Employee Benefits Guide

Plan Year: 9.1.26 to 8.31.27

For internal use only

Benefits at a Glance
eCapital Enterprises Corp.
September 1, 2026 - August 31, 2027

When Am I Eligible for Coverage?

Benefits for employees working 30 or more hours a week will begin on the 1st of the month following your date of hire.

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eCapital Team Members:

Thank you for the dedication, hard work, and commitment you bring to eCapital every day. Your contributions are the driving force behind our success, and we are proud to support you with a benefits program designed to promote the health, well-being, and financial security of you and your family.

As healthcare costs continue to rise across the country, we remain committed to offering high-quality, competitive benefits that deliver meaningful value while ensuring the long-term sustainability of our health plans. This year, eCapital has made strategic investments to enhance our benefits offerings, expand access to care, and introduce additional resources that make healthcare easier to navigate and more affordable.
Our goal is simple: to help you make the most of your benefits and reduce the financial burden often associated with healthcare, so you can focus on what matters most—your health, your loved ones, and your future.

Within this guide, you'll find important information about your benefit options, as well as new programs and enhancements designed to support your overall well-being. We encourage you to take the time to explore these offerings and take full advantage of the resources available to you.

Thank you for being a valued member of the eCapital team. We appreciate all that you do and look forward to a healthy, productive, and successful year together.

With Appreciation,
The eCapital Executive Team

This benefits summary describes the highlights of our benefits in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official documents and not the information in this summary. If there is any discrepancy between the descriptions of the programs as contained in this brochure and the official plan documents, the language of the official plan document shall prevail as accurate. Please refer to the plan-specific documents for detailed plan information. Any plan benefits may be modified in the future to meet Internal Revenue Service rules or otherwise as decided by eCapital Enterprises Corp.

eCapital Enterprises Corp.
September 1, 2026 - August 31, 2027
Important Information About Your Benefit Enrollment

The benefit elections you make during Open Enrollment will remain in effect for the entire plan year, **September 1, 2026, through August 31, 2027**, unless you experience a qualifying life event as defined by IRS regulations.

For newly hired employees, benefits become effective on the **first day of the month following your date of hire.**

Making Changes to Your Benefits

Under IRS guidelines, benefit elections for pre-tax plans generally cannot be changed once they are made unless you experience a qualifying life event.

Examples of qualifying life events include:

- Marriage
- Divorce or legal separation
- Birth of a child
- Adoption of a child
- Death of a spouse or dependent
- A dependent losing eligibility for coverage
- Loss of coverage under your spouse's benefit plan

Reporting a Qualifying Life Event

If you experience a qualifying life event, you may be eligible to update your benefit elections during the plan year. To make a change, you must notify the Employee Benefits Department within 30 days of the event and provide any required documentation. Requests received after the 30-day window cannot be processed and must wait until the next Open Enrollment period.

Dependent Eligibility

Eligible dependent children may remain covered under your benefits plan until they reach age 26. Coverage will end on the last day of the month in which the dependent turns age 26.
Important: Please review your benefit elections carefully during Open Enrollment, as your choices will remain in effect for the entire plan year unless you experience a qualifying life event.

eCapital Enterprises Corp.
Key Updates for 2026-2027

At eCapital, we regularly evaluate our benefits programs to ensure we continue to provide employees and their families with the greatest possible value and support. As part of this commitment, we are excited to introduce several enhancements and updates to our benefits offerings for the upcoming plan year. These changes are designed to enhance your overall benefits experience while expanding access to programs and resources that support your health, well-being, and financial security.

Medical Plan Highlights

We're pleased to maintain the strength and affordability of our medical plans while continuing to provide valuable healthcare resources and cost-saving opportunities.

- No changes to medical plan designs – Deductibles, out-of-pocket maximums, copays, and coinsurance remain unchanged for the new plan year.
- $0 employee-only coverage will continue to be available through both the HSA and EPO medical plan options.
- Free telehealth services remain available through EVO Health, giving you convenient access to care from anywhere.
- No-cost advanced imaging and select outpatient procedures are available through Valenz Health (formerly KISx), including MRI, MRA, CT, and PET scans, as well as a broad range of outpatient surgeries.

EVO Health – Your Virtual Healthcare Concierge

To further support employee health and well-being, eCapital has expanded its investment in EVO Health.

- All employees enrolled in an eCapital medical plan will have access to free virtual primary care and mental health services.
- EVO Health provides convenient, high-quality care designed to help you manage your health, access treatment quickly, and improve overall well-being.

Rightway – Enhanced Healthcare Navigation

To provide a more streamlined and personalized benefits experience, Rightway will replace HealthJoy as our healthcare navigation partner.

- Rightway offers expert support and advocacy for your Medical, Prescription Drug, Dental, and Vision benefits.
- Members receive personalized guidance to help navigate healthcare decisions, find quality providers, understand costs, and maximize their benefits.

MetLife Replacing Guardian

We are excited to announce that MetLife will become our new carrier for Dental, Vision, Life, Disability, Accident, Hospital Indemnity, and Critical Illness coverage. Through extensive negotiations, we secured enhanced benefits, broader coverage, and more competitive rates for employees.

Key Enhancements Include:

- **Expanded Dental Coverage**
  - Coverage for up to four cleanings per calendar year.
  - A higher annual benefit maximum.
  - Access to one of the nation's largest dental provider networks.
- **Expanded Voluntary Life Insurance**
  - Increased coverage availability from $250,000 to up to 5 times annual salary, with a maximum benefit of $500,000 (subject to Evidence of Insurability requirements).
  - Guaranteed Issue amounts increased from $150,000 to $200,000, making it easier to obtain additional protection for your loved ones.
- **Improved Voluntary Benefits**
  - Lower employee premiums.
  - Enhanced coverage provisions for Accident, Critical Illness, and Hospital Indemnity Insurance plans.

Key Benefit Plan Contacts

Alisa Monday

Senior Benefits Administrator
alisa.monday@ecapital.com
benefitsus@ecapital.com
Telephone: (786) 288-3530

Navigating your benefits shouldn't be difficult.

Should you ever need assistance with a claim, a medical bill that doesn't look right, or you simply need to order a new ID card, please feel free to reach out to our benefits consultants at **All Atlantic Benefits.**

TJ North

Benefits Consultant
tjn@allatlanticbenefits.com
Talk/Text: (305) 978-3051

Haydee Millan-Feliz

Senior AccountManager
haydeem@allatlanticbenefits.com
Office: (305) 809-8211

Jacqueline Francois

Junior Account Manager
jacquelinef@allatlanticbenefits.com
Office: (305) 809-8211

Visit our Benefits Website for full plan information:
www.ecapitalbenefits.com (PENDING)



2026-27 Medical Plans Side-by-Side

Benefits Description		Meritain HSA	Meritain EPO	Meritain POS II
		In Network	In Network	In Network
Network		Aetna Choice POS II (Open Access)	Aetna Choice POS II (Open Access)	Aetna Choice POS II (Open Access)
EVO Health - Virtual Visit		Covered 100%	Covered 100%	Covered 100%
Primary Office Visit		$25 Copay after Deductible	$25 Copay	$25 Copay
Specialist Services		10% after Deductible	$50 Copay	$50 Copay
CVS Minute Clinic		$0 Copay after Deductible	$0 Copay	$0 Copay
Preventative Care Services Well-Child Care/Immunizations; Adult Wellness Exams Including Preventative X-Rays and Lab		$0 Copay	$0 Copay	$0 Copay
Emergency Room		10% after Deductible	$500 Copay and Deductible	$500 Copay and Deductible
Urgent Care Diagnostic		10% after Deductible	$50 Copay	$50 Copay
Laboratory		10% after Deductible	$0 Copay	$0 Copay
Diagnostic X-Ray		10% after Deductible	$0 Copay	$0 Copay
Advanced Imaging MRI/MRA, CT Scans	Valenz Network	$0 Copay	$0 Copay	$0 Copay
	Non Valenz Network	10% after Deductible	20% after Deductible	20% after Deductible
Inpatient Hospital Services		10% after Deductible	20% after Deductible	20% after Deductible
Outpatient Surgery Hospital	Valenz Network	$0 Copay	$0 Copay	$0 Copay
	Non Valenz Network	10% after Deductible	20% after Deductible	20% after Deductible
Coinsurance		10%	20%	20%
Calendar Year Deductible Individual / Family		$2,500 / $4,000	$3,000 / $5,000	$3,000 / $5,000
Calendar Year Out of Pocket Maximum Individual / Family		$5,000 / $8,000	$6,000 / $10,000	$6,000 / $10,000
Deductible/Out of Pocket Type		Non-Embedded	Embedded	Embedded
Out of Network				
Calendar Year Deductible Individual / Family		$2,500 / $5,000	Emergency Only Coverage	$3,000 / $6,000
Coinsurance		50%		50%
Out of Pocket Maximum Individual / Family		$10,000 / $13,800		$10,000 / $15,000

Prescription Benefits Description

Prescription Benefits	Meritain H.S.A.	Meritain EPO	Meritain POS II
Tier 1 / Generic Drug	$10 Copay after Deductible	$10 Copay	$10 Copay
Tier 2 / Preferred Brand Drug	$60 Copay after Deductible	$60 Copay	$60 Copay
Tier 3 / Non-preferred Brand Drug	$100 Copay after Deductible	$150 Copay	$150 Copay
Tier 4 / Specialty Drug (preferred)	$150 Copay after Deductible	$500 Copay	$500 Copay
Tier 5 / Specialty Drug (non-preferred)	$300 Copay after Deductible	$800 Copay	$800 Copay
90 Day Prescriptions / Mail Order Buy two, get one FREE!	2x Copay	2x Copay	2x Copay

HSA Plan

This health plan qualifies as HSA eligible because all services are subject to the deductible. However, services provided to you by **EVO** are free and not subject to the deductible.

Meritain Health® an aetna® company

(800) 925-2272 | www.meritain.com

Plan Name	HSA Plan	
Network Access	In Network	Out of Network
Provider Network	Aetna Choice POS II (Open Access)	Not Applicable
Opportunities for Care		
Preventive Care	Covered 100%	50% After Ded
EVO: Primary Care & Mental Health	Covered 100%	50% After Ded
EVO: Telemedicine	Covered 100%	50% After Ded
Physician	$25 Copay After Ded	50% After Ded
Specialist	10% After Ded	50% After Ded
Convenience Care Clinic	10% After Ded Covered 100% at CVS After Ded	50% After Ded
Urgent Care	10% After Ded | **Free with EVO**	50% After Ded
Emergency Room	10% After Ded	
Diagnostic Services		
Independent Clinical Lab / X-Ray	10% After Ded	50% After Ded
Diagnostic Testing Facility MRI, MRA, CT & PET Scans	10% After Ded **Free with Valenz after Reimburse**	50% After Ded
Outpatient & Inpatient Services		
Outpatient Surgery Ambulatory Surgical Center/Hospital	10% After Ded **Free with Valenz after Reimburse**	50% After Ded
Inpatient Hospital	10% After Ded	50% After Ded
Provider Services Inpatient Hospital	10% After Ded	50% After Ded
Pharmacy Benefits		
Prescription	Deductible then Generic $10 | Brand $60 | Brand Non-Preferred $100 Specialty Preferred $150 | Specialty Non-Preferred $300	
Deductible		
Deductible	$2,500 / $4,000 (Not Embedded)	$2,500 / $5,000 (Not Embedded)
Member Co-Insurance	10%	50%
Maximum Benefits		
Member Out of Pocket Maximum	$5,000 / $8,000 (Not Embedded)	$10,000 / $13,800 (Not Embedded)
Carrier Lifetime Benefit Maximum	Unlimited	
Dependent Child/Student Age	Up to Age 26, benefit will terminate at end of the month of birth date	

EPO Plan

While the EPO provides you the comfort and security of having a predictable copay when you visit a primary care physician, specialist, or urgent care facility, your coverage is limited to In-Network only.

Meritain Health®
an aetna company

(800) 925-2272 | www.meritain.com

Plan Name	EPO Plan
Network Access	In Network
Provider Network	Aetna Choice POS II (Open Access)
Opportunities for Care	
Preventive Care	Covered 100%
EVO: Primary Care & Mental Health	Covered 100%
EVO: Telemedicine	Covered 100%
Physician	$25 Copay
Specialist	$50 Copay
Convenience Care Clinic	$25 Copay | **Free with EVO** CVS Minute Clinic: Covered 100%
Urgent Care	$50 Copay | **Free with EVO**
Emergency Room	Ded & $500 Copay
Diagnostic Services	
Independent Clinical Lab / X-Ray	Covered 100%
Diagnostic Testing Facility MRI, MRA, CT & PET Scans	20% After Ded **Free with Valenz**
Outpatient & Inpatient Services	
Outpatient Surgery Ambulatory Surgical Center/Hospital	20% After Ded **Free with Valenz**
Inpatient Hospital	20% After Ded
Provider Services Inpatient Hospital	20% After Ded
Pharmacy Benefits	
Prescription	Deductible then Generic $10 | Brand $60 | Brand Non-Preferred $150 Specialty Preferred $500 | Specialty Non-Preferred $800
Deductible	
Deductible	$3,000 / $5,000 (Embedded)
Member Co-Insurance	20%
Maximum Benefits	
Member Out of Pocket Maximum	$6,000 / $10,000 (Embedded)
Carrier Lifetime Benefit Maximum	Unlimited
Dependent Child/Student Age	Up to Age 26, benefit will terminate at end of the month of birth date

POS II Plan

The POS II Plan offers the same In-Network benefits as the EPO Plan, while also providing a level of coverage should you choose to go out-of-network.

Meritain Health® an aetna company

(800) 925-2272 | www.meritain.com

Plan Name	POS II Plan	
Network Access	In Network	Out of Network
Provider Network	Aetna Choice POS II (Open Access)	Not Applicable
Opportunities for Care		
Preventive Care	Covered 100%	50% After Ded
EVO: Primary Care & Mental Health	Covered 100%	50% After Ded
EVO: Telemedicine	Covered 100%	50% After Ded
Physician	$25 Copay	50% After Ded
Specialist	$50 Copay	50% After Ded
Convenience Care Clinic	$25 Copay CVS Minute Clinic: Covered 100%	50% After Ded
Urgent Care	10% After Ded | **Free with EVO**	50% After Ded
Emergency Room	Ded & $500 Copay	
Diagnostic Services		
Independent Clinical Lab / X-Ray	Covered 100%	50% After Ded
Diagnostic Testing Facility MRI, MRA, CT & PET Scans	20% After Ded **Free with Valenz**	50% After Ded
Outpatient & Inpatient Services		
Outpatient Surgery Ambulatory Surgical Center/Hospital	20% After Ded **Free with Valenz**	50% After Ded
Inpatient Hospital	20% After Ded	50% After Ded
Provider Services Inpatient Hospital	20% After Ded	50% After Ded
Pharmacy Benefits		
Prescription	Deductible then Generic $10 | Brand $60 | Brand Non-Preferred $150 Specialty Preferred $500 | Specialty Non-Preferred $800	
Deductible		
Deductible	$3,000 / $5,000 (Embedded)	$3,000 / $6,000 (Embedded)
Member Co-Insurance	20%	50%
Maximum Benefits		
Member Out of Pocket Maximum	$6,000 / $10,000 (Embedded)	$10,000 / $15,000 (Embedded)
Carrier Lifetime Benefit Maximum	Unlimited	
Dependent Child/Student Age	Up to Age 26, benefit will terminate at end of the month of birth date	

Introducing EVO Health!
Your FREE Virtual Healthcare Concierge

Faster, Smarter Care for Happier, Healthier Teams

fabric

Evo by Fabric delivers all-in-one virtual care for today's workforce. Discover lightning-fast access and seamless user experiences your employees can count on.

