



2026 EMPLOYEE BENEFITS





January 2026

Chalk Mountain Family Members,

We are excited to continue to offer our enhanced benefit programs in 2026 with a focus on your health and wellness. Highlights continue to include your Personal Health Assistant at MyPHA, Jessie Garcia, who can handle all of your healthcare needs for you and your family. In addition, we have several free programs focused on assisting you with your health and welfare needs.

Details for the 2026 plan include:

- **Jessie Garcia at MyPHA:** Chalk Mountain partners with MyPHA and our Personal Health Assistant at no cost to you. Jessie is available to employees and family members, regardless of enrollment, as a dedicated Personal Health Assistant to help you make the best healthcare decisions. Jessie will provide confidential, one-on-one assistance to find the best possible care. Jessie is the first, and most important number you need to call when you speak with someone about your benefits.
- **Pathways Concierge Services:** In addition to Jessie at MyPHA, members enrolled in medical coverage will have access to Pathways Concierge Services. Your concierge will assist with locating participating providers, verifying networks, making appointments and helping you understand your costs and responsibilities under the plan. In addition, Pathways can assist members' medical providers to confirm coverage, especially under the EHN/PHCS network option.
- **Multiple network/coverage options to fit your needs:** Health Plans Inc. (HPI) will continue to administer our medical plans, and we will continue offering two Preferred Provider options (PPO) and two High-Deductible Plan (HDHP) options. We are utilizing the United Healthcare network in 2026 and continuing to offer coverage through the Employer Health Network (EHN) with PHCS. Details on what distinguishes these plan designs and networks are outlined in this guide.
- **Valenz Surgical Care:** Health plan participants will have access to a Surgical & Imaging program that provides access to FREE healthcare if you are eligible for the program. Anytime you have surgical or imaging needs, make sure you call Jessie with MyPHA, and he can assist you through the process and possibly save you money!
- **Cancer Care:** If you, or a covered dependent, are facing a cancer diagnosis you are not alone. Chalk offers additional free resources giving you access to a team of cancer experts to help guide you through your care, including assistance in finding financial and community support.
- **Teladoc Diabetes/Hypertension Support:** Chalk will continue to provide to our employees, and adult dependents, enrolled in the medical plan free support with hypertension, weight management, pre-diabetes and diabetes management. More details are included in this guide.
- **Lyric:** Not feeling well, but not sure if you should see a doctor? Lyric gives employees enrolled in the Chalk medical plan access to board certified doctors available 24/7/365 and it's free! Don't wait for something to occur, download the Lyric App today at www.getlyric.com.
- **Voya:** Chalk will continue to provide free Accident, Hospital and Critical Illness coverage through Voya to all employees enrolled in the health insurance plan. All employees have the ability to purchase additional coverage for your dependents or elect a higher level of benefit at a reduced cost as well!

The Chalk Mountain Benefits Call Center will be utilized for our benefit communication and enrollment this plan year. Benefit Counselors will be available to provide you with a detailed explanation of your entire benefits program.

Stay safe and be well!

Sincerely,

Aaron Yeager
CEO



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INTRODUCTION

ABOUT THIS BENEFIT GUIDE

The Chalk Mountain Benefits Call Center will be utilized for our benefit communication and enrollment this plan year. Benefit Counselors will be available to provide you with a detailed explanation of your entire benefits program. They will review your benefits with you on an individual, confidential basis.

Each year, we strive to offer comprehensive and competitive benefits plans to our employees. In the following pages, you will find a summary of our benefits plans beginning January 1, 2026. Please read this guidebook carefully as you prepare to make your elections for the upcoming 2026 plan year.

When you call the Chalk Mountain Benefits Call Center, if you and your dependents are not currently enrolled in any of Chalk's plans, you will need the following information and supporting documentation for your dependents: legal name, date of birth, social security number, mailing address and phone number(s).

ENROLLMENT SUPPORT

Chalk Mountain Benefits Call Center **(866) 602-9001**

Monday – Friday: 8:00am – 5:00pm (CST)

CHALK MOUNTAIN

Human Resources **(817) 473-1931**

Monday – Friday: 8:00am – 5:00pm (CST)
Email: hr@cmstx.com



Note: This Benefits Guidebook describes the highlights of Chalk Mountain Services of Texas, LLC's benefits program in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information in this guidebook. If there is any discrepancy between the descriptions of the program elements as contained in this benefits guidebook and the official plan documents, the language in the official plan documents shall prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Any and all elements of Chalk Mountain Services of Texas, LLC's benefits program may be modified in the future, at any time, to meet Internal Revenue Service rules or otherwise as decided by Chalk Mountain Services of Texas, LLC.

ELIGIBILITY

Chalk Mountain encourages the health and financial well-being of its employees by providing access to quality and affordable healthcare. Eligible full-time employees have access to Chalk Mountain's comprehensive Benefits Program. Chalk Mountain may conduct an audit requesting supporting documentation on all eligible dependents at any time during the plan year. Please thoroughly review this Benefits Guide to learn more about these options.



ELIGIBILITY



Employee Eligibility

Full-time employees who work a minimum of 30+ hours per week and are at least age 18 are eligible to participate in the benefits program, with an effective date of the first of the month following a 60-day waiting period. If an Employee has a change in employment status (ex. Part-time to Full-Time) the waiting period will apply to the date of the status change.

Please note: Once your enrollment is completed, you may not make any changes to your elections unless you have a Qualifying Life Event (QLE) or your hours worked per week drop below the minimum.



Spouse Eligibility

Employees' legal spouse or domestic partner are eligible to be added to your benefits if they meet one of the below qualifications:

- Spouse or domestic partner is not employed or
- Spouse or domestic partner is self-employed or employed but does not have access to medical coverage through their own employer

Please note: Spousal affidavit for coverage must be completed at time of enrollment.



Dependent Eligibility

Employees' legal dependent children/step-children are eligible to be added to your benefits up to age 26.

QUALIFYING LIFE EVENTS (QLE)

Other than Open Enrollment, you are able to make changes to your benefits if you experience a Qualifying Life Event (QLE). In the event of a QLE, please contact Human Resources (HR); proof of the QLE must be submitted to HR within 30 days of the QLE, in order to change current benefit elections.

Examples of QLEs include:

- A change in the number of dependents (birth, adoption, death, guardianship);
- A change in marital status (marriage, divorce, death, legal separation);
- A dependent's loss of eligibility (attainment of limiting age or change in student status);
- A change in employee's, spouse/domestic partner's, or dependents' work hours;
- A termination or commencement of employment of employee's spouse/domestic partner or eligible dependent with coverage;
- An entitlement to Medicare or Medicaid (proof must be submitted within 60 days);
- Other events as the administrator determines to be permitted or any other applicable guidelines issued by the Internal Revenue Service.

YOUR BENEFITS JOURNEY STARTS WITH MyPHA



Chalk Mountain will continue partnering with **MyPHA** in 2026, at no cost to you! All employees and family members have a dedicated Personal Health Assistant (PHA), a healthcare concierge, to help you make the best healthcare decisions for you and your family.

WHAT DOES MYPHA DO?

When you have an issue or question related to any benefits you or your family members may be enrolled in at Chalk, including medical/prescription, dental, vision, life, disability, etc., MyPHA is here to help you. All information you share with MyPHA will be confidential, and Chalk's PHA will be able to assist you with questions such as:

- Finding the highest quality, most cost effective medical providers. When you call MyPHA for a provider recommendation, you'll get a list of highly ranked doctors matched to your health needs who have experience treating patients like you.
- What are biometrics and what do they mean?
- How can I spend less for my medications?
- What are my copays and deductibles?
- Understanding medical bills
- How do I complete my wellness program requirements?
- How do I access Mobile Health?
- What is an HSA?
- And more!



HOW DO I CONTACT MYPHA?

Chalk's dedicated PHA is Jessie Garcia, and you can contact Jessie at jessie.garcia@mypha.com or **972-591-2660** from M-F 7:00 am - 7:00 pm (CST). Jessie can be reached via phone, email or text, and is bilingual (Spanish).

