JANUARY 2027 - DECEMBER 2027

2027 BENEFITS ENROLLMENT GUIDE



Hilldrup™

TRUE NORTH
Insurance and Financial Strategies

Contact Information

MEDICAL
Health Plan Inc (HPI)
800-532-7575 / www.hpitpa.com

PRESCRIPTION DRUG
MedOne
888-884-6331 | www.medone-rx.com

TELEMEDICINE
Doctor on Demand
800-997-6196 | doctorondemand.com/health-plans-inc

HEALTH SAVINGS ACCOUNT
OptumBank
800-243-5543 | www.optumbank.com

DENTAL
Delta Dental of VA
800-237-6060 | www.deltadentalva.com

VISION
Guardian / Davis Vision
888-600-1600 www.guardiananytime.com/FPAPP/FPWEB

LIFE
Guardian
888-600-1600 | www.guardiananytime.com

DISABILITY, ACCIDENT, CRITICAL ILLNESS, CANCER, HOSPITAL INDEMNITY
Guardian
888-600-1600 | www.guardiananytime.com

FLEXIBLE SPENDING & DEPENDENT CARE
OptumBank
800-243-5543 | www.optumbank.com

EAP
Guardian
855-239-0743 | Guardianresources.com
CODE: Guardian

LEGAL & IDENTITY THEFT
Legal Resources
800-728-5768 | www.legalresources.com

PET INSURANCE
Pet's Best
888-984-8700 | www.pestbest.com/hilldrup

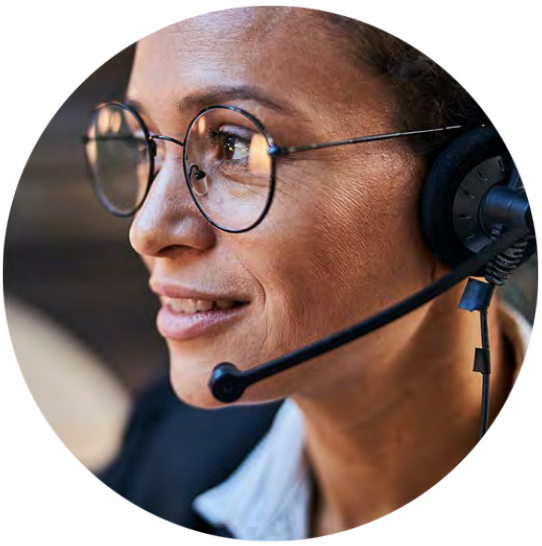
401(K) RETIREMENT
Principal
800-547-7754 | www.principal.com



TABLE OF CONTENTS

Who To Call 3
Eligibility & Qualified Life Events 4
Enrollment Instructions 5
Medical 6
CanaRx & RxManage 8
Telemedicine / Virtual Visits 9
Hinge Health 10
Health Savings Account & Flexible Spending Account 11
Dental 12
Vision 13
Life and AD&D 14
Short & Long-Term Disability 15
Accident, Critical Illness, Cancer, & Hospital Indemnity 16-21
Dependent Care 22
Employee Assistance Program 23
Legal Support & Identity Theft 24
Pet Insurance 25
Additional Benefits 26

Disclaimer
The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources.
The information provided in this summary is for comparative purposes only. Actual claims paid are subject to the specific terms and conditions of each contract. This benefit summary does not constitute a contract. *The information in this booklet is proprietary. Please do not copy or distribute to others.*



TRUEADVOCATE

The TrueAdvocate Team will be able to provide assistance with questions related to topics such as:

- Eligibility
- Plan Information
- ID Cards
- Claim Explanation
- Instructions on how to enroll in benefits

HOW DO I CONNECT WITH THE TRUEADVOCATE TEAM?

The team is available: Monday-Friday 6:30am to 4:00pm EST

Phone: 888-655-9980

E-mail: trueadvocate@truenorthcompanies.com

CAN I STILL CONTACT HR WITH MY QUESTIONS?

Of course! The Human Resources department at Hilldrup is willing, able and excited to support our employees with any type of question that you may have.

Benefit Basics

WELCOME TO YOUR 2027 BENEFITS!

Hilldrup benefits add value beyond your paycheck. They can make health care more affordable, provide income during a disability, and help you achieve financial goals.

As an employee of Hilldrup, you have a total compensation package - a combination of pay and benefit programs that is among the best in our industry. This guide describes the key features of our health, life and additional program offerings. They are designed to give you choices about the types and levels of protection that you want. As your needs change, you can continue to design a benefits program that best fits your life. Each year, you have the opportunity to review your choices and make new decisions.