Watch this Video to learn more (note that pricing shown in the video does not apply to eCapital employees enrolled in a health plan)
https://www.youtube.com/watch?v=CoAD5TPMoJE

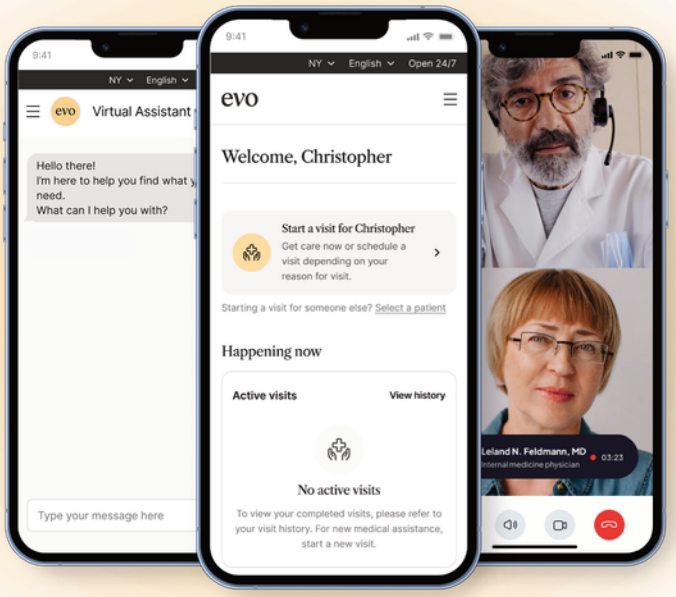
evo by fabric

Care for *life in motion.*

Managing healthcare shouldn't be a burden for your employees—or your business. With intelligent navigation and convenient virtual care, Evo creates a seamless healthcare experience. Our platform guides employees to the care they need when they need it, answers health-related questions, and reduces costs for everyone.

Everyday & Urgent Care

Talk Therapy* | Mental Health Medication Management



✓ Care Coordination ✓ Virtual Care ✓ Follow-Up

Guidance & Care 24/7/365

Evo connects you with care typically available 24/7 for Everyday & Urgent care conditions. From virtual consultation to care coordination, it offers timely, accurate support tailored to individual needs.

Personalized Virtual Care

Offer convenient virtual access to care. With a robust nationwide network, members wait on average just 7 minutes to receive urgent care treatment plans and can see a provider in as little as 3 days for therapy.

Expert Care Team

Our nationwide network of clinicians and care coordinators are here to deliver professional guidance and support when your members need it most.

Connect *With a Provider*

Quick Care	Guided symptom gathering	Most popular
Phone	No camera required	Familiar phone call
Video	Face-to-face	Show a provider your concern

Median member wait time for Quick Care visits

5 mins

Welcome to Rightway!

Personalized Support so you can Maximize Your Health, Dental, and Vision Benefits

Rightway®

Rightway makes healthcare easier.

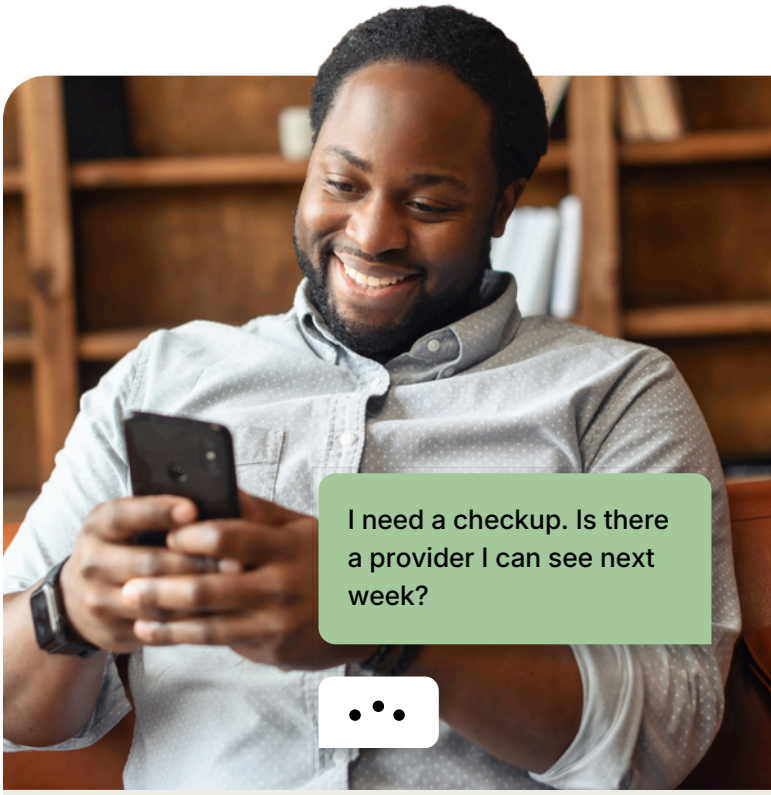
Rightway helps you save time and money while ensuring you get the most out of your healthcare benefits. Our expert support and easy-to-use app are available at no cost to you.

Healthcare help so good, it actually saves you time.

Healthcare often comes with questions, paperwork, and to-do lists. With Rightway, you have a team of experts who understand the system and can help you find the right care quickly.

Our health guides are here to help:

- Provide personalized recommendations for doctors and specialists.
- Confirm appointment availability and in-network status, so you can schedule confidently.
- Explain your insurance coverage, including copays and deductibles.
- Find ways for you to maximize your health benefits.



GET ONE-ON-ONE SUPPORT ON YOUR SCHEDULE

Whenever you have a healthcare question, reach out to Rightway. You'll always speak with a real person and get free, confidential support tailored to your needs.

GET STARTED

Download the Rightway app or visit **joinrightway.com**.

Prefer to speak on the phone?
Call **833-307-9425**.
Phone support is available:
Mon – Fri: 8:00 AM – 11:00 PM ET
Sat – Sun: 9:00 AM – 5:00 PM ET.

Welcome to Rightway!

Personalized Support so you can Maximize Your Health, Dental, and Vision Benefits

How to activate your Rightway account.

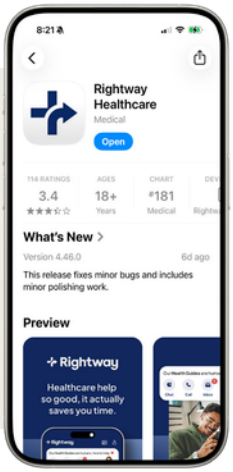
Getting started is easy and only takes a minute.

Rightway

STEP 1

Download the Rightway app from the **App Store** or **Google Play**, or visit

member.rightwayhealthcare.com



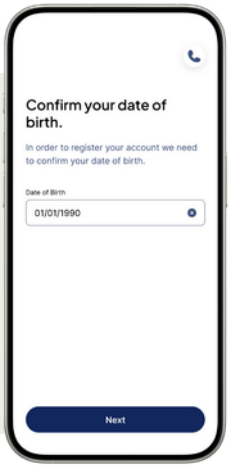
STEP 2

Click "**Get Started**" to enter your email address and confirm your date of birth.



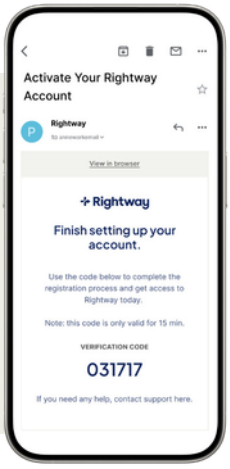
STEP 3

Click "**Next**" to send an activation code to your email to verify your eligibility.



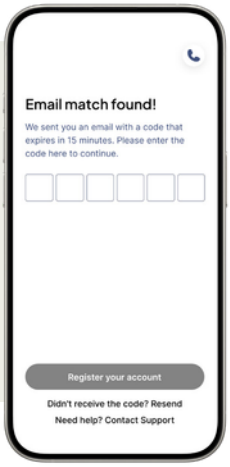
STEP 4

Check your inbox for an email from Rightway with your code and enter it in the app.



STEP 5

Click "**Register Your Account**" to create a password and complete registration.



Download the Rightway app to get started.

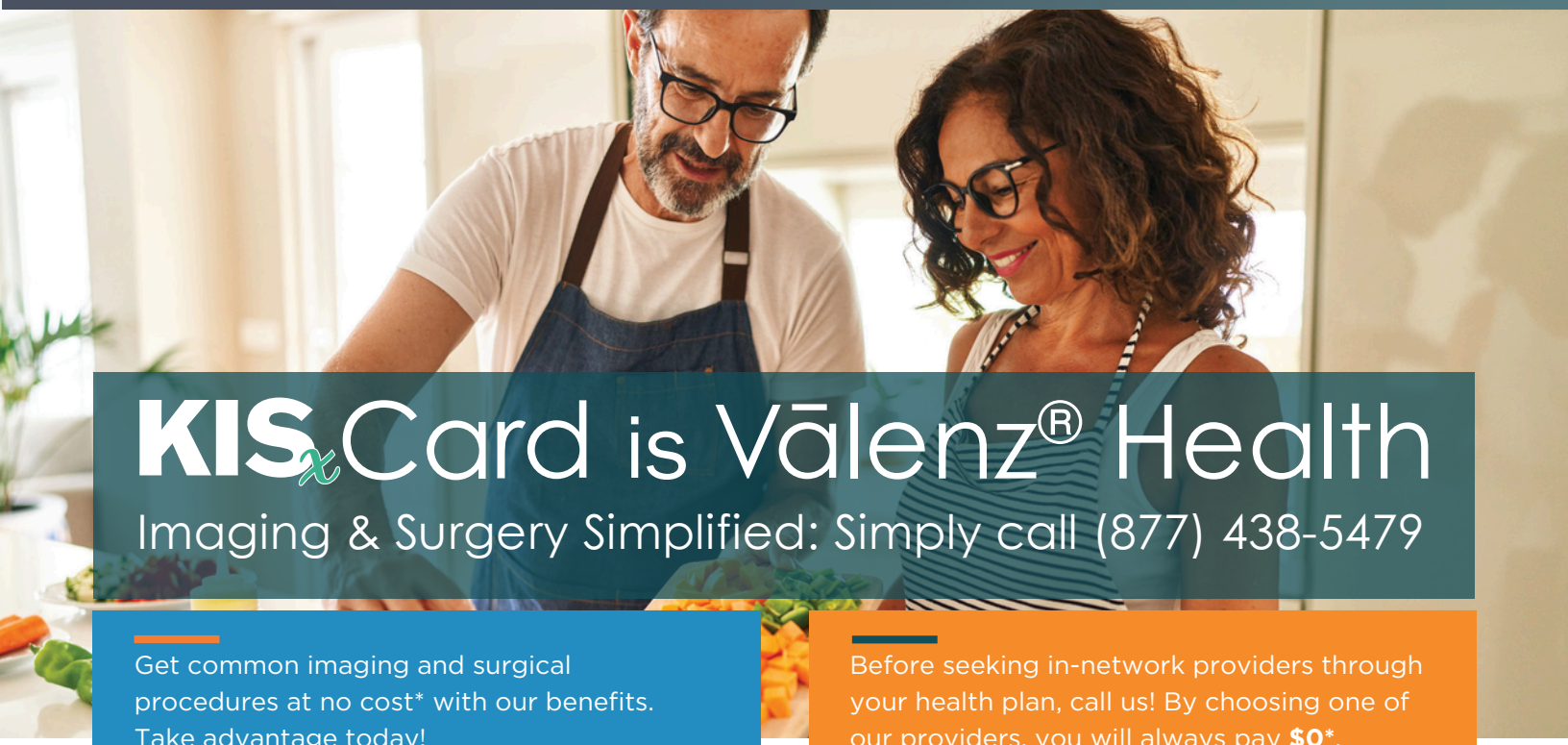
Once you activate your account, you'll have instant access to expert support and self-service tools.

Download on the App Store

GET IT ON Google Play

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Valenz Health (KISx Card)
FREE Diagnostic Imaging & Outpatient Surgery



KISx Card is Vālenz® Health

Imaging & Surgery Simplified: Simply call (877) 438-5479

Get common imaging and surgical procedures at no cost* with our benefits. Take advantage today!

Before seeking in-network providers through your health plan, call us! By choosing one of our providers, you will always pay **$0***.

Common Procedures:

- Ankle & Foot
- Arthroscopy
- Colonoscopy
- ENT
- Elbow
- Gastroenterology
- General Surgery
- Hernia Repair
- Hip
- Imaging
- Knee
- Shoulder
- Spine
- Urology
- Wrist & Hand
- And More

*HSA Plans require first dollar coverage from patient before procedure up to IRS Minimum, before program incentives are received.



Vālenz® HEALTH

getkisx.com

Valenz Health (KISx Card)
FREE Diagnostic Imaging & Outpatient Surgery

getkisx.com

Arthroscopy - General
- Knee - Diagnostic/OR meniscus repair, ACL, etc.
- Shoulder - includes
- Capsulorrhaphy/ Bankart
- Elbow
- Wrist
- Hip
- Ankle

Ear, Nose & Throat
- Inner Ear - Stapedectomy
- Mastoidectomy (Simple)
- Tympanoplasty and
- Mastoidectomy
- Myringoplasty
- Ossiculoplasty
- Bilateral Submucosal
- Resection of Turbinates
- Septoplasty
- Sinus/Turbinates Bilateral
- Parotidectomy
- Thyroidectomy- Total or Partial
- Thyroidectomy, Complex
- Adenoidectomy
- Adenoidectomy and BMT
- Tonsillectomy
- Frenulectomy
- Esophagoscopy With or Without
- Dilatation/Biopsy

Elbow
- Bursectomy (Elbow)
- Distal Biceps Re-attachment
- Ulnar
- Nerve Transposition / Epicondylectomy

Foot & Ankle
- Achilles Repair
- Tarsal Tunnel Release
- Brostrom Repair of ankle/ Reconstruction
- Bilateral Bunionectomy
- Unilateral Bunionectomy
- Hammertoe Reconstruction
- Arthrodesis of Great Toe / Metatarsophalangeal Joint
- Plantar Fasciotomy
- Tarsal Tunnel Osteotomy
- Partial Excision of Gastrocnemius
- Recession
- Plantar Fasciotomy
- Morton's Neuroma Excision

General Surgery
- Hemorrhoidectomy
- Non-Urgent Laparoscopic or Open Cholecystectomy (Gall Bladder Removal)
- All Hernia Repairs
- Pilonidal Cyst Removal
- Non-Urgent Laparoscopic
- Appendectomy

GI
- Colonoscopy and EGD
- EGD
- Colonoscopy

GI
- Anterior Repair
- Epididymectomy /Partial Epididymectomy
- Total Hydrocelectomy
- Transurethral Resection of Prostate
- Mini-Arc Urethral Suspension
- Posterior Repair

Hardware Removal
- Complex
- Simple

Hip
- Hip Arthroscopy (Simple
- or Complex) With W/O Labral Repair
- Total or Partial Hip Arthroplasty (Repair)- Includes Implants

Imaging
- MRI
- CT Scans
- PET Scans
- Arthrograms
- X-ray in conjunction with MRI/ CT

Knee
- Anterior Cruciate Ligament Repair with Allograft OR Allograft Posterior
- Cruciate Ligament Repair Medial Collateral Ligament
- Tibial Tubercle Osteotomy
- Complete Synovectomy
- Chondroplasty
- Medial & Lateral Meniscectomy
- Total OR Partial Knee Arthroplasty (Knee Replacement)

Shoulder
- Rotator Cuff Repair-Arthroscopic and Open
- Shoulder Manipulation (With or Without anesthesia)
- Repair Pectoralis Muscle Rupture
- Bankart Stabilization or Labral
- Repair
- Distal Clavicle Excision Extensive debridement
- Subacromial Decompression-Arthroscopic
- Total Shoulder Arthroplasty / Replacement

Spine
- Microdiscectomy
- Lumbar Laminectomy
- Anterior Cervical Discectomy with Fusion, 1 level (includes hardware) Anterior Cervical Discectomy with Fusion, 2 level (includes hardware)

Women's Health Surgery
- Hysterectomy
- Hysteroscopy

Wrist & Hand
- Carpal Tunnel Release (Open or
- Laparoscopic)
- Dupuytrens Contracture
- Trigger Finger
- Excision of lesion of tendon sheath or joint capsule (ex. cyst, mucous cyst, or ganglion)
- Ganglion Excision
- Synovectomy/Tenosynovectomy

Other Specialties offered
- Bariatric Surgery- for weight loss
- Regenexx- Non-surgical treatment for orthopedic issues/injuries/pain

Meritain Health Member Portal

MERITAIN® HEALTH
An Aetna Company



Meritain Health® Member Website

A fresh new connection to your benefits plan

Did you know you can find a variety of health care tools and resources at **www.meritain.com**?

