



2025-2026 Employee Benefits Guide

Plan Year: October 1, 2025 – September 30, 2026



WELCOME

Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family, and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully along with any supplemental materials you may receive.

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If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please see page 23 for more details.

ELIGIBILITY

Eligible Employees

You may enroll in the MYcroSchool Employee Benefits Program if you are an employee working 30 or more hours per week. You will be eligible for medical, dental, and vision benefits on the 1st day of the month following 30 days of employment.

Eligible Dependents

- Legal spouse
- Domestic Partner
- Natural, adopted, foster or stepchild(ren) up to age 26
- Child(ren) for whom court appointed or legal guardianship has been awarded

A disabled dependent child may continue coverage beyond the age limit, proof of disability is required.

Notify HR if your dependent child no longer meets the eligibility requirements under the plan(s).

Open Enrollment:

During this time, you will be able to enroll in new benefits or change your current elections as well as add or remove dependents. All benefit elections made at this time will become effective October 1ST.

When Coverage Begins:

For new hires, you must complete the enrollment process by the 1st day of the month following one-month of full-time employment. If you enroll on time, coverage is effective the 1st of the month following 30 days after your date of hire.

If you fail to enroll on time, you will NOT have benefits coverage until the next enrollment date or you experience a qualifying event.

When Coverage Ends:

Your benefit elections will stay in effect until September 30, 2026. Should your employment terminate, or your work status change, making you ineligible for benefits, your benefits will terminate on the day of termination.

Qualifying Life Events

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, domestic partner, or child
- Loss of coverage under your spouse's or domestic partner's plan
- Eligible for state coverage under Medicaid or CHIP

Making Changes

To make changes to your benefit elections, you must contact Human Resources within 30 days of the qualified life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate, or divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.



BENEFIT RESOURCE CENTER



Need additional help choosing a plan? Have questions about your benefit plans or policy questions? Do you need to talk about an issue with one of the insurance vendors? Call the BRC!

Our Benefits Specialists can help you choose the right plan for you and your family, translate confusing jargon, answer questions about which benefits are on your plan and which aren't, work directly with insurance carriers to resolve tricky issues regarding claims and denials of service—and more!

**Benefit specialists are available
Monday-Friday 8am-5pm EST & CST**

BRCSouth@usi.com | Toll Free: 855-874-0835

FREE MOBILE BENEFITS APP

The MyBenefits2GO app gives you on-the-go access to benefit and insurance policy details, Benefits Team contact information and more!

The mobile benefits app provides a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. The app also offers the ability to take photos of ID cards to store on the phone, as well as a way to easily locate carrier and HR contact information—all in one place—24/7 and on the go. The MyBenefits2GO app is free and available for iPhone and Android platforms. App benefits include:

- **Staying Organized**
The app gives you access to all benefit plan information and ID cards—all in one place.
- **Lightening Wallets**
The app allows you to take and access images of your ID cards. Images are stored on the phone itself; no personal health information is transmitted or saved.
- **Getting In Touch**
The app provides you with a single location to find contact information for your Human Resources team

and the Benefit Resource Center as well as insurance carriers.

Check Out the App

Download the mobile app to your smartphone. Scroll through the intro pages and, when prompted, enter the code **L91881** to see your plan information.



**SCAN TO
DOWNLOAD!**



When prompted,
enter code:
L91881



EMPLOYEE NAVIGATOR

Login to: www.employeenavigator.com

Company Identifier: MYcroSchool

Once you've logged in, click the green **Start Enrollment** button on the right-hand side of the screen to begin enrollment! Be sure to add your dependents when prompted – this will adjust your benefit offerings accordingly. For example, if you have a spouse in the system, it will show coverage options for both employee only and employee + spouse. You'll click the green **Save & Continue** button at the bottom of each page or if you don't want a specific benefit, you'll click the blue **Don't Want this Benefit** button. There is a running per pay period total on the top right corner. Don't forget to click the green **Sign and Acknowledge** button on the last page when you're finished to save your changes or new elections!