DO I HAVE TO CONTACT MYPHA?

It is highly recommended that all employees and spouses enrolled in one of our medical plans with HPI contact Jessie, but it is not required to do so.

Just Call Jessie!
972-591-2660

SAVE JESSIE'S
CONTACT INFORMATION





MEDICAL INSURANCE

Nobody plans on getting sick or hurt, but most people will need medical care at some point in their lives.

COPAY

If you enroll in the PPO plan, your copay is a set amount that you will pay each time you visit your Primary Care Physician (PCP) or a Specialist. Your copays do not count towards your deductible, but they do accumulate towards your OOPM.

DEDUCTIBLE

The amount of money you must pay each calendar year to cover eligible medical and prescription expenses before the Chalk plan begins sharing in your costs.

COINSURANCE

Once your deductible is met, coinsurance refers to the percentage of your medical and prescription expenses that you pay vs. the percentage that Chalk pays on your behalf. Coinsurance only applies until the individual and/or family OOPM is met.

OUT OF POCKET MAX (OOPM)

The maximum amount of money that any individual or family covered on the Chalk plan will pay during each calendar year. Your OOPM includes your deductible, copays and coinsurance.

MEDICAL PLAN COMPARISON



YOUR HEALTH PLAN OPTIONS

Chalk Mountain will continue to partner with **Health Plans Inc. (HPI)** as our health plan administrator in 2026. Chalk offers four different medical plans that include both PPO Copay Plans and High-Deductible Health Plans (HDHP). All plans will provide coverage for expenses, such as doctor's office visits, preventive care, and hospitalization. There are important differences in the plan networks. Please evaluate each option and choose the plan that makes the most sense for you and your family based on your needs and what you want to pay for coverage.



Medical plan choices include:

- **PPO Plan:** UHC Choice Plus Network
- **HDHP Plan:** UHC Choice Plus Network

- **PPO Plan:** Employers Health Network (EHN) & PHCS VDHP
- **HDHP Plan:** Employers Health Network (EHN) & PHCS VDHP



PREFERRED PROVIDER ORGANIZATION (PPO)

If you choose to enroll in the Preferred Provider Organization (PPO) plan, you will have copays when you see your PCP/Specialists, pick up prescriptions, visit an Urgent Care facility or visit the Emergency Room. All copays will accumulate towards your Out-of-Pocket Maximum (OOPM), but your deductible will need to be met through receiving other medical services, if applicable.

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)

The High Deductible Health Plan (HDHP) is different than the PPO plan in that there are no copays until your deductible is met. If you enroll in the HDHP, you are subject to meet your full deductible, then you and the plan begin sharing expenses. Your portion of the expense is the coinsurance. This also applies to prescription drugs, which are subject to the plan's deductibles with exception to a list of certain maintenance drugs that are considered preventive. Once the deductible is met, you pay a fixed fee (see table on page 12 for amounts).

The HDHP also offers a tax-savings feature called the Health Savings Account (HSA). With this account, partially funded by Chalk Mountain, you can pay for certain out-of-pocket medical expenses throughout the year.

NOTE: There is no out-of-network plan coverage with Chalk's UHC medical plans. If you choose to see an out-of-network provider, you will be subject to **100% of the cost(s)**.

When you visit your provider, be sure to have them call the number on the back of your ID card to verify benefits and eligibility!

PREVENTIVE CARE

Routine preventive care is covered by Chalk at 100% under all medical plans. Preventive care can identify potential health risks before they become real health problems. Services include, but are not limited to, annual physicals, well-child visits, immunizations and health screenings. There are maintenance medications considered as preventive that are covered at no cost on the HDHP plan. Preventive care is required under Chalk's wellness program.

NOTE: During your preventive exams, if you and your doctor discuss any diagnostic services, the visit will no longer be coded as preventive and your visit will be subject to applicable copays and/or deductibles and coinsurance.

MEDICAL PLAN COMPARISON



The PPO and HDHP plans below will be administered by Health Plans Inc. (HPI) and utilize the national **United Healthcare (UHC) Choice Plus PPO** network for Physicians and Facilities.

 United Healthcare	PPO Plan	HDHP Plan
	In-Network	In-Network
Annual Deductible	Individual: \$3,000 Family: \$6,000	Individual: \$4,000 Family: \$8,000
Annual Out-of-Pocket Maximum (Includes Annual Deductible)	Individual: \$5,000 Family: \$10,000	Individual: \$6,000 Family: \$12,000
You Pay		
Preventive Care	Covered by plan at 100%; deductible waived	Covered by plan at 100%; deductible waived
Primary Care Physician (PCP)	\$25 copay	10% after deductible
Specialist Care	\$50 copay	10% after deductible
Urgent Care	\$75 copay	10% after deductible
Inpatient Hospital Care	10% after deductible	10% after deductible
Outpatient Surgery	10% after deductible	10% after deductible
Emergency Room	Visits 1 & 2: \$500 copay + deductible + 10% Visits 3 or more: deductible + 10%	10% after deductible

NOTE: Deductibles, office visit copays and prescription copays apply to the out-of-pocket maximum. Deductibles and out-of-pocket maximums are on a calendar year basis (January 1 – December 31). **There is no out-of-network plan coverage with Chalk's medical plans above. If you choose to see an out-of-network provider, you will be subject to 100% of the cost(s).**

Bi-Weekly Deductions		
	PPO Plan	HDHP Plan
Employee Only	\$42.50	\$27.50
Employee + Spouse	\$262.50	\$222.50
Employee + Child(ren)	\$172.50	\$147.50
Family	\$372.50	\$272.50

UHC NETWORK

You will have access to a national network PPO network through United Healthcare. To find an in-network provider or to verify that your current provider is in network, please visit www.hpiTPA.com and visit the **Your Resources** menu.

Then under **Members**, click **Find a Provider**. Choose **UnitedHealthcare** and from the options select **UnitedHealthcare Choice Plus and HPHC**. Search by doctor type, name or location.

You can also have our Personal Health Assistant, Jessie, verify this information by contacting him at jessie.garcia@mypha.com or **972-591-2660**.

SCAN QR CODE TO LOCATE AN
IN-NETWORK UHC CHOICE PLUS PROVIDER:



New ID Cards for 2026!

Plan participants enrolled on a UHC Choice Plus medical plan will receive a new ID card in the mail!

MEDICAL PLAN COMPARISON



The PPO and HDHP plans below will be administered by Health Plans Inc. (HPI) and utilize a regional network, Employers Health Network (EHN). EHN is a network of providers, clinics and hospitals. In addition to EHN, plan participants have access to the PHCS VDHP network for physician services only.

	PPO Plan - EHN	HDHP Plan - EHN
Network	EHN & PHCS VDHP	EHN & PHCS VDHP
Annual Deductible	Individual: \$2,000 Family: \$4,000	Individual: \$4,000 Family: \$8,000
Annual Out-of-Pocket Maximum (Includes Annual Deductible)	Individual: \$4,000 Family: \$8,000	Individual: \$6,000 Family: \$12,000
You Pay		
Preventive Care	Covered by plan at 100%; deductible waived	Covered by plan at 100%; deductible waived
Primary Care Physician (PCP)	\$25 copay	10% after deductible
Specialist Care	\$50 copay	10% after deductible
Urgent Care	\$75 copay	10% after deductible
Inpatient Hospital Care	10% after deductible	10% after deductible
Outpatient Surgery	10% after deductible	10% after deductible
Emergency Room	Visits 1 & 2: \$500 copay + deductible + 10% Visits 3 or more: deductible + 10%	10% after deductible

NOTE: Deductibles, office visit copays and prescription copays apply to the out-of-pocket maximum. Deductibles and out-of-pocket maximums are on a calendar year basis (January 1 – December 31). **Out-of-network services under the EHN plan options will be subject to reasonable and customary (R&C) limitations.**

	Bi-Weekly Deductions	
	PPO Plan - EHN	HDHP Plan - EHN
Employee Only	\$37.50	\$0.00
Employee + Spouse	\$212.50	\$172.50
Employee + Child(ren)	\$152.50	\$127.50
Family	\$317.50	\$217.50

EHN & PHCS NETWORKS

You will have access to facilities, hospitals and providers through the **EHN network**, which is a regional network. To find a provider please visit <https://members.ehnconnects.com> (or scan the QR Code). Select the type of care you need from the options at the bottom of the screen. Enter your location and Group ID number. If you don't have a Group ID number yet, enter "all" in the field. Then view your results.



