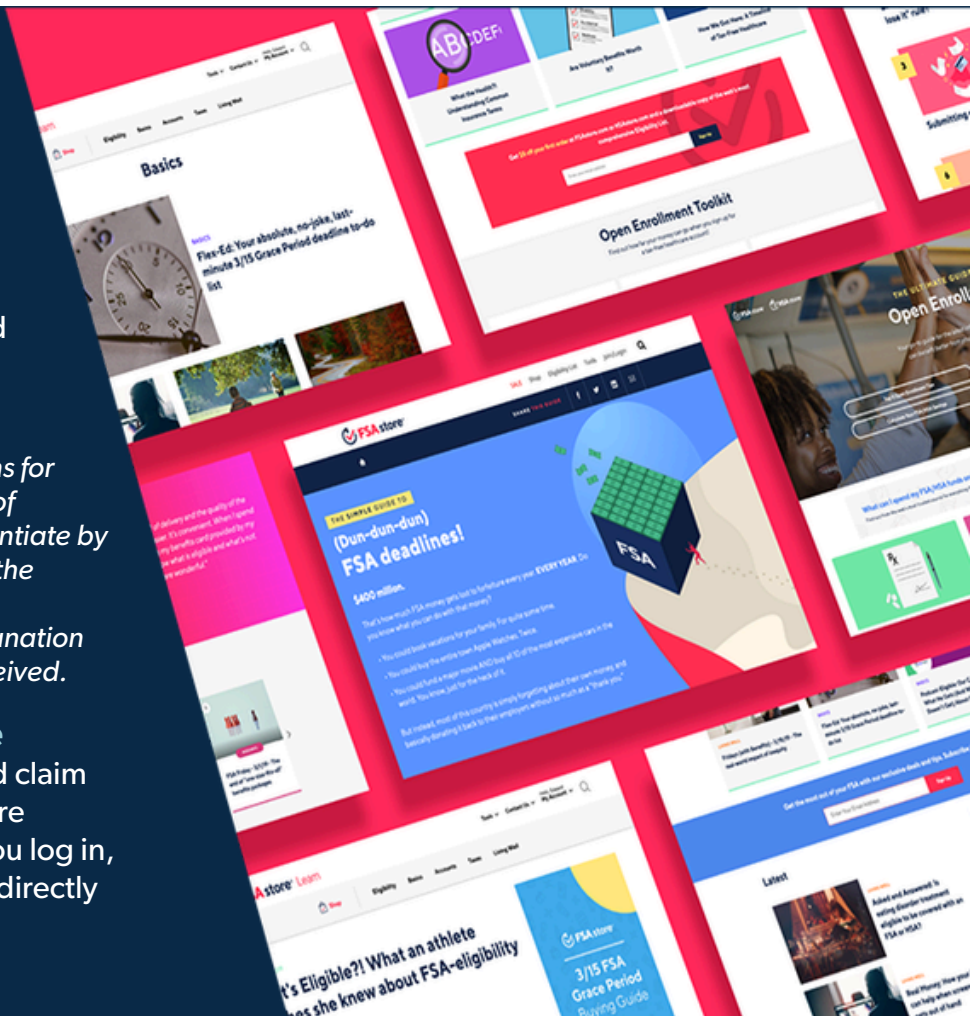
Benefits Card

The FFGA Benefits Card is available to all employees that participate in a Medical FSA and/or a Dependent Care FSA. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and any eligible dependents who are at least 18 years old.

The IRS requires validation of most transactions for FSAs. You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to FFGA within 60 days of the purchase or date of service your card will be suspended until the necessary receipt or explanation of benefits from your insurance provider is received.

View Your Account Details Online

Sign up to view your account balance, find claim forms and check claims status on our secure website. Log in at www.ffga.com. After you log in, you may sign up to have reimbursements directly deposited to your bank account.



FF Mobile Account App

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App Store or Google Play Store.

FSA Store

FFGA has partnered with the FSA Store to bring you an easy-to-use online store to better understand and manage your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the store at <http://www.ffga.com/individuals/#stores> for more details and special deals.



Limited Purpose FSA



First Financial Administrators, Inc. | www.ffga.com | 1-866-853-3539
P.O. Box 161968 | Altamonte Springs, FL 32716

A Limited Purpose Flexible Spending Account (LPFSA) works together with a Health Savings Account (HSA) for you to further optimize your tax savings. By establishing an LPFSA, you can save money on taxes by using the account for eligible dental and vision expenses while preserving your HSA funds for other purposes, including simply saving those funds for the future.

Your maximum contribution amount for 2026 is \$3,400.

Limited Purpose FSA Highlights

- Only certain dental and vision expense are eligible such as eye exams, contact lenses and eyeglasses.
- Funds can be accessed by submitting a claim or paying for expenses upfront with a benefits debit card.
- Purchases may need to be verified during the claims process, so be sure to save your receipts.
- If the carryover provision is elected by your employer, balances may be carried over to the following plan year.

Health Savings Account

First Financial Administrators, Inc. | www.ffga.com | 1-866-853-3539
P.O. Box 161968 | Altamonte Springs, FL 32716

A Health Savings Account (HSA) is a great way to help you control your healthcare costs. It works in conjunction with a qualified High Deductible Health Plan (HDHP) to combine tax-free savings earmarked for qualified medical expenses. An HSA allows you to set aside money to pay for higher deductibles associated with a lower monthly premium HDHP. The money you save in monthly insurance premiums is reserved for eligible medical expenses you incur in the future. Eligible expenses include things like co-pays and deductibles, prescriptions, vision expenses, dental care, therapy and medical supplies.

Health Savings Account Highlights

- Balances roll over from year to year and earn interest along the way.
- Portable – you keep it even after you leave employment.
- Tax advantages – invest money in mutual funds to grow your tax savings for either future healthcare costs or retirement.
- Pay for expenses with a benefits debit card that gives you immediate access to your money at the time of purchase.
- Expenses also can be reimbursed through our online portal, online bill pay directly to your provider or submitting a distribution request form.
- Receipts are not required for reimbursement but be sure to save them for tax purposes.

Who Can Participate in an HSA?

- You must be enrolled in a qualified High Deductible Health Plan (HDHP).
- You cannot be enrolled in Tricare or Medicare or covered under your spouse’s traditional (non-HDHP) health care plan.
- You cannot participate in a general purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement.
- Limited Purpose Flexible Spending Accounts are permitted (dental and vision expenses only).
- You cannot participate if your spouse has a general purpose FSA or HRA at their place of employment.
- You cannot participate if you are being claimed as a dependent on another person’s tax return.

	2025	2026
HSA Contribution Limits	• Self: \$4,300 • Family: \$8,550	• Self Only: \$4,400 • Family: \$8,750
Health Insurance Deductible Limits	• Self Only: \$1,650 • Family: \$3,300	• Self Only: \$1,700 • Family: \$3,400

\$1,000 catch-up contributions (age 55 or older)

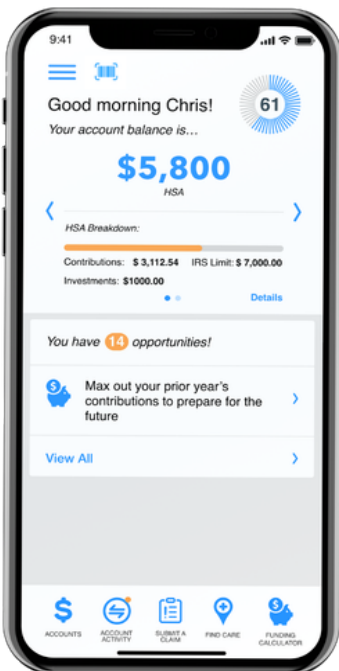
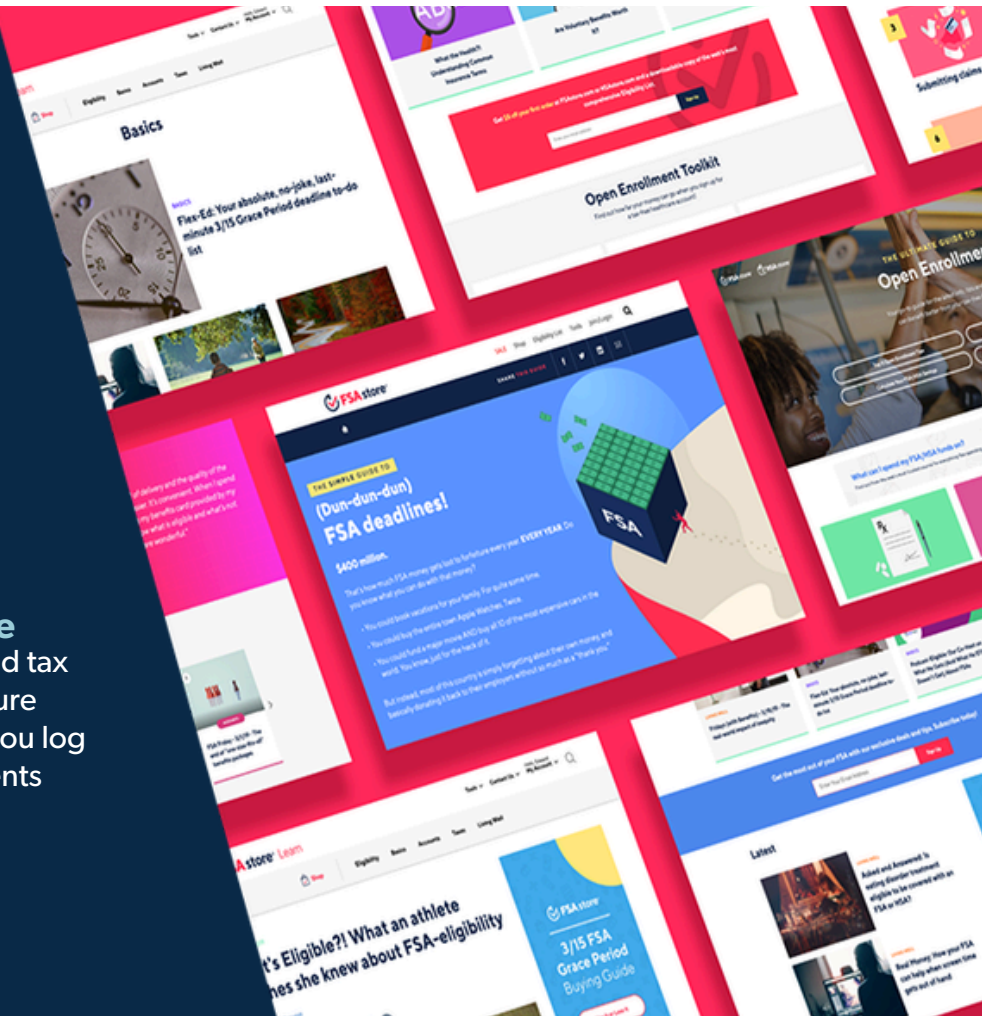
HSA Resources

Benefits Card

The FFGA Benefits Card is available to all employees that participate in a Health Savings Account. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and any eligible dependents who are at least 18 years old.

View Your Account Details Online

Sign up to view your account balance, find tax forms and check claims status on our secure website. Log in at www.ffga.com. After you log in, you may sign up to have reimbursements directly deposited to your bank account.



FF Mobile Account App

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App Store or Google Play Store.

HSA Store

FFGA has partnered with the HSA Store to bring you an easy-to-use online store to better understand and manage your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the store at <http://www.ffga.com/individuals/#stores> for more details and special deals.