Your member website gives you 24-hour access to a number of tools and resources that can help you manage your health benefits.

At meritain.com you can:

- Check your eligibility and benefits.
- Find the status of claims.
- View your Explanations of Benefits (EOBs).
- Review your benefit plan document.
- View deductibles and out-of-pocket limits.
- Access your ID card.

Access is as easy as 1–2–3

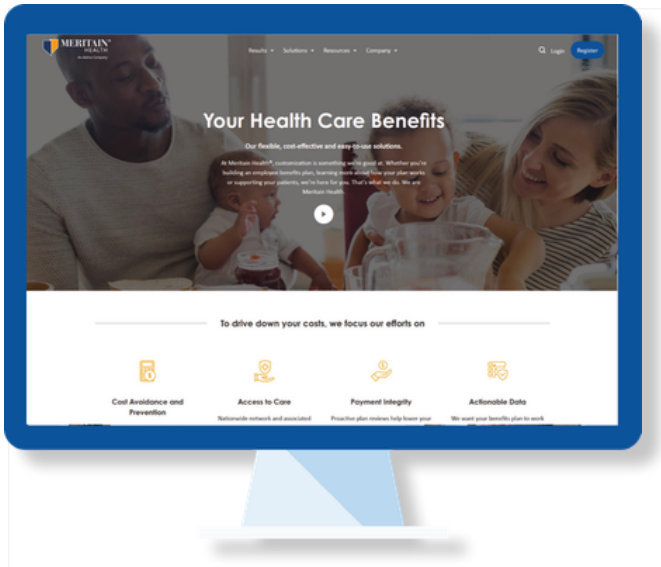
Ifyou have an account,simply log in. If you're a new user, you'll need to register with these simple steps. When you're registering, you can use the last four of your Social Security number to help identify you or you'll need your Member ID and group ID from your ID card. If you're new to the plan, you'll receive your ID card in the mail soon.

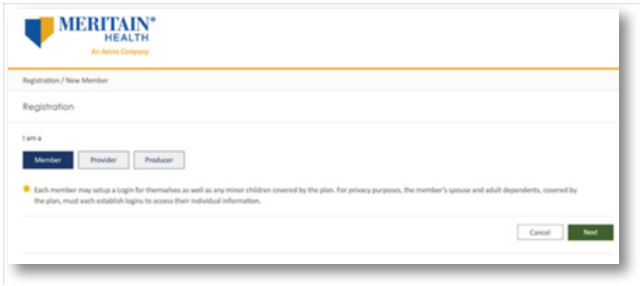
Step 1

Scan the QR code below and click on the link to register or visit **www.meritain.com** and click *Register*.

Step 2

Select *Member* under *I am a*. Then, click *Next*.



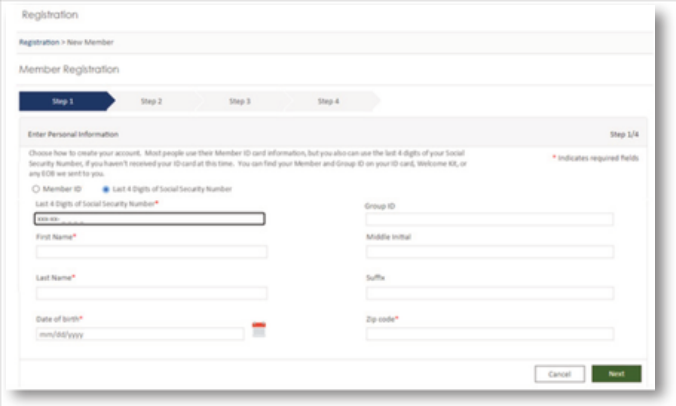


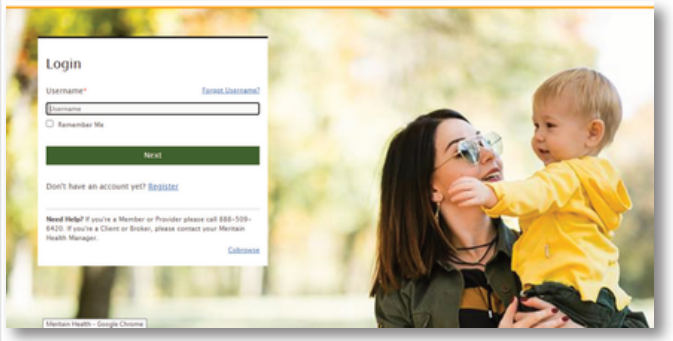
Meritain Health Member Portal

Step 3

You can register with your member ID number or the last four digits of your Social Security number (SSN). You'll need to enter the following information, then select *Submit*:

- Member ID and group ID (located on your member ID card) **or** SSN
- First name (employee, spouse or adult dependent)
- Last name (employee, spouse or adult dependent)
- ZIP code
- Email (personal address)
- Date of birth (mm/dd/yyyy)





Then, you will create a username and password. After you confirm your email address—you're done!

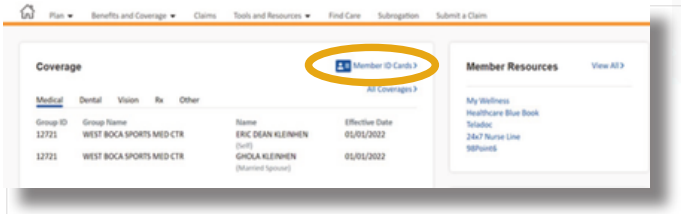
You can now log in to your account with your new username and password.

What you'll find at www.meritain.com

You can easily navigate our website by clicking on the icons on the homepage or click the name of each function in the top banner of the page to access the following functions.

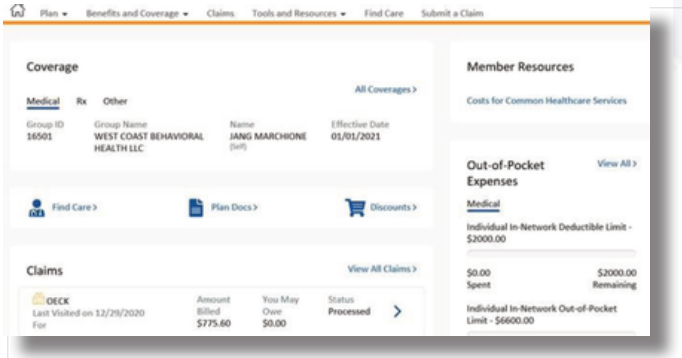
Click *Home* to return to the homepage.

You can also download a copy of your digital ID card. Simply click on the *Member ID Card* icon in the coverage box—you will be able to easily access a copy of your ID card!



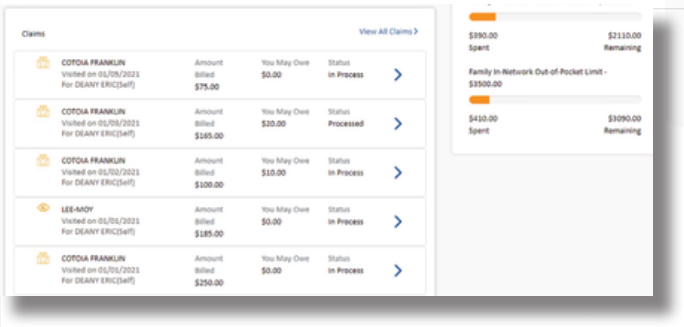
Health care plan overview

You can view deductibles and out-of-pocket maximums on the main page when you log in to your member account.



Claim information

Just click *Claims* to view your claim information. The *Apply* button lets you view all claims. Claims with statuses of *In Process, Processed* or *Awaiting Review* will be displayed. You can view and print the Explanation of Benefits (EOBs) by clicking for the claim details under the claim number.



Meritain Health Member Portal

Just click on **Account Settings** to access your information.

You can change your password or store your email address by going to the drop-down arrow located next to the person icon and *Welcome* in the upper right-hand corner of your page. From there, click *Account Settings* and update the information as needed.

You can click *Home* at any time to return to the welcome page.

Need help registering? Give us a call at the number on the back of your ID card.

Important information about the member website

Spouses and dependents

Per the HIPAA Privacy Regulations, spouses and dependents over age 18 have partially protected health care information. To access their information, they'll need to register for their account using the previous steps. You can view financial information for all dependents, regardless of age.

Returning user login

When returning to the website after your account has been created, just enter your established username and password in the login box.

Incorrect login

You can click *Home* to return to the homepage and try again if you receive an incorrect login message.

Website support

If you need help with the login process or forgot your username or password, we're here to help. You can contact customer service at the number on the back of your ID card.

If you need help navigating www.meritain.com or registering your account, simply call us at the number on the back of your ID card.

Meritain Health Mobile App (IPhones)



How to Access Your Mobile App

(IPhone)

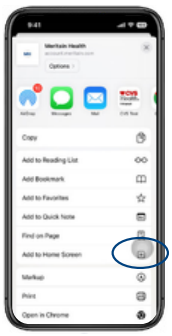
1

Once you log in to your member website through **www.meritain.com**, or **by scanning the QR code**, click the icon at the bottom of the page shown here.



2

Then, scroll through the menu options and select *Add to Home Screen*.



3

Click *Add* in the upper right-hand corner.



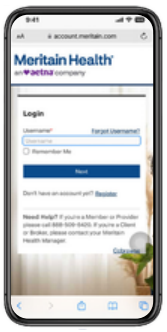
4

Your Meritain Health® app logo will then be installed and added to your home screen.



5

Now, you're all set to log in through the mobile app!



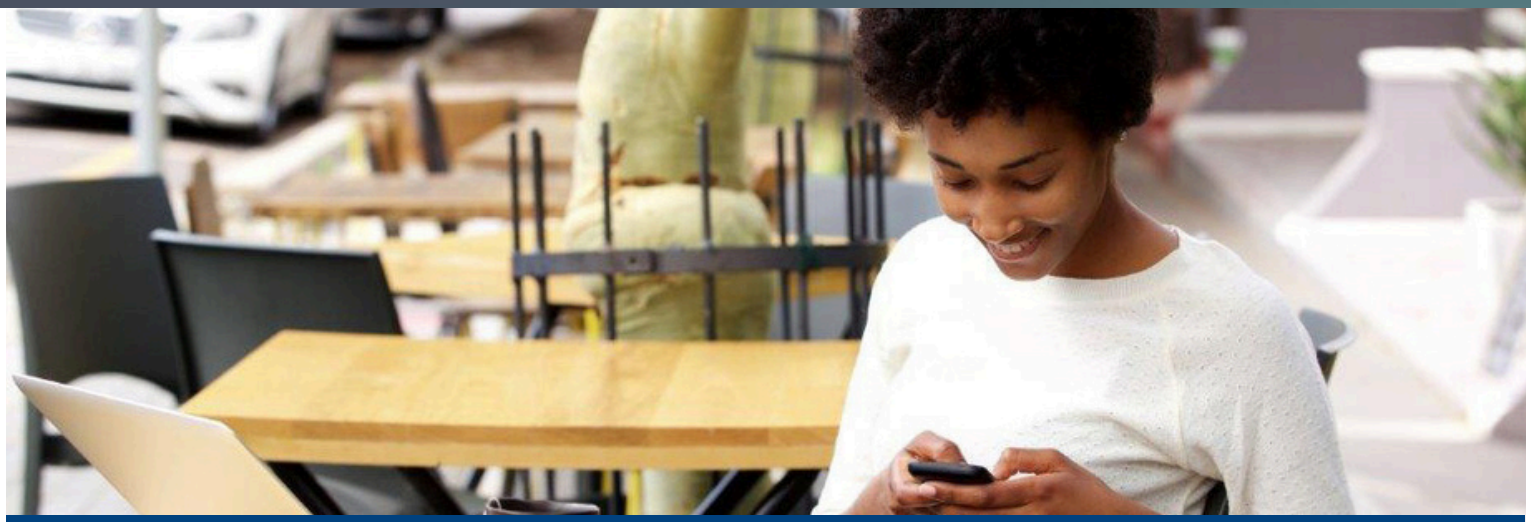
Simple. Transparent. Versatile.
AtMeritainHealth®,we'recreatingunrivaled connections.

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Meritain Health Mobile App (Androids)

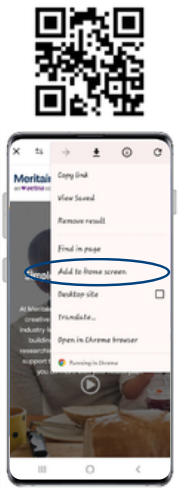


How to Access Your Mobile App

Android Phones

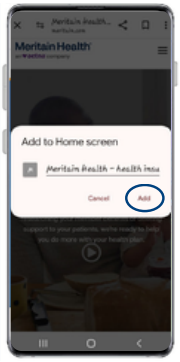
1

Once you log in to your member website through **www.meritain.com**, or **by scanning the QR code**, you'll be prompted with the pop-up message *Add Meritain Health® to Home Screen* at the bottom of the page. Click this message.



2

Then, click *Add* to add the app to your home screen.



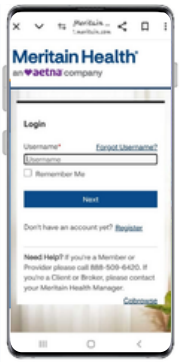
3

You should see the Meritain Health logo on your phone's home screen.



4

Now, simply launch the app from your home screen and log in.



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AtMeritainHealth®,we'recreatingunrivaled connections.

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Meritain Health
What to Know When Seeking Care



What to Know When Seeking Health Care Services

When you need care, knowing your options can save you time and money. Here are some care options arranged from least costly to more costly:

- $ Physician's office
- $ CVS MinuteClinic®
- $$ Urgent care
- $$$ Emergency care

Emergency care

It's best to seek emergency care for sudden and severe medical or behavioral conditions. These include any condition you believe is life-threatening or could result in serious medi- cal consequences, disability. Examples include a suspected heart attack or stroke, head injury, severe pain or uncontrolled bleeding.

Urgent care

You can seek urgent care for non-emergent health conditions. These include any conditions you can safely postpone treatment for while you contact a physician for instruction. Some examples include earaches, sprains, minor fractures, controlled bleeding, rashes, colds or stomach pain.

CVS MinuteClinic

CVS MinuteClinic offers quick, convenient and affordable treatment for many common illnesses. For many of these treatments, you can also get prescriptions. CVS MinuteClinic is a walk-in clinic inside select CVS Pharmacy and Target stores that specialize in family health care with no appointment needed. Visit a MinuteClinic when you need to treat conditions such as:

- Minor illnesses (strep/sore throat, flu-like symptoms)
- Minor injuries (bug bites, sprains)
- Screenings and monitoring
- Skin conditions
- Vaccinations and injections
- Wellness and physicals
- Women's services

You should always seek immediate emergency care if you believe you are experiencing a medical emergency!

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Meritain Health
What to Know When Seeking Care

Urgent care vs. emergency care

It's easy to assume the emergency room (ER) is the only treatment plan for fast care at any hour of the day. But often, the opposite is true. If your injury or illness is minor, you may find yourself waiting a long time while others with more serious problems are seen first. Also a trip to the ER for non-emergent care can cost three to four times more than a visit to an urgent care center for the same injury.

The level of care you seek is completely up to you. However, when you need urgent care, considering an urgent care center or doctor's can help you get the care you need faster, and at a lower cost to you.

Emergency Room (ER)

Because ERs are overwhelmed, you may wait hours to be seen, and at a high out-of-pocket cost. An ER should be used only for the most serious or life-threatening conditions. Emergency care is needed for medical emergencies that require immediate care to avoid severe injury, serious impairment, disability or death.

Urgent care center

Urgent care centers handle many problems that can be treated in a doctor's office, but they also offer some services not often found there, such as x-rays and minor trauma treatment.

Doctor's office

During normal business hours, you can be seen for a wide variety of services; from routine check-ups to immunizations. Also, most doctors' offices provide an answering service if you have a medical issue outside normal business hours.

Retail health clinic

This option offers quick, convenient and affordable treatment for many common illnesses like allergies, infections, bronchitis or strep throat. For many of these treatments, you can also get prescriptions. Retail clinics are usually located within or near a pharmacy, and may be in major retail stores.

Remember, you should always seek the level of care you need, regardless of the cost of that care.