Plan participants also have access to the **PHCS VDHP** network for physicians. To locate an in-network provider, please visit hstconnect.com, select "PHCS" then "Value Drive Health Plan" (or scan the QR Code).



**It is important to review the network and facilities in your area BEFORE enrolling in coverage.
Learn more about the EHN plan on the following page.**

**Please refer to your Summary Plan Description to review full benefits and deductions.*

EMPLOYER HEALTH NETWORK

EHN is a regional network anchored with the Baylor Scott & White Quality Alliance

- EHN network, which includes the Baylor Scott & White Quality Alliance
- EHN's network provides in-network access to over 4,000 doctors
- The PHCS VDHP network provides access to additional doctors

What if a non-participating provider is used for care?

The primary network is EHN for both doctors and facilities and the PHCS VDHP network for doctors only (no facilities).

The EHN plan includes a reference-based pricing (RBP) feature for covered medical services received at any provider or hospital outside of the EHN / PHCS network.

If you must use a non-participating provider for care, you should call the Pathways Concierge Team to schedule your appointment and arrange a pre-negotiated payment prior to seeking services. Given that these providers are not in network the possibility of balance billing exists if the pre-negotiated payment does not take place.

Pathways Concierge Team: (888) 682-4269

When you receive services in a hospital, surgery center or emergency room present your ID card. During the admission process the provider should not collect an amount that exceeds the plan's deductible / annual out-of-pocket maximum. If you are requested to pay an amount that exceeds these amounts, please contact your Pathways Concierge for assistance. If you receive a bill for an amount that differs from your Explanation of Benefits, please contact your Pathways Concierge at your earliest convenience (888) 682-4269.

When you want to schedule care, you have four options:

- Talk to your PCP to discuss your needs and options.
- Call your HPI Pathways Concierge team for help finding a first-rate provider or to help you schedule appointments.
- Visit hstconnect.com or download the HST Connect app. Search HST Connect in the Apple® App Store or Google Play™, or scan the code included here.
- Log into your member *My Plan* account at hpiTPA.com.



EHN Regions

Austin, TX

Charleston, SC

Charlotte, NC

College Station, TX

Dallas & Fort Worth, TX

Denver, CO

El Paso, TX

Fort Smith, AR

Greenville & Spartanburg, SC

Houston, TX

Little Rock, AR

Los Angeles, CA

Lubbock, TX

Orlando, FL

Phoenix & Tucson, AZ

San Antonio, TX

San Diego, CA

Seattle, WA

Tampa, FL

Temple, TX

PRESCRIPTION DRUG COVERAGE



If you enroll in one of the Chalk Mountain medical plans, you will automatically receive prescription drug coverage through our pharmacy benefit administrator, **TrueRx** for any non-high cost medications (see below for high cost medication coverage). When you need prescriptions, you can purchase them through a local retail pharmacy, or for medications you take on an ongoing basis, through the mail order program. If you enroll in a PPO plan, you will have copays for your prescriptions. If you enroll in a HDHP plan, your prescriptions will be subject to coinsurance and your deductible. You can use your HSA funds for prescriptions. Once your deductible is met, you may have prescription copays until your out-of-pocket maximum is met.

RETAIL PRESCRIPTION PROGRAM

The retail prescription program uses a network of participating pharmacies. To receive the highest level of benefits, you must use a participating pharmacy. Prescriptions you fill at non-participating pharmacies are not covered. If you would like assistance finding an in-network pharmacy, please call our Personal Health Assistant, Jessie, at **972-591-2660**.

MAIL ORDER PROGRAM

The mail order program offers a convenient and cost-effective way to fill prescriptions for medications you take on a regular basis (maintenance medications). **Certain maintenance medications may require mail order through TrueRx.** When you use mail order, you receive a 90-day supply of your maintenance medication, delivered directly to your home through **WB Rx Express**.

For questions on this program, you can reach Web Express Customer Service at **833-391-0126** or visit www.wbrxexpress.com.

SHARx HIGH-COST MEDICATION PROGRAM

In addition to TrueRx, Chalk Mountain partners with a high cost pharmacy solution, SHARx. Medications can be very expensive, and if you are prescribed certain high cost medications, you must fill your prescription through a designated pharmacy that provides the best available pricing for you (can even be FREE!) and additional personalized support. To fill these prescriptions, TrueRx partners with SHARx, a pharmacy advocacy program. If you are on the medical plan, and currently taking an eligible medication, you will receive a welcome email from SHARx and must complete the online SHARx enrollment. For additional information, you or your physician may also call **314-451-3555**.

Prescriptions		
	PPO Plans	HDHP Plans
Retail (up to 31-day)^{1,2}		
Generic	\$10 copay	\$10 copay after deductible
Preferred	\$35 copay	\$35 copay after deductible
Non-Preferred	\$60 copay	\$60 copay after deductible
Specialty	Covered under copay	Covered under ded. + coins.
Mail Order (up to 90-day)^{1,2,3}		
Generic	\$25 copay	\$25 copay after deductible
Preferred	\$87.50 copay	\$87.50 copay after deductible
Non-Preferred	\$150 copay	\$150 copay after deductible
Specialty	2.5x retail copay	Covered under ded. + coins.

1. If your prescription drug costs less than the designated copay, you will pay the lower of the two amounts.

2. Copays only apply if medication not sourced through SHARx; see above for details on SHARx.

3. Certain maintenance medications may require 90-day mail order through TrueRx



WHAT IS CARE NAVIGATION?

- Valenz Surgery & Imaging:** Chalk Mountain medical plan participants have access to a Care Navigation program that provides **best-in-class healthcare at no out of pocket cost to you!***
- What services are included?** The more common services include:
 - Orthopedic
 - General Surgery
 - Colonoscopies
 - MRIs, CT & PET Scans
- How does it work?** The first step is to engage with a Nurse when a need first arises to determine the options available to you. The Nurse will provide you with participating facilities and physicians in your area, assist with scheduling testing, appointments, coordinate surgery schedule and facilitate post operative care (ex. PT).
- Who is eligible?** Employees, Spouses and older dependent children (18+) enrolled in the Chalk Mountain medical plan are eligible for this program. Please note Pediatric services are NOT covered through this program.
- Is the program available in all areas?** The program has facilities and providers across the country. However, dependent on the procedure and location travel may be required.
- What will my cost be?** If you use one of these programs, you will receive your services at **no cost to you!***

*members enrolled in a HDHP plan must meet the minimum IRS deductible (\$1650 for 2025) before services are free.

Example Scenario:

John Smith needs a total knee replacement. He has the option of going to any surgeon and facility in his area. However, if John contacts Valenz Health to coordinate his surgery he will receive best in-class care and no out of pocket costs. John is enrolled in the "PPO Plan" with Chalk Mountain. The chart to the right explains the difference in benefits if John uses the Care Navigation program, or if he selects a different provider.

SCAN THE QR CODE
FOR A FULL LISTING



CARE NAVIGATION

Speak to a Valenz
Health nurse....

Please contact Valenz Health directly and speak to a nurse about your healthcare needs and whether they can assist!

The nurse will assist you with:

- Locating a facility and provider in your area for care
- Transferring medical records, if needed
- Coordinate appointment(s) both pre and post procedure
- Coordinate your care and payment for the service!