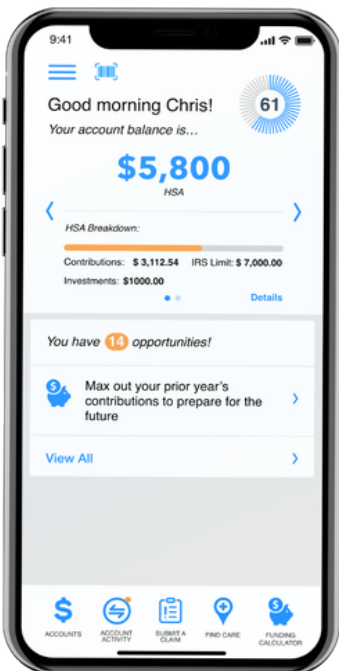
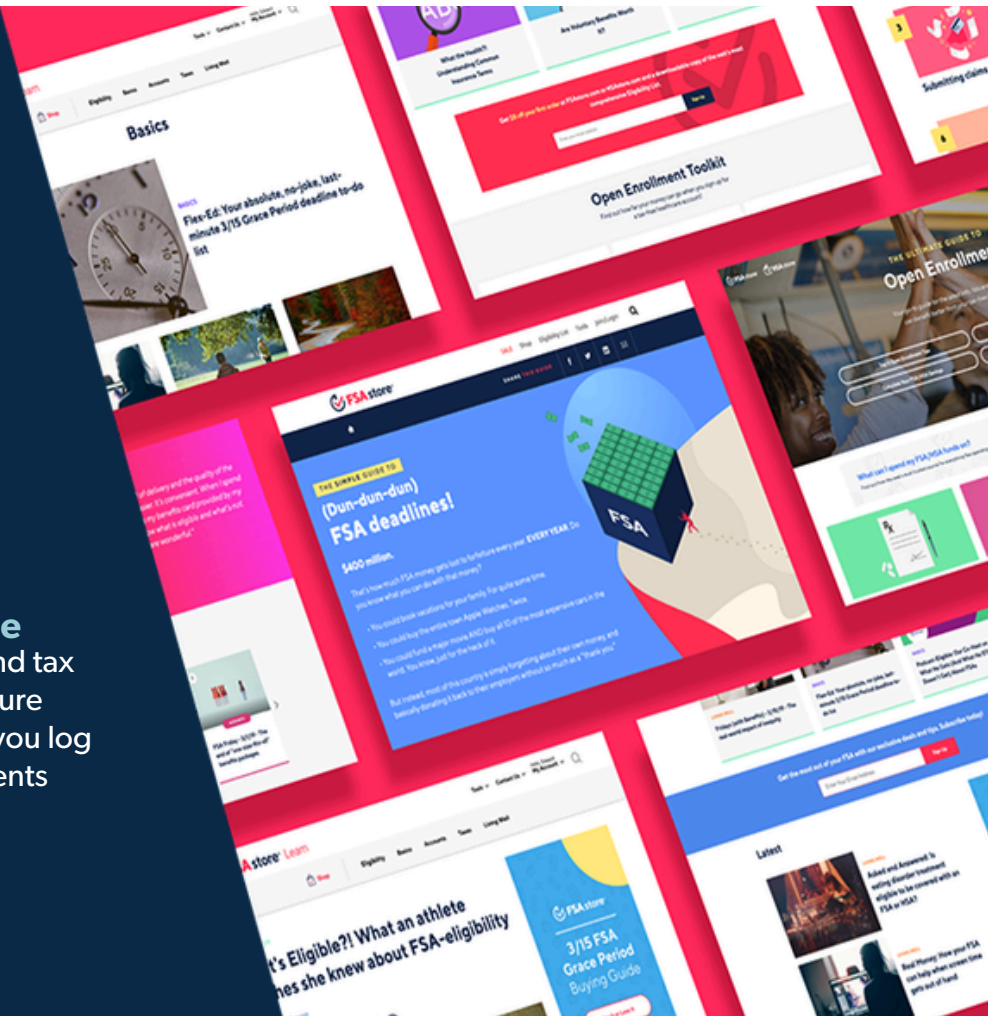
FSA & HSA Resources

Benefits Card

The FFGA Benefits Card is available to all employees that participate in a Flexible Spending Account or Health Savings Account. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and any eligible dependents who are at least 18 years old.

View Your Account Details Online

Sign up to view your account balance, find tax forms and check claims status on our secure website. Log in at www.ffga.com. After you log in, you may sign up to have reimbursements directly deposited to your bank account.



FF Mobile Account App

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App Store or Google Play Store.

FSA/HSA Store

FFGA has partnered with the FSA Store and HSA Store to bring you easy-to-use online stores to better understand and manage your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the stores at <http://www.ffga.com/individuals/#stores> for more details and special deals.



Term Life & AD&D

Employer-Paid & Voluntary

BCBS | www.bcbstx.com | 877-442-4207

Employer-Paid Term Life & AD&D Insurance

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. Your employer provides all eligible employees a \$50,000. The cost of this policy is paid for 100% by your employer. This is a term life policy that is in effect while you are employed.

Voluntary Term Life Insurance

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period of time while you are employed. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides. Limitations apply, please see policy for details. Visit the Employee Benefits Center for more details.



Texas Life

Permanent Life



Texas Life | www.texaslife.com | 800-283-9233

Texas Life Insurance - Permanent, Portable Life Insurance

The peace of mind voluntary, permanent life insurance provides is unmatched. It is a solid companion to your group life insurance plan. Texas Life provides life insurance that you can keep for a lifetime. The plan is easy to purchase, pay for, and keep through the convenience of payroll deduction. Coverage is affordable and dependable. Plus, Texas Life has over a century of experience protecting families and giving the peace of mind only permanent life insurance can provide.

Texas Life - Permanent Life Highlights

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121 if you pay the necessary premium on time.
- It is a permanent, universal life policy which means you can rest easy knowing your loved ones will be well taken care of when you're gone.

PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown Includes Added Cost for Accidental Death Benefit (Ages 17-59) and Accelerated Death Benefit for Chronic Illness (All Ages)									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		13.05	23.85	34.65	45.45	67.05	88.65	110.25	131.85	75
21-22		13.33	24.40	35.48	46.55	68.70	90.85	113.00	135.15	74
23		13.60	24.95	36.30	47.65	70.35	93.05	115.75	138.45	75
24-25		13.88	25.50	37.13	48.75	72.00	95.25	118.50	141.75	74
26		14.43	26.60	38.78	50.95	75.30	99.65	124.00	148.35	75
27-28		14.70	27.15	39.60	52.05	76.95	101.85	126.75	151.65	74
29		14.98	27.70	40.43	53.15	78.60	104.05	129.50	154.95	74
30-31		15.25	28.25	41.25	54.25	80.25	106.25	132.25	158.25	73
32		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	74
33		16.63	31.00	45.38	59.75	88.50	117.25	146.00	174.75	74
34		17.45	32.65	47.85	63.05	93.45	123.85	154.25	184.65	75
35		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	76
36		19.10	35.95	52.80	69.65	103.35	137.05	170.75	204.45	76
37		19.93	37.60	55.28	72.95	108.30	143.65	179.00	214.35	77
38		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	77
39		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	78
40	10.75	23.50	44.75	66.00	87.25	129.75	172.25	214.75	257.25	79
41	11.52	25.43	48.60	71.78	94.95	141.30	187.65	234.00	280.35	80
42	12.40	27.63	53.00	78.38	103.75	154.50	205.25	256.00	306.75	81
43	13.17	29.55	56.85	84.15	111.45	166.05	220.65	275.25	329.85	82
44	13.94	31.48	60.70	89.93	119.15	177.60	236.05	294.50	352.95	83
45	14.71	33.40	64.55	95.70	126.85	189.15	251.45	313.75	376.05	83
46	15.59	35.60	68.95	102.30	135.65	202.35	269.05	335.75	402.45	84
47	16.36	37.53	72.80	108.08	143.35	213.90	284.45	355.00	425.55	84
48	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	85
49	18.12	41.93	81.60	121.28	160.95	240.30	319.65	399.00	478.35	85
50	19.22	44.68	87.10	129.53	171.95					86
51	20.54	47.98	93.70	139.43	185.15					87
52	21.97	51.55	100.85	150.15	199.45					88
53	23.07	54.30	106.35	158.40	210.45					88
54	24.17	57.05	111.85	166.65	221.45					88
55	25.38	60.08	117.90	175.73	233.55					89
56	26.48	62.83	123.40	183.98	244.55					89
57	27.80	66.13	130.00	193.88	257.75					89
58	29.01	69.15	136.05	202.95	269.85					89
59	30.33	72.45	142.65	212.85	283.05					89
60	31.18	74.58	146.90	219.23	291.55					90
61	32.61	78.15	154.05	229.95	305.85					90
62	34.37	82.55	162.85	243.15	323.45					90
63	36.13	86.95	171.65	256.35	341.05					90
64	38.00	91.63	181.00	270.38	359.75					90
65	40.09	96.85	191.45	286.05	380.65					90
66	42.40									90
67	44.93									91
68	47.68									91
69	50.43									91
70	53.29									91

CHILDREN AND GRANDCHILDREN (NON-TOBACCO)

Accidental Death Benefit included for ages 17 and older.

Grandchild coverage available through age 18.

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
15D-1	9.25	16.25	81
2-4	9.50	16.75	80
5-8	9.75	17.25	79
9-10	10.00	17.75	79
11-16	10.25	18.25	77
17-20	12.25	22.25	75
21-22	12.50	22.75	74
23	12.75	23.25	75
24-25	13.00	23.75	74
26	13.50	24.75	75

Indicates Spouse Coverage Available

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO

Accelerated Death Benefit for Chronic Illness Rider Form ICC15-ULABR-CI-15, ULABR-CI-15 or CA-ULABR-CI-18

Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

25M011-C-M FFGA 1007 (expo227)

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown Includes Added Cost for Accidental Death Benefit (Ages 17-59) and Accelerated Death Benefit for Chronic Illness (All Ages)									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	71
21-22		19.38	36.50	53.63	70.75	105.00	139.25	173.50	207.75	71
23		20.20	38.15	56.10	74.05	109.95	145.85	181.75	217.65	72
24-25		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	71
26		21.30	40.35	59.40	78.45	116.55	154.65	192.75	230.85	72
27-28		21.85	41.45	61.05	80.65	119.85	159.05	198.25	237.45	71
29		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	71
30-31		24.88	47.50	70.13	92.75	138.00	183.25	228.50	273.75	72
32		25.70	49.15	72.60	96.05	142.95	189.85	236.75	283.65	72
33		25.98	49.70	73.43	97.15	144.60	192.05	239.50	286.95	72
34		26.25	50.25	74.25	98.25	146.25	194.25	242.25	290.25	71
35		28.18	54.10	80.03	105.95	157.80	209.65	261.50	313.35	72
36		29.00	55.75	82.50	109.25	162.75	216.25	269.75	323.25	72
37		30.93	59.60	88.28	116.95	174.30	231.65	289.00	346.35	73
38		31.75	61.25	90.75	120.25	179.25	238.25	297.25	356.25	73
39		33.95	65.65	97.35	129.05	192.45	255.85	319.25	382.65	74
40	16.14	36.98	71.70	106.43	141.15	210.60	280.05	349.50	418.95	76
41	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	77
42	18.34	42.48	82.70	122.93	163.15	243.60	324.05	404.50	484.95	78
43	19.88	46.33	90.40	134.48	178.55	266.70	354.85	443.00	531.15	80
44	20.65	48.25	94.25	140.25	186.25	278.25	370.25	462.25	554.25	80
45	21.75	51.00	99.75	148.50	197.25	294.75	392.25	489.75	587.25	81
46	22.63	53.20	104.15	155.10	206.05	307.95	409.85	511.75	613.65	81
47	23.73	55.95	109.65	163.35	217.05	324.45	431.85	539.25	646.65	82
48	24.72	58.43	114.60	170.78	226.95	339.30	451.65	564.00	676.35	82
49	26.15	62.00	121.75	181.50	241.25	360.75	480.25	599.75	719.25	83
50	27.36	65.03	127.80	190.58	253.35					83
51	28.57	68.05	133.85	199.65	265.45					83
52	30.33	72.45	142.65	212.85	283.05					84
53	31.87	76.30	150.35	224.40	298.45					85
54	33.30	79.88	157.50	235.13	312.75					85
55	34.84	83.73	165.20	246.68	328.15					85
56	36.60	88.13	174.00	259.88	345.75					85
57	38.36	92.53	182.80	273.08	363.35					86
58	40.23	97.20	192.15	287.10	382.05					86
59	42.10	101.88	201.50	301.13	400.75					86
60	43.28	104.83	207.40	309.98	412.55					86
61	45.81	111.15	220.05	328.95	437.85	CHILDREN AND GRANDCHILDREN (TOBACCO) Accidental Death Benefit included for ages 17 and older. Grandchild coverage available through age 18.				86
62	48.23	117.20	232.15	347.10	462.05					87
63	50.65	123.25	244.25	365.25	486.25					87
64	53.07	129.30	256.35	383.40	510.45					87
65	55.71	135.90	269.55	403.20	536.85					87
66	58.57									88
67	61.65									88
68	64.84									88
69	68.25									88
70	71.88									89

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO

Accelerated Death Benefit for Chronic Illness Rider Form ICC15-ULABR-CI-15, ULABR-CI-15 or CA-ULABR-CI-18

Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

25M011-C-M FFGA 1007 (expo227)

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
17-20	17.25	32.25	71
21-22	18.00	33.75	71
23	18.75	35.25	72
24-25	19.25	36.25	71
26	19.75	37.25	72

Indicates Spouse Coverage Available

Disability Insurance

One America | www.wcm.oneamerica.com/wps/portal/OneAmerica/claims | 855-517-6365

Why Do I Need Disability Insurance?