This guide provides a brief summary of your Hilldrup benefits. Please take the time to review your options and learn about the coverages that will best work for you and your family.

This information is a highlight of our benefit program. In the event of any discrepancy or omission, actual benefits will be determined by the applicable governing plan documents. Hilldrup reserves the right to change or end any benefit at any time to the extent allowed by the law.

ELIGIBILITY

As a full-time employee of Hilldrup, you are eligible for benefits if you work at least 30 hours per week. Your dependents can also enroll for coverage, including:

- Your legal spouse
- Your children up to age 26

DEPENDENT ELIGIBLIITY

Hilldrup is happy to extend benefit coverage to your dependents to ensure the needs of your family are met. There are specific criteria as to what is considered an eligible dependent.

Definition of an eligible dependent:

- A lawful spouse of an employee
- Children of an employee up to age 26
- Children age 26 or older who are mentally or physically handicapped
- A legally adopted child, a step-child, or a child placed in your care by court order, all under 26 years of age.

Falsification of dependent eligibility will result in coverage for the dependent being rescinded and may result in medical claims being denied.

QUALIFYING LIFE EVENTS

Generally, you may only make or change your existing benefit elections during the open enrollment window. However, you may change your benefit elections during the year if you experience an event such as:

- Gain or loss of other coverage
- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse or dependent child
- Qualification by the Plan Administrator of a child support order for health coverages
- New entitlement to Medicare or Medicaid

You must notify Human Resources within 30 days of a qualifying life event. If you do not contact Human Resources within 30 days of the qualified event, you will have to wait until the next open enrollment period to make changes.

Learn & Enroll

ADP WorkforceNow is an online enrollment system that allows you to learn about your benefits and also allows you to manage the benefits you are enrolled in. You can access ADP at **www.workforcenow.adp.com** anytime, 24/7!



Learn About Your Benefits

Visit **www.MyHilldrupBenefits.com** to learn about the benefits package that is available to you and your eligible family members

- Side-by-side Plan Comparisons
- Policy Documents
- Important Notices
- Carrier Contact Information

Enroll in Your Benefits

Ready to enroll in your benefits?
Visit **www.workforcenow.adp.com**

Scan the QR code to access ADP.

Questions?

Contact TrueAdvocate
888-655-9980 | M – F 6:30am to 4:00pm EST
trueadvocate@truenorthcompanies.com



Your Medical & Rx Plan

HEALTH PLAN INC (HPI)
800-532-7575 | WWW.HPITPA.COM
GROUP NUMBER: R2544

MEDONE | 888-884-6331
www.medone-rx.com

Hilldrup is happy to offer medical insurance options that best fit the needs of you and your family.

- **High Deductible Health Plan:** The lowest cost per paycheck plan that allows the opportunity to save with a Health Savings Account.
- **Choice:** A traditional plan that does not allow for out-of-network coverage in exchange for a lower employee cost per paycheck. This is the mid-cost plan option.



Use In-Network Providers

What does it mean to go to an in-network provider? When your doctor or hospital is considered “in-network” it means that your provider has negotiated to offer their services at a lower rate.

The network that you belong to when you participate in depends on the Medical plan you choose to enroll in.

- **HDHP with HSA** = Cigna PPO Network (In and out-of-network benefits)
- **Choice Medical Plan** = Cigna PPO Network (In-network benefits ONLY)

To find out if your provider or facility is in-network

1. Visit www.hpitpa.com
2. Under “Your Resources” click “Find a Provider”
3. Select “Cigna” to find in-network doctors

Why Use Preventive Care?

According to the U.S. Centers for Disease Control and Prevention (CDC), 7 out of 10 Americans die each year from chronic diseases, many of which are preventable. When preventive care is used and illnesses and diseases are caught early enough, individuals can avoid or better control their health problems.

Why Use Preventive Care?

Preventive care is important because it helps you stay healthy and access prompt treatment when necessary, and it can also help reduce your overall medical expenses.

- **Stay healthier and get more effective treatment**
- **Pay less for medical expenses**
- **Many preventive services are now covered in full**

What Services Are Considered Preventive Care?