VALENZ SURGERY & IMAGING

Contact Valenz Health
877-438-5479
kisx@valenzhealth.com

Cost for Total Knee Replacement Average Cost = \$57,000

	Valenz Care Navigation Program	Other Provider
Total Knee Replacement Hospital Bill	\$25,000	\$65,000
Plan Payment	\$25,000	\$60,000
Employee Cost of Claims	\$0	\$5,000
Total Knee Replacement Cost	\$25,000	\$65,000

LYRIC VIRTUAL VISITS

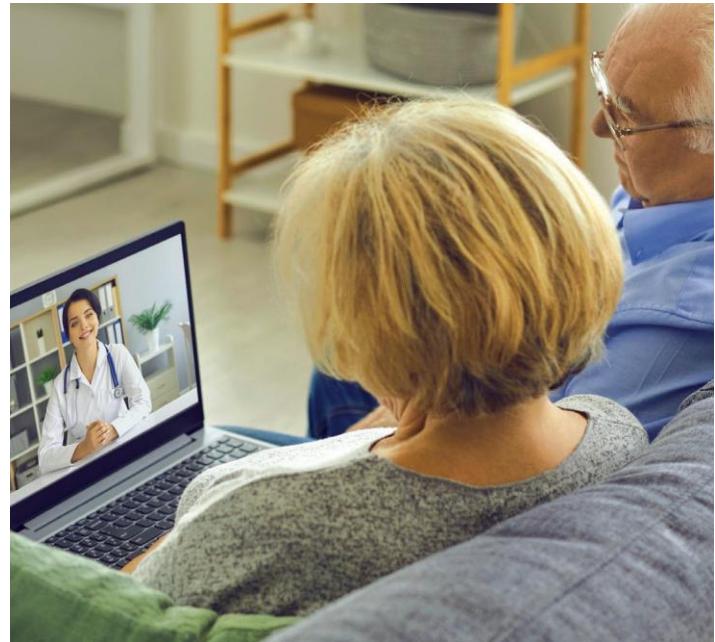
Access to care when you need it most.

24/7/365 access to care. FREE, Fast, Convenient & Affordable.

Doctors can be hard to reach, illness can occur in the middle of the night, and sometimes you just have a question. In all of those circumstances – and many more – Lyric Health is a convenient and affordable solution. As a member, you now have access to a network of board-certified doctors available 24/7/365 to treat many of your medical issues. Telemedicine visits are FREE to all members enrolled in Chalk's medical plan.

SIMPLE AS 1, 2, 3

1. Call **1-866-223-8831**, download the **Lyric App** or log on to your member portal at www.getlyric.com to schedule a consultation with state licensed physician.
2. Speak to a Care Coordinator who will triage and update your Electronic Health Record (EHR).
3. Consult with a Physician who will recommend a treatment plan, and if medication(s) is prescribed, it's sent electronically.



WHEN TO USE

Our goal is to provide you with convenient, affordable healthcare, when you need it most – 24/7/365.

- When you need care now
- If you have a health related questions, and just need professional guidance
- If you're considered the ER or urgent care center for a non-emergency issue
- On vacation, a business trip, or away from home

Common Conditions:

- Cold and Flu Symptoms
- Sinus Problems
- Ear Infection
- Allergies
- Urinary Tract Infection
- Nausea
- Pink Eye
- Stomach Viruses
- Infections
- Rashes
- Sore Throat
- Acne
- Recommendations
- Second Options and more

For additional assistance, you can reach Lyric Customer Service at **1-866-223-8831** or visit www.getlyric.com.

WHERE TO GO FOR CARE

With so many options for getting care, how do you choose?

This chart can help you understand where to go for what - *and potential savings!*

If you have a life-threatening condition go to the emergency room (ER) or call 911. For everything else, you're encouraged to see your primary care physician (PCP) or family doctor first. If seeing your PCP isn't possible, you have access to virtual visits with Lyric (FREE, 24/7) or Urgent Care.

Getting care at the best place for your condition can **save you thousands compared to an ER visit!** It's important to establish a relationship with a Primary Care Physician for you and your family. For more details on quick care options or questions, call MyPHA at **972-591-2660**.

Where to Go?	Type of Care & Services	Cost
	<h3>Lyric - Virtual Visits</h3> <p>Virtual care available 24/7</p> <ul style="list-style-type: none">• Cold and Flu Symptoms• Sinus Problems• Ear Infection• Allergies• Urinary Tract Infection• Nausea• Pink Eye• Stomach Viruses• Infections• Rashes• Sore Throat• Acne	FREE www.getlyric.com 1-866-223-8831
	<h3>Primary Care Physician</h3> <p>See a primary care doctor for your annual physical. Your doctor helps manage health conditions and can refer you to a specialist.</p> <ul style="list-style-type: none">• Checkups• Preventive Services• Minor skin conditions• Vaccinations• General health management• Chronic conditions	\$\$ <small>**Average Cost: \$25 - \$250</small>
	<h3>Urgent Care</h3> <p>When you need care quickly, but it is not an emergency. Urgent care centers treat issues that aren't life threatening.</p> <ul style="list-style-type: none">• Sprains• Strains• Small cuts that may need stitches• Minor burns• Minor infections• Minor broken bones	\$\$\$ <small>**Average Cost: \$75 - \$250+</small>
	<h3>Emergency Room*</h3> <p>For life-threatening or very serious conditions that require immediate care.</p> <ul style="list-style-type: none">• Heavy bleeding• Large open wounds• Sudden changes in vision• Chest pain• Sudden weakness or trouble talking• Major burns• Spinal injury• Severe head injury• Difficulty breathing• Major broken bones	\$\$\$\$ <small>**Average Cost: \$500 - \$3,000+</small>

**Actual cost of care dependent on Plan enrollment. Provider selection and services rendered. The services outlined above are examples of the type of care generally received at each of these different locations. This chart is intended to provide plan participants with guidance on where services may be received and the associated cost to you when obtaining care. It is important to contact a medical professional when researching the appropriate care options for you and your family.

CHALK LIFE HEALTH AND WELLNESS PROGRAM

Chalk Mountain offers a comprehensive health and wellness program at no cost to you!
We are empowering you to lead a healthier lifestyle!

WELLNESS PROGRAM DETAILS

Employees and spouses enrolled in either of Chalk's medical plans will have from **January 1, 2026 to December 31, 2026 to reach 100% completion of our health and wellness program**. There are only 2 requirements: complete your biometric screening and receive an annual physical or age/gender appropriate screening! Please contact Jessie at MyPHA at **972-591-2660** with questions.

WELLNESS PROGRAM REWARD

Employees and spouses achieving 100% of your wellness program requirements between January 1, 2026 and December 31, 2026, will not experience wellness surcharge beginning January 1, 2027.

- If you or your covered spouse do not complete both requirements listed above by 12/31/26, your insurance premiums will increase \$50 per month effective 1/1/27.
- If you and your covered spouse do not complete both requirements listed above by 12/31/26, your insurance premiums will increase \$100 per month effective 1/1/27.



TELADOC HEALTH

Diabetes Prevention & Management, Hypertension Management and more!

In 2026, Chalk will continue to partner with **Teladoc Health**, to offer support for employees and dependents age 18 and older enrolled in Chalk's medical plan(s), who may be diagnosed as pre-diabetic, diabetic, high cholesterol and/or high blood pressure. Teladoc Health is a support program that provides dedicated coaches to you who will assist you with managing your diagnosis, and is offered at no additional cost.