Have you ever wondered what would happen to your income if you had an accidental injury, sickness, or pregnancy? That is why you need disability coverage. It replaces a portion of income for the period you are unable to work due to those reasons. You can choose the benefit amount, which is the amount of your income to replace, and the waiting period that you begin receiving payments.

How do you decide if you need disability insurance? Consider these questions when making your decision:

- How much employer leave do you have?
- Do you have savings?
- Do you have other income you can rely on, such as from your spouse or from child support?
- How close are you to retirement?
- Could you go on Social Security Disability or take a Disability Retirement?
- What are your other sources of income?



Proposal for: China Spring ISD
Prepared: 10/17/2025

Products and financial services provided by
American United Life Insurance Company^{*}
a OneAmerica Financial[®] company
One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318



Proposed Effective Date: 01/01/2026

Group Worksite Disability Insurance Options – Short Term

Class Description:	All Eligible Full-Time Employees ³	
Required Minimum Number of Hours Worked:	30 hours weekly	
Employer Contribution Percentage:	0%	
Participation Requirement:	Greater of 10 insured employees or 25% of all eligible employees	
Features	STD Option 1	STD Option 2
Injury Elimination Period:	14 Days	30 Days
Sickness Elimination Period:	14 Days	30 Days
Maximum Benefit Duration⁴:	11 Weeks	9 Weeks
Monthly Benefit Amount:	Increments of \$100 with a minimum of \$200 and a maximum of \$7,500 not to exceed 66 2/3% of Covered Monthly Earnings	Increments of \$100 with a minimum of \$200 and a maximum of \$7,500 not to exceed 66 2/3% of Covered Monthly Earnings

Pre-Existing Condition Exclusion:	3/3/12
Total Disability Definition:	Regular Job
Partial Disability Benefit:	50%
Residual Benefit:	Yes

³ Use of the term "Employee" includes employees, owners, members, partners, shareholders, or participants eligible to apply for coverage under American United Life Insurance Company[®] (AUL) contract.

⁴ Disability benefits payable under the contract for Short Term Disability (durations less than or equal to 104 weeks) will be paid weekly instead of monthly. To estimate the potential weekly benefit payable under the contract, multiply the monthly benefit by 12, then divide by 52.

Proposal for: China Spring ISD
Prepared: 10/17/2025

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Benefit Features Offered for Group Worksite Disability Insurance – Short Term:

Continuation of Personal Insurance under Family Medical Leave Act (FMLA)
Continuation of Personal Insurance during Leave of Absence, including Active Military Service and a
Temporary Layoff
Coverage Type - Non-Occupational
First Day Hospital Benefit - including outpatient surgery
Individual Reinstatement – 30 days
Minimum Monthly Benefit – The greater of 10% of the gross monthly benefit or \$100
Normal pregnancy and certain complications included in definition of Sickness
Portability Privilege
Recurrent Disability – 30 days
Salary Continuance Offset Method – No offsets until 100% of pre-disability earnings
Social Security Integration Method – Family
Tax Reporting Services - pertaining to Employee FICA & W2 (Option 2)
Waiver of Premium
Workplace Modification Benefit

An eligible employee is a full-time employee authorized to work and reside in the United States. Eligible employees must work the required minimum number of hours and cannot be considered a part-time, temporary or seasonal employee. If any eligible employee is not actively at work on the contract effective date, group insurance coverage for that employee will not exist until he/she returns to full-time active work.

Proposal for: China Spring ISD
Prepared: 10/17/2025

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Proposed Premium Rates for Group Worksite Disability Insurance

<i>Age Category*</i>	STD Monthly Premium Rate per \$100 of Monthly Benefit Option 1	STD Monthly Premium Rate per \$100 of Monthly Benefit Option 2
0-19	\$1.84	\$1.48
20-24	\$1.84	\$1.48
25-29	\$1.84	\$1.48
30-34	\$1.84	\$1.48
35-39	\$1.36	\$1.18
40-44	\$1.08	\$0.96
45-49	\$1.08	\$0.96
50-54	\$1.20	\$1.08
55-59	\$1.60	\$1.34
60-64	\$1.72	\$1.34
65-69	\$1.88	\$1.64
70+	\$1.98	\$1.74

The proposed premium rates are guaranteed for 36 months, to 12/31/2028. Any variation in benefits or services will make these rates invalid.

*An eligible employee's age will be determined as of the Policyholder's anniversary date. If the anniversary date and the effective date are identical, the employee's age will be determined as of the Policyholder's effective date of coverage. Premium rates for each employee will increase for events such as when the employee enters a new age category.

This proposal is based on 410 eligible employees.

If an employee is eligible and enrolls timely, the employee will be able to apply for coverage without providing Evidence of Insurability. After the initial enrollment period, eligible employees may apply for coverage under another option only during an approved scheduled enrollment period. However, any change in coverage will then require medical underwriting and written approval by American United Life Insurance Company® (AUL).

Any change in the above amounts of coverage and/or number of employees insured will invalidate the proposed premium rates and require further evaluation by AUL. To be eligible for the above premium rates and coverages, the required number of insured employees must be the greater of 10 enrolled employees or 25% of all eligible employees. When both Group Worksite short term disability and Group Worksite long term disability coverage are issued to the policyholder, the required percentage of insured employees is 25% of all eligible employees.

2025-10-17 SIC:8211 (LIF 15.00 2510 2008A)(VTL 15.00 2535 2008A)(WDS 15.00 3802 2015A)(WDL 15.00 3802 2015A)
Proposal #: 525716

Proposal for: China Spring ISD
Prepared: 10/17/2025

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a OneAmerica Financial® company
One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318*



The proposed effective date of coverage under AUL's contract will be 1/1/2026. No insurance coverage shall exist or become effective until approved in writing by AUL at its Indianapolis, Indiana home office. AUL shall not be liable or responsible for any loss or benefits incurred prior to AUL's effective date of coverage for any insured.

Tax Reporting Services offered

Deduct and deposit with the IRS employee FICA, if any; supply the policyholder with periodic and annual benefit payment and tax withholding reports; and prepare and issue W-2 Forms only.

Additional information

Any sick pay services will be performed pursuant to IRS Employer's Tax Guide or applicable tax publication and AUL is not considered the employer's agent. The employer/policyholder remains responsible and liable for all withholding, depositing, and reporting obligations not agreed to be provided by AUL.

Proposal for: China Spring ISD
Prepared: 10/17/2025

Products and financial services provided by
American United Life Insurance Company⁵
a OneAmerica Financial[®] company
One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318



Proposed Effective Date: 01/01/2026

Group Worksite Disability Insurance Options – Long Term

Class Description:	All Eligible Full-Time Employees ⁵
Required Minimum Number of Hours Worked:	30 hours weekly
Employer Contribution Percentage:	0%
Participation Requirement:	Greater of 10 insured employees or 25% of all eligible employees
Features	LTD Option 1
Elimination Period:	90 days
Maximum Benefit Duration:	SSNRA
Monthly Benefit Amount:	Increments of \$100 with a minimum of \$200 and a maximum of \$7,500 not to exceed 66 2/3% of Covered Monthly Earnings
Pre-Existing Condition Exclusion:	3/3/12
Total Disability Definition:	Regular Occupation – 2 years
Partial Disability Benefit:	50%
Residual Benefit:	Yes

⁵ Use of the term "Employee" includes employees, owners, members, partners, shareholders, or participants eligible to apply for coverage under American United Life Insurance Company[®] (AUL) contract.

Proposal for: China Spring ISD
Prepared: 10/17/2025

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Benefit Features Offered for Group Worksite Disability Insurance – Long Term:

Accidental Dismemberment and Loss of Sight
Accumulation of Elimination Period – 2 times the Elimination Period
Continuation of Personal Insurance under Family Medical Leave Act (FMLA)
Continuation of Personal Insurance during Leave of Absence, including Active Military Service and a
Temporary Layoff
Gainful Occupation - 80% if working / 60% if not working
Individual Reinstatement – 30 days
Minimum Monthly Benefit – \$100
Normal pregnancy and certain complications included in definition of Sickness
Portability Privilege
Recurrent Disability – 6 months
Return to Work Benefit - 12 months
Social Security Integration Method – Family
Survivor Benefit - 3 times last Gross Monthly Benefit
Tax Reporting Services - pertaining to Employee FICA & W2 (Option 2)
Vocational Rehabilitation Program
Waiver of Premium
Workplace Modification Benefit

Limitations:

Mental Illness - 24 months lifetime cumulative
Drug & Alcohol Abuse - 24 months lifetime cumulative
Special Conditions - 24 months lifetime cumulative

An eligible employee is a full-time employee authorized to work and reside in the United States. Eligible employees must work the required minimum number of hours and cannot be considered a part-time, temporary or seasonal employee. If any eligible employee is not actively at work on the contract effective date, group insurance coverage for that employee will not exist until he/she returns to full-time active work.

Proposal for: China Spring ISD
Prepared: 10/17/2025

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(800) 553-5318



Proposed Premium Rates for Group Worksite Disability Insurance

<i>Age Category*</i>	LTD Monthly Premium Rate per \$100 of Monthly Benefit Option 1
0-19	\$0.10
20-24	\$0.24
25-29	\$0.32
30-34	\$0.48
35-39	\$0.62
40-44	\$0.80
45-49	\$1.06
50-54	\$1.06
55-59	\$1.06
60-64	\$1.06
65-69	\$0.58
70+	\$0.44

The proposed premium rates are guaranteed for 36 months, to 12/31/2028. Any variation in benefits or services will make these rates invalid.

*An eligible employee's age will be determined as of the Policyholder's anniversary date. If the anniversary date and the effective date are identical, the employee's age will be determined as of the Policyholder's effective date of coverage. Premium rates for each employee will increase for events such as when the employee enters a new age category.

This proposal is based on 410 eligible employees.

If an employee is eligible and enrolls timely, the employee will be able to apply for coverage without providing Evidence of Insurability. After the initial enrollment period, eligible employees may apply for coverage under another option only during an approved scheduled enrollment period. However, any change in coverage will then require medical underwriting and written approval by American United Life Insurance Company® (AUL).