IF YOU HAVE ALREADY REGISTERED ON EMPLOYEE NAVIGATOR, go to:

<https://www.employeenavigator.com> and click on the login button in the top right corner.

If you do not remember your login credentials, click the login button then select "Forgot Password" and follow the instructions in the email you receive.

IF YOU ARE NEW TO EMPLOYEE NAVIGATOR, go to:

<https://www.employeenavigator.com/benefits/Account/Register>

1. You will need some personal information to create your account; complete the fields noted below, using the Company Identifier
2. Click "Next"

Tips: Use your formal name (hyphenated last names, formal and complete first names, not nicknames or shortened versions).

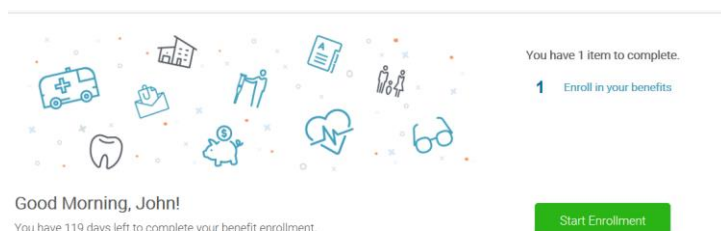


EMPLOYEE NAVIGATOR

You will then be asked to create a username and password. Please make your password something you will remember but private as *this site will contain confidential employee information.*

Once you have created your login, you will be taken through a wizard that will help navigate you through the enrollment process.

The first thing you will see is the welcome screen, example shown below. You will click the **“Start Enrollment”** Icon:



Create Your Account

First, let's find your company record

First Name

Last Name

Company Identifier
(provided by HRF)

PIN
(Last 4 Digits of SSN / ID)

Birth Date

Next you will see a page to welcome you to your enrollment process. Click **“Get Started”**.

Complete any missing data on the first page where you will see your employee information. Be sure to click this button at the bottom of the screen if you have made any changes.

If you do not have any changes, click **“Save”** to go to the next screen which is **“Dependent Information”** and add your dependents there. Be sure to click the **“Save & Continue”** button once you are done adding dependents. If you do not have dependents to add, click **“Save”**.

For the next few pages, you will see the different benefits options offered to you. Simply complete the information to enroll or waive coverage you wish to elect for you and your dependents.

Who am I enrolling? *You will need to select your dependents on each line of coverage you are enrolling them on.*

Which plan do I want? (if you have more than one to choose from).

You can also click on the **“Compare”** icon to show the plan(s) and cost for all tier levels. Or select the **“Details”** icon to provide a brief benefits overview.

You will do this the same for each line of coverage available to you during this enrollment process.

If you need to go back during any step of the enrollment process, click on the **“View Steps”** under the progress bar and a drop down will appear. Simply click on that benefit to go that screen.

At the end, you will be able to view all elections and the cost for each line and you can print a copy for your records. If you have missed any steps, you will be notified which items need to be completed.

Be sure to always select **“SAVE & CONTINUE”** for any modifications that you make.

Once you have made elections for all benefits, you will ask to electronically sign, and you will click the **“Click here to sign”** button which will complete your enrollment process! Please save a copy of your elections for your records.



KEY TERMS

Open Enrollment is the time of year reserved for you to make changes to your benefit elections, and unfamiliar terms can make this process confusing. Definitions for common benefits terms are listed below. If you would like to learn more about health insurance terminology — please go to the following website: www.HealthCare.gov/glossary.

Coinsurance — The amount or percentage that you pay for certain covered health care services under your health plan. This is typically the amount paid after a deductible is met and can vary based on the plan design. For example, if your plan has a coinsurance requirement of 20% and a health service costs \$100, your health insurance would pay \$80, and you would pay the remaining \$20 if you had reached your deductible.

Copayment — A flat fee that you pay toward the cost of covered medical services. You usually pay a copay when services are rendered. The amount may change for different types of care. For example, you might pay \$15 when you go in for a doctor's visit and \$200 when you go to the emergency room.