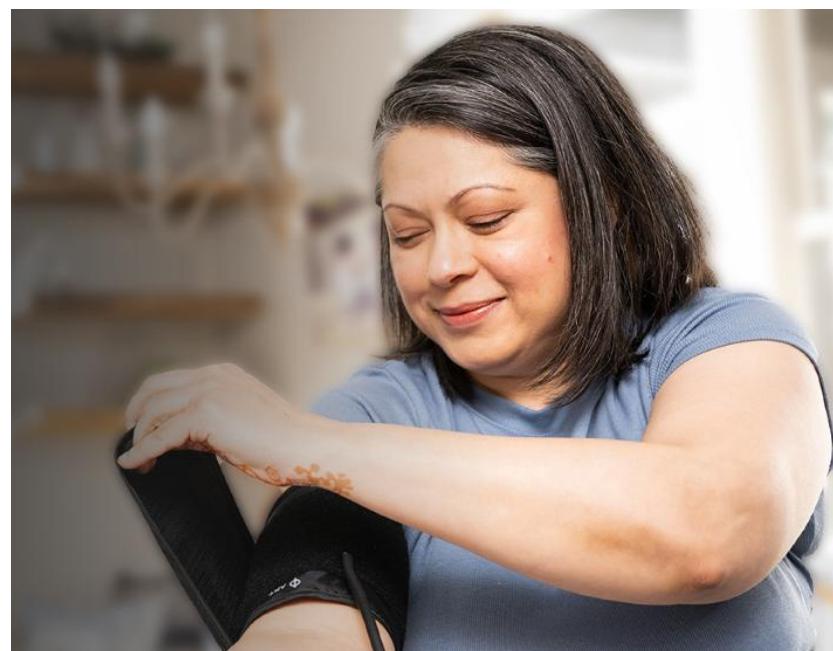
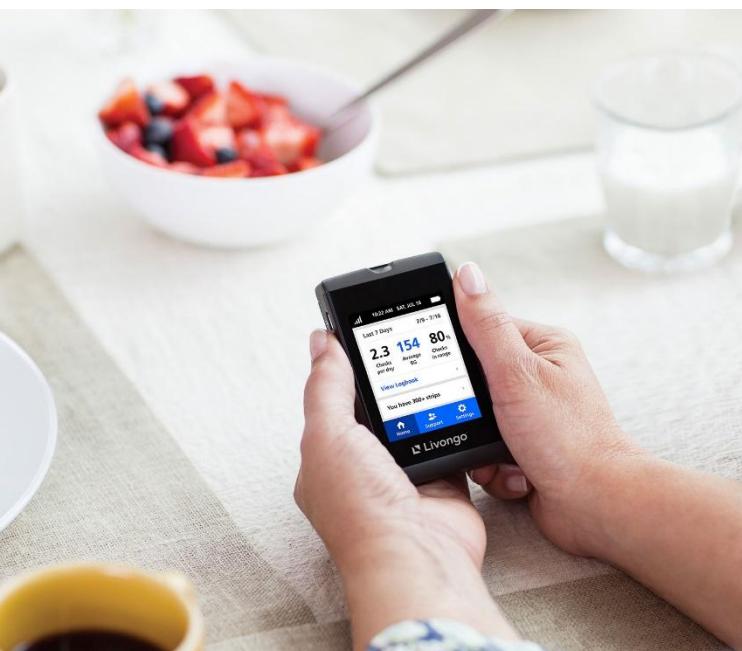
Through this program participants will have access to smart devices and app to help you feel more confident in managing your diagnosis and improve your health. If you have one of the aforementioned diagnoses, you are not required to participate in the program, but participation is highly encouraged.

Each participant will have access to:

- A dedicated health coach to connect with, and to receive advice and encouragement
- Advice on nutrition, meal planning and more via phone or the app
- Teladoc Health app and web portal provides access to tools and educational materials to encourage, educate and empower you
- Free devices to read your blood pressure, glucose, etc., and the results will connect to your app where you can track your numbers and watch trends
- Customizable reminders to log health data, medications, food, activity, and more
- Integration with other apps to sync and track all of your health data in one place

Reach out to our Personal Health Assistant, Jessie at MyPHA at **972-591-2660** with questions.

Enroll at TeladocHealth.com/Register/CMSTX or call 800-835-2362 and use registration code: CMSTX





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.



HEALTH SAVINGS ACCOUNT

PAYING FOR HDHP EXPENSES WITH A HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the High Deductible Health Plan (HDHP), you can pay for certain medical costs through a Health Savings Account (HSA). If you enroll in the HDHP, you will automatically be enrolled in an HSA through **Optum Bank**, our HSA vendor, and will be able to make pre-tax contributions to your account from your paychecks throughout the year. Then, you can use the HSA to pay for eligible health care expenses, such as deductibles, coinsurance, and other out-of-pocket dental, vision, and prescription drug expenses. The program provides investment options including interest bearing money markets. Funds are not automatically interest bearing and participants must take action to invest the funds in your account. Your HSA account balance will carry over from year to year, and you can take it with you if you leave the company. If you have any questions call our Personal Health Assistant, Jessie at **972-591-2660**.

CHALK MOUNTAIN'S CONTRIBUTIONS

Chalk Mountain will continue to assist with out of pocket healthcare expenses for HDHP enrollees by contributing **up to \$650 per plan year** to your Optum Bank HSA account. The employer HSA contribution will be made to your HSA on a prorated, per payroll basis, meaning that **\$25 will be contributed to your HSA each payroll cycle**. If you enroll in the Buy-Up PPO Plan, you are not eligible to enroll in the HSA.

2026 Calendar Year Contribution Amounts		
	Individual	Family
Company Contribution	Up to \$650 / year	Up to \$650 / year
Maximum Employee Contribution	\$3,750 / year	\$8,100 / year
Total IRS Maximum Allowable Contribution	\$4,400 / year	\$8,750 / year

NOTE:

If you will be age 55+ in 2026, you may contribute an additional \$1,000.

Important HSA Rules

You can participate in the HSA only if you enroll in the HDHP. You are not eligible to contribute if:

- You are enrolled in Medicare.
- You are covered by another medical plan (such as your spouse's plan) that does not qualify as a high deductible health plan.
- Your spouse participates in a Health Care Flexible Spending Account (FSA) through their employer.

HOW TO OPEN YOUR HSA

After you enroll in the HDHP plan, you should receive your Optum Bank HSA debit card in the mail. If Optum needs more information from you before they can open your account, you will receive a letter in the mail. Once your account is open and your HSA debit card is activated, you can use your funds to pay for qualified medical, prescription, dental and vision expenses.

HOW TO USE YOUR HSA TO PAY FOR CARE

Once you receive your debit card, you have several choices for paying health-related medical expenses:

- Pay with your HSA debit card, if you have funds available in your account.
- Write a check from your HSA. You must order checks when you enroll in the HSA to have this option. And, as with any other type of check, you must have funds available or the check will be returned — and you will be charged an insufficient funds fee.



DENTAL

Chalk Mountain's Dental Plan is administered through **Cigna** and utilizes the **DPPO Total Network**. The Dental Plan provides you and your family with coverage for typical dental expenses, such as cleanings, X-rays, fillings, and orthodontia. The plan allows you the freedom to visit any dentist, without referrals, for all of your dental care. If you receive care from one of Cigna's in-network dentists, you'll pay less for your care. If you choose an out-of-network dentist, your share of costs will generally be higher and you may need to file your own claims.

To find an in-network provider, visit www.cigna.com click Find a Doctor, select Employer, enter your zip code and select Dentist as type of Doctor. When prompted to select a network choose the "DPPO Total" network. If you have specific questions about your dental plan, please contact our Personal Health Assistant, Jessie at **972-591-2660**.



Dental Choice Plan

In-Network

Calendar Year Deductible (You Pay)	Individual: \$50 Family: \$150
Calendar Year Benefit Maximum (Plan Pays)	Per Individual: \$1,500
	You Pay
Preventive Care Oral Exams, Routine Cleanings (2 per year), including X-rays, Sealants and Space Maintainers	Covered by plan at 100%; deductible waived
Basic Services Fillings, Extractions, Endodontics and Periodontics	20% after deductible
Major Procedures Crowns, Dentures, Bridges	50% after deductible
Orthodontia (Plan Pays) Adults and Children to age 26 Lifetime Orthodontia Maximum	50% after deductible Up to \$2,000 per person
Out -of-Network Reimbursement	90 th Percentile

Bi-Weekly Deductions

Employee Only	\$9.71
Employee + Spouse	\$21.58
Employee + Child(ren)	\$20.49
Family	\$32.09

**Please refer to your Summary Plan Description to review full benefits and deductions.*



VISION

Chalk Mountain's Vision Plan promotes preventive care through regular eye exams and provides coverage for corrective materials, such as glasses and contact lenses. The Vision Plan is administered through **Cigna/EyeMed** combined network. If you enroll in vision coverage, you can go to any eye care provider you choose for care. However, if you choose providers who are part of the Cigna/EyeMed network, you will receive a discount on services. **To find an in-network provider: eyedoclocator.eyemedvisioncare.com**

The Vision Plan is designed to cover eye care needs that are visually necessary. You will pay extra if you choose certain cosmetic or elective eyewear, so be sure to ask your eye doctor what items are covered by the plan before you purchase materials.