Any change in the above amounts of coverage and/or number of employees insured will invalidate the proposed premium rates and require further evaluation by AUL. To be eligible for the above premium rates and coverages, the required number of insured employees must be the greater of 10 enrolled employees or 25% of all eligible employees. When both Group Worksite short term disability and Group Worksite long term disability coverage are issued to the policyholder, the required percentage of insured employees is 25% of all eligible employees.

2025-10-17 SIC:8211 (LIF 15.00 2510 2008A)(VTL 15.00 2535 2008A)(WDS 15.00 3802 2015A)(WDL 15.00 3802 2015A)
Proposal #: 525716

Proposal for: China Spring ISD
Prepared: 10/17/2025

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The proposed effective date of coverage under AUL's contract will be 1/1/2026. No insurance coverage shall exist or become effective until approved in writing by AUL at its Indianapolis, Indiana home office. AUL shall not be liable or responsible for any loss or benefits incurred prior to AUL's effective date of coverage for any insured.

Tax Reporting Services offered

Deduct and deposit with the IRS employee FICA, if any; supply the policyholder with periodic and annual benefit payment and tax withholding reports; and prepare and issue W-2 Forms only.

Additional information

Any sick pay services will be performed pursuant to IRS Employer's Tax Guide or applicable tax publication and AUL is not considered the employer's agent. The employer/policyholder remains responsible and liable for all withholding, depositing, and reporting obligations not agreed to be provided by AUL.

Proposal for: China Spring ISD
Prepared: 10/17/2025

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Proposal Conditions

The following are assumptions and conditions upon which this proposal is offered:

1. This invitation to inquire allows interested employers an opportunity to inquire further about group insurance coverage and is limited in its description of the losses for which benefits may be payable. The contract has exclusions, limitations, reduction of benefits, and terms under which it may be continued in force or discontinued. The contract may contain a waiting or elimination period between the effective date of the contract and the effective date of coverage, and between the date a loss occurs and the date benefits begin to be payable for the loss.
2. Estimated rates are available for 60 calendar days following the proposal date. Actual monthly premium will be calculated and quoted by AUL. Premium rates do increase upon reaching certain age brackets, according to contract terms, and are subject to change. Any deviation from the benefits selected and/or information supplied by employer will invalidate this proposal and require reevaluation of any terms/conditions offered by AUL. Employer warrants and represents, to the best of its knowledge, no participants who may apply for coverage have any illnesses that could affect premium rates, benefits or coverage approval.
3. Rates and coverage are dependent upon the employer being in business and operational at least 2 consecutive years.
4. Coverage continues while required premium is paid and employer receives coverage under the AUL group contract. Benefits payable under the contract may be based on a percentage of an employee's covered earnings subject to AUL's approval, contract maximums, contract reductions, and according to contract terms and conditions. If a choice of the amount of benefits is offered, the amount of benefits provided depends upon the coverage selected and premium can vary with the amount of benefits selected. If a range of benefit levels is present, the applicant is only entitled to the benefit level shown in the contract.
5. Rates assume an SIC code of 8211.
6. Any coverage offered by AUL prior to and after the effective date of coverage is contingent upon information and documents received by AUL being accurate and reliable. Final premium costs will be calculated by AUL based on the final enrollment data of employees insured on the effective date.
7. AUL's group insurance policies are nonparticipating contracts.
8. Certain disabilities are not covered if the cause of the disability is traceable to a condition existing prior to the insured's effective date of coverage. A pre-existing condition is any condition for which a person has done any of the following at any time during the period of time as stated in the policy: 1) received medical treatment or consultation; 2) taken or were prescribed drugs or medicine; or 3) received care or services, including diagnostic measures. Insureds must also be treatment-free for a time-frame specified in some contracts following the individual effective date of coverage.
9. AUL assumes employer has existing Worker's Compensation insurance coverage.
10. All products and benefits may not be available or offered in all states. Contact your AUL regional group insurance representative for availability of products and benefits

EMPLOYER SHOULD RETAIN AND NOT TERMINATE ANY OTHER GROUP INSURANCE COVERAGE UNTIL WRITTEN APPROVAL HAS BEEN RECEIVED FROM AUL.

Cancer Insurance

Plan Options



American Public | www.americanpublic.com/contact-apl/ | 800-256-8606

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more.

Premiums are paid through convenient payroll deduction to ensure your policy remains in force if you should need it. Benefits are paid directly to you, so you can choose how to spend the money. Visit the Employee Benefits Center and view policy for more details.

Summary of Benefits* for China Spring ISD

	Plan 1 Insured Benefit	Plan 2 Insured Benefit
Spouse Coverage	Available	Available
Dependent Child(ren) Coverage	Available	Available
Pre-Existing Condition Period/Pre-Existing Condition Exclusion Period	12 months/12 months	12 months/12 months
Portability Amendment Rider	Included	Included
Continuity of Coverage Amendment Rider (Takeover)	Included, credit given for time served under prior coverage for: Pre-Existing Condition Limitation	Included, credit given for time served under prior coverage for: Pre-Existing Condition Limitation
Cancer Plan Benefit	Level 2	Level 3
Radiation Therapy, Chemotherapy, Immunotherapy Maximum per 12-month period	\$10,000	\$15,000
Hormone Therapy Maximum of 12 treatments per calendar year	\$50 per treatment	\$50 per treatment
Experimental Treatment	paid in same manner and under the same maximums as any other benefit	paid in same manner and under the same maximums as any other benefit
Mastectomy		
Confinement	\$50 per day of hospital confinement	\$50 per day of hospital confinement
Surgery	\$25 per surgery	\$25 per surgery
Prosthesis	\$25	\$25
Ovarian/Cervical Cancer Screening 1 test per calendar year	\$10	\$10
Prosthesis and Orthotic Device surgical or non-surgical	\$25	\$25
Internal Cancer First Occurrence Benefit	Level 1	Level 2
Lump Sum Benefit Maximum 1 per lifetime	Insured or Spouse: \$2,500 Eligible Dependent Child(ren): \$3,750	Insured or Spouse: \$5,000 Eligible Dependent Child(ren): \$7,500
Benefit Riders		
Cancer Screening Benefit Rider	Level 1	Level 1
Diagnostic Testing 1 test per calendar year	\$50 per test	\$50 per test
Follow-Up Diagnostic Testing 1 test per calendar year	\$100 per test	\$100 per test
Medical Imaging	\$500 per test; 1 test(s) per calendar year	\$500 per test; 1 test(s) per calendar year
Surgical Benefit Rider	Level 2	Level 2
Surgical Operation	\$30 unit dollar amount; Max \$3,000 per operation	\$30 unit dollar amount; Max \$3,000 per operation
Anesthesia	25% of amount paid for covered surgery	25% of amount paid for covered surgery
Bone Marrow Transplant Maximum per lifetime	\$6,000	\$6,000
Stem Cell Transplant Maximum per lifetime	\$600	\$600
Prosthesis Surgical implantation Non-surgical (not hair piece) 1 device per site, per lifetime	\$1,000 per device \$100 per device	\$1,000 per device \$100 per device

	Plan 1 Insured Benefit	Plan 2 Insured Benefit
Patient Care Benefit Rider	Level 1	Level 3
Hospital Confinement	Insured or Spouse: \$100 per day of hospital confinement, days 1-30; \$100 per day of hospital confinement, days 31+ Eligible Dependent Child(ren): \$200 per day of hospital confinement, days 1-30; \$200 per day of hospital confinement, days 31+	Insured or Spouse: \$200 per day of hospital confinement, days 1-30; \$400 per day of hospital confinement, days 31+ Eligible Dependent Child(ren): \$400 per day of hospital confinement, days 1-30; \$800 per day of hospital confinement, days 31+
Outpatient Facility	\$200 per day surgery is performed	\$400 per day surgery is performed
Attending Physician	\$30 per day of hospital confinement	\$40 per day of hospital confinement
Dread Disease	\$100 per day of hospital confinement, days 1-30; \$100 per day of hospital confinement, days 31+	\$200 per day of hospital confinement, days 1-30; \$400 per day of hospital confinement, days 31+
Extended Care Facility	\$100 per day	\$200 per day
Donor	\$100 per day	\$200 per day
Home Health Care	\$100 per day	\$200 per day
Hospice Care	\$100 per day; maximum of 365 days per lifetime	\$200 per day; maximum of 365 days per lifetime
US Government, Charity Hospital or HMO	\$100 per day of hospital confinement, days 1-30; \$100 per day of hospital confinement, days 31+	\$200 per day of hospital confinement, days 1-30; \$400 per day of hospital confinement, days 31+
Miscellaneous Benefit Rider	Level 1	Level 4
Cancer Treatment Center Evaluation or Consultation - 1 per lifetime	Not included	\$750
Evaluation or Consultation Travel and Lodging - 1 per lifetime	Not included	\$350
Second / Third Surgical Opinion Per diagnosis of cancer	\$300 / \$300	\$300 / \$300
Drugs and Medicine	\$150 per inpatient confinement; \$50 per outpatient prescription, maximum \$150 per month	\$150 per inpatient confinement; \$50 per outpatient prescription, maximum \$150 per month
Hair Piece (Wig) - 1 per lifetime	\$150	\$150
Transportation and Lodging Transportation - maximum 12 trips per calendar year for all modes of transportation combined Lodging - up to a maximum of 100 days per calendar year	actual coach fare or \$0.40 per mile for travel by bus, plane or train; \$0.40 per mile for travel by car; \$50 per day for lodging	actual coach fare or \$0.75 per mile for travel by bus, plane or train; \$0.75 per mile for travel by car; \$100 per day for lodging
Family Member Transportation and Lodging Transportation - maximum 12 trips per calendar year for all modes of transportation combined Lodging - up to a maximum of 100 days per calendar year	actual coach fare or \$0.40 per mile for travel by bus, plane or train; \$0.40 per mile for travel by car; \$50 per day for lodging	actual coach fare or \$0.75 per mile for travel by bus, plane or train; \$0.75 per mile for travel by car; \$100 per day for lodging
Blood, Plasma and Platelets	\$300 per day	\$300 per day
Ambulance Maximum of 2 trips per hospital confinement for all modes of transportation combined	Ground: \$200 per trip Air: \$2,000 per trip	Ground: \$200 per trip Air: \$2,000 per trip
Inpatient Special Nursing Services	\$150 per day of hospital confinement	\$150 per day of hospital confinement
Outpatient Special Nursing Services	\$150 per day	\$150 per day
Medical Equipment Maximum of 1 benefit per calendar year	Not included	\$150

Cancer

Group Limited Benefit Cancer Insurance



	Plan 1 Insured Benefit	Plan 2 Insured Benefit
Physical, Occupational, Speech, Audio Therapy and Psychotherapy	\$25 per visit; maximum of \$1,000 per calendar year	\$25 per visit; maximum of \$1,000 per calendar year
Waiver of Premium	Included	Included
Hospital Intensive Care Unit Benefit Rider		
Intensive Care Unit Maximum of 45 days per confinement for any combination of intensive care unit or step down unit	\$600 per day	\$600 per day
Step Down Unit Maximum of 45 days per confinement for any combination of intensive care unit or step down unit	\$300 per day	\$300 per day
Increase in Coverage	Only available at annual renewal. Must be approved by APL and premium rates will be based upon the insured's attained age. Subject to the Time Limit on Certain Defenses and Pre-Existing Condition provisions, as defined in the policy.	Only available at annual renewal. Must be approved by APL and premium rates will be based upon the insured's attained age. Subject to the Time Limit on Certain Defenses and Pre-Existing Condition provisions, as defined in the policy.

*The premium and amount of benefits vary dependent upon Plan selected at time of application.

Premiums

Plan 1 - Monthly Premium*				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
18+	\$15.40	\$31.66	\$19.83	\$36.14

Plan 2 - Monthly Premium*				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
18+	\$21.40	\$44.10	\$27.25	\$49.99

*Total premium includes the Plan selected and any applicable rider premium. The premium and amount of benefits vary dependent upon the Plan selected at time of application.