Deductible — A specific dollar amount you pay out-of-pocket before benefits are available through a health plan. Under some plans, the deductible is waived for certain services. For example, if your deductible is \$1,000, your plan won't pay anything until you've paid \$1,000 for health care services covered by your health plan. After that, your health insurance plan will pay for services.

Out-of-Pocket Maximum (OOPM) — The highest out-of-pocket amount paid for covered services during a benefit period (typically a year.). After you reach this limit, your health insurance plan will pay 100% of the allowed costs for services covered by your health plan. For example, if your plan's out-of-pocket limit is \$5,000, once you have paid \$5,000 of your own money in deductibles, copays, and coinsurance (all added together), you won't have to pay any more health insurance costs in the year. Your premium, costs for health services that your plan doesn't cover, and certain other costs don't count toward the out-of-pocket. Different health insurance plans count different things toward the out-of-pocket limit, and they may differ for in network and out of network benefits so be sure you understand your plan's rules.

Preventive Services — Routine health care that includes check-ups, tests, and counseling to prevent illnesses, disease, and other health problems. Preventive care is intended to prevent disease or to identify disease while it is more easily treatable. These services are typically covered at 100% if you receive care in-network. You can find a full schedule of Preventive Services on your member portal.

Primary Care Physician (PCP) — A general doctor who you go to for treatment of common illnesses and routine care like check-ups and shots. This doctor also helps you decide if you need to go to the hospital or get specialized treatment, this generally includes family practice physicians, general practitioners, internists, pediatricians, etc. A PCP may need to be selected to coordinate treatment under your health plan.

MEDICAL

MYcroSchool's health coverage through Florida Blue helps you maintain your well-being through preventative care and access to an extensive network of providers, as well as affordable prescription medication.

| | BlueOptions 05190/05191 PPO - HSA | | BlueCare 60 HMO |
|--------------------------------------|---|---|---|
| | In-Network | Out-of-Network | In-Network Only |
| Annual Deductible | | | |
| Individual | \$1,650 | \$3,300 | \$500 |
| Family | \$3,300 | \$6,600 | \$1,000 |
| Coinsurance (Member Pays) | 20% | 40% | 10% |
| Maximum Out-of-Pocket | | | |
| Individual | \$4,800 / \$7,050 | \$9,600 / \$18,400 | \$3,500 |
| Family | \$9,200 | \$18,400 | \$7,000 |
| Office Visits | | | |
| Primary Care | 20% after deductible | 40% after deductible | \$25 copay |
| Specialty Care | 20% after deductible | 40% after deductible | \$45 copay |
| Preventive Care | | | |
| Adult Periodic Exams | 100% Covered | 40% coinsurance | 100% Covered |
| Well-Child Visits | 100% Covered | 40% coinsurance | 100% Covered |
| Diagnostic Services | | | |
| Designated Network Lab | 100% after deductible | 40% after deductible | 100% Covered |
| X-ray | 20% after deductible | 40% after deductible | \$45 copay |
| Designated Network Complex Radiology | 20% after deductible | 40% after deductible | Physician Office: \$125 copay Testing Center: \$80 copay |
| Other Services | | | |
| Urgent Care Facility | 20% after deductible | 20% after deductible | \$45 copay |
| Emergency Room Facility Charges | 20% after deductible | 20% after deductible | \$100 copay |
| Inpatient Facility Charges | 20% after deductible | \$500 PAD + 40% after deductible | \$325 copay per day up to \$1,625 maximum |
| Outpatient Facility Charges | 20% after deductible | 40% after deductible | \$275 copay |
| Prescription Drugs | | | |
| Retail (30-day supply) | | | |
| Generic / Preferred / Non-Preferred | Deductible + \$10 / \$50 / \$80 copay | In-Network Deductible + 50% coinsurance | \$10 / \$50 / \$80 copay |
| Specialty | Deductible + \$250 copay | In-Network Deductible + 50% coinsurance | \$250 copay |
| Mail Order (90-day supply) | Deductible + \$25 / \$125 / \$200 copay | Not Covered | \$25 / \$125 / \$200 copay Specialty Not Covered |