If you have specific questions about your vision plan, please contact our Personal Health Assistant, Jessie at **972-591-2660**.



Vision Plan

	In-Network (You Pay)	Out-of-Network (Reimbursement)
Exam (once every 12 months)	\$10 copay	Up to \$45
Materials	\$25 copay	See allowance amounts below
Lenses Coverage (once every 12 months) Single Vision Bifocals Trifocals Lenticular	Covered at 100% after materials copay	Up to \$32 allowance Up to \$55 allowance Up to \$65 allowance Up to \$80 allowance
Frames (once every 24 months) Retail Frame Equivalent	Up to \$130 allowance + 20% off balance	Up to \$71 allowance
Contacts¹ (once every 12 months) Fitting & Lens Allowance	Up to \$130 allowance	Up to \$105 allowance

1. Contact lenses are in lieu of eyeglasses and frames

2. Frequency is based on calendar year basis (begins January 1)

Bi-Weekly Deductions

Employee Only	\$2.36
Employee + Spouse	\$4.03
Employee + Child(ren)	\$4.27
Family	\$6.40

**Please refer to your Summary Plan Description to review full benefits and deductions.*



LIFE / AD&D

You do everything you can for your loved ones—not because you have to but because you want to. Whether you're looking for coverage for a specific period or a lifetime, with the right Life / AD&D Insurance coverage, you can rest knowing your loved ones will be able to live out their dreams—no matter what the future holds.

BASIC TERM PAID 100% BY CHALK MOUNTAIN

Chalk Mountain offers Life and Accidental Death and Dismemberment (AD&D) insurance coverage to provide financial protection in the event you die while you are still working or become injured as a result of an accident. This coverage is administered through **Lincoln Financial**. This coverage is offered at no charge to you and is active for the duration of your employment.

NOTE: Basic Life/AD&D reduction schedule is to 65% at age 65 and to 50% at age 70.

Basic Life/AD&D Coverage

Basic Life and AD&D Amount	\$50,000
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VOLUNTARY LIFE

In addition to Basic Life and AD&D insurance, you may also purchase Voluntary Life and AD&D insurance for yourself, your spouse, and your dependent children through **Lincoln Financial**. You may only elect coverage for your dependents if you enroll in Voluntary Life coverage for yourself. You pay for the cost of Voluntary Life Insurance on an after-tax basis through payroll deductions. New Hires are eligible for up to the applicable Guarantee Issue (GI) amount, without being subject to Evidence of Insurability (EOI). If you waived coverage previously, you are considered a late entrant and must complete an EOI. Contact Chalk Mountain Benefits Center for EOI instructions.

NOTE: Coverage amounts for Life and AD&D insurance must be the same. Voluntary Life/AD&D reduction schedule is to 65% at age 65 and to 50% at age 70.



Employee

- Coverage:** Increments of \$10,000 to a maximum of the lesser of 5x annual salary or \$500,000
- Guarantee Issue (GI):** \$300,000

Spouse/Domestic Partner

- Coverage:** Increments of \$5,000 to a maximum of \$500,000, not to exceed 100% of employee election
- Guarantee Issue (GI):** \$50,000

Child(ren) – 6 months to age 26

- Coverage:** Increments of \$1,000 up to \$10,000
- Guarantee Issue (GI):** \$10,000
- No EOI required

Please speak with a Benefits Counselor for personalized rates, or call our Personal Health Assistant, Jessie at 972-591-2660 if you have general questions. See Page 4 for Call Center contact info.

**Please refer to your Summary Plan Description to review full benefits and deductions.*

***The effective date of any initial, increased or additional insurance will be delayed for an individual if he is not in Active Employment because of injury or sickness. The initial, increased or additional insurance will begin on the date the individual returns to Active Employment. If a covered Dependent is confined on the date the initial, increase or additional coverage is to take effect, it will take effect when the confinement ends.*



SHORT-TERM DISABILITY

Lincoln Financial's Short-Term Disability (STD) Insurance is designed to maximize flexibility and simplicity and will pay you a weekly benefit if you have a covered disability that keeps you from working. As long as you remain disabled, you can continue to receive benefits. STD insurance may cover a variety of conditions and injuries, such as normal pregnancy, injuries, joint disorders, back disorders, digestive disorders, and more.

Benefit Amount: 60% of weekly base salary up to \$1,000 per week

Benefits Begin: After 14 days of disability

Benefit Duration: 13 weeks including 14-day elimination period listed above

Pre-Existing Conditions: 3/12 (if you receive treatment for a diagnosis in 3 months prior to your enrollment date in Chalk's STD program, that specific diagnosis will not be covered under the STD plan for 12 months)

LONG-TERM DISABILITY



Lincoln Financial's Long-Term Disability (LTD) Insurance provides income replacement benefits for you and your family in the unfortunate event you are unable to work for an extended period of time due to injury, illness, or pregnancy. LTD insurance covers injuries and illnesses from both on- or off-the-job.

Benefit Amount: 60% of monthly base salary up to \$7,000 per month

Benefit Begin: After 90 days of disability (13 weeks)

Benefit Duration: Please speak with a Benefits Counselor for benefit duration period

Pre-Existing Conditions: 3/12 (if you receive treatment for a diagnosis in 3 months prior to your enrollment date in Chalk's LTD program, that specific diagnosis will not be covered under the LTD plan for 12 months)

Please speak with a Benefits Counselor for personalized rates, or call our Personal Health Assistant, Jessie at 972-591-2660 if you have general questions. See Page 4 for Call Center contact info.

**Please refer to your Summary Plan Description to review full benefits and deductions.*



ACCIDENT

You do everything you can to keep your family safe, but accidents do happen. Take comfort knowing you have help to manage the medical costs associated with accidental injuries. **Voya's** Accident Insurance provides additional coverage to help cover medical expenses and living costs when you unexpectedly get hurt. If you have any questions call our Personal Health Assistant, Jessie at **972-591-2660**.

The Accident plan also provides a **wellness benefit** payout to all covered members who receive their applicable preventive care. That means you will get paid to get your preventive care! The **wellness benefit is a \$50 payout**. The payout amount is per insured person, per calendar year.

Scan the QR code to visit your Employee Benefits Resource Center to learn more about this benefit and review instructions on how to file a claim after your effective date.

<https://presents.voya.com/EBRC/ChalkMountain>

Chalk Mountain provides the "Core" Accident Plan to employees enrolled in medical insurance at no cost. All Employees have the option to enroll dependents or elect enhanced coverage with the "Buy Up" Accident Plan.