Critical Illness Insurance

The Hartford | www.thehartford.com/benefits/myclaim | 866-547-4205

Prepare For the Unexpected

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often times, a critical illness has a powerful impact on people's lives, affecting their livelihood and finances.

A critical illness plan can help with the treatment costs of covered illnesses. Benefits are paid directly to you, unless otherwise assigned, giving you the choice of how to spend the money. Plus, there are plans available to provide coverage for you, your spouse and dependent children.

Prepare now for the unexpected with a critical illness insurance plan. The plan helps you focus on getting well rather than worrying about finances. Visit the Employee Benefits Center and view policy for more details.





A little help when you're not 100%.

Critical Illness Insurance



China Spring Independent School District

Critical Illness Insurance which we call Critical Illness Benefits

provides a lump-sum payment upon diagnosis of a covered illness, such as cancer, heart attack, or stroke. This benefit can be used to cover medical expenses, lost income, or other financial burdens, offering peace of mind and financial support during a challenging time.

What are Critical Illness Benefits?

To support your financial well-being, China Spring Independent School District is offering Critical Illness Benefits for all eligible employees. This coverage is paid by you and is available for yourself and your eligible dependents. It offers cash payments if you are diagnosed with a covered serious illness, such as cancer, heart attack, or stroke. These payments can help you manage unexpected costs and give you greater control over your finances. You must be actively at work with your employer on the day your coverage takes effect. Use it for things like:

- Mortgage or Rent
- Travel for Treatment
- Out-of-Pocket Medical Costs
- Everyday Living Expenses

Critical Illness plan benefits.

For Yourself: \$5,000, \$10,000, \$15,000, \$20,000, \$30,000, \$35,000, \$40,000, \$45,000 or \$50,000

For Your Spouse: 100% of your coverage amount

For Your Children: 50% of your coverage amount

Stay proactive about your health and get rewarded.

Health Screening Benefit: When you or a covered family member complete an eligible preventive screening like an annual physical, mammogram, colonoscopy or biometric blood test, you'll receive \$50 per person, per calendar year directly to you. It's a simple way to offset the cost of routine check-ups while maximizing your benefits.

How Critical Illness Benefits work:

David's Story¹

David always considered himself healthy, but one morning, he felt an intense pain in his chest and was rushed to the hospital. He'd suffered a heart attack and needed immediate surgery followed by weeks of recovery and cardiac rehab.

Fortunately, David had signed up for Critical Illness insurance through work. After his diagnosis, he received a lump-sum cash benefit that helped cover expenses his health insurance didn't—like hospital bills, transportation to appointments, and everyday costs while he was out of work.

With the financial support from his Critical Illness coverage, David could focus on getting better without worrying about his bills.

Here's how you and your family can benefit from this coverage if something happens to you:

Married with kids, lots of expenses

Lump-sum payout helps cover family bills and daily costs while you recover.

Single parent, multiple responsibilities

Gives you financial breathing room so you can focus on getting better, not bills.

Dual income, no kids

Covers lost income or out-of-pocket medical expenses without draining savings.

Growing children, aging parents

Helps you manage care costs for your kids or parents if a major illness hits.

Single and carefree

Protects your income and lifestyle so that a diagnosis doesn't derail your finances.



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THIS POLICY PROVIDES LIMITED BENEFITS FOR SPECIFIED DISEASES ONLY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

Critical Illness Form Series includes GBD-2600, GBD-2700, GBD-3600, GBD-3700, or state equivalent. Not available in all states.

In New York: This policy provides limited benefits health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

1Critical Illness is referred to as "Specified Disease" in New York.

2This case illustration is fictitious and for illustrative purposes only.

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Benefits Cost Guide

Rates shown are Monthly.
Rates and/or benefits may
be changed on a class
basis.

Critical Illness Benefits

provides a lump-sum payment upon diagnosis of a covered illness, such as cancer, heart attack, or stroke. This benefit can be used to cover medical expenses, lost income, or other financial burdens, offering peace of mind and financial support during a challenging time.

Important

Coverage for any Dependent Child(ren) is automatic with Employee enrollment/participation. A separate premium is not required for child coverage.

Voluntary Critical Illness Insurance

Premiums are based on the employee's current age and increase as the employee enters each new age category.

Employee			
Age	Non-Tobacco Rate	Age	Tobacco Rate
18-29	\$0.59	18-29	\$0.74
30-39	\$0.86	30-39	\$1.19
40-49	\$1.12	40-49	\$2.09
50-59	\$2.06	50-59	\$4.18
60-69	\$3.28	60-69	\$7.80
70-79	\$7.19	70-79	\$13.56

To calculate your premium amount, use the following formula.

$$\frac{\text{Benefit Amount}}{\div \$1,000} = \text{Rate} \times \text{Premium Amount} = \$$$

Spouse			
Age	Non-Tobacco Rate	Age	Tobacco Rate
18-29	\$0.59	18-29	\$0.74
30-39	\$0.86	30-39	\$1.19
40-49	\$1.12	40-49	\$2.09
50-59	\$2.06	50-59	\$4.18
60-69	\$3.28	60-69	\$7.80
70-79	\$7.19	70-79	\$13.56

To calculate your premium amount, use the following formula.

$$\frac{\text{Benefit Amount}}{\text{Benefit Amount}} \div \$1,000 = \frac{\text{Benefit Amount}}{\text{Benefit Amount}} \times \frac{\text{Rate}}{\text{Rate}} = \$ \frac{\text{Premium Amount}}{\text{Premium Amount}}$$

Child(ren)	
Rate	\$0.13

To calculate your premium amount, use the following formula.

$$\frac{\text{Benefit Amount}}{\text{Benefit Amount}} \div \$1,000 = \frac{\text{Benefit Amount}}{\text{Benefit Amount}} \times \frac{\text{Rate}}{\text{Rate}} = \$ \frac{\text{Premium Amount}}{\text{Premium Amount}}$$

Tip

Refer to your Benefit Highlight Sheet for specifics about your Benefits.



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Accident Insurance

The Hartford | www.thehartford.com | 800-243-5860

The costs associated with an injury can add up. Between hospital visits, exams and treatment, out-of-pocket costs could put you in a financial hardship. An accident plan pays benefits directly to you so you can determine where to spend the money. It's comforting to know that an accident insurance policy can be there through all stages of your care, from initial treatment to follow-up care. Accident coverage is available to you through payroll deduction and may provide a benefit for costs associated with:

- Concussions
- Lacerations
- Broken teeth
- Emergency room visits
- Ambulance, ground or air
- Intensive care unit





Help keep your bank account healthy while you heal.

Accident Insurance



China Spring Independent School District

Accident Insurance, which we call **Accidental Injury Benefits** put money in your pocket in the event of a covered accident, helping alleviate financial stress so you can focus on getting better. Covered incidents include things like broken bones, lacerations, emergency transportation needs and more.

What are Accidental Injury Benefits?

To support your financial well-being, China Spring Independent School District is offering Accidental Injury Benefits for all eligible employees. This coverage is paid by you and is available for yourself and your eligible dependents. It offers cash payments for a range of accidental injuries and the services incurred as a result. Cash benefits put you in control. You must be actively at work with your employer on the day your coverage takes effect. Use it for things like:

- Childcare
- Utilities
- Groceries
- Medical Expenses

Our Accidental Injury Benefits cover over 200 types of injuries. Here are some commonly covered benefits.

Benefit	Amount
	Plan
X-ray	\$200
Follow-up Care	\$100
Diagnostic Exam	\$300
Initial Physician Visit	\$250
Therapy	\$125
Urgent Care	\$250
Medical Appliance	\$450
Ground Ambulance	\$1,250

Stay proactive about your health and get rewarded.

Health Screening Benefit: When you or a covered family member complete an eligible preventive screening like an annual physical, mammogram, colonoscopy or biometric blood test, you'll receive \$75 per person, per calendar year directly to you. It's a simple way to offset the cost of routine check-ups while maximizing your benefits.

Accident Prevention Benefit: An accident prevention benefit provides cash to cover exams, tests, screenings, and preventative care programs. These services, ranging from eye exams to driver's safety and training programs, help maintain your health and prevent serious illnesses or injuries. Each covered individual under your plan can claim their own benefits.

How Accidental Injury Benefits work:

Jayden's Story¹

Jayden played basketball all through high school and still played as often as he could. One Saturday during a pickup game he tripped and went down hard. When his wrist swelled up and he couldn't stand without feeling dizzy, his friends called an ambulance to transport him to the ER.

He went home with an arm in a cast and instructions on healing from a concussion. It took him some time to recover, but Jayden was able to rest easy. He'd checked the box for Accident insurance, which we call Accidental Injury Benefits, during open enrollment at work. It paid him a cash benefit he used to help cover medical expenses, food and rent while he was recovering.

The plan pays a benefit amount for each covered service as a result of Jayden's accident.

Service	Accident Plan Pays
Ground Ambulance	\$1,250
ER	\$250
X-ray	\$200
CT Scan (Diagnostic exam)	\$300
Wrist Fracture	\$3,000
Accident Follow-up	\$300 (\$100/visit x3)
Chiropractor	\$1,000 (\$100/visit x10)
Physical Therapy	\$1,250 (\$125/visit x10)
Total	\$7,550



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THE ACCIDENT POLICY IS A LIMITED ACCIDENT ONLY BENEFIT POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

Accident Form Series includes GBD-3300, GBD 3500, GBD-2000, GBD-2300, or state equivalent.

Not available in all states.

In New York: This Accident policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. IMPORTANT NOTICE—THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

¹This case illustration is fictitious and for illustrative purposes only.

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China Spring Independent School District Accidental Injury Benefits

EMERGENCY, HOSPITAL & TREATMENT CARE		PLAN BENEFITS
Accident Follow-Up	Up to 3 visits per accident	\$100
Acupuncture/Chiropractic Care/PT	Up to 10 visits each per accident	Up to \$125
Ambulance - Air	Once per accident	\$2,500
Ambulance - Ground	Once per accident	\$1,250
Blood/ Plasma/ Platelets	Once per accident	\$500
Child Care	Up to 30 days per accident while insured is confined	\$100
Daily Hospital Confinement	Up to 365 days per accident	\$750
Daily ICU Confinement	Up to 30 days per accident	\$1,000
Diagnostic Exam	Once per accident	\$300
Emergency Dental	Once per accident	Up to \$900
Emergency Room	Once per accident	\$250
Health Screening Benefit or Accident Prevention Benefit	Once per year for each covered person	\$75
Hospital Admission	Once per accident	\$2,500
ICU Admission	Once per accident	\$1,000
Initial Physician Office Visit	Once per accident	\$250
Lodging	Up to 30 nights per accident	\$175
Medical Appliance	Once per accident	\$450
Rehabilitation Facility	Up to 15 days per accident	\$600
Transportation	Up to 3 trips per accident	\$800
Urgent Care	Once per accident	\$250
X-Ray	Once per accident	\$200
SPECIFIED INJURY & SURGERY		PLAN BENEFITS
Abdominal/Thoracic Surgery	Once per accident	\$5,000
Arthroscopic Surgery	Once per accident	\$1,000
Burn	Once per accident	Up to \$20,000
Burn - Skin Graft	Once per accident for third degree burn(s)	50% of burn benefit
Concussion	Up to 3 per year	\$400
Dislocation	Once per joint per lifetime	Up to \$12,000
Eye Injury	Once per accident	Up to \$1,000
Fracture	Once per bone per accident	Up to \$12,000
Hernia Repair	Once per accident	\$1,000
Joint Replacement	Once per accident	\$7,500
Knee Cartilage	Once per accident	Up to \$3,000
Laceration	Once per accident	Up to \$1,500
Ruptured Disc	Once per accident	\$3,000
Tendon/Ligament/Rotator Cuff	Once per accident	Up to \$4,000
Organized Amateur Sports Injury	--	25% of non-catastrophic benefits
CATASTROPHIC		PLAN BENEFITS
Accidental Death	Within 90 days; Spouse @ 50% and child @ 25%	\$100,000
Common Carrier Death	Within 90 days	\$300,000
Coma	Once per accident	\$20,000
Dismemberment	Once per accident	Up to \$100,000
Home Health Care	Up to 30 days per accident	\$125
Paralysis	Once per accident	Up to \$100,000
Prosthesis	Once per accident	Up to \$5,000

Benefits Cost Guide

Rates shown are Monthly.