Meritain Health
CVS Minute Clinic Services



MinuteClinic® Benefit Services

The MinuteClinic™ benefit gives members no-or lower-cost access to many covered MinuteClinic services. The following services are typically offered at most MinuteClinic locations. All services may not be available at all locations. Services are subject to change and availability.

Services offered at no-or lower-cost member cost:*

- A1c checks
- Acne
- Allergy symptoms
- Athlete's foot
- Bronchitis and coughs
- Bug bites and stings Chickenpox
- Cold, canker and mouth sores Dermatitis, rash and skin irritations
- Ear wax removal
- Earaches and infections Flu-like symptoms
- Gout
- Impetigo
- Lice
- Minor burns
- Minor cuts, blisters and wounds
- Minor psoriasis
- Mononucleosis
- Mouth and oral conditions
- Nausea, vomiting and diarrhea
- Pink eye and styes
- Poison ivy and poison oak
- Ringworm
- Rosacea
- Scabies
- Shingles
- Smoking cessation
- Splinter removal
- Sprains, strains and joint pain
- Sunburn
- Suture and staple removal
- Swimmer's ear
- Tick bites
- Upper respiratory infections
- Wart evaluation
- Yeast infections

Meritain Health®
an aetna company

Meritain Health
CVS Minute Clinic Services

Services offered at no-or lower-cost that may include testing services sent to a third-party lab at standard member cost sharing:*

- Cholesterol screening, monitoring and treatment Diabetes screening, monitoring and treatment Hepatitis C screening
- High blood pressure screening, monitoring and treatment
- Indigestion and heartburn
- Pregnancy tests
- Sexually transmitted infections
- Sore throat and strep throat Titers/immunity
- Tuberculosis testing
- Urinary tract and bladder infections

Services offered at standard member cost sharing:*

- Labs that are sent to a third-party lab
- Medication administered at visit
- Prescriptions filled at the pharmacy

Services offered that are not a part of the MinuteClinic Benefit:

- Cosmetic services (for example, eyelash lengthening consult)
- Department of Transportation physicals
- Employment-related physicals
- Mental health counseling in-person and virtually (where available)

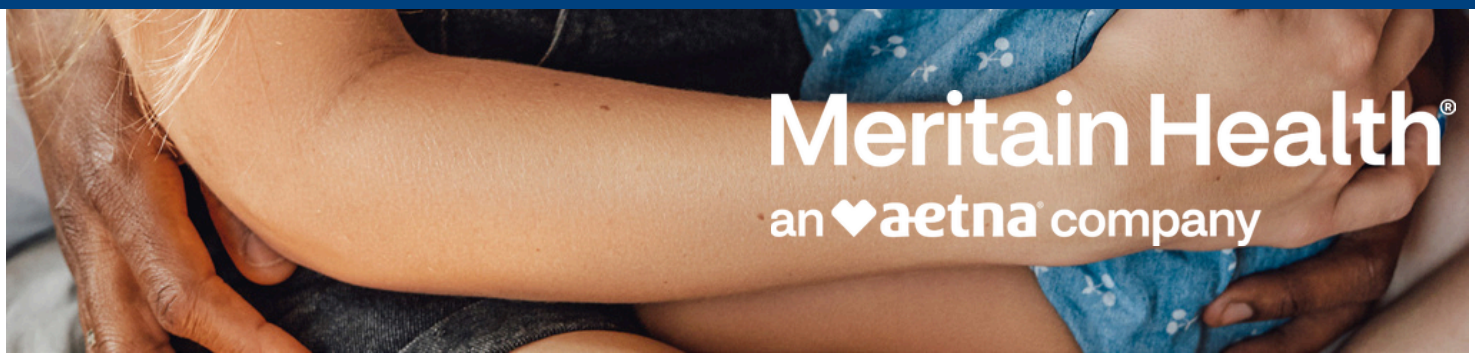
**Includes select MinuteClinic services. Not all MinuteClinic services are covered. Please consult benefit documents to confirm which services are included. Members enrolled in qualified high deductible health plans must meet their deductible before receiving covered non-preventive MinuteClinic services at no cost-share. However, such services are covered at negotiated contract rates. This benefit is not available in all states and on indemnity plans.*

Meritain Health
Preventive Services Covered at No Cost



Preventive Care Covered with No Cost Sharing

Checkups, screenings, vaccines, prenatal care, contraceptives and more with no out-of-pocket costs



Meritain Health
Preventive Services Covered at No Cost

Good news! Your health benefits cover the services* listed here with no cost to you[1] as part of your preventive care.
This includes routine screenings and checkups. It also includes counseling to prevent illness, disease or other health problems.

Many of these services are covered as part of physical exams, including regular checkups, and routine gynecological and well-child exams.

You won't have to pay out-of-pocket for these preventive visits when you visit a doctor in your provider network. But these services are generally not preventive if you get them as part of a visit to diagnose, monitor or treat an illness or injury. Then copays, coinsurance and deductibles may apply.

Meritain Health® follows preventive recommendations as determined by the U.S. Preventive Services Task Force, Centers for Disease Control and Prevention and other advisory committees. Screenings, services and other covered preventive services can vary by age, gender and other factors. Be sure to talk with your doctor about which services are right for you.

Preventive care for adults

Covered preventive services for adults generally include the following:

Medications and supplements

Doses, recommended ages, and recommended populations vary.

- Aspirin for women at risk of preeclampsia and adults ages 50–69 with certain heart risk factors
- Bowel preparation medication (for preventive colorectal cancer screening)
- Low-dosage statins: dependent on cardiovascular disease (CVD) and risk factors
- Tobacco-cessation medicine approved by the U.S. Food and Drug Administration (FDA), including over-the-counter medicine when prescribed by a health care provider and filled at a participating pharmacy
- HIV pre-exposure prophylaxis (PrEP) medication for members at higher risk
  - — **Truvada** (until a generic version is available)
  - — **Descovy**—covered for members with renal comorbidities or bone disease

Screenings

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Anxiety
- Cholesterol (for adults of certain ages or at high risk)
- Colorectal cancer*
- Depression
- Diabetes
- High blood pressure
- Home blood pressure monitor (one monitoring device per member age 18 and over)
- Human immunodeficiency virus (HIV)
- Human papillomavirus (HPV)
- Hepatitis B and C
- Lung cancer (with history of smoking)
- Obesity
- Prostate cancer
- Syphilis (for pregnant women and members at higher risk)
- Tuberculosis (TB) testing
- Tobacco use
- Unhealthy drug use

Counseling services

- Alcohol misuse
- Domestic violence
- Nutrition (for adults with cardiovascular and diet-related chronic disease)
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use (including programs to help you stop using tobacco)

[1] Employers with grandfathered plans may choose not to cover some of these preventive services, or to include cost share (deductible, copay or coinsurance) for preventive care services. Certain religious employers and organizations may choose not to cover contraceptive services as part of the group health coverage.

*Certain services are subject to age restrictions

Meritain Health
Preventive Services Covered at No Cost

Immunizations
Doses, recommended ages, and recommended populations vary.

- Tetanus, diphtheria, pertussis (Tdap)
- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza (flu)
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chicken pox)
- COVID-19 vaccines (as authorized under EUA or approved by BLA)
- RSV (for those 60 years and older)

Preventive care for women

Covered preventive services* for women include the following:

Screenings and counseling services

- Bacteriuria screening
- Breast cancer chemoprevention if you're at a higher risk
- Breast cancer (BRCA) gene counseling and genetic testing for members at a higher risk in place of this
- Breast cancer mammography
- Cervical cancer
- Chlamydia infection
- Gonorrhea
- Interpersonal or domestic violence
- Osteoporosis (depending on risk factors)

Medications and supplements

- Folic acid supplements (for women of child-bearing ages)
- Risk-reducing medicine, such as tamoxifen and raloxifene, for women with an increased risk for breast cancer

Counseling and services**

- Prescribed FDA-approved female over-the-counter or generic contraceptives[2] when filled at an in-network pharmacy
- Two visits a year for patient education and counseling on contraceptives

  Voluntary sterilization services

Preventive care for pregnant women

Covered preventive services for pregnant women

- Aspirin for those at high-risk for pre-eclampsia
- Routine prenatal visits (you pay your normal cost share for delivery, postpartum care, ultrasounds or other maternity procedures, specialist visits and certain lab tests)
- Diabetes screenings
- Bacteriuria urinary tract or other infection screenings
- Rh incompatibility screening, with follow-up testing for women at higher risk
- Hepatitis B counseling (at the first prenatal visit)
- Pre-eclampsia screening
- Expanded counseling on tobacco use
- Maternal depression screening and counseling
- Breastfeeding interventions to support and promote breastfeeding after delivery, including up to six visits with a lactation consultant[†]
- Respiratory syncytial virus immunization (RSV)

Covered preventive supplies for pregnant women
Breast pump supplies (one set per birth)

- Certain standard electric breastfeeding pumps (nonhospital grade) anytime during pregnancy or while you are breastfeeding (one per birth)
- Manual breast pump anytime during pregnancy or after delivery for the duration of breastfeeding

[2] Brand-name contraceptive drugs, methods or devices only covered with no member cost-sharing under certain limited circumstances when required by your doctor due to medical necessity.

* Certain services are subject to age restrictions.

** Certain eligible religious employers and organizations may choose not to cover contraceptive services as part of the group health coverage.

[†] Limits may vary depending upon state requirements and applicability

Meritain Health
Preventive Services Covered at No Cost

Preventive care for children

Covered preventive services for children include the following:

Screenings and assessments*

- Adolescent depression screening
  Alcohol and drug use
- Anemia
- Anxiety screening
- Autism
- Behavioral and psychological issues
- Congenital hypothyroidism
- Depression
- Development
- Hearing
- Height, weight and body mass index
- Hepatitis B
- HIV
- Lead (for children at risk for exposure)
- Medical history
- Newborn blood screenings
- Obesity
- Oral health (risk assessment)
- STIs
- Syphilis
- TB testing
- Vision

Counseling services

- Obesity
- Sexually transmitted infection (STI) prevention (for adolescents at higher risk)
- Tobacco use

Medications and supplements

- Gonorrhea preventive medication for the eyes of all newborns
- Oral fluoride for children* (prescription
- supplements for children without fluoride in their water source)
- Topical application of fluoride varnish by primary care providers

Immunizations

From birth to age 18—doses, recommended ages and recommended populations vary.

- Tdap/diphtheria, tetanus, pertussis (DTaP)
- COVID-19
- Haemophilus influenzae type b
- Hepatitis A and B
- Human papillomavirus
- Inactivated poliovirus
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Polio
- Respiratory syncytial virus (RSV)
- Rotavirus
- Varicella (chicken pox)

* Certain services are subject to age restrictions.

This material is for information only. Health benefits plans contain exclusions and limitations. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Information is believed to be accurate as of the production date; however, it is subject to change.

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Find a Doctor In-Network

MERITAIN® HEALTH
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Your DocFind® Online Directory

Aetna Choice® Point of Service (POS) II

It's easy to find doctors and hospitals in your network

When you andyour familyneed care,you canlook fordoctors and hospitals in the Aetna Choice POS II network. It's easy when you use the online DocFind directory from Aetna.* With up-to-date listings, you can search for providers by name, specialty, gender, hospital affiliations and more.

Find Aetna providers online in just a few quick steps

You can use the DocFind directory anywhere you have internet access. Just:

1. Visit **http://www.aetna.com/docfind/custom/mymeritain/**.
2. Key in the ZIP code, city, county or state of the desired geographical area in the *Enter location here* field. Click *Search*.
3. Key in *Aetna Choice® POS II (Open Access)* under *Select a Plan*. **Or** you can select *Aetna Choice® POS II (Open Access)* from the list of plans. Click *Continue.*
4. There are two options available to search for providers. The guided flow search uses some of our most commonly searched terms and easily organizes them for our users to find. To use the guided search flow, choose and click on one of the categories under *Find what you need by category*. **Or see step five.**
5. Use the search box, which includes type-ahead suggestions and will present provider, facility, specialty and condition search options based on what is entered. These suggested options will present an exact match or relevant providers. *What do you want to search for near* (will display your chosen location).
6. Choose your provider from the list of providers displayed on the results screen. You can learn more about each by clicking on the provider's name.
7. Narrow your search results by using the *Filter & Sort* option. Choices include Gender, Languages, Hospital Affiliations, Office Detail, Individual Practice Association Affiliations, Group Affiliations and Provider Type.

Cancer Care
Your Advocates for the Best Possible Care

CancerCARE
Right Care. Right Place. Right Time.

What is CancerCARE?

The CancerCARE Program is a free, fully integrated cancer solution included in YOUR health plan that supports you from the first day of your diagnosis well into the stages of aftercare. CancerCARE coordinates care and benefits for patients with new or existing cancers. Our expert medical team advocates for the best possible care in your community or at a leading national Centers of Excellence location.



Day One Help

The day you receive a cancer diagnosis is overwhelming. Our CancerCARE professionals will answer questions about your diagnosis and help you evaluate your treatment options. They will also help maximize your health benefits and minimize your out-of-pocket expenses.

Register online or by phone promptly (within 72 hours) of diagnosis for the highest care impact.



Personalized Care

Today's cancer treatments vary by cancer type, stage of spread, and the patient's genetic makeup. The most effective care occurs when it is genetically personalized for you. Genetic testing is often not a covered benefit; however, it is fully covered when used for treatment planning with CancerCARE's recommendation.



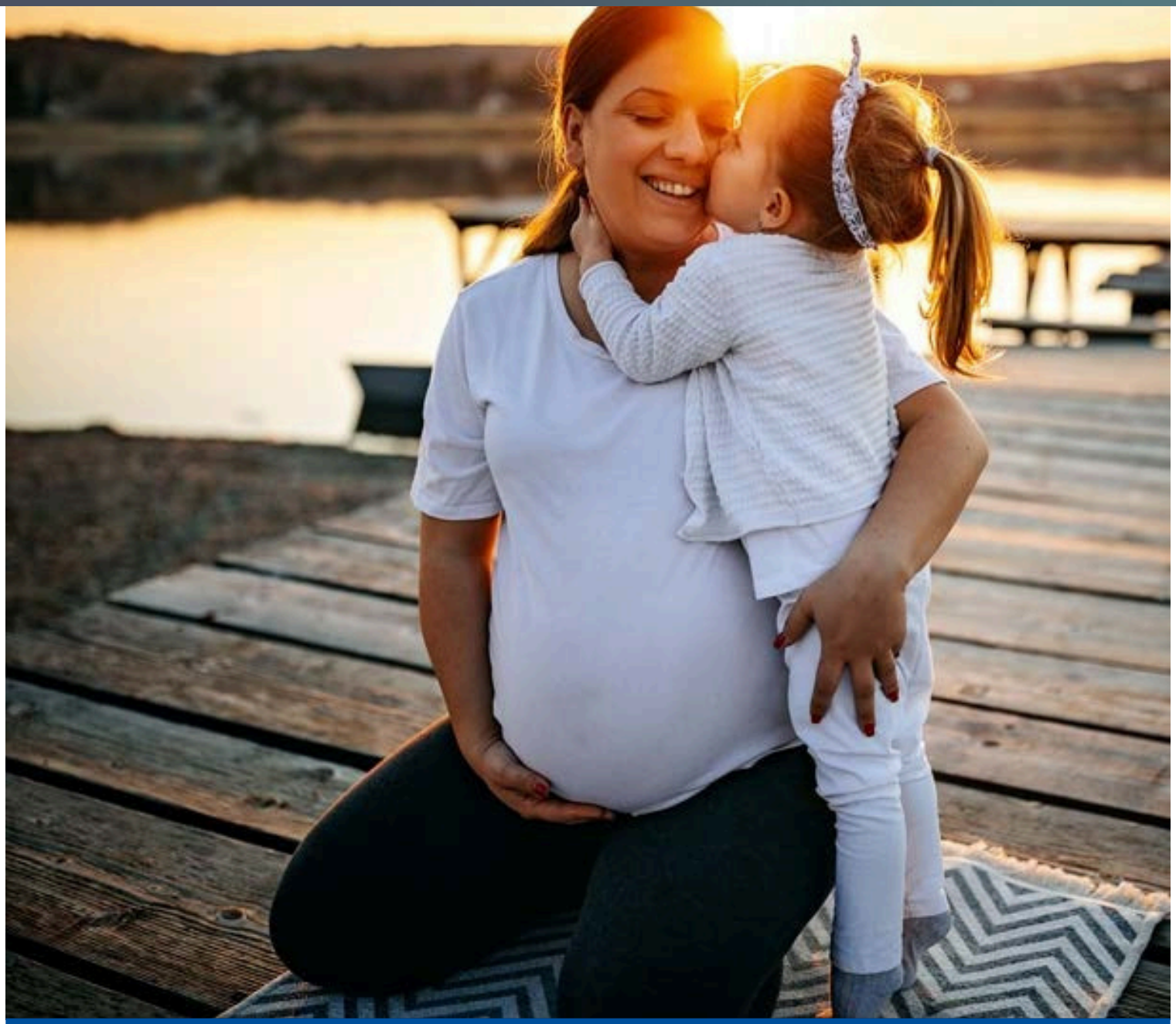
National Resources

New treatments are developed and tested at leading cancer centers called Centers of Excellence. Treatment received from your local oncologist is often the best possible, but in some instances, we may suggest new treatments that are only offered at a Center of Excellence when those treatments could be more beneficial to you. Two examples would be Clinical Trials or proven new treatments that have not yet been written and given to community oncologists.