PAD: Per Admission Deductible

Semi-Monthly Payroll Deductions (24)

| Coverage Level | BlueOptions 05190/05191 PPO - HSA | BlueCare 60 HMO |
|-----------------------|--------------------------------------|--------------------|
| Employee | \$7.50 | \$37.02 |
| Employee & Spouse | \$192.24 | \$238.15 |
| Employee & Child(ren) | \$97.24 | \$121.68 |
| Family | \$409.26 | \$512.33 |

PRESCRIPTION DISCOUNTS



MYcroSchool is always looking to protect its employees' pockets when it can. Take a look at the various pharmacy discounts available to you simply for being a consumer. You do not need to be a member of the medical plan in order to participate in any of these programs. For more information, please visit the websites below and keep in mind that certain restrictions will apply.

\$4 Prescriptions

Save big on 30-day generic medications for only \$4 & spend just \$10 on 90-day prescriptions. No insurance necessary.



Find your medication list at:

<https://www.walmart.com/cp/4-prescriptions/1078664>



Mark Cuban's CostPlus aims to offer the public low-cost generic drugs at a low price, no middleman (PBMs). Simple look up your medication, have your doctor send in the prescription and CostPlus will mail it to you.

To look up your medication, visit their website at www.costplusdrugs.com








Get a GoodRx Prescription Discount Card for free! Use the card for discounts of up to 80% on most prescription drugs at over 70,000 U.S. pharmacies. Get discounts for every member of your family, including pets! No expiration. No fees or obligations. No credit card required. GoodRx is not insurance. Savings based on pharmacy retail price.

GoodRx is 100% free. No registration required. Visit their website at www.goodrx.com or download their app.

KNOW WHERE TO GO

With so many options for getting care, how do you know where to go?

This chart can help you understand your best options for seeking appropriate medical treatment and how you can save money while still receiving the care you need.

| Where to Get Care | What it is | Type of Care | Cost |
|--|--|---|---|
|  Virtual Visit | A virtual visit lets you see a doctor via your smartphone, tablet, or computer. | <ul style="list-style-type: none"> • Allergies • Bladder infections • Bronchitis • Cough/colds • Diarrhea • Fever | <ul style="list-style-type: none"> • Pink eye • Rashes • Seasonal flu • Sinus problems • Sore throats • Stomachaches \$ |
|  Convenience Care Clinics | Visit a convenience care clinic when you can't see your doctor and your health issue isn't urgent. The clinics are often in stores. | <ul style="list-style-type: none"> • Common infections • Minor skin conditions • Vaccinations • Pregnancy tests • Minor injuries • Earaches | \$\$ |
|  Primary Care Physician | Go to a doctor's office when you need preventive or routine care. Your primary doctor can access your medical records, manage your medications and refer you to a specialist, if needed. | <ul style="list-style-type: none"> • Checkups • Preventive services • Vaccinations • General health management | \$\$ |
|  Urgent Care | Urgent care is ideal for when you need care quickly, but it is not an emergency (and your doctor isn't available). Urgent care centers treat issues that aren't life threatening. | <ul style="list-style-type: none"> • Sprains/strains • Small cuts that may need a few stitches | <ul style="list-style-type: none"> • Minor burns, infections, or broken bones \$\$\$ |
|  Emergency Room | The ER is for life-threatening or very serious conditions that require immediate care. This is also when to call 911. | <ul style="list-style-type: none"> • Heavy bleeding • Large open wounds • Sudden change in vision • Chest pain • Sudden weakness or trouble talking | <ul style="list-style-type: none"> • Major burns • Spinal injuries • Severe head injury • Breathing difficulty • Major broken bones \$\$\$\$ |

HEALTH SAVINGS ACCOUNT (HSA)

HSA

The HSA plans are IRS-qualified High-Deductible Health Plans (HDHP) and work similarly to the other plan types.