The U.S. Department of Health and Human Services has provided lists of preventive services that must be covered by most health insurance plans. Lists are available for adults, women and children, as covered services depend on age and gender. Visit https://www.hhs.gov/healthcare/about-the-aca/preventive-care/index.html

Your Medical Plan

In-Network Member Responsibility	High Deductible Health Plan with HSA	Choice In-Network Only Coverage
Preventive Care	100% Covered	100% Covered
Deductible Single / Family	$2,250 / $4,500 Individual in a family must meet family deductible	$1,250 / $2,250
Coinsurance	80% / 20%	80% / 20%
Out-of-Pocket Maximum Single / Family	$3,500 / $6,850	$3,000 / $6,000
PCP / Specialist	20% After Deductible	$25 / $45 Copay
Virtual Visits	20% After Deductible	$10 Copay
Urgent Care	20% After Deductible	$100 Copay
Emergency Room	20% After Deductible	$175 Copay + 20% After Deductible
Inpatient Hospitalization	20% After Deductible	20% After Deductible
Outpatient Surgery	20% After Deductible	20% After Deductible
Rx Deductible	Medical deductible applies	$100 / $300 Does not apply to Tier 1 drugs
Rx Out-of-Pocket Maximum Single / Family	$3,550 / $7,250	$4,000 / $8,000
Rx Copay Generic / Preferred / Non-Preferred / Specialty	$10 / $30 / $50 / $400	$15 / $25 / $40 / $400
Vision Exam	100% Covered One exam per year	100% Covered One exam per year
Bi-Weekly Rate	**High Deductible Health Plan with HSA**	**Choice In-Network Only**
Employee	$54.08	$99.51
Employee + Spouse	$256.34	$375.32
Employee + Child(ren)	$196.85	$314.75
Employee + Family	$426.15	$637.06

CanaRx & RxManage

Hilldrup is happy to offer international sourcing of certain medications for all Medical plan members. MedOne has partnered with CanaRx and RxManage which offer simple, safe and smart ways for members to get brand-name maintenance medications from licensed and regulated pharmacies in tier 1 countries such as the United Kingdom, Australia, New Zealand, and Canada.

If you are filling a medication that is available for one of these programs, you will be contacted directly. Any medication fills internationally sourced will incur no out-of-pocket cost to you! That's right, all copays are waived. Applicable prior authorizations still apply to internationally sourced medications.

CANARX (Brand Name Maintenance Meds)

Phone: 1-866-893-6337
Website: canarx.com

CANARX is a voluntary international mail order option. CANARX offers hundreds of brand-name maintenance medications that you can get copay-free! Medications are shipped directly to your door from licensed and regulated pharmacies located in Canada, the United Kingdom and Australia.

All medications are backed by a Quality Assurance Team of doctors and pharmacists, as well as 20-plus years of experience in the industry. To be eligible for the CANARX program, you must be an existing member of a health insurance plan that currently has CANARX implemented as an additional option for prescription medication coverage.

Scan the QR code to visit canarx.com

RXMANAGE (Specialty Meds)

Phone: 877-794-2218
Email: PCC@myRxAlly.com

International prescription sourcing can save you up to 70% on Specialty prescriptions compared to US pricing. Your Prescription drug carrier, MedOne, offers a suite of specialty cost containment solutions with RxManage.

Included in the suite is the opportunity to internationally source specialty medications. MedOne has partnered with a selection of international pharmacy vendors that offer access to medications from other countries at much lower costs to MedOne clients and members, this means savings for you on Specialty prescription drugs.

To get enrolled to save money on Specialty Rx call our Patient Care Coordinators at 877-794-2218 or email PCC@myRxAlly.com.

Telemedicine

Doctor on Demand | 800-997-6196

Doctorondemand.com/health-plans-inc



Access medical care from the comfort of your own home or wherever you happen to be!
Doctor on Demand is a great alternative to care that you would normally seek at an Urgent Care facility, Emergency Room, or even your regular physician at a fraction of the cost.

It's Fast and Easy

- Connect virtually with a physician in minutes
- Video visits held online or through the mobile app
- Pay only your office visit/PCP-level cost share or less. Refer to your plan Summary of Benefits for your specific copay amount.
- Referrals are not required
- Paperless prescriptions are sent directly to your pharmacy

Medical Urgent Care Visits

Doctors can diagnose, treat and write prescriptions for many conditions, including:

- Coughs/colds/flu
- Sore/strep throat
- Pediatric issues
- Sinus and allergies
- Nausea/diarrhea
- Rashes and skin issues
- Women's health
- Sports injuries

Scan code to download the Doctor On Demand app

Behavioral Health Visits

Psychologists support you using talk therapy, while psychiatrists will also look for biological imbalances and can prescribe medicine as part of a treatment plan.

dr+ on demand

How it works

1. Download the app on your mobile device or access doctorondemand.com/health-plans-inc
2. Create your account and enter insurance (choose Health Plans, Inc.) and pre-consult information.
3. Complete a questionnaire of current symptoms and medical history.
4. Pay cost-share via app or website.
5. Consult with a Doctor on Demand Board Certified provider.
6. Receive email follow up after the visit to share with your PCP, or request that it be sent directly to your PCP.