Expert Medical Team

During your Initial registration call, our highly trained Intake Coordinators will quickly gather your medical and health plan information. When a diagnosis permits, you will be assigned your own personal Oncology Nurse Expert who will answer any questions you have regarding your diagnosis as well as your care options. CancerCARE's entire team of Doctors, Nurses, and Medical Experts is dedicated to being with you throughout your treatment journey.



Meritain Health® Maternity Management

WhyisMaternalCareImportant?

MERITAIN® HEALTH
An Aetna Company

Whitepaper | September 2022

Meritain Health
Marternity Management



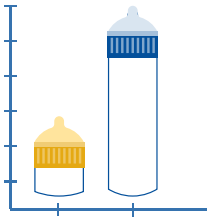
1 in 10
babies born prematurely
in the U.S. each year[1]



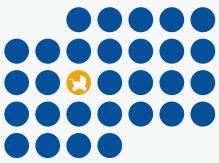
Pre-term births cost
at least **$26.2 billion**
annually[2]...



...and is the **#2 cause of death**
in newborns[3]



Inpatient and outpatient first-year
medical costs are about **4 times**
greater for preterm births[4]

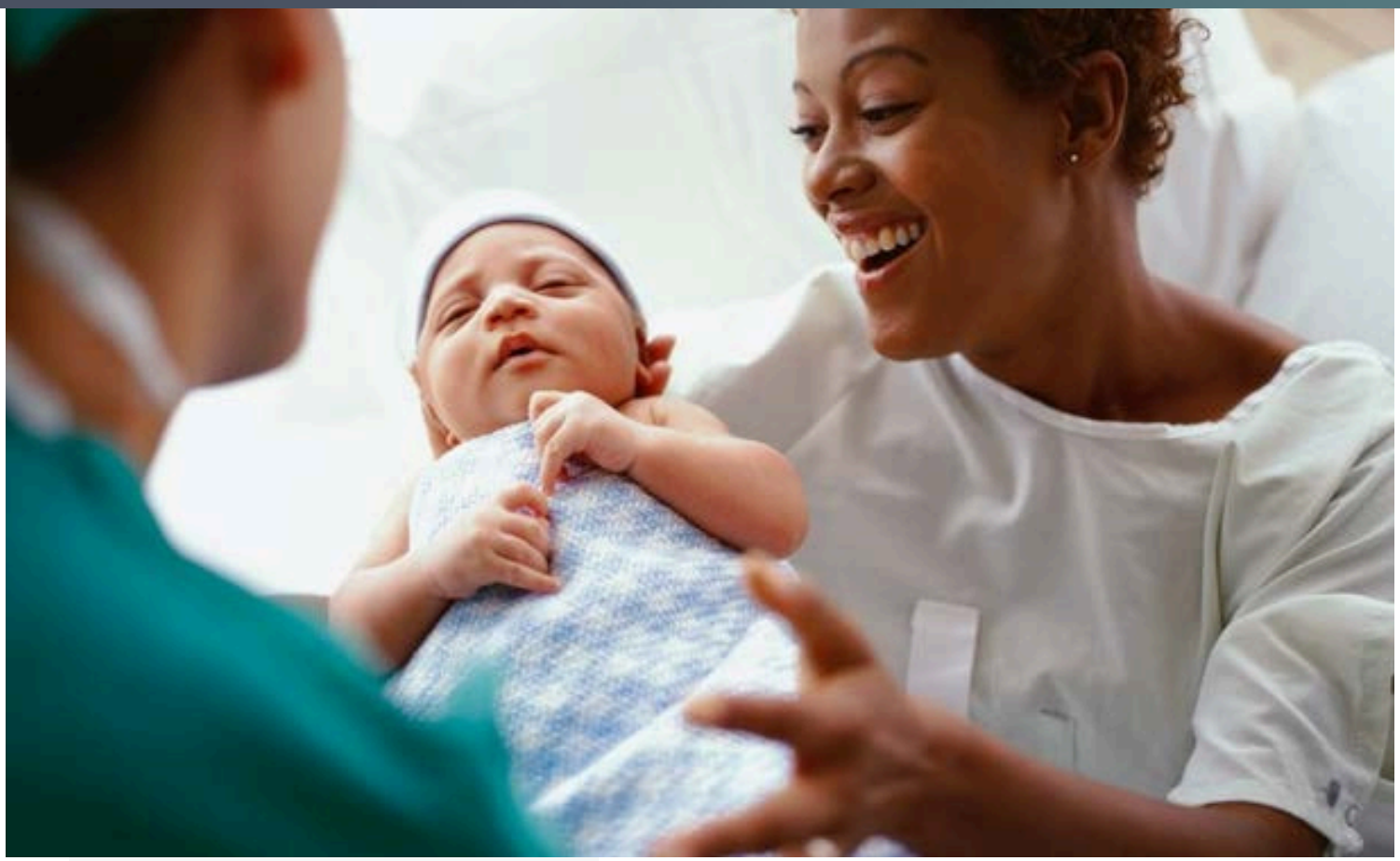


A premature baby
spends an average of
15 days in a specialty
care nursery[5]...

...costing an average
of **$55,393**

[1]Centers for Disease Control and Prevention. (2021, Nov 1). Preterm birth.
[2]March of Dimes. (Oct 2015). The Impact of Premature Birth on Society.
[3]Centers for Disease Control and Prevention. (June 2022). Infant mortality.
[4]March of Dimes. (2021, Jan 24). Medical Cost of Preterm Birth.
[5]March of Dimes. (2014, Feb 7). Premature Babies Cost Employers $12.7 Billion Annually.

Meritain Health Marternity Management



Preventing deaths and complications from pre-term births and low birth weight starts with a healthy pregnancy

2020 Maternity Management Program Rates:

	Meritain Health Maternity Management	National
Low birth weight	5.0%	8.24%[1]
Premature birth	7.5%	10.0%[2]

[1]Centers for Disease Control and Prevention. (2022, May 16). FastStats - Birthweight.

[2]Centers for Disease Control and Prevention. (2021, November 1). Preterm birth.

The Meritain Health Maternity Management Program includes interventions to help prevent premature birth and low birth weight, including information and education on the following:

- Healthy diet and nutrition.
- Importance of tobacco and substance cessation.
- Medications and pregnancy.
- Pregnancy-induced hypertension: preeclampsia or toxemia. Gestational diabetes testing and information.
- Important tests and screenings at each stage of the pregnancy, including importance of immunizations.
- Kick counts chart.
- Fetal position.
- Preterm labor screening, symptoms, and treatment.
- Premature rupture of water.
- Delivery plans and hospital checklist.
- Signs of labor.
- Overdue testing and what to expect.
- Post-partum depression.
- Information for after baby arrives.

Meritain Health Marternity Management

How can you ensure these programs are effective?

Communication plan

We can help clients build a comprehensive communication plan.

Developing a communication plan is important to ensure members are aware of the program and the benefits it offers. Communications should include specifics on the importance of prenatal care and how the Maternity Management Program can help reduce risk of premature birth and other complications. It is also very important to outline any incentives offered. You may distribute materials a number of ways, including:

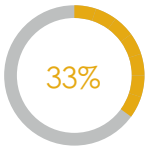
- Posting information in open enrollment packets.
- Providing program information in company newsletters.
- Posting flyers in prominent places throughout the worksite.

We have created a comprehensive member engagement toolkit to help make communications easy. Your Account Executive can provide additional information.

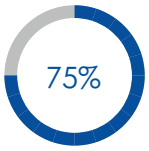
Incentives

The Maternity Management Program can only be successful if members engage in the program. Once they are aware of the program, the next step is to get them to participate. Incentives are an excellent way to increase participation.

To illustrate the importance of incentives, we have collected the following historical data:



Average program completion rate for all clients



Average program completion rate with incentive

Each company will need to determine what incentives will work best for their employees and their culture of wellness. The focus of the incentive should emphasize participation and completion rather than just enrollment in the program.



Examples of successful incentive programs offered by actual clients:

Client A: $250 gift card upon program completion; 78.6 percent completion rate

Client B: Hospital delivery copay waived upon program completion; 86.1 percent completion rate

Incentives are not one-size-fits-all. Below are some examples of activities to consider for earning an incentive:

- Enrollment and completion of Maternity Management Program
- Completion of calls with the Maternity Management nurse coach (e.g. a call during each trimester and post-delivery)
- Completion of first prenatal appointment within the first trimester of pregnancy
- Completion of postpartum visit between three and eight weeks after baby is born
- Penalty surcharge for not enrolling in the program

Various incentives that have been used to increase engagement in maternity management programs include:

- Gift basket, including items for the baby or expectant mom.
- Gift card or cash equivalent.
- Hospital visit copay waived.
- Provider office copays waived for prenatal visits.

Incentives may work more effectively when placing a small incentive for enrollment, such as a gift basket. A more significant incentive can be used for completion of the program, such as a gift card or hospital visit copay waiver. This keeps expectant moms engaged throughout the entire program and through all stages of their pregnancy, including prenatal and post-natal care.

MERITAIN® HEALTH
An Aetna Company

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SmithRx
Your Prescription Benefits

SmithRx

Find self-serve tools and resources in the SmithRx Member Portal

SCAN ME

*SMS text and emails apply if SmithRx has the updated member contact information. You can update your contact information in the member portal - simply click your profile to add your email and phone number.

Patient (Member) Support

Toll-free Phone Number
(844) 454 - 5201

Email
help@smithrx.com

Connect Patient Support

Toll-free Phone Number
(844) 385 - 7612

Toll-free Fax Number
(866) 642 - 5620

Connect Access Plus
(844) 385 - 4565

Connect Access Specialty & Traditional
(844) 385 - 7612

Email
connect@smithrx.com

Pharmacy/ Provider Line

Toll-free Phone Number
(844) 512 - 3030

Toll-free Fax Number
(866) 642 - 5620

Email
provider@smithrx.com

SmithRx
Your Prescription Benefits

SmithRx

Mail Order Partners

Register at www.amazon.com/smithrx. Doctors can send prescriptions via electronic prescribing, fax or phone:

- **Name/E-scribe**: Amazon Pharmacy Home Delivery
- **Amazon Pharmacy fax:** 512-884-5981
- **Amazon prescriber and pharmacy line:** 855-206-3605

amazon pharmacy

Best for Amazon Prime members who want fast, free home delivery and an optional $5/month flat-fee program for unlimited routine generic medications.

Doctors can send prescriptions via electronic prescribing, fax or phone:

- **Walmart Pharmacy fax:** 1 (800) 406-8976
- **Walmart prescriber and pharmacy line:** 1 (800) 273-3455
- **Website:** www.walmart.com/cp/1042239

Walmart Pharmacy

Best for employees who prefer same-day, in-person pickup at a local counter and want access to reliable $4 generic drug lists.

See whether your medications are available: costplusdrugs.com/medications. Doctors can send prescriptions via electronic prescribing to:

- **Name/E-scribe:** Mark Cuban Cost Plus Drug Company (MCCPD)

MARK CUBAN CostPlus DRUG COMPANY

Best for absolute price transparency and maximum savings on high-cost or specialty generic medications delivered straight to your door.

Manufacturer Copay Assistance

Many brand-name medications offer manufacturer copay savings programs that can help lower your out-of-pocket prescription costs.
How it works:

- **Visit the medication manufacturer's website and look for "Savings," "Cost Support," or "Copay Card" information.**
- **Complete the online enrollment using your insurance and personal information.**
- **Once approved, you'll receive a copay card with billing information (BIN, PCN, Group, and ID numbers).**
- **Provide this information to your pharmacy so the copay assistance can be applied after your health insurance is billed.**

Important: Copay assistance is administered by the drug manufacturer—not your health plan—and annual savings limits may apply.

Chat
Chat live with a member service representative on our website or in the member portal

Portal
Find plan info, ID cards and documents at smithrx.com/portal

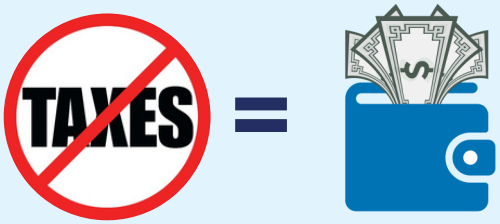
Email
Email our team at help@smithrx.com

Phone
Call us at 844-454-5201

Optum Bank Health Savings Account

Optum Bank® Member FDIC www.optumbank.com/health-savings-accounts.html

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in).



A Health Savings Account (HSA) is a tax-advantaged savings account that can be used for your health care expenses. Money comes out of each paycheck and is deposited into the account for future use.

If you have a high deductible health insurance plan, an HSA can help provide some security for your health care costs and

An HSA can help you save money and conveniently pay for health care costs.

An HSA provides triple tax benefits. Since the deposits are coming straight out of each paycheck, the money you contribute to an HSA is pre-tax, and the interest that accumulates in the account is tax-free. In addition, money withdrawn from an HSA is not taxed, provided that you use it for qualifies medical expenses.

What are the benefits of an HSA?

There are many benefits of using an HSA, including the following:

- It saves you money. HDHPs have lower monthly premiums, meaning less money is being taken out of your paycheck.
- It is portable. The money in your HSA is carried over from year to year and is yours to keep, even if you leave the company.
- It is a tax-saver—HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you'll pay less in taxes.

HSA LIMITS			
TYPE OF LIMIT		2026	2027
Contribution limit	Self-only	$4,400	$4,500
	Family	$8,750	$9,000
Catch-up Contribution (not subject to adjustment for inflation)			
Age 55 or older		$1,000	



HSA EXAMPLES OF ELIGIBLE EXPENSES

Your HSA may reimburse:

- Qualified medical expenses incurred by the account beneficiary and his or her spouse and dependents;
- COBRA premiums
- Health Insurance premiums while receiving unemployment benefits;
- Qualified long-term care premiums*; and
- Any health insurance premiums paid, other than for a Medicare supplemental policy, by individuals age 65 or older

Qualified Medical Expenses

The Internal Revenue Service (IRS) defines qualified medical care expenses as amounts paid for the diagnosis, cure or treatment of a disease, and for treatments affecting any part or function of the body. The expenses must be primarily to alleviate a physical or mental defect or illness.

Optum Bank
Flexible Spending Accounts



HEALTHCARE SAVINGS WITHOUT THE HASSLE

A flexible savings account (FSA) makes healthcare affordable for employees by better preparing them for health-related costs not covered by insurance. Clarity FSA gives you and your employees the tax savings you expect -- plus a simply smarter experience. Our program is simple to use, easy to manage and automated for efficiency.

A SIMPLY SMARTER FSA

🩺 **Healthcare Flexible Spending Account (FSA)**
Set aside pre-tax dollars to pay for eligible medical, dental, and vision expenses, helping you save money on healthcare costs throughout the year.

👓 **Limited Purpose Flexible Spending Account (LPFSA)**
Available if you're enrolled in an HSA-qualified medical plan, an LPFSA lets you use pre-tax dollars for eligible dental and vision expenses while preserving your HSA for future medical needs.