Rates and/or benefits may be changed on a class basis.

Voluntary Accident insurance

Accidental Injury Benefits put money in your pocket in the event of a covered accident, helping alleviate financial stress so you can focus on getting better. Covered incidents include things like broken bones, lacerations, emergency transportation needs and more.

Coverage Tier	Plan
Employee Only	\$13.24
Employee & Spouse	\$19.02
Employee & Child(ren)	\$23.21
Employee & Family	\$28.99

Tip

Refer to your Benefit Highlight Sheet for specifics about your Benefits.



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Hospital Indemnity Insurance

The Hartford | www.thehartford.com/benefits/myclaim | 866-547-4205

Hospital stays are costly. If you or a family member find yourself in the hospital due to a sudden accident or illness, you may struggle financially, even if you have a good medical plan. With a hospital indemnity plan, you can rest assured those extra expenses won't be a financial burden.

Unlike medical plans, there are no deductibles to meet with a hospital indemnity plan. As soon as you incur a qualified event, you can file a claim and start receiving benefits.

The plan pays a lump sum benefit in a previously specified amount. The money can be used for medical costs, insurance deductibles, groceries, transportation, childcare – the choice is up to you!





A little help when you're not 100%.

Hospital Indemnity Insurance



China Spring Independent School District

Hospital Indemnity Insurance which we call Hospital Cash Benefits provides financial support for each day you or your dependent stays in the hospital. This coverage can help alleviate the financial burden during a hospital stay, allowing you to focus on your recovery rather than worrying about unexpected expenses.

What are Hospital Cash Benefits?

To support your financial well-being, China Spring Independent School District is offering Hospital Cash Benefits for all eligible employees. This coverage is paid by you and is available for yourself and your eligible dependents. This benefit offers cash payments if you're admitted to the hospital due to illness or injury. The payments can help offset the costs associated with a hospital stay and give you flexibility to use the money where you need it most. You must be actively at work with your employer on the day your coverage takes effect. Use them for things like:

- Hospital Admission Fees
- Transportation
- Lodging for Family
- Recovery Support Services

Our Hospital Benefits provide financial support for hospital stays. Here are some commonly covered benefits.

Benefit	Amount		
	Plan 1	Plan 2	Plan 3
First Day Hospital Confinement	\$1,500	\$2,500	\$2,500
Daily Hospital Confinement	\$100	\$100	\$200
First Day ICU Confinement	\$3,000	\$5,000	\$5,000
Daily ICU Confinement	\$200	\$200	\$400
Newborn Routine Hospital Care	\$400	\$500	\$500

How Hospital Cash Benefits work:

Samantha's Story¹

Samantha was excited about the arrival of her first child, but her delivery didn't go as planned. Complications led to an unexpected C-section and a longer- than-expected hospital stay. While her health insurance covered a portion of the medical costs, the extra days in the hospital added up quickly.

Luckily, Samantha had enrolled in Hospital Indemnity Insurance during open enrollment. The plan paid a set cash benefit for each day she was in the hospital, which she used to help with medical bills, childcare, and even groceries while she recovered at home.

Thanks to her hospital indemnity coverage, Samantha had one less thing to worry about during a stressful time.

Here's how you and your family can benefit from this coverage if something happens to you:

Service	Hospital Cash Benefits Plan Pays
First Day Hospital Confinement	\$2,500
Daily Hospital Confinement	\$200
Total	\$2,700



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THIS IS A HOSPITAL CONFINEMENT INDEMNITY POLICY. THE POLICY PROVIDES LIMITED BENEFITS. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

In New York: This policy provides limited benefits health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

Hospital Indemnity Form Series includes GBD-2800, GBD-2900, or state equivalent

¹This case illustration is fictitious and for illustrative purposes only.

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Hospital Cash Benefits

HOSPITAL CARE		PLAN 1 BENEFITS	PLAN 2 BENEFITS	PLAN 3 BENEFITS
First Day Hospital Confinement	Up to 2 days per year	\$1,500	\$2,500	\$2,500
Daily Hospital Confinement	Up to 30 days per year	\$100	\$100	\$200
First Day ICU Confinement	Up to 2 days per year	\$3,000	\$5,000	\$5,000
Daily ICU Confinement	Up to 30 days per year	\$200	\$200	\$400
ADDITIONAL CARE		PLAN 1 BENEFITS	PLAN 2 BENEFITS	PLAN 3 BENEFITS
Newborn Routine Hospital Care	Once per newborn Dependent Child	\$400	\$500	\$500

Benefits Cost Guide

Rates shown are Monthly.

Rates and/or benefits may be changed on a class basis.

Voluntary Hospital Indemnity insurance

Hospital Cash Benefits provides financial support for each day you or your dependent stays in the hospital. This coverage can help alleviate the financial burden during a hospital stay, allowing you to focus on your recovery rather than worrying about unexpected expenses.

Coverage Tier	Plan 1	Plan 2	Plan 3
Employee Only	\$14.72	\$22.14	\$26.32
Employee & Spouse	\$30.52	\$47.64	\$56.66
Employee & Child(ren)	\$22.78	\$34.96	\$41.52
Employee & Family	\$38.60	\$60.46	\$71.86

Tip

Refer to your Benefit Highlight Sheet for specifics about your Benefits.



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5962 PW 11-2025

Identity Theft Protection

Metlife | www.metlife.com | 844-931-2872

Millions of Americans report having their identity stolen each year. People are online and mobile more than any time in history, so it's no surprise that identity theft is on the rise. And it goes far beyond simply having your credit card number stolen. While credit card fraud is one of the highest reported types of identity theft, it also includes bank, loan, phone and tax-related fraud.

Identity theft insurance won't prevent your identity from being stolen. But it will be there to alert you if any suspicious activity is noticed under your name. The plan includes credit bureau monitoring, social security number usage and lost wallet protection. Accounts are monitored daily so you can rest easy knowing your identity is being protected even while you sleep. The sooner you can take action to close your accounts, the quicker you can recover your identity.

It takes years to establish a good reputation with credit lenders and employers. Make sure it remains yours by taking advantage of the identity theft insurance offered through your employer.





Identity & Fraud Protection



Smart, simple identity and fraud protection all in one place.

Keep your private information private.

What is identity and fraud protection? MetLife and Aura Identity & Fraud Protection helps safeguard the things that matter to you most: your identity, money, assets, family, reputation and privacy.

All-in-one digital security in an app that's SIMPLE to use, so it's EASY to stay safe online. Keep your registered accounts and identity safe. Protect your finances and credit. Protect your Wi-Fi network and devices.

**You asked.
We answered.**

Why sign up? Find out with some FAQs

Why is having identity and fraud protection so important?

- A.** Everything you do is online, which makes your personal info more vulnerable. Get peace of mind knowing that you've taken a big step in protecting yourself from online threats, identity theft and fraud.

What are some of the benefits of this protection?

- A.** Aura offers robust protection by monitoring your personal info, credit, finances and devices and alerting you of suspicious activity. It's proactive protection to help stop threats before they strike. If you are a victim of fraud, an experienced Resolution Specialist will help you navigate credit bureaus, help initiate credit freezes or a credit lock and work with you to resolve your fraud incident.

How are my finances protected?

- A.** Aura monitors your credit, financial accounts, titles and alerts you to suspicious changes. We will help you take charge of your credit with our financial tools and Experian Credit Lock.

What kind of online and device security tools are available?

- A.** Every plan comes with smart safety tools including VPN/Wi-Fi security, antivirus, password manager and more to protect your online privacy and data.

How is my identity protected?

- A.** Through extensive monitoring of your social security number, driver's license, passport, ID and more. Plus, our solution requests the removal of your data from broker lists to help reduce spam like robocalls and robotexts.

What happens if one of my passwords is compromised?

- A.** Aura will let you know if your credentials appear on the Dark Web. You will be able to resolve compromised passwords without missing a beat. We flag at-risk passwords and use smart automation to help you replace the password and secure the account with a single click.

What is credit monitoring?

- A.** Credit monitoring helps detect possible financial and identity fraud by monitoring inquiries and changes to your credit report. In conjunction with all three credit bureaus, monitoring helps you stay on top of your credit and protect your credit score by receiving near-real-time alerts about potential threats.

What protections are available for my minor children?

- A.** Aura's Digital Parenting Suite² was designed in partnership with child psychologists, parents and kids, and includes customizable, easy-to-use tools to help you gain a deeper, more personalized insight into your child's digital world and its impact on their mental health— without compromising privacy.

Plus, additional protections that include child identity protection, online predator protection, parental controls, safe gaming and more.

Who can I protect with a Family plan?

- A.** Account owners can add up to 10 adults to their plan. There are no restrictions on adult family members, irrespective of where they live, their age, their relationship or their financial dependence on the employee. Each adult member gets their own private, full-feature Aura account.

Account owners may also add unlimited minors (under 18) to their plan if they have parental guardianship rights. The minor's alerts will only be available for the account owner to review.

What else do I get?

- A.** All plans include a \$5M identity theft insurance policy¹ for each enrolled adult. Plus, you have 24/7/365 access to our U.S. based customer support.

Enroll in identity and fraud protection during the enrollment period.

Questions? Please call Aura directly at 1-844-931-2872 to answer account, technical or billing questions.

1. As a component of becoming an Aura Plan member, Consumers receive identity theft insurance through a group policy issued to Aura, which is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company that is not an affiliate or subsidiary of MetLife. Checking & Savings Cash Recovery and 401(K) & HSA Cash Recovery are part of and not in addition to the Expense Reimbursement limit of liability. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions and coverage exclusions. Coverage may not be available in all jurisdictions.
2. Users are responsible for making their own parental decisions. Aura's services are not intended to diagnose, treat, cure, or prevent any disease or medical condition. The services are for informational purposes and cannot replace the services of physicians or medical professionals. Always seek the advice of your physician or other qualified healthcare provider with any questions about medical conditions or treatment. Aura's services do not monitor for all content or a child's behavior in real time. Some alerts and/or insights are created using generative AI and may not be fully accurate, complete, or timely.

No one can prevent all identity theft or monitor all transactions effectively.

Aura is a product of Aura Sub, LLC. Aura Sub, LLC. is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product.



MetLife Consumer Services, Inc. | 200 Park Avenue | New York, NY 10166

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Identity & Fraud Protection

Smart, simple identity
and fraud protection
all in one place.

Keep your private information private.



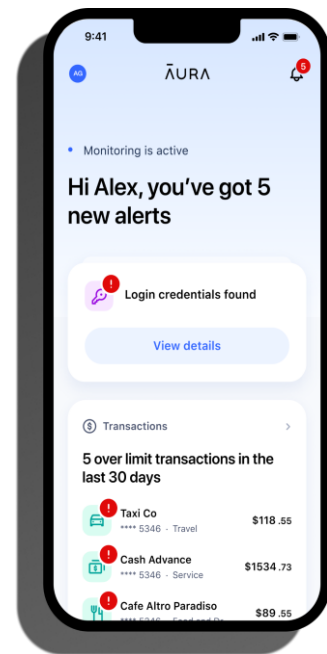
MetLife + Aura Identity and Fraud Protection

With MetLife and Aura, you'll have the option to enroll in a robust digital security plan to help protect you and your family from financial and identity fraud.

This document has important information about what's available to you. Use it to:

- **Learn** more about the tiered coverage options available to you, plan features and services.
- **Understand** the costs for coverage and how payments will be deducted.