- **PPO HSA (BlueOptions 05190/05191):** you may seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider that is in-network.
- Both plans pay the full cost of qualified in-network preventive health care services.
- You pay the full cost of non-preventive services until you meet the annual deductible.
- Once you meet the deductible, you pay a percentage (coinsurance), and the plan pays the rest.
- Once your deductible and coinsurance add up to the out-of-pocket maximum, the plan pays the full cost of qualified health care services for the remainder of the plan year.

HEALTH SAVINGS ACCOUNTS

If you met certain criteria, enrollment in a HDHP qualifies you to open and use a health savings account (HSA). An HSA lets you set aside pre-tax dollars to help offset your annual deductible and pay for qualified health care expenses.

- You contribute funds to the HSA and deduct these contributions on your taxes, so they become tax-free.
- You can withdraw HSA funds tax-free to pay for current qualified health care expenses, or save them for the future, are also tax-free.
- Unused funds roll over year to year and go with you if you change medical plans or leave your employer.

| HSA Tier | 2025 Limit | 2026 Limit |
|---|------------|------------|
| Employee Only | \$4,300 | \$4,400 |
| Family | \$8,550 | \$8,750 |
| Annual Catch-up Contribution (age 55+ only) | \$1,000 | |



DENTAL

Good dental hygiene has substantial impact on your overall health. Prevent both oral conditions and other diseases through regular preventive dental care.

MYcroSchool's eligible employees can enroll in the dental plan administered by Guardian. This plan gives you the freedom to access dental care from any licensed dentist, however your costs are usually lowest when you see a dentist in the network. Please review our summary of benefits for out-of-network coverage.



Visit www.guardianlife.com to find a list of dentists in your area.

| | Low Plan | High Plan |
|--|------------------------|------------------------|
| | <i>In-Network</i> | <i>In-Network</i> |
| Annual Deductible | | |
| Individual | \$50 | \$50 |
| Family | \$150 | \$150 |
| In-Network Dental Benefits | | |
| Annual Maximum | \$2,000 | \$2,500 |
| Type I: Preventive Services (deductible waived) Exams, Cleanings, X-Rays, Fluoride | 100% covered | 100% covered |
| Type II: Basic Services Fillings, Extractions, Periodontics, Endodontics, General Anesthesia | 80% after deductible | 90% after deductible |
| Type III: Major Services Crowns, Bridges, Dentures, Inlays, Onlays | 50% after deductible | 60% after deductible |
| Orthodontia Services Children to age 19 only | 50% to \$1,000 maximum | 50% to \$1,000 maximum |

| Semi-Monthly Payroll Deductions | | |
|--|----------|-----------|
| Coverage Level | Low Plan | High Plan |
| Employee | \$2.59 | \$11.64 |
| Employee & Spouse | \$5.58 | \$25.86 |
| Employee & Child(ren) | \$4.08 | \$23.38 |
| Family | \$11.62 | \$43.97 |

VISION

Eligible employees can enroll in vision insurance provided through Guardian utilizing the VSP network. The plan allows you to improve your health through a routine eye exam while saving you money on your eye care purchases. The vision plan gives you the freedom to access vision care from any licensed vision provider, however your costs are usually lowest when you see a provider in the network.



Visit www.vsp.com to find a list of providers in your area.

| | VSP In-Network Benefits | Out-of-Network Benefits |
|--|---|---|
| Benefit Frequency | | |
| Exams | Once every 12 months | |
| Lenses/Contacts | Once every 12 months | |
| Frames | Once every 24 months | |
| Benefit Coverage | | |
| Exams | \$10 copay | Up to \$39 |
| Lenses (Single, Bifocal, Trifocal, Lenticular) | 100% covered after \$10 copay | Up to \$23 / \$37 / \$49 / \$64 |
| Frames | Up to \$130 + 20% off remaining balance Costco, Walmart, Sam's Club: Up to \$70 | Up to \$46 Costco, Walmart, Sam's Club: Not Covered |
| Contacts (in lieu of frames) | Elective: Up to \$130 Medically Necessary: 100% covered after \$10 copay | Elective: Up to \$100 Medically Necessary: Up to \$210 |

| Semi-Monthly Payroll Deductions | |
|--|--------|
| Coverage Level | Vision |
| Employee | \$0.81 |
| Employee & Spouse | \$2.37 |
| Employee & Child(ren) | \$1.96 |
| Family | \$4.09 |

BASIC LIFE AND AD&D

MYcroSchool provides Basic Life and Accidental Death & Dismemberment benefits to eligible employees. If something happens to you, life insurance can help your family reduce financial stress. This benefit provided by your employer at no cost to you.