👨‍👩‍👧 **Dependent Care Account (DCA)**
Save on eligible daycare and dependent care expenses by using pre-tax dollars to pay for care that allows you (and your spouse, if applicable) to work or attend school.
These are short enough to fit nicely beneath each account heading while still explaining the value to employees.

2026 FSA & LPFSA LIMITS	
Contribution Limit	$3,400
Maximum Rollover into 2027	$680

2026 DCA LIMITS	
Contribution Limit if Single or Married Filing Jointly	$7,500
Contribution Limit if Married Filing Separately	$3,750

Learn more about us at www.optumbank.com/flexible-spending-accounts
www.optumbank.com/dependent-care-flexible-spending-accounts

Optum Bank
Health Savings & Flexible Spending Accounts



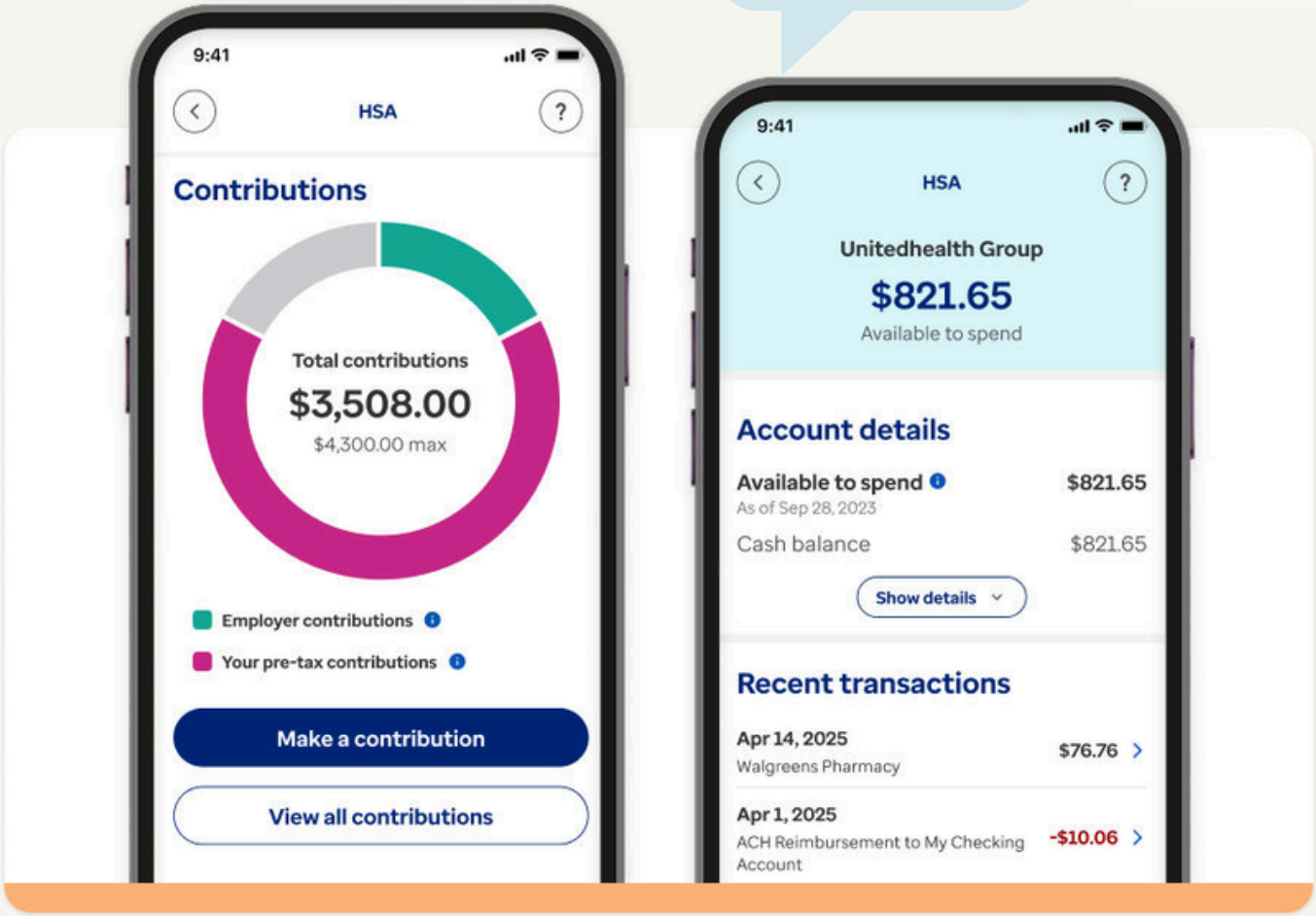


Manage your health dollars with the Optum Bank app
Our app provides personalized support and guidance to help you make the most of your account benefits anytime, anywhere.* You can:

- Track account balances with ease.
- Maximize tax savings by contributing the max each year.
- Cancel your payment card if it's lost or stolen.
- Reimburse yourself or pay bills.

Register to manage your HSA/FSA health dollars online: www.healthsafe-id.com

Scan this QR Code to download the mobile app!



Introduction to MetLife

Your New Dental, Vision, Life, Disability, & Supplemental Benefits

At eCapital, we regularly evaluate our benefits program to ensure we're providing employees with the greatest possible value. After a comprehensive market review, we made the decision to transition our ancillary benefits from Guardian to MetLife for the 2026–2027 plan year.

This change allows us to offer a stronger overall benefits package by enhancing coverage while reducing costs for many employees and their families.

What This Means for You

Enhanced Dental Benefits

- Higher annual maximum benefits
- Access to one of the nation's largest dental provider networks
- Competitive plan design to help maximize your dental benefits

Improved Income Protection

- Increased Short-Term Disability maximum benefit from $1,500 to $2,000 per week

Lower Premiums on Voluntary Benefits

- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance

Learn More About MetLife Benefits

MetLife Dental | **MetLife Vision** | **MetLife Disability** | **MetLife Life**

Dental Benefits
Standard PPO & Enhanced PPO

CAPITAL®

Our 2026-27 Dental plans offer exciting new enhancements and are provided at a lower cost to you!

- $500 increase on the Standard & Enhanced PPO Maximums!
- $500 increase on the Enhanced PPO Orthodontia Maximum!
- NEW! 4 Cleanings per Year on both plans (increased from 1 per 6 Months)
- NEW! Implant Coverage on both plans
- NEW! Adult Ortho coverage on the Enhanced Plan & Child Ortho extended to 26
- Access to the largest Dental Provider Network in the nation!

MetLife

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Plan Name	Standard PPO		Enhanced PPO	
	In Network	Out of Network	In Network	Out of Network
Network	MetLife PDP Plus Network		MetLife PDP Plus Network	
Individual Deductible	$50	$100	$25	$25
Family Deductible	$150	$300	$75	$75
Waived for Preventative	Yes		Yes	
Deductible Schedule	Calendar Year		Calendar Year	
Annual Maximum	$2,000 **$500 Increase from Last Year!**		$2,500 **$500 Increase from Last Year!**	
Preventative - Type 1	100%	100%	100%	80%
Basic - Type 2	80%	50%	80%	70%
Major - Type 3	50%	25%	50%	40%
Ortho - Type 4	Not Included		50%	
Ortho Age Limit			Adult & Child(ren) to age 26	
Ortho Maximum			$1,500 **$500 Increase This Year!**	
Endodontics	Major		Basic	
Periodontics Non-surgical	Major		Basic	
Periodontics Surgical	Major		Basic	
Oral Surgery (Simple)	Major		Major	
Oral Surgery (Complex)	Major		Major	
Implants **NEW!**	Major		Major	
Cleanings Frequency	4 per calendar year **Increased This Year!**		4 per calendar year **Increased This Year!**	
Waiting Periods	None		None	
Out-of-Network Reimbursement	Fee Schedule		90th UCR	
Dependent Child/Student Age	Up to Age 26, benefit will terminate at end of the month of Birth Date			

Common Dental Services

Preventive	Periodontics	Endodontics	Oral Surgery
• Exams & Cleanings • X-rays • Fluoride • Sealants & Fillings	• Scaling & Root Planing • Periodontal Maintenance • Gum Surgery	• Root Canals • Retreatments • Apicoectomies	• Simple Extractions • Surgical Extractions • Wisdom Teeth • Biopsies

VSP Vision Benefits

eCAPITAL®

Our 2026-27 Vision Plan features the largest Vision provider network in the U.S.

- $250 Frame/Contact Allowance! The highest allowance that any VSP plan offers
- VSP members get up to $1,100 off LASIK! at participating networks like LASIK.com or NVISION Eye Centers
- Access to wide range of private practice providers in-network
- In-network chains include Visionworks, Eyemart Express, Walmart, Sam's Club, Costco, Pearle Vision, and more!
- You can shop online & remain in-network at eyeconic.com

MetLife

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Plan Name	Vision
	In Network Copays & Allowances
Network	VSP by MetLife
Exam Copay	$10 Copay
Materials Copay	$25 Copay Note: Pay your materials copay once to access both your lens benefit and your frame/contact allowance
Retinal Imaging Copay	$39 Copay
Exam & Materials Frequencies	Exams: 1 per 12 months Lenses: 1 per 12 months Frames 1 per 24 months
Single, Bifocal, Trifocal & Lenticular Lenses	Covered in Full after Materials Copay
Progressive Enhancements	Standard: $55 Copay Premium: $105 Copay Custom: $175 Copay
Blue Light Filtering	$15 Copay
Frames	Up to $250 after Materials Copay Note: $270 allowance on featured frames $135 allowance at Costco, Walmart & Sam's Club
Contacts	Elective: Up to $250 after Materials Copay Necessary: Covered 100% after Materials Copay
Dependent Child/Student Age	Up to Age 26, benefit will terminate at end of the month of Birth Date

Did you know your annual eye exam can detect early signs of diabetes, high blood pressure, high cholesterol, glaucoma, and even certain cancers?

Out-of-Network Reimbursement Allowances

Eye Examinations	Lenses	Frames	Contacts
• Up to $45	• Single: Up to $30 • Bifocal: Up to $50 • Trifocal: Up to $65 • Lenticular: Up to $100	• Up to $70	• Elective: Up to $105 • Necessary: Up to $210

MetLife Mobile App

MetLife | MetLife US Mobile App

Checking your benefits just got easier

MetLife's mobile app puts convenience in the palm of your hands.You can quickly access and manage your benefit information — anytime, anywhere.



Dental Insurance

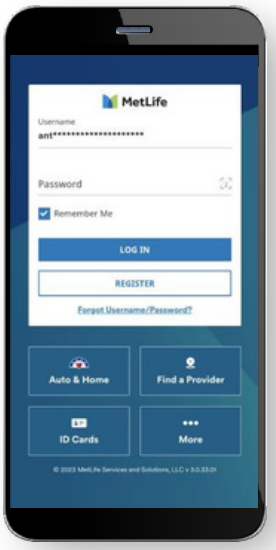
- Find a dentist
- Plan based cost estimator for dental procedures
- View your Plan Summary
- Book an appointment
- Provider reviews and ratings
- View and save ID card
- View your claims

Vision Insurance

- Find a provider
- View and save ID card

Disability & Life Insurance

- View and update claim & leave information
- Set up direct deposit for benefit payments



It is easy to get the MetLife US Mobile app
Search "MetLife" in the App Store® or Google Play® and download the MetLife US Mobile App, or scan these QR codes.

GET IT ON Google play

Download on the App Store

Group Life & Voluntary Life Insurance

MetLife

(800) 438-6388 | www.metlife.com

EMPLOYER PAID BASIC LIFE & AD&D BENEFIT

eCapital Enterprises Corp. provides Employer Paid Life Insurance and AD&D to all Full-Time Team Members eligible for benefits in the amount of:

All Active Full Time Employees - **1x Salary to Max of $250,000**

Benefit Age Reduction:
- 35% at Age 65
- 50% at Age 70

VOLUNTARY LIFE & AD&D

Team Member Benefits

Elect additional Life Insurance in increments of $10,000

Up to the greater of 5x your salary or $500,000

Spousal Benefits

Elect Life Insurance for your spouse in increments of $5,000

Up to $250,000 not to exceed 50% of EE amount

Initial Enrollment Guarantee Issue (GI) amounts are $200,000 for Employees and $30,000 for Spouses.
Any amount above the Guaranteed Issue amount will require to provide Evidence of Insurability (EOI)
Guarantee Issue is only provided to you during open enrollment or new hire enrollment — if you decide to elect or increase coverage next year, you will have to provide EOI

Child Benefits

·Child 15 days to 6 months old: $1,000
·Child more than 6 months old: $10,000
·Child limiting age: 26
·Team member must elect coverage in order to enroll children

Accidental Death and Dismemberment (AD&D)

- Life insurance benefit is doubled if death is caused by an accident.
- Pays the Principal Sum Amount for the loss of life due to an accident or the loss of 2 or more appendages such as hand, foot, or eye.
- Half the Principal Sum is payable for the loss of one appendage.

Note: The above is just a brief summary of benefits and does not constitute a contract. Please refer to your Certificate of Insurance for further information on your Employee Benefits. In the case of error or omission, the carrier policy will govern.

Short Term & Long Term Disability

eCAPITAL®

Our 2026-27 Short Term Disability Plan features an increased maximum benefit of $2,000 weekly.

- Note: You have a Guarantee Issue up to $2,000 on STD and $7,500 on LTD only at your initial enrollment.
  - Electing coverage at your next enrollment opportunity will require you to provide EOI

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VOLUNTARY SHORT TERM DISABILITY

Elimination Period Maximum	1st Day Accident / 8th Day Sickness
Weekly Benefit	60% Of Your Weekly Salary Up to $2,000
Maximum Benefit Duration	13 Weeks
Maternity Leave Benefit	6 weeks for regular birth (8 for C-section)
Pre-Existing Period	3 month look-back / 12 month exclusion

VOLUNTARY LONG TERM DISABILITY

Elimination Period	90 Days
Maximum Monthly Benefit	60% Of Your Monthly Salary Up To $7,500
Benefits Duration	SSNRA or RBD if age 60+
Own Occupation	24 Months
Pre-Existing Period	6 month look-back / 12 month exclusion

DEFINITIONS AND REQUIREMENTS

Elimination Period: The number of days you must be disabled before benefit payments begin.

Pre-Existing Condition: A pre-existing condition includes any condition/symptom for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.

Benefit Duration: Your STD/LTD plan will continue to pay your weekly/monthly benefit until you are able to return to the duties of your job or until you reach the Maximum Benefit Duration.

LTD Definition of Disability: For the first 2 years, you're considered disabled if you're unable to perform the duties of your own occupation due to a covered illness or injury. After that, you must be unable to perform any occupation for which you're reasonably qualified.

Why enroll in Disability Benefits?

Many people insure their car, home, and health—but not their paycheck. Yet your paycheck is what pays for everything else. Your ability to earn an income is likely your most valuable financial asset. For most people, lifetime earnings are worth far more than their home or retirement savings.
Most disability claims are caused by illnesses—not accidents. Conditions like cancer, heart disease, pregnancy complications, and musculoskeletal disorders are among the leading reasons employees use disability benefits. Long-Term Disability can protect your income for years.

Accident Benefits

eCAPITAL

Our 2026-27 Accident Plan is seeing MAJOR Enhancements this year!

- The benefit amount for Hospital Admission & ICU Admission have DOUBLED to $3,000 and $6,000 respectively.
- Daily Hospital and ICU Confinement benefits have also nearly DOUBLED to $300 & $1,000 respectively.
- The benefit amounts for ER, Urgent Care, & Initial Physician's Office Visit have also nearly doubled to $400, $200, and $200 respectively
- Benefit amounts for all Fractures and Dislocations have increased. For instance, a hip fracture now pays a $12,000 benefit!
- **Have MetLife Disability?** If you file a qualifying MetLife Disability claim and are also enrolled in Accident coverage, MetLife will proactively identify and process additional benefits that may be available.

MetLife

(800) 438-6388 | www.metlife.com

ACCIDENT PLAN

Cash benefits when an unexpected accident happens

Whether you're injured playing sports, working around the house, or in a car accident, Accident Insurance pays cash benefits directly to you to help cover deductibles, copays, lost income, travel expenses, or everyday bills.