Plan Options



Protection Plus Plan: Robust protection for your identity, finances, privacy, and unlimited devices per adult member.

Individual Coverage for Protection Plus: Protection for the employee only.

Family Coverage for Protection Plus: Our inclusive definition of “**Family**” allows the employee to add up to 10 additional adults and unlimited minors to the plan. There are no restrictions on adult family members - no matter where they live, their age, relationship, or whether they are financially dependent on the employee.

Protection Plus Plan Features

Identity Theft & Financial Fraud Protection

Credit Monitoring and Alerts (Three Bureaus)
Credit Reports & Scores (Three Bureaus)
Monthly Credit Score Tracker & Insights ¹
Credit, Bank & Utility Account Freeze Assistance
Home & Vehicle Title Monitoring
Bank Fraud & Financial Transaction Monitoring
High-Risk Transaction Alerts
Utility Account Monitoring
Dark Web Monitoring
Digital Vault
SSN & Identity Authentication Alerts
Public & Court Records Monitoring
USPS Address Monitoring
Social Media Monitoring & Takeover Alerts
Social Media Privacy Checkup & Optimization
Experian Credit Lock
Credit Score Simulator
Gamertag Monitoring
Payday/Specialty Loan Block

Scam & Cybercrime Prevention

Automated Data Broker & Spam List Removal
Password Manager & Automated Password Change
Email Alias
Safe Web Browsing with Anti-Tracker & Ad-Blocker
IP Address Monitoring
Wi-Fi Security VPN (Unlimited Devices)
Antivirus (Unlimited Devices)
Mobile Phone Takeover Protection
Unusual Transaction Alerts
Email, Call and Text Scam Protection

Smart Family Safety (included with family plan only)

Unrestricted family definition
Private, Full-feature Aura Account per Adult
Separate, Individual \$5M Insurance Policy per Adult ²
Sex Offender Geo Alerts
Secure Family Sharing

Digital Parenting & Mental Health (included with family plan only)

Child Mental Wellbeing Insights ³
Daytime and Nighttime Trends & Benchmarking
Social Persona & Connections
Sentiment & Emotional Tone Analysis
Behavior Change Detection
Personalized Parent Insights & Recommendations
Safe Gaming
Cyberbullying & Online Predator Protection

Parental Controls

Content Filtering & Blocking
Screentime Management & Schedules
Safe Search & Pause the Internet

Child Identity Protection

Child SSN Monitoring
3-Bureau Child Credit Freeze Wizard

Services Restoration & Reimbursement

\$5M Identity Theft Insurance Policy Per Adult ²
White Glove Fraud Resolution Service
Full-Service Resolution for Pre-Existing ID Thefts
Credit File Fraud Alerts Assistance
Online Resolution Tracker
24/7/365 US-based Customer Support
Mobile App (iOS & Android)

Who is eligible to enroll for this identity and fraud protection?

A. This product is available for Individual (Employee only) or Family coverage. Individual covers the employee only; Family covers the employee and up to 10 additional adults and unlimited minors.

- For Family plans, you may add up to 10 additional adult members to your plan, regardless of where they live, age, relationship, or if they are financially dependent on the employee. Each adult member gets their own private, full-feature Aura account.
- Account owners may also add unlimited minors (under 18) to their plan and have parental guardianship rights over the minor in order to view their information and alerts.

How do I pay for my identity and fraud protection?

A. Fees will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.

What happens if my employment status changes? Can I take my coverage with me?

A. Yes, you can take your coverage with you. You will need to continue to pay your monthly fees via credit card payment on Aura's platform to keep your coverage in force.

Enroll in identity and fraud protection during the enrollment period.

Questions? Please call Aura directly at 1-844-931-2872 to answer account, technical or billing questions.

1. The score you receive with Aura is provided for educational purposes to help you understand your credit. It is calculated using the information contained in your Equifax credit file. Lenders use many different credit scoring systems, and the score you receive with Aura is not the same score used by lenders to evaluate your credit.
2. As a component of becoming an Aura Plan member, Consumers receive identity theft insurance through a group policy issued to Aura which is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company, which is not an affiliate or subsidiary of MetLife. Checking & Savings Cash Recovery and 401(K) & HSA Cash Recovery are part of and not in addition to the Expense Reimbursement limit of liability. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.
3. Users are responsible for making their own parental decisions. Aura's services are not intended to diagnose, treat, cure, or prevent any disease or medical condition. The services are for informational purposes and cannot replace the services of physicians or medical professionals. Always seek the advice of your physician or other qualified healthcare provider with any questions about medical conditions or treatment. Aura's services do not monitor for all content or a child's behavior in real time. Some alerts and/or insights are created using generative AI and may not be fully accurate, complete, or timely.

No one can prevent all identity theft or monitor all transactions effectively.

Aura is a product of Aura Sub, LLC. Aura Sub, LLC. is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product.



Legal Plan



Metlife | www.metlife.com.com | 800-821-6400

Have you ever found yourself in need of legal advice, but aren't sure where to go? A voluntary group legal plan helps fill that need. It provides you with access to professional lawyers at a low monthly rate. For just a few dollars a month, you can consult with a lawyer about having your will prepared, reviewing documents, contesting a traffic ticket, lawsuits, divorce and so much more. Expert legal advice is available at your fingertips.

Virtual Solutions for Benefit Education

Helping employees understand their benefits is more important than ever



Employees who understand their benefits are:

94% more likely to feel valued/appreciated

80% more likely to be satisfied with their current job¹

MetLife understands the importance of providing targeted, ongoing communications to reinforce the value of employee benefits. In addition to printed or digital communications, virtual support provides an additional connection to help build awareness and understanding Of the MetLife benefits available to employees.

Virtual Solutions can include:



Virtual Benefit Fairs: MetLife can attend your virtual benefit fair, complete with:

- A licensed benefit counselor
- Video
- Presentations
- Print or digital collateral
- Banners
- Live chat support



HR Team Training Sessions: MetLife can provide webcast product training to HR representatives. These presentations focus on:

- The products offered by MetLife
- Specific plan design details
- Common questions from employees



Webinars: MetLife can provide live presentations to employees which can include:

- Q&A
- Chat
- Recorded presentations with live Q&A, over the phone or on camera, are also available.
- Polls and engagement activities



On-Demand Online Presentations:

MetLife can create customized presentations with voiceover audio that highlight the benefits available. These presentations can be posted online for employees to access at their convenience.

Employees say certain improvement to benefits can enhance trust

Make benefits more affordable

Expand the range of benefits

Improve coverage of existing benefits

Regular review and update the benefits package

Offer more personalized benefits

Provide better education and communication about benefits

The right benefit education strategy can effectively keep employees engaged and increase retention. MetLife understands that every customer has unique needs, and your account team is here to help tailor a solution that works for your workforce.

1. MetLife's 23rd Annual US [Employee Benefit Trends Study](#), 2025



MetLife Legal Plans offers you protection at every step

Your legal plan benefit is a helpful hand. It can support you when an unexpected or expected legal situation arises. A network attorney can help you make educated decisions by reviewing your personal legal documents. And if needed for certain matters, an attorney can advocate for your interests and navigate legal issues on your behalf. Coverage provides access to a network of qualified and experienced attorneys nationwide.

MetLife Legal Plans benefits include:

- A cost-effective plan, providing access to more than 18,000+ experienced network attorneys.¹
- Assistance for a wide range of legal needs, including money matters, home and real estate, family and personal matters, civil lawsuits, elder care issues, and traffic/driving violations.²
- Online digital estate planning tool—create wills and trusts, healthcare proxies, and power of attorney documents from the comfort of home.

We've made finding legal help easy for you!
Our network attorneys are available in person, by phone or by email.

We also offer online tools to complete **Estate Planning Documents** in as little as 15 minutes. You can also download self-help legal forms.

Not sure if a Legal Plan is right for you?

Get an idea of what and how we can make it easy to get the legal help you may need through your life. Scan the QR code or visit www.legalplans.com/whyenroll.



Scan to access:
Why choose
MetLife Legal Plans?



Ensure you have legal protection for what comes next

Legal Plans

Cover the costs of a wide range of common legal issues with a Legal Plan

Access experienced attorneys to help with estate planning, home sales, tax audits and more.

68%
of members

of Legal Plan members say they are on track to achieve their financial goals, compared to 54% of those without a legal plan³

70%
of Americans

of Americans do not have a will, the most basic estate planning document you need to plan your assets⁴



Consider these life events:

- Getting married or name change
- Buying, renting or selling a home
- Dealing with identity theft issues
- Assist contacting banks/creditors
- Starting a family or adoption
- Creating wills, or estate planning
- Caring for aging parents
- Sending kids off to college
- Medicaid/Medicare questions
- Security deposit assistance
- Student loan debt assistance

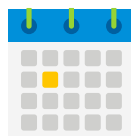
Legal help made easy. See how simple it is to use your plan:



**Call Center
Representatives
in Cleveland, OH**



**Over 100+
covered legal
matters**



**Convenient
scheduling with
attorney**



**Easy access to
member services
online or by
phone**



**Educational tools
and self-help
library online**

Your employer has partnered with MetLife Legal Plans to give you access to a nationwide network of attorneys. A legal plan is similar to any other insurance coverage you purchase at work.

Legal Plans

Help ensure your personal and family's security with MetLife Legal Plans.

Excellent customer service

The website is easy to use to identify plan attorneys by ZIP code; calls to the 800 number are answered promptly, and agents are very knowledgeable. I was able to have two wills, two powers of attorney, two living wills, and two property deed transfers done with no additional charge.

— S.D., MetLife Legal Plans Member



Estate planning at your fingertips

Most of us know we need important estate planning documents like wills, advance directives and powers of attorney, but finding the time to complete these documents can be a challenge. Through our digital estate planning solution we make it easy for you to complete estate planning documents. This allows you to designate your wishes for healthcare, as well as protect your family and assets quickly and easily from the comfort of your home. With our digital estate planning solution you can create:

- **Last Will and Testament:** Leave property to loved ones and choose guardians for minor children.
- **Advance Directive:** Plan for a medical emergency and select medical care preferences.
- **Durable Financial Power of Attorney:** Choose someone to manage finances in case of an emergency.
- **Probate Avoidance Documents:** Keep your home out of the probate process and have it pass directly to the beneficiaries of your choosing with either a transfer on death deed or revocable living trust, depending on your state.



Create wills, living wills and powers of attorney online in as little as 15 minutes

How do I get started?

Our digital estate planning solution is available to all enrolled legal plan members at members.legalplans.com. You will need to create an account here using the email and password of your choice to use the digital estate planning solution. The process is designed to work for most people, but if there are aspects of your estate that are more complicated, you might be directed to reach out to one of our network attorneys instead of using the online process.

Legal Plans

Frequently Asked Questions

How does the plan work?

- A. Getting started is easy.** You choose an attorney from our network, which is available online or by calling our Client Service Center. Call the attorney you select and schedule a time to talk or meet. It's that simple. You can also choose an attorney outside of our network and be reimbursed according to a set fee reimbursement schedule.⁵ You can speak to our network attorneys face to face, by phone or you can submit questions online to our Law Firm E-Panel — whatever works best for you. And for certain legal matters, your attorney can represent you in court without you having to make an appearance.

Can I get help finding the right attorney for my needs?

- A. Yes, our Client Service Center representatives are here to help** you find the right attorney for your legal matter, whatever that might be. We're committed to ensuring you receive the expert legal help you need, when you need it.

How are attorneys selected for the network? What are their qualifications?

- A. We only select attorneys who meet our selection criteria and agree to our Attorney Code of Excellence.** Attorneys in the network have an average of 25 years experience in the practice of law, have graduated from an accredited law school and must maintain valid state licensure. Additionally, the attorneys must agree to provide superior customer service to all legal plan members. We routinely monitor our attorneys to ensure our members' needs are being met and conduct regular re-credentialing audit that looks at legal activity, member feedback, verification of malpractice insurance and more.