The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

Important Reminder!

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes.

Basic Life and AD&D

| | |
|---|--|
| Employee Benefit | \$75,000 |
| Accidental Death and Dismemberment | Your Basic Life coverage includes Accidental Death and Dismemberment coverage. |
| Age Reduction Schedule | Age 65: 65% Age 70: 50% |

VOLUNTARY LIFE AND AD&D

In addition to the employer-paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life insurance to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to medical questions and evidence of insurability.

Your contributions will depend on your age and the amount of coverage you elect.

Voluntary Life and AD&D

| | |
|---|--|
| Employee Benefit | Increments of \$10,000 to \$500,000 |
| Spouse Benefit <i>*Benefit terminates at age 70</i> | Increments of \$5,000 to \$200,000 <i>Not to exceed 100% of Employee's amount</i> |
| Child Benefit | \$10,000 <i>Not to exceed 100% of Employee's amount</i> |
| Guarantee Issue | Employee: \$150,000 Spouse: \$30,000 Child: \$10,000 |

| Rates | |
|-----------------|------------------|
| Age | Rate per \$1,000 |
| Under 30 | \$0.082 |
| 30-34 | \$0.102 |
| 35-39 | \$0.112 |
| 40-44 | \$0.152 |
| 45-49 | \$0.242 |
| 50-54 | \$0.392 |
| 55-59 | \$0.672 |
| 60-64 | \$1.032 |
| 65-69 | \$1.722 |
| 70+ | \$2.722 |

VOLUNTARY SHORT-TERM DISABILITY

MYcroSchool offers both short-term and long-term disability options through Guardian. Disability insurance covers a part of your income, so you can pay your bills if you're injured or sick and can't work. Disability may be more common than you might realize, and people can be unable to work for all sorts of different reasons. **This benefit is 100% Employee-Paid.**

Short-Term Disability

| | |
|---|---|
| Coverage Amount | 60% of your total weekly earnings up to \$1,500 |
| Maximum Payment Period: Maximum length of time you can receive disability benefits | Up to 13 weeks |
| Accident Benefits Begin | Day 8 |
| Illness Benefits Begin | Day 8 |

VOLUNTARY LONG-TERM DISABILITY

If you are unable to work because of a covered disability, long-term disability insurance replaces a portion of your income. After your claim is approved, you will receive a monthly check for your benefits that helps pay your everyday expenses like your mortgage, rent, or childcare and groceries. **This benefit is 100% Employee-Paid.**

Long-Term Disability

| | |
|---|--|
| Coverage Amount | 60% of your monthly earnings up to \$7,500 |
| Maximum Payment Period: Maximum length of time you can receive disability benefits | Social Security Normal Retirement Age |
| Benefits Begin: The length of time you must be disabled before benefits begin. | Day 91 |



VOLUNTARY PRODUCTS

Accident

Accident Insurance provides cash benefits directly to you (unless otherwise assigned) that help with out-of-pocket expense – medical and nonmedical – associated with treatment in the event of a covered accident. Coverage is also available for your spouse and/or child(ren).