When an accident happens, there are typically three stages of care:

1. The Injury – What happened (broken bone, concussion, burns, lacerations, etc.)
2. Medical Treatment – Emergency room, ambulance, X-rays, doctor's visits, therapy, etc.
3. Hospital Care – Surgery, hospital admission, ICU, rehabilitation, and recovery.

Step 1
You get injured...

Common Injuries	Cash Benefit
Broken Bones	Up to $12,000
Dislocated Joints	Up to $12,000
Burns	Up to $17,500
Concussion	$750
Eye Injury	$500
Lacerations Requiring Stitches	Up to $800

Benefits vary depending on the injury and severity.

Step 2
You receive medical treatment...

Treatment	Cash Benefit
Broken Bones	Up to $12,000
Dislocated Joints	Up to $12,000
Burns	Up to $17,500
Concussion	$750
Eye Injury	$500
Lacerations Requiring Stitches	Up to $800

Step 3
If surgery or hospitalization is needed...

Treatment	Cash Benefit
Hospital Admission	$3,000
ICU Admission	$6,000
Daily Hospital Stay	$500/Day
Daily ICU Stay	$1,000/Day
Inpatient Rehabilitation	$300
Surgical Repair	Up to $2,500

Example Scenario
Broken Leg While Playing Soccer

John is at the park playing a game of soccer with his friends when he takes a tumble and breaks his leg.

Then, the following occurs:

- Travels by ambulance to the hospital
- Visits the ER
- Gets X-rays
- Has surgery
- Spends 2 nights in the hospital

John could receive:

- Ground Ambulance: $500
- Emergency Room: $400
- Medical Testing: $250
- Fracture benefit: Up to $12,000
- Surgical Repair: Up to $2,500
- Hospital Admission: $3,000
- Hospital Stay: 2 x $500/day

Potential Total: $19,650+
(depending on specific fracture and surgery)

Hospital Indemnity & Critical Illness Benefits

eCAPITAL®

Our Hospital Indemnity and Critical Illness plans provide financial protection when you need it most—helping you manage the unexpected costs of a hospitalization or serious illness.

- This year, Benefit Amounts for Hospital and ICU Stays have been added to both Hospital Indemnity plan options.
- Additionally, a $50 Wellness Benefit has been added to the Hospital Indemnity plans

MetLife

(800) 438-6388 | www.metlife.com

HOSPITAL INDEMNITY PLAN

Cash benefits paid directly to you during a covered hospital stay

Hospital Indemnity Insurance provides cash benefits that can help pay for deductibles, copays, rent, groceries, childcare, or any other expenses while you're recovering.

	Standard Plan	Enhanced Plan
Hospital Admission	$1,000	$2,000
ICU Admission	$1,000	$2,000
Hospital Stay	$100/Day	$200/Day
ICU Stay	$200/Day	$200/Day
Newborn Nursery Care	$200/Day	$200/Day
Inpatient Rehab	$200/Day	$300/Day
Wellness Benefit	$50/Year	$50/Year

Benefits are paid directly to you—not your healthcare provider.

CRITICAL ILLNESS

Cash benefits paid directly to you after a covered diagnosis

CHOOSE YOUR COVERAGE AMOUNT

Employee: $5,000	$10,000	$15,000	$20,000
Spouse: $2,500	$5,000	$7,500	$10,000
Children: $2,500	$5,000	$7,500	$10,000

Note: Spouses are added at an additional cost, but children are added at no additional cost.

Your cash benefit depends on the covered condition you are diagnosed with. Each condition pays a percentage of the coverage amount you elect.

Percentage of Coverage Amount per Condition

Heart Attack	100%	Kidney Failure	100%	Deaf, Blindness, Mute	100%
Sudden Cardiac Arrest	100%	Major Organ Transplant	100%	ALS, MS, Alzheimer's	100%
Stroke	100%	Benign Brain Tumor	100%	Coronary Bypass Surgery	50%
Invasive Cancer	100%	Coma or Paralysis	100%	Non-Invasive Cancer	25%

Simplified Wellness Claims with MetLife Connected Benefits

Your Accident, Hospital Indemnity, & Critical Illness each pay a $50 Wellness Benefit once per calendar year when you complete an eligible preventive screening, including an annual physical, dental exam, eye exam, mammogram, colonoscopy, bloodwork and many other screenings.

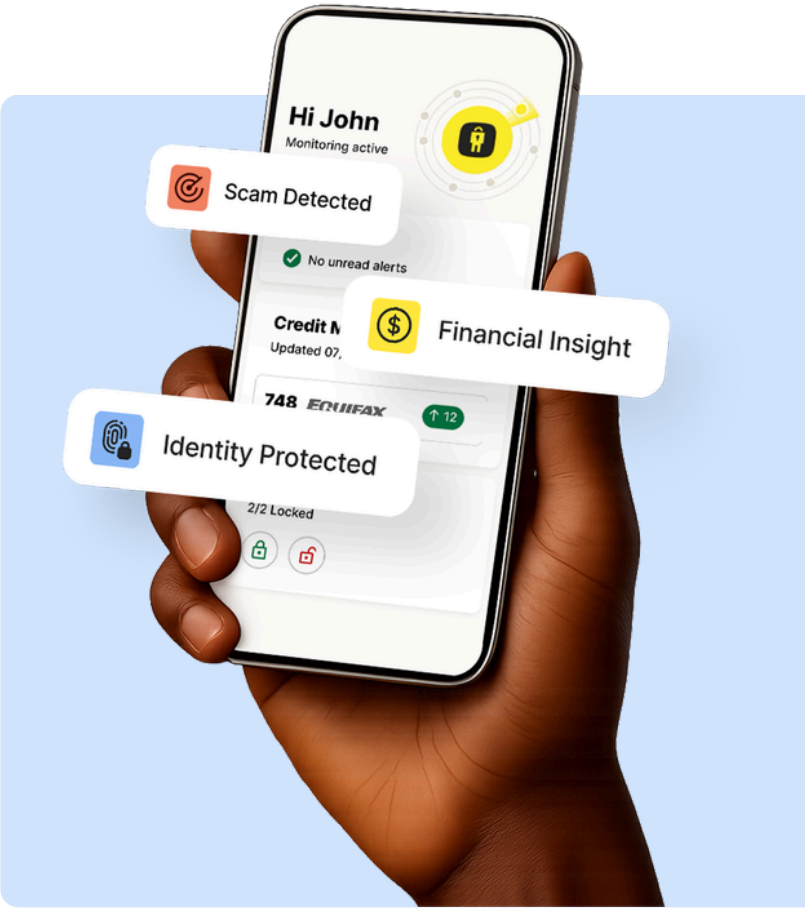
Have MetLife Dental or Vision? When you submit a covered preventive dental claim (such as a dental exam) or a Vision exam claim, MetLife will automatically identify that you're eligible for your wellness benefit and process it for you.

Norton LifeLock Identity Theft Protection

norton™
LifeLock Benefit Solutions

Take Back Control of Your Identity

Your personal data is everywhere— from doctor's offices to mobile apps. Norton LifeLock Benefit Plans help prevent fraud, block scams, monitor activity, and strengthen your financial wellbeing.



Get Protection Now

Protect Your Well-Being from Every Angle

Fraud Detection
Monitor identity and finances to detect identity fraud early.

Identity Restoration
Get peace of mind with expert help if your identity is compromised.

Threat Prevention
Block scams and cyber threats to protect your data and devices.

Enhanced Privacy
Remove your personal details from data broker sites and enjoy a safer, more private internet experience.

Financial Insights
Gain financial insights into your credit, spending, and income.

Scam Detection
Built-in AI assistant helps you navigate suspicious websites and SMS messages, and offers advice if you think you're being scammed.

Already a member?
Don't forget to cancel your existing membership just prior to your benefit effective date by calling **800-607-9174.**

Norton LifeLock Identity Theft Protection

norton™ LifeLock Benefit Solutions

Pricing Only Employees Get

Enroll Today!

Find Out More

Benefit Plans are 60% less than the retail equivalent.

www.Norton.com/BenefitPlans

You get this (and so much more)	Essential	Premier
Identity & Credit Monitoring[1] We monitor for new accounts being opened in your name and for key changes to your credit file at one or all three of the leading credit bureaus and alert you to potential fraud.	✓ 1B2	✓ 3B3
Identity Restoration Support If your identity is compromised, a US-based Identity Restoration Specialist will personally handle your case and help restore your identity.	✓	✓
Device Security w/ Secure VPN Protects your mobile devices, tablets, and computers from hackers and vulnerable websites in addition to keeping your browsing private.	✓ 3 devices family gets 6	✓ 5 devices family gets 10
Genie Scam Detection AI-powered alerts help detect and navigate suspicious texts, emails, and calls in real time. Offers advice if you think you're being scammed.	✓	✓
Financial + Credit Insights Empowers you with valuable insights into your finances, guiding you on the path to greater, more insightful, financial well-being.	✓	✓

MetLife Employee Assistance Program

Employee Assistance Program

Professional support and guidance for everyday life

Life doesn't always go as planned. And while you can't always avoid the twists and turns, you can get help to keep moving forward.
We can help you and your family, those living at home, get professional support and guidance to make life a little easier. Our Employee Assistance Program (EAP) is available to you in addition to the benefits provided with your MetLife insurance coverage. This program provides you with easy-to-use services to help with the everyday challenges of life —at no additional cost to you.



Help is always at your fingertips.
Our mobile app makes it easy for you to access and personalize educational content important to you.
Search "TELUSHealth" on iTunes

App Store or Google Play. Log in withthe username: **metlifeeap** and password: **eap**

Expert advice for work, life, and your well-being

Theprogram's experienced counselorsprovidedthroughTELUS Health —one of the nation'spremierprovidersofEmployeeAssistanceProgramservices—cantalktoyou about anything going on in your life, including:

- **Family:** Going through a divorce, caring for an elderly family member, returning to work after having a baby
- **Work:** Job relocation, building relationships with co-workers and managers, navigating through reorganization
- **Money:** Budgeting, financial guidance, retirement planning, buying or selling a home, tax issues
- **Legal Services:** Issues relating to civil, personal and family law, financial matters, real estate and estate planning
- **Identity Theft Recovery:** ID theft prevention tips and help from a financial counselor if you are victimized
- **Health:** Coping with anxiety or depression, getting the proper amount of sleep, how to kick a bad habit like smoking
- **Everyday Life:** Moving and adjusting to a new community, grieving over the loss of a loved one, military family matters, training a new pet

Convenient and confidential help when you want it, how you want it

Your program includes up to 5phone or video consultations per issue with licensed counselors for you and your eligible household members per year. You can call 1-888-319-7819 to speak with a counselor or schedule an appointment, 24/7/365.
When you call,just select "Employee Assistance Program" when prompted.You'll be connected to a counselor.

If you're simply looking for information, the program offers easy to use educational tools and resources, online and through a mobile app. There is a chat feature so you can talk with a consultant to guide you to the information you are looking for or help you schedule an appointment with a counselor.
Log on to one.telushealth.com, user name: metlifeeap and password: eap

MetLife Employee Assistance Program

Answers to important questions

Are Employee Assistance Program services confidential?

Yes. Any personal information provided to TELUSHealth stays completely confidential.*

How do I get help?

Getting professional help is just a phone call away. Simply call 1-888-319-7819 to speak witha counselor or to schedule a phone or video conference appointment. These services are available 24 hours a day, 7 days a week.

When is the right time to call?

That's upto you. Counselors are here whenever you need them—whether you simply need to talk or want guidance on something you are going through.

Does the program have any limitations?

While we offer a broad range of services,we may not cover all services you may need. Your Employee Assistance Program does not provide:

- Inpatient or outpatient treatment for any medically treated illness
- Prescription drugs
- Treatment or services for intellectual disability or autism
- Counseling services beyond the number of sessions covered or requiring longer term intervention
- Services by counselors who are not TELUS Health providers
- Counseling required by law or a court, or paid for by Workers' Compensation

Does the program offer Cognitive Behavioral Therapy (CBT)?

Many TELUS Health EAP providers are trained in this type of counseling and the foundation of TELUS Health's CareNow digital programs, available through the programs website and mobile app, are built upon Cognitive Behavioral Therapy (CBT) techniques. CareNow provides instant access to a range of self-service programs developed by world leading experts, focused on behavior change in the areas of anxiety, stress, depression, and more.

When you need some support, we're here to help.



Phone
1-888-319-7819



Web
o n e. tel u sh ea lth .co m
user name:metlifeeap
and password: eap



Mobile App
user name: metlifeeap
and password: eap

*MetLife and TELUS Health abide by federal and state regulations regarding duty to warn of harm to self or others. In these instances, the consultant may have a duty to intervene and report a situation to the appropriate authority.

Some restrictions may apply to all of the above-mentioned services. Please contact your employer or MetLife for details. EAP services provided throughanagreementwithTELUSHealth.TELUSHealthisnotasubsidiaryoraffiliateofMetLife.InformationdisclosedddirectlytoTELUSHealth is not disclosed to MetLife, and therefore is not subject to MetLife's privacy policy.

Like most group benefit programs, benefit programs offered by MetLife contain certain exclusions, exceptions, waiting periods, reductions, limitations, and terms for keeping them in force. Ask your MetLife group representative for costs and complete details

MetLife

Metropolitan Life Insurance Company| 200 Park Avenue | New York, NY 10166
©2025MetLife Services andSolutions, LLC

MetLife Will Preparation Services

MetLife | Life Insurance

Will Preparation Services

Want to know more about Will Preparation Services? Find out with some FAQs.



You asked. We answered.

What are Will Preparation Services?

A. This service, offered through MetLife Legal Plans, fully covers attorney fees by a Network Attorney for preparing or updating a will, living will, or power of attorney.

Am I eligible for this service?

A. You are eligiblefor thisservice ifyou are enrolled in MetLife's Supplemental Term Life, Group Universal Life or Group Variable Universal Life coverage. As a life policyholder, your spouse/domestic partner also has access to this service.

What are the covered services?

A. Coveredservices:

- Preparing and updating wills, including complex will(s) and codicils, living will(s), power(s) of attorney for medical directives, and healthcare proxies for both you and your spouse/domestic partner.[1]
- In-person or telephone consultations with an attorney in a private and supportive environment.
- Unlimited access to prepare or update a will for as long as you continue to participate in an eligible MetLife Group Life Plan.

Advantages include:

- Convenient access to a local attorney
- Extensive network of participating plan attorneys
- Professional Client Service Center to assist you in locating an attorney

Are ancillary documents included?

A. Yes. Assistance with some ancillary documents such as all living wills, codicils, testamentary trusts, and powers of attorney are included with this service.

Exclusions: There is an additional fee associated with living trusts and tax planning needs. The participating plan attorney can provide guidance on living trusts and how to approach tax issues related to a will. The attorney will provide a written fee statement detailing any associated costs in advance of providing these services.

Are there additional fees charged to my plan[2]?

A. No. Covered services are available at no additional cost to you with your MetLife Group Life Plan. When you use a network attorney there are no claim forms or co-payments to file — fees are included in your plan and the attorney handles all the paperwork. If you ask the attorney to provide additional work that is not fully covered under this service, the attorney will provide a written fee statement detailing any associated costs in advance of providing the service.

Is there a limit to how often I can update my will?

A. No. As long as you are an active participant inaqualifying MetLife Group Plan, you can meet with a participating plan attorney as often as you deem necessary to keep your will up to date.

MetLife Pet Insurance

This benefit is not administered by eCapital. Our partnership with MetLife gives you access to MetLife Pet Insurance. If you choose to enroll in this benefit, you must provide payment by linking your personal bank account.

MetLife | Pet Insurance

From playtime to vet time

MetLife Pet Insurance is here for the expected and unexpected moments in your pet's life



MetLife Pet can help cover unexpected costs and routine care
Visits to the vet can be unpredictable. According to the 2022 Pet Parent Pulse Poll Findings, most pet parents are facing rising care costs to keep their pets happy and healthy, with 54% of owners worried about being able to care for their pets in the future with economic uncertainties.

MetLife Pet can help protect your pet's health and your wallet.