	Accident - Core Plan (Medical Participants Only)	Accident - Buy Up Plan
Injuries		
Fractures	Up to \$4,500	Up to \$6,400
Dislocations	Up to \$5,100	Up to \$7,700
Second- and Third-Degree Burns	Up to \$10,000	Up to \$15,000
Concussions	\$150	\$300
Lacerations	Up to \$320	Up to \$480
Surgical	Up to \$800	Up to \$1,200
Tendon, Ligament, Rotator Cuff, or Knee	Up to \$800	Up to \$1,225
Services & Treatment		
Ambulance (Ground / Air)	\$250 / \$1,000	\$500 / \$2,000
Emergency Room	\$150	\$300
Initial Physician's Office Visit Accident	\$60	\$100
Follow-Up Treatment	\$60	\$100
Therapy Services	\$30 (limits apply based on treatment type)	\$50 (limits apply based on treatment type)
Medical Appliances	\$75	\$200
Hospital (Accident)		
Admission	\$1,000	\$1,500
Daily Critical Care Unit Confinement Daily	\$225 (per day up to 365 days)	\$300 (per day up to 365 days)
Hospital Confinement	\$350 (per day up to 30 days)	\$450 (per day up to 30 days)
Rehabilitation Facility	\$150 (per day up to 90 days)	\$200 (per day up to 90 days)
Major Diagnostic Exam	\$125	\$275
Wellness, Health Screening and Preventive Care Benefit		
Examples include (but are not limited to) routine gynecological exams, general health exams, mammography and certain blood tests.	\$50 for employees \$50 for spouses 100% of your benefit amount per child	\$50 for employees \$50 for spouses 100% of your benefit amount per child

*Please speak with a Benefit Counselor for personalized rates, or call our Personal Health Assistant Jessie at **972-591-2660** if you have general questions. See Page 4 for Call Center contact info.*

**SCAN QR CODE FOR ACCIDENT
PLAN SUMMARY & RATES**



**Please refer to your Summary Plan Description to review full benefits and deductions.*



CRITICAL ILLNESS

Voya's Critical Illness insurance protects you and your family in the event of a serious illness or other covered medical condition. The Critical Illness benefit¹ will pay a lump sum benefit upon diagnosis of a covered critical illness to help ease your financial and emotional worries. If you have any questions call our Personal Health Assistant, Jessie at **972-591-2660**.

Chalk Mountain provides \$5,000 in Critical Illness coverage to employees enrolled in medical insurance at no cost. All Employees have the option to purchase additional coverage and enroll dependents.

ELECTION AMOUNTS

 Employee Employer-paid \$5,000 (enrolled in medical) May enroll in additional \$10,000, \$20,000 or \$30,000	 Spouse / Domestic Partner (employee must be enrolled) \$10,000, \$20,000 or \$30,000 up to 100% of Employee's Benefit	 Dependent Child(ren) (employee must be enrolled) \$5,000, \$10,000 or \$15,000 up to 50% of Employee's Benefit
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The Critical Illness plan also provides a **wellness benefit** payout to all covered members who receive their applicable preventive care. That means you will get paid to get your preventive care! The **wellness benefit is a \$50 payout**. The payout amount is per insured person, per calendar year.

Visit your Employee Benefits Resource Center to learn more about this benefit and review instructions on how to file a claim after your effective date.
<https://presents.voya.com/EBRC/ChalkMountain>

Initial Critical Illness Benefit

Pays a lump sum benefit direct to the insured, unless otherwise assigned, upon the date of diagnosis made after the coverage effective date, for each of the Covered Conditions listed below. The amount payable per Covered Condition is the Initial Benefit Amount, multiplied by the applicable percentage for the diagnosis of the Covered Condition shown below. Each Covered Condition will be payable one time, per Covered Person, subject to the Maximum Lifetime Limit.

Covered Critical Illnesses - 100% of Election Amount (unless otherwise noted)

- Heart attack*
- Cancer
- Stroke
- Sudden cardiac arrest*
- Major organ transplant**
- Coronary artery bypass (25%)
- Carcinoma in situ (25%)
- Type 1 Diabetes
- Severe burns
- Transient ischemic attacks (10%)
- Ruptured or dissecting aneurysm (10%)
- Abdominal aortic aneurysm (10%)
- Thoracic aortic aneurysm (10%)
- Open heart surgery for valve replacement or repair (25%)
- Transcatheter heart valve replacement or repair (10%)
- Coronary angioplasty (10%)
- Implantable (or Internal) cardioverter defibrillator (ICD) placement (25%)
- Pacemaker placement (10%)
- Benign brain tumor
- Skin cancer (10%)
- Bone marrow transplant (25%)
- Stem cell transplant (25%)
- Permanent paralysis
- Loss of sight, speech, or hearing
- Coma
- Multiple sclerosis
- Amyotrophic lateral sclerosis (ALS)
- Parkinson's Disease
- Advanced Dementia
- Huntington's disease
- Muscular dystrophy
- Infectious disease (hospitalization req.) (25%)***
- Addison's disease (10%)
- Myasthenia gravis (50%)
- Systemic lupus erythematosus (SLE) (50%)
- Systemic sclerosis (scleroderma) (10%)

**SCAN QR CODE FOR
CRITICAL ILLNESS PLAN
SUMMARY & RATES**



* A sudden cardiac arrest is not in itself considered a heart attack.

** Major organ transplant means the irreversible failure of your heart, lung, pancreas, entire kidney or liver, or any combination thereof, determined by a physician specialized in care of the involved organ.

*** Diagnosis of a severe infectious disease by a Doctor, when a diagnosis occurs on or after the group's coverage effective date; AND Confinement to a Hospital or a transitional facility for [5 or more consecutive days].

Reoccurrence Critical Illness Benefit

You may receive a benefit payment for each different diagnosis of a covered condition shown on your Schedule of Benefits. (A definition of "different diagnosis" is provided in the certificate of coverage). There is no total maximum benefit amount or limit to the number of payments you may receive for each covered condition under your plan, except for skin cancer. For skin cancer, the benefit is payable up to 1 times per calendar year with a total benefit amount of 10 times the benefit amount you're enrolled in. Once the maximum for skin cancer has been reached, no further benefits are payable.

Please speak with a Benefit Counselor for personalized rates, or call our Personal Health Assistant Jessie at 972-591-2660 if you have general questions. See Page 4 for Call Center contact info.

**Please refer to your Summary Plan Description to review full benefits and deductions.*



HOSPITAL INDEMNITY

Voya's Hospital Indemnity Insurance is designed to help provide financial protection for covered individuals by paying a fixed daily benefit if you have a covered stay in a hospital, critical care unit or rehabilitation facility. Employees can use the benefit to meet the out-of-pocket expenses and extra bills that can occur. Hospital Indemnity lump-sum benefits are paid directly to the employee, based on the amount of coverage listed (regardless of the actual cost of treatment). Hospital Indemnity Insurance is a limited benefit policy. It is not health insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

WHO CAN BE COVERED

Chalk Mountain provides Hospital Indemnity Insurance for you at no cost to you, only if you are enrolled in the medical plans. You also have the option to enroll in additional coverage for your spouse and children.

WHAT DOES IT COVER

Your Hospital Indemnity Insurance coverage provides a benefit payable upon a stay in a covered medical facility or other covered loss. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders. A highlight of coverage amounts are listed in the table.

Only one type of facility confinement or admission benefit is payable per day. Any combination of confinement and admission benefits payable will not exceed a total of 76 days during a period of confinement.

**SCAN QR CODE FOR
HOSPITAL PLAN
SUMMARY & RATES**



The Hospital Indemnity plan also provides a **wellness benefit** payout to all covered members who receive their applicable preventive care. That means you will get paid to get your preventive care! The **wellness benefit is a \$50 payout**. The payout amount is per insured person, per calendar year.

Visit your Employee Benefits Resource Center to learn more about this benefit and review instructions on how to file a claim after your effective date.
<https://presents.voya.com/EBRC/ChalkMountain>

First Day of Confinement (Admission Benefit)

Type of Admission	Core Plan (Medical Participants Only)	Buy Up Plan
Hospital admission	\$1,000	\$1,000
Critical Care Unit (CCU)	\$1,000	\$1,000

This benefit is payable once per confinement, up to 8 admission(s) per year

Starting Day Two (Daily Confinement Benefit)

Type of Facility	Core Plan (Medical Participants Only)	Buy Up Plan
Hospital confinement, up to 30 days per confinement	1 x \$100 Daily Benefit	1 x \$200 Daily Benefit
CCU confinement, up to 15 days per confinement	2 x \$100 Daily Benefit	2 x \$200 Daily Benefit
Rehabilitation facility confinement, up to 30 days per confinement	1 x \$100 Daily Benefit	1 x \$200 Daily Benefit
Observation Unit <i>At least 4 consecutive hours but less than 20 consecutive hours, other than as an inpatient. Not payable for any day that a facility confinement or admission benefit is payable.</i>	\$250	\$250

**Please refer to your Summary Plan Description to review full benefits and deductions.*



ADDITIONAL BENEFITS

EMPLOYEE ASSISTANCE PROGRAM (EAP)

PAID 100% BY CHALK MOUNTAIN

Life. Just when you think you've got it figured out, along comes a challenge. Whether your needs are big or small, the **GuidanceResources EAP** is there to help you and your family find solutions and restore your peace of mind. Reach out 24/7 for assistance at no cost to you for issues including:

- Confidential Counseling
- Financial Information and Resources
- Legal Support and Resources
- Work-Life Solutions
- GuidanceResources Online
- Free Online Will Preparation
- Help for New Parents

You also have three face-to-face sessions with a behavioral counselor available to you and your household members.