Benefits Include (but are not limited to):

- Ambulance (\$200 for ground or \$1,000 for air)
- Hospital Admission (\$1,000)
- ICU Admission (\$2,000)
- Major Diagnostic Exams (\$200)
- Coma (\$10,000)
- Concussion (\$200)
- Accidental Death (\$50,000 for employee)
- Wellness Benefit (\$50 per insured, per year)

| Accident Monthly Rates | |
|------------------------|---------|
| Employee Only | \$11.93 |
| Employee & Spouse | \$20.08 |
| Employee & Child (ren) | \$22.33 |
| Family | \$30.48 |

Hospital Indemnity

Hospital Indemnity Insurance provides cash benefits directly to you (unless otherwise assigned) that help pay for some of the costs – medical and nonmedical – associated with a covered hospital stay due to a sickness or accidental injury. Coverage is also available for your spouse and/or child(ren).

Benefits Include:

- Hospital/ICU Admission (\$1,000 per admission)
- Hospital/ICU Confinement (\$200 per day)

| Hospital Indemnity Monthly Rates | |
|----------------------------------|---------|
| Employee Only | \$16.41 |
| Employee & Spouse | \$35.03 |
| Employee & Child (ren) | \$25.73 |
| Family | \$46.34 |

Critical Illness

Critical Illness Insurance pays benefits directly to you (unless otherwise assigned) if you or a loved one is diagnosed with a Critical Illness. Employees can elect a \$20,000 benefit amount and spouse coverage is also available at a \$10,000 benefit amount. Covered illnesses include, but are not limited to heart attack, stroke, heart failure, cancer, organ failure, and kidney failure. Please refer to your plan summary for more details on covered illnesses and their benefits.

Monthly Premiums

Employee

| Benefit Amount | <25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ |
|----------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|----------|----------|
| \$20,000 | \$10.40 | \$15.00 | \$20.20 | \$26.00 | \$35.00 | \$41.80 | \$54.20 | \$70.20 | \$95.00 | \$133.80 | \$224.60 |

Spouse

| Benefit Amount | <25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ |
|----------------|--------|--------|---------|---------|---------|---------|---------|---------|---------|---------|----------|
| \$10,000 | \$5.20 | \$7.50 | \$10.10 | \$13.00 | \$17.50 | \$20.90 | \$27.10 | \$35.10 | \$47.50 | \$66.90 | \$112.30 |

IMPORTANT CONTACTS

USI Mobile App – MyBenefits2GO

MYcroSchool, Inc. is pleased to offer on-the-go access to key benefit information through the USI Mobile App, MyBenefits2GO. Search for “MyBenefits2GO” and download the free app on your smartphone. Add your name and email then enter the code L91881 when prompted.

Have Questions? Need Help?

MYcroSchool, Inc. is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time at 855-874-0835 or via e-mail at BRCSouth@usi.com. If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Additional information regarding benefit plans can be found on enter correct source for additional benefits portfolio information for Client. Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

| BENEFITS PLAN | CARRIER | PHONE NUMBER | WEBSITE |
|--|---------------|------------------------------|--|
| Medical PPO | Florida Blue | 800-352-2583 | www.floridablue.com |
| Dental PPO | Guardian | 800-627-4200 | www.guardianlife.com |
| Vision | VSP | 877-814-8970 | www.vsp.com |
| Health Savings Account | Health Equity | 866-346-5800 | www.my.healthequity.com |
| Life and AD&D | Guardian | 800-525-4542 | www.guardianlife.com |
| Short Term Disability (STD) Long Term Disability (LTD) | Guardian | 800-268-2525 800-538-4583 | www.guardianlife.com |
| Voluntary Critical Illness Hospitalization Only Accident | Guardian | 800-541-7846 | www.guardianlife.com |
| MYcroSchool | Denise Castro | 352-586-1364 | Denise.Castro@newmycro.org |
| USI Benefit Resource Center | USI | 855-874-0835 | BRCSouth@usi.com |



Summary of Benefits and Coverage

Choosing a medical plan that is right for you is an important decision. The Summary of Benefits and Coverage (SBC) summarizes important information about your medical plan options in a standard format, helping you to compare across options.

Important

This guide is provided as a general overview of the MYcroSchool benefit plans. MYcroSchool reserves the right to change, modify, or terminate these plans at any time. Full details of the plans are contained in official plan documents that govern each plan. In case of a conflict in interpretation between this guide and the official plan documents, the official plan documents will prevail.