How much will it cost?

- A. Less than you might think.** For less than a dollar a day, you can have our legal experts on your side, for as long as you need them.⁶

How do I pay for my coverage?

- A. It's easy. Your premium is conveniently paid through payroll deductions,** so you don't have to worry about writing a check or missing a payment.

Are my spouse and family members also covered by my plan?

- A. Most plans cover your spouse and dependent children; please see the details of your plan.** You can confirm the details of your coverage online. If your dependents are included, you can grant online access in account settings.

Are claim forms required when using the legal plan?

- A. No. We make using your plan easy.** When you use a network attorney, there is nothing for you to do. Plan services are covered in full, and billing is between MetLife Legal Plans and the network attorney. There are no waiting periods, no copays, no deductibles and no claim forms.

Legal Plans

**Enroll in Legal Insurance during
the enrollment period.**

**Questions? Call our Client Service
Center 1-800-821-6400**

1. Please see your plan description for details. Coverage may vary by state or employer group rate.
2. Does not cover DUI, unless your legal plan has DUI coverage. Coverage for defense of criminal matters is excluded from insurance coverage for individuals located in New York.
3. Source: 2022 MetLife Employee Benefit Trends Study
4. CARAVAN survey conducted by ENGINE on behalf of MetLife Legal Plans, January 2020.
5. See your plan description for further details. You will be responsible to pay the difference, if any, between the plan's payment and the out-of-network attorney's charge for services. For out of network attorneys, there is a fee reimbursement schedule. Participants must pay the difference between the scheduled reimbursement amount and the out-of-network attorney's actual charge for the services.
6. This cost is based on an average monthly rate of \$20 for the legal plan.

Legal plans are administered by MetLife Legal Plans, Inc., Cleveland, Ohio. In California, this entity operates under the name MetLife Legal Insurance Services. In certain states, legal plans are provided through insurance coverage underwritten by Metropolitan General Insurance Company, Warwick, RI. Some services not available in all states. No service, including consultations, will be provided for: 1) employment-related matters, including company or statutory benefits; 2) involving any sponsoring or offering company, MetLife, or its affiliates and plan attorneys as an adverse party; 3) matters in which there is a conflict of interest between the policyholder and spouse or dependents in which case services are excluded for the spouse and dependents; 4) appeals and class actions; 5) farm and business matters, including rental issues when the participant is the landlord; 6) patent, trademark and copyright matters; 7) filing fees, costs and fines; 8) frivolous or unethical matters; 9) matters for which an attorney client relationship exists prior to the participant becoming eligible for plan benefits. For individuals covered under a New York insurance policy defense of criminal matters is excluded and parents must be related by blood, marriage, adoption, dependency, or operation of law and reside in the same household as the insured to utilize the Plus Parents benefit. For all other personal legal matters, an advice and consultation benefit is provided. Additional representation is also included for certain matters. Please see your plan description for details.



Medical Transport

MASA | www.masamts.com | 954-334-8261

Americans today suffer from a false sense of security that their medical coverage will pay for all costs associated with emergency or critical care transport. The reality is that a majority of Americans are only partially covered for these high costs.

Most medical plans will only pay a portion of costs leaving you with the remainder of the bill. There is also the possibility of your medical provider denying your claim altogether, which means you would be responsible for paying the entire bill.

With medical transport protection, you will have zero out-of-pocket expenses for any emergent air or ground transport from anywhere in the United States, regardless of who transports you. You will receive medical emergency transportation solutions to help cover your out-of-pocket medical transport costs when your insurance falls short.



Find your MASA membership

Empower your emergency care decisions

When every second counts, MASA plans give you the confidence to respond quickly without hesitation. Explore the benefits below, and choose the plan that gives you peace of mind when life takes an unexpected turn.

	Emergent Premier	Platinum
Emergency Ground Ambulance Transport Protection	● ²	● ²
Emergency Air Ambulance Transport Protection	\$20k max per claim ²	● ²
Hospital to Hospital Ground Ambulance Transport Protection	● ²	● ²
Hospital to Hospital Air Ambulance Transport Protection	\$20k max per claim ²	● ²
Repatriation to Hospital Near Home Transport	● ³	● ⁴
Emergency Water Ambulance Transport Protection – NEW!	\$2,500 max per claim ³	\$2,500 max per claim ³
Treat and No Transport – NEW!	\$500 max per claim, limit 2 per year ¹	\$500 max per claim, limit 2 per year ¹
Minor Return Transport Protection	\$2,500 max per claim ³	\$2,500 max per claim ³
Pet Return Transport Protection	\$2,500 max per claim ³	\$2,500 max per claim ³
Sick While Away From Home Expense Protection	\$5k max, limit 2 pp per year ⁴	---
Post-Admission Continued Care Transport Protection	\$500 max pp ¹	---
Patient Return Transport	---	● ⁴
Companion Emergency Transport Protection	---	● ³
Hospital Visitor Air Transport	---	● ³
Vehicle & RV Return	---	● ³
Organ Retrieval Transport	---	● ¹
Organ Recipient Transport	---	● ¹
Mortal Remains Return Transport	---	● ⁴

Coverage territories

1: United States | 2: United States and Canada | 3: United States, Canada, Mexico, and the Caribbean | 4: Worldwide: to include any region with the exclusion of Antarctica and not prohibited by U.S. law or U.S. travel advisories. Contingent upon ten (10) day notice of travel

Disclaimer

This material is for informational purposes only and does not provide any coverage. The benefits listed, and the descriptions thereof, do not guarantee coverage and do not represent the full terms and conditions applicable for usage and may only be offered in some memberships or policies. Premiums, benefits, and coverage vary depending on the plan selected. For a complete list of benefits, premiums, terms, conditions, and restrictions, please refer to the applicable member services agreement or policy for your state. For additional information and disclosures about MASA plans, visit: <https://info.masaglobal.com/disclaimers>

457(b) Retirement Plans



TCG | www.tcgservices.com | 800-943-9179

A 457(b) plan is a Tax Deferred Retirement Plan available to employees of state and local governmental agencies, including public school employees. They are similar to 401(k) plans because they allow you to place a percentage of your salary into an employer-sponsored plan that helps you save for retirement. You will not have to pay taxes on what you contribute or your earnings made until you withdraw the money.

Benefits

- Investment options: fixed annuities, variable annuities, or mutual funds
- Flexibility: start, stop, and adjust your contributions as allowed by your employer's plan
- Receive periodic account statements
- No 10% federal penalty on interest or earnings for early withdrawal
- No current federal income taxes on the money you put into the plan until it is time to take withdrawals

Contribution Limits	
2025	2026
\$23,500	\$24,500
Participants aged 50 and older at any time during the calendar year are permitted to contribute an additional \$8,000.	

All investing involves risk. Past performance is not a guarantee of future returns.



457(b) RETIREMENT PLAN



The FFinvest Retirement Plan is a comprehensive plan, funded by Net Asset Value Mutual Funds. It is a competitive & simple, yet flexible plan with a 401(k) type of approach.

PLAN HIGHLIGHTS

Multiple Investment Options

- The plan provides 30+ different investment options , for savers and investors of all risk tolerances

ROTH (After-Tax) Option

Loan availability (subject to balance)

Rollovers/Transfers

- Rollovers and Transfers are accepted into the plan from other retirement plans

No Front-End or Deferred Sales Charges



ENROLL ONLINE

Go to www.tcgservices.com

- Click Enroll (upper right-hand corner)
- Search for your Employer
- Click Enroll in the 457(b) Savings Plan

If you have questions, please contact
TCG Administrators at [\(800\) 943-9179](tel:8009439179)
Monday - Friday, 8:00 a.m. - 7:00 p.m.

24/7, 365 ONLINE ACCESS VIA WEB OR MOBILE APP

Vast Learning Center located at
www.tcgservices.com

- Video Library
- Retirement Rundown & Market Commentary
- Financial Calculators

Service from your FFGA Account Rep
Dedicated email address: FFinvest@ffga.com

COBRA

First Financial Administrators, Inc. | www.ffga.com | 800-523-8422, option 4

Life is full of unexpected events that may impact your health insurance coverage. Under the Consolidated Omnibus Budget Reconciliation Act, better known as COBRA, you have the right to continue your group health coverage such as medical, dental, vision insurance and flexible spending accounts for a limited period of time.

COBRA Highlights

- Temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work, divorce, death or a child no longer qualifying as a dependent. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.
- Either you or your family member are responsible for notifying your employer of a divorce, legal separation or child losing dependent status within 60 days of the event. In the case of termination, death or reduction in hours, your employer will be responsible for letting the provider know that you have the right to continue coverage under COBRA.
- Benefits will remain identical to what you had while employed. However, you will be responsible for paying the full premium, plus any applicable fees.

First Financial Administrators, Inc. provides COBRA administration services for the following plans:
Dental, Vision, FSA

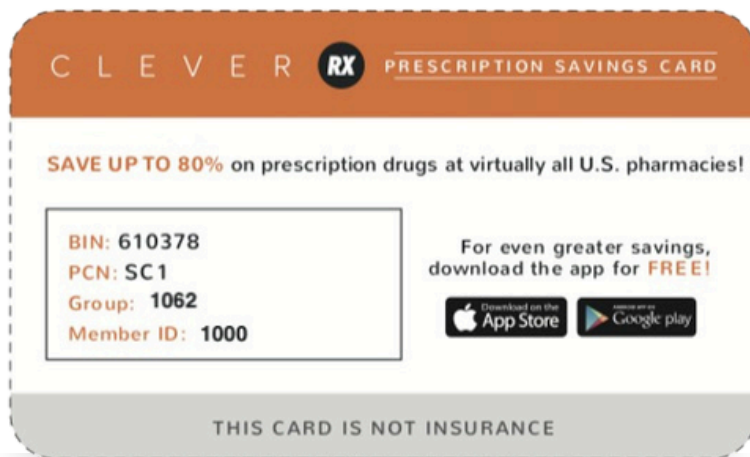


Clever RX

Clever RX | <https://partner.cleverrx.com/ffga> | 800-873-1195

Clever RX helps you save money by using a prescription drug savings card. They partner with the healthcare community to bring state-of-the-art, money-savings tools to participants. It helps you save up to 80% off prescriptions drugs and often beats the average copay. Plus, it's completely free. Thanks to Clever RX, you will never overpay for prescriptions again!

Use Clever RX every time you pay for a medication for instant savings!



Download the app or visit the site to price a drug: <https://partner.cleverrx.com/ffga>.

Clever RX Highlights

- 100% FREE to use.
- Unlock discounts on thousands of medications.
- Save up to 80% on prescription medication – Often beats your copay!
- Download the Clever RX app by using the information on your card to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Contact Information

Product	Carrier	Website	Phone
Medical	TRS	www.trs.com	866-355-5999
Dental	Ameritas	www.ameritas.com	800-487-5553
Vision	Eyemed	www.eyemed.com	866-939-3633
Disability	One America	www.oneamerica.com	855-517-6365
Accident	The Hartford	www.thehartford.com	800-243-5860
Cancer	American Public Life	www.ampublic.com	800-256-8606
Critical Illness	The Hartford	www.thehartford.com	866-547-4205
Permanent Life	Texas Life	www.texaslife.com	800-283-9233
Employer Paid Life	BCBS	www.bcbs.com	877-442-4207
Identity Theft Protection	Metlife	www.metlife.com	844-931-2872
Legal	Metlife	www.metlife.com	800-821-6400
Medical Transport	MASA	www.masamts.com	954-334-8261
EAP	Support Clinic	mysupportclinic.com	800-475-3327
FSA, HSA & DCA	FFGA	www.ffga.com	866-853-3539
Hospital	The Hartford	www.thehartford.com	866-547-4205
Retirement	TCG	www.tcgservices.com	800-943-9179