Call anytime, any day at **888-628-4824** or visit **GuidanceResources.com**.

GuidanceResources.com login credentials: Username: LFGSupport Password: LFGSupport1

LINCOLN BENEFITS

PAID 100% BY CHALK MOUNTAIN

ONLINE WILL PREPARATION

A will is the cornerstone of any estate plan and can protect your assets and loved ones. Creating a will allows you to make vital decisions ahead of time, including naming a guardian for your children or designating who will receive your property and assets after you pass away. Without a will, state officials will distribute your estate. *EstateGuidance* offers a secure, efficient way to create and execute a will so you can rest easy knowing you've planned ahead for your family.

Access *LifeKeys* services.
Visit **GuidanceResources.com**,
download the GuidanceNow mobile app
or call 855-891-3684.
First-time users: enter web ID: LifeKeys.

LifeKeys CLAIMANT SUPPORT SERVICES

Losing a loved one can be overwhelming to say the least. *LifeKeys* is a comprehensive program that offers resources to help your loved ones address a range of common concerns should they experience a loss. Services include grief counseling, financial and legal advice, and support when coping with the challenges of day-to-day life. Your beneficiaries will have access to six in-person sessions for grief counseling, legal or financial information, and unlimited phone counseling.

Grief counseling — advice, information, and referrals on:

- Coping with loss
- Stress, anxiety, and depression
- Memorial planning information
- Concerns about family, including children and teens

Legal support — access to legal information on:

- Estate and probate law
- Real estate transactions
- Social Security survivor and child benefits
- Important documents for beneficiaries

Financial services — online resources and advice from financial specialists on:

- Estate planning
- Budgeting
- Overcoming debt
- Bankruptcy
- Investments

Help with everyday life — comprehensive information on:

- Finding child care or elder care
- Financing a home
- Moving and relocation
- Making major purchases

401(K) RETIREMENT SAVINGS PLAN

Smart saving and investing is the foundation for financial security during your retirement years. Our 401(k) plan, through **Bank of Oklahoma Financial (BOKF)**, is designed to help you reach your retirement goals and can be a powerful tool in your secure financial future. Through payroll deductions, you may choose to contribute to either a traditional 401(k) or a Roth 401(k).

COMPANY MATCH

The Chalk Mountain 401(k) plan has a matching contribution of 100% of the first 4% that you contribute to the plan. Vesting occurs immediately.



HOW TO ENROLL OR MAKE CHANGES

After completing 60 days of employment with Chalk Mountain, you can enroll at any time via the BOKF website at www.startright.bokf.com or call **1-800-876-9557** for assistance. If you are enrolling online with BOKF for the first time, your initial User ID will be your SSN and your initial Password will be your last 4 digits of your SSN and your last 2 digits of your year of birth.

Do you expect your tax rate to be lower, the same, or higher when you take your 401(k) distribution?

LOWER

You may benefit from deferring taxes with traditional 401(k) contributions.

SAME

Traditional or Roth 401(k) contributions will generally yield the same, after taxes.

HIGHER

You may benefit from paying taxes now at a lower tax rate with Roth 401(k) contributions.

	Traditional 401(k)	Roth 401(k)
Eligibility	Must be at least 18 years old. Must have completed 60 days of employment with Chalk Mountain.	Must be at least 18 years old. Must have completed 60 days of employment with Chalk Mountain.
Chalk Mountain Contributions	100% on the first 4% of pay you contribute	100% on the first 4% of pay you contribute
When will I pay taxes on my contributions?	Taxes due upon withdrawal. Employee contributions are tax deferred, so current taxable income is reduced.	Taxes paid on employee contributions before the money goes into your account. Current taxable income is NOT reduced.
When will I pay taxes on any investment earnings?	Taxes are paid on the FULL amount of any distribution, including earnings, at ordinary income tax rates in effect upon withdrawal.	Taxes are NOT paid on earnings from your contributions if you take a qualified distribution: At least five years must elapse from year of initial contributions and you must be age 59 1/2 or older (or become disabled or deceased).
Impact of Contributions on take-home Pay	Pretax contributions reduce your current taxable income, so each dollar contributed reduces your take-home pay by less than a dollar.	Current taxes are paid on your contributions, so your take-home pay is reduced dollar for dollar by your contributions.
When will I pay taxes on employer contributions?	Employer contributions are made on a pre-tax basis; therefore, contributions and earnings are taxable upon withdrawal.	Employer contributions are made on a post-tax basis; therefore, contributions and earnings are not taxable upon withdrawal.



HOLIDAY SCHEDULE

Employees who have completed 90 days of service are eligible for holiday pay if: the employee works their last scheduled day before as well as their first scheduled day after the holiday; the employee is on approved PTO covering the last and first scheduled work days of the holiday period; the employee worked on the holiday and first scheduled day following.

Chalk Mountain recognizes the following holidays.

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

NOTICES & DISCLOSURES

The Company's policies, plans, practices and procedures may be amended, terminated or changed at any time at the sole discretion of the Company. If that should occur, the material in this document will be superseded and the provisions of the actual official plan documents will control. **If there are discrepancies between this document and the official plan documents, the actual plan documents will always govern.**

Please scan the QR Code below to access the 2026 Benefits Notices & Disclosures. Please contact Chalk Mountain Human Resources at hr@cmstx.com to request a paper copy.



IMPORTANT CONTACTS

If you have any questions regarding your 2026 benefit elections, please contact the Chalk Mountain Benefits Call Center.

Chalk Mountain Benefits Center: **(866) 602-9001**

Monday – Friday: 8:00am – 5:00pm (CST)

Coverage	Carrier	Phone	Website/Email
MyPHA	Jessie Garcia	(972) 591-2660 M – F: 7:00am – 7:00pm (CST)	jessie.garcia@mypha.com
Medical	Third Party Administrator: Health Plans Inc (HPI) Group Number: R2513	HPI Pathways Concierge (888) 682-4269	www.hpiTPA.com
Prescription	TrueRx Group Number: TRUE1471	MyPHA (972) 591-2660 M – F: 7:00am – 7:00pm (CST)	www.truerx.com
Care Navigation	Valenz Health Program		kisx@valenzhealth.com
High Dollar Drug Savings Program	SHARx	(314) 451-3555	sharx@sharxplan.com
Health Savings Account (For HDHP Participants Only)	Optum Bank	MyPHA (972) 591-2660 M – F: 7:00am – 7:00pm (CST)	www.optumbank.com
Dental/Vision	Cigna Group Number: 3346493	MyPHA (972) 591-2660 M – F: 7:00am – 7:00pm (CST)	www.cigna.com
Basic Life Basic AD&D			
Voluntary Life Voluntary AD&D	Lincoln Financial Group Number: 09-LF1614	MyPHA (972) 591-2660 M – F: 7:00am – 7:00pm (CST)	www.lincolinfinancial.com
Short-Term and Long- Term Disability (STD and LTD)			
Accident Critical Illness Hospital Indemnity	Voya Group Number: 747114	MyPHA (972) 591-2660 M – F: 7:00am – 7:00pm (CST)	presents.voya.com/EBRC/Chalk_Mountain
Employee Assistance Program (EAP)	GuidanceResources EAP	(888) 628-4842	guidanceresources.com Username: LFGSupport Password: LFGSupport1
401(k) Retirement	Bank of Oklahoma Financial	(800) 876-9557	www.startright.bokf.com
Human Resources	Chalk Mountain	(817) 473-1931 M – F: 8:00am – 5:00pm (CST)	hr@cmstx.com