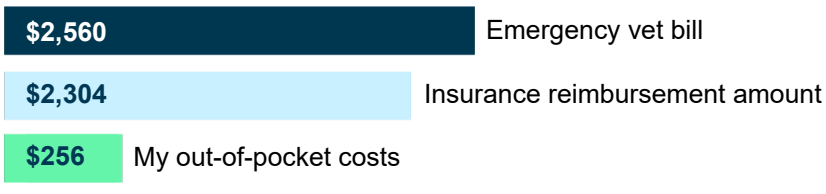
How it works

Savings example when visiting a licensed veterinarian, specialist or emergency clinic in the U.S

- *Bella, a two-year-old mixed-breed dog, needed emergency surgery after swallowing some small rocks. Bella pulled through, but not until incurring an emergency vet bill of $2,560.*

Since Bella was insured under a MetLife Pet Insurance policy, the pet parent received a 90% bill reimbursement after already meeting the deductible.

Thanks to the smart decision to enroll, the pet parent saved $2,304 in out-of-pocket vet expenses.[1]



Enroll at metlife.com/getpetquote54 or call 877-591-1021

With MetLife Pet Insurance, you can get:

- Discounts of up to 30%
- Up to 90% coverage if your pet becomes sick or injured—including exam fees
- Freedom to visit any licensed vet in the U.S.
- No breed or age exclusions
- 24/7 live chat with licensed vets—for when things come up after hours
- And more!

Plus, if you already have pet insurance, any pre-existing conditions that were covered by your previous pet insurance provider will be covered by MetLife Pet Insurance, too![*]

We offer coverage for exotic pets!**

Scan the QR code for exotic pet species and breed list.

Meritain Coverage Outside of the U.S.



Receiving Services Outside the U.S.

What if I need emergency care outside of the U.S.?

Your plan covers emergency room care outside of the country at the in-network level. If you have an urgent medical situation requiring emergency care while you're traveling, you'll have to pay out-of-pocket at the time of the service to be reimbursed later. Be sure to get a receipt in English for services rendered, including:

- Diagnosis.
- Procedure.
- Amount paid.

Then, simply file a manual claim with Meritain Health® for reimbursement. Keep in mind, expenses for health care services or supplies outside the U.S. sought for the express purpose of receiving medical treatment are not considered eligible.

Submitting a claim is easy

1. Just visit **www.meritain.com** to download and print a claim form.
2. Then, you'll need to complete the form, which should only take a couple of minutes. Be sure to fill out the entire form or it'll be sent back to you, and the processing of your claim will be delayed.
3. Attach the original invoice you received from your provider. The invoice should include:
   - The patient's name.
   - The date of service.
   - The name, address and telephone number of the provider.
   - A description of the services provided.
   - The amount paid.
4. Mail the completed form and original invoice to the address on the back of your member ID card.

Where's my check?

Allow time for your claim to be processed and your reimbursement check to be mailed to you. In the meantime, you can check your claim status online at **www.meritain.com**.

Additional questions?

Just call Meritain Health Customer Service at the number located on your ID card.

Simple. Transparent. Versatile.
At Meritain Health®, we're creating unrivaled connections.

Follow us: @meritainhealth | Meritain Health

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Meritain Health®
an aetna company

HUSK Wellness
Gym & Fitness Savings

HUSK Pareto Health

HUSK GYM & FITNESS CENTER NETWORK

HUSK Marketplace members can access exclusive savings and flexible membership options to a variety of facilities. From national chains to specialty studios, HUSK has something for every workout.

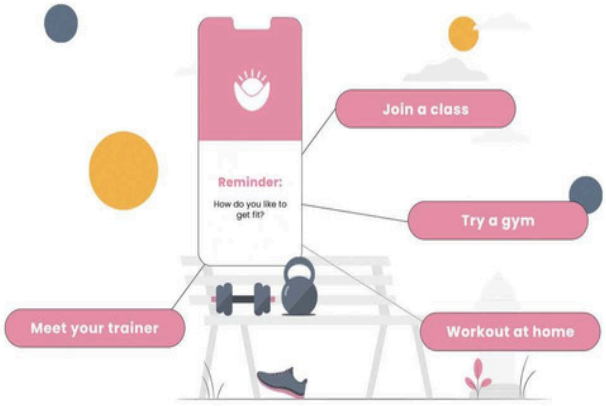


Get access to best-in-class pricing at gyms like:

- Planet Fitness
- Anytime Fitness
- Club Fit
- And More!

Search by zip code, facility type, or available amenities in the HUSK Marketplace Portal to find a gym near you!

HUSK VIRTUAL SUBSCRIPTIONS



Take advantage of all the benefits of group exercise classes in the comfort of your own home. HUSK's streaming membership options will take your wellness and workouts to the next level.

HUSK is your hub for flexible wellness, with on demand offerings like:

- FIT4MOM
- Honor Yoga
- Trainwell
- lok
- Physique 57

Please visit **https://marketplace.huskwellness.com/paretohealth** to register for your account.

Use the code **P3555** to register.

HUSK Wellness
Registered Dietitians

HUSK | ParetoHealth



Our health philosophy revolves around a patient-centric care model. Our goal is to put the patient first, understand their values, and respect their preferences or desired outcomes, while giving the space for our Licensed Registered Dietitians to customize a nutrition plan specifically designed for a patient's health goals and lean on their vast clinical and wellness experience.

By pairing employees with registered dietitians as the first stop in their care journey, Husk Nutrition provides the ongoing support needed to achieve sustainable, life-changing results. Through customized, one-on-one visits, registered dietitians help employees improve the modifiable lifestyle factors that are proven to decrease the risk of chronic conditions, such as diet, exercise, and stress management.

Choose Wisely: Registered Dietitian or Nutritionist?

REQUIREMENTS	Registered Dietitian (RD)	Nutritionist
	YES	NO
Bachelor's Degree or higher in the field of nutrition from an accredited nutrition and dietetics programs	✓	–
Complete 1200-hour dietetic internship	✓	–
Pass the Commission on Dietetic Registration (CDR) exam	✓	–
Continued Education Credits	✓	–

Registered dietitians are the most qualified health care professionals to tailor safe nutrition interventions because they have a complex understanding of human physiology as it relates to nutrition and disease. They are held to strict standards in training, evidence-based practice, and continuing education, ensuring the highest quality of care and safety.

HUSK Wellness
Additional Eligible Discounts

Husk Marketplace

Achieving optimal health and wellness doesn't have to be complicated or expensive. Access exclusive best-in-class pricing with some of the biggest brands in fitness, nutrition, and wellness with HUSK Marketplace.

YOUR LANDING PAGE:

Marketplace.huskwellness.com/paretohealth

Click on Activate Benefit to register for the program and unlock your discounts and exclusive offers. Be sure to use the provided "Eligibility ID" to register.

Have questions? Reach out to our Customer Support team at customerservices@huskwellness.com or call 800-294-1500

As part of the HUSK Marketplace program, you are eligible for exclusive discounts on:



GYMS & FITNESS CENTERS

HUSK Marketplace members can access exclusive savings and flexible membership options to a variety of facilities. From national chains to specialty studios, HUSK has something for every workout.



HUSK NUTRITION

HUSK Nutrition provides evidence-based virtual health and nutrition programs. You will meet with a Registered Dietitian who will implement a complete 1-on-1 nutrition program specifically designed to answer your nutrition related questions, meet your health goals, individual needs and busy lifestyle.



HOME EQUIPMENT & TECH

Whatever your fitness level is, HUSK has exclusive equipment and wearable technology to help support you on your wellness journey. Whether you want to monitor an everyday activity or start a new fitness routine, find the best products and deals here.



ON-DEMAND FITNESS

Take advantage of all the benefits of group exercise classes in the comfort of your own home. HUSK's streaming membership options will take your wellness and workouts to the next level.



MENTAL HEALTH

We all need help sometimes. We all go through difficulties and struggles. HUSK Mental Health connects you with licensed therapists through technology. Our therapists empower you through guidance and support using evidence-based practices.

401(k) Benefits

401(k) PLAN

Invest in Your Future. We'll Help You Get There.

Our 401(k) plan is designed to help you save for the retirement you deserve with valuable tax advantages and a company match.

WHO IS ELIGIBLE?

All full-time employees age 21 or older who have satisfied their 401(k) waiting period of 6 months of service and completed at least 1 hour of service.

WHY SAVE NOW?

Social Security alone won't be enough! While certain expenses may decrease over time, others will likely increase. We are living longer, which means we will need more savings for retirement.

WHEN SHOULD YOU START SAVING?

As soon as you can! Starting down the path to saving for your retirement may be easier than you think. Your employer will deduct your contribution every time you get paid. There are two tax breaks. First, your contributions are tax-deductible. The money you contribute to your 401(k) reduces your taxable income. Second, your 401(k) money grows tax-deferred. If you save money in a savings account or brokerage account, you have to pay taxes on the interest/dividends you earn. With a 401(k), you don't pay taxes until you withdraw your funds at retirement, so your savings grow faster.

HOW MUCH IS ENOUGH?

Many people underestimate how much they'll need. Saving enough can help you maintain the lifestyle you desire. You don't want to outlast your money! Consider saving at least 12% to 17% of your pay. If you are not able to save the maximum amount, save as much as possible and plan to make increases each year. Remember, every bit counts.

HOW MUCH CAN I CONTRIBUTE?

You can contribute 1% to 100% of your eligible compensation, inclusive of pretax and/or Roth deferrals.

2026 IRS CONTRIBUTION LIMITS

Elective Deferral Limit
$24,500

Age 50 and Over Catch-Up Limit
$8,000

Super Catch-Up
For employees between the ages of 60–63 at the end of the 2026 calendar year
$11,250
($3,250 additional)

For "High Earners", whose 2025 Social Security taxable wages exceeded **$150,000**, all catch-up amounts – including Super Catch-Up contributions – **MUST** be made on a **Roth (after-tax)** basis starting in 2026.

EMPLOYER MATCH

Safe Harbor Employer Matching Contribution – 100% up to 5% of eligible compensation.

VESTING

You are 100% vested immediately in your Employee Contributions and the Safe Harbor Match.

ACCESS YOUR ACCOUNT

Log in to your account to view your balance, investment options, and more.

Visit: www.empowermyretirement.com

Call: 1-855-756-4738

EMPOWER

For retirement-related questions, please contact our advisor at CGI Wealth Management:

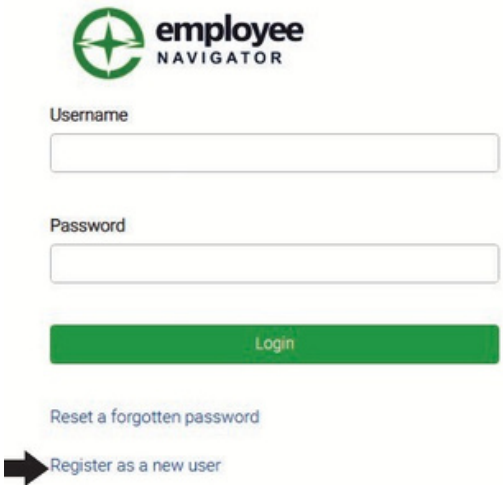
rmclaughlin@cgiwm.com

603-232-9317

Employee Navigator: How to Enroll in Benefits

First time logging into Employee Navigator? Register as a New User to get started!

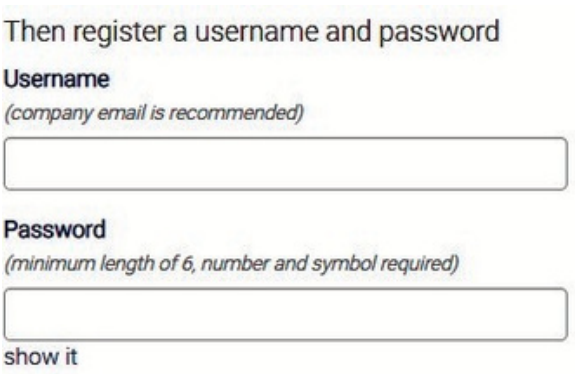
1 Visit https://www.employeenavigator.com/benefits/Account/Login and click 'Register as a new user'



2 Create your Account by completing the information below. Our Company Identifier is '***eCapital***'



3 Complete your registration by creating a Username and Password.



You are ready to enroll

Employee Navigator: How to Enroll in Benefits

To begin enrolling visit

https://www.employeenavigator.com/benefits/Account/Login

From here, you will need to click login in the top right corner. Use the credentials you created with the registration email to login.

Step 1

Begin enrolling by click the ***Start Enrollment*** button on the right side of the home page banner. You are now in the enrollment site. The first step is to confirm the personal data. Once you have reviewed/corrected all the data on this screen. Click ***Save & Continue***

Step 2

Next you will need to confirm your address. Please note: entering and verifying an address is required to complete the enrollment. Once done, click ***Save & Continue***

Step 3

Now you will be asked to enter any dependents you have that you will be enrolling in benefits.

To add, click on add dependent + Please note, the SSN is required to enroll in the benefits.

One you have completed entering all of the dependents that will be added to your plans,

Click ***Save & Continue***

- You will now begin enrolling starting with your medical plan offerings.
- Select the dependents that you would like covered by clicking on the radio buttons beside there names.
- After that, scroll down and select a plan you will be electing, and then click ***Save & Continue***
- If you do not wish to elect a particular benefit, select ***Don't want this benefit?*** then click ***Save & Continue*** It will then request that you enter a reason for declining that benefit.
- Once you have moved past this that benefit, you will be taken to the next plan offering. You are required to take a decision on all plans or you will not be able to complete the enrollment.
- Once you have completed all of your elections, you will be taken to the Enrollment Summary page. On this page, you can review what you have elected as well as see your total cost per pay period. You will also be able to print the summary.
- The complete your enrollment and make you benefits active, click ***Click to Sign*** to electronically sign your form.

You have successfully completed your enrollment.

Contacts

Benefit	Provider	Phone	Website/E-Mail
Medical	Meritain-Aetna	(800) 925-2272	Meritain - Find a Doc
Prescription Drugs —SmithRX	SmithRX	(844) 454-5201	www.smithrx.com/portal
Amazon Pharmacy	Amazon Pharmacy	(855) 745-5725	www.pharmacy.amazon.com/
Mark Cuban-SmithRX	Mark Cuban Cost Plus Drugs	Contact Cost Plus Drugs	www.costplusdrugs.com
Virtual Healthcare Concierge	EVO Health	(855) 636-3669	www.care.evohealth.com
Medical- Valenz (KISX)	Valenz (KISx Card)	(877) 438-5479	www.getkisx.com
Medical-Rightway	Rightway	(305) 851-7310	www.joinrightway.com
Husk Wellness Program: Gym Membership Nutritional Wellness	Husk	(800) 294-1500	www.marketplace.huskwellness.com
Dental / Vision / Critical Illness / Life Insurance / Vol Life / STD / LTD /Accident / Hospital Indemnity	MetLife	(800) 627-4200	www.identity.metlife.com
Health Care FSA, Dependent Care FSA, Limited Purpose FSA & HSA	Optum Bank	(800) 234-8913	www.optumbank.com
Employee Assistance Program (EAP)	MetLife	(888) 319-7819	www.one.telushealth.com
IdentityTheftProtection	LifeLock	(800) LifeLock	www.lifelock.norton.com
Ryan McLaughlin - 401(k)	CGI Wealth Management	(855) 756-4738 (603) 232-9317	www.empowermyretirement.com rmclaughlin@cgiwm.com
Alisa Monday Sr. Benefits Administrator	eCapital	(786) 288-3530	Alisa.Monday@ecapital.com
eCapital Benefits E-Mail	eCapital		benefitsus@ecapital.com
TJ North - Benefits Consultant	All Atlantic Benefits	(305) 701-1076	tjn@allatlanticbenefits.com
Haydee Millan-Feliz Sr. Account Manager	All Atlantic Benefits	(305) 809-8074	haydeem@allatlanticbenefits.com
Jacqueline Francois Jr. Account Manager	All Atlantic Benefits	(954) 361-9164	jacquelinef@allatlanticbenefits.com

Questions?

Alisa Monday | Sr. Benefits Administrator
alisa.monday@ecapital.com
benefitsus@ecapital.com

TJ North | Benefits Consultant
tjn@allatlanticbenefits.com

Haydee Millan-Feliz | Sr. Account Manager
haydeem@allatlanticbenefits.com

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