The details of your consultation will not be forwarded to your PCP without your consent.



NEW

Hinge Health



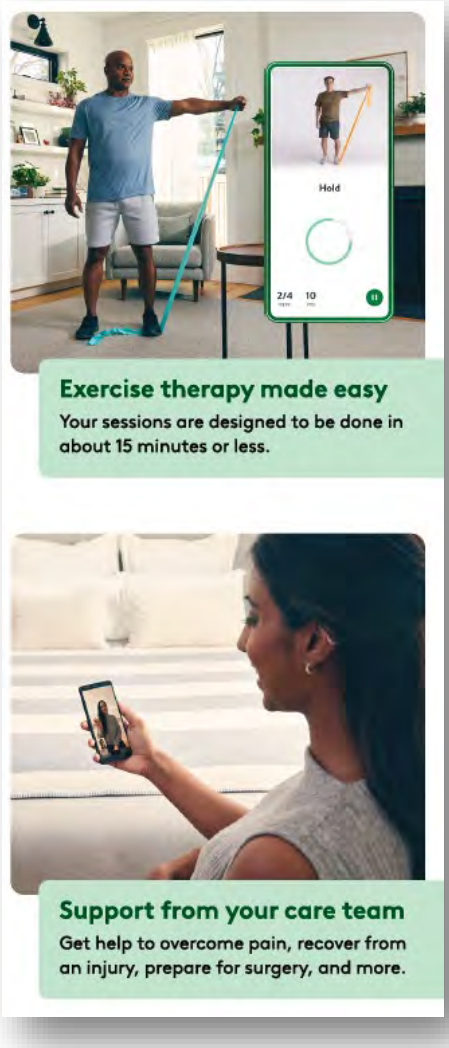
Hinge Health | 855-902-2777

hinge.health/for-individuals

Personalized exercise therapy for joint and muscle pain.
Hinge Health offers expert-developed exercise plans for lasting pain relief, with support from a physical therapist and health coach.

What's included

- Personalized exercises and stretches developed by physical therapists
- Exercise sessions through the Hinge Health app, anytime and anywhere
- Sessions designed to take about 15 minutes or less
- Dedicated one-on-one support from your care team
- No additional cost for eligible members



Who can benefit?

Get support for new or ongoing joint and muscle pain, including:

- Neck or back pain
- Joint pain
- Limited movement
- Recent or past injuries

Who is eligible?

Employees and eligible dependents age 18+ enrolled in a medical plan through their employer. Hinge Health is available at no additional cost.

HSAs & FSAs

OPTUM BANK | 800-243-5543 | WWW.OPTUMBANK.COM

A Health Savings Account (HSA) and a Flexible Spending Account (FSA) are both tax-advantaged accounts that can be used for your health care expenses. Money comes out of each paycheck pre-tax and is deposited into the account for future use. These accounts can help provide some security for your health care costs and limit out-of-pocket expenses.

	FLEXIBLE SPENDING ACCOUNT (FSA)	HEALTH SAVINGS ACCOUNT (HSA)
	If you are enrolled in the **Choice Medical Plan***	If you are enrolled in the **High Deductible Health Plan with HSA**
How does money get into the account?	You contribute money pre-tax every paycheck	You contribute money pre-tax every paycheck
How much can I put into the account each year?	There is no minimum contribution. The maximum is $3,500/year.	There is no minimum contribution. The maximum is: Employee: $4,500/year Employee + Family: $9,000/year If you are age 55+, you may contribute an additional $1,000 per year.
Availability of funds in account	Available on day 1	Funds must accumulate before using.
What can you spend money on?	Any qualified healthcare expense, including dental and vision expenses	Any qualified healthcare expense, including dental and vision expenses. After age 65, you can use the money for anything you wish, without penalty
What happens if you don't use the money by the end of the year?	You can rollover a max of $700 of un-used funds to the next year	You can keep the money, and your balance grows with interest.
How do I qualify to contribute?	You must not be contributing to a Health Savings Account. A Limited Purpose FSA is available to those who contribute to a HSA. It can be used only on Dental and Vision expenses.*	• Must be enrolled in a qualified High Deductible Health Plan • Can't be enrolled in a non-qualified HDHP • Can't be on Medicare or Tricare • Can't be a dependent on another's tax return • Can't be enrolled in a Flexible Spending Account*
What happens to the money if I leave the company?	You lose the money	You keep the money

Hilldrup contributes annually to your HSA to get the savings started!
Employee: $500 Employee + Family: $1,000
Amounts are pro-rated based on hire date. Hilldrup will open your HSA/FSA/Limited Purpose FSA on behalf of enrolled employees with Optum, respectively.

Your Dental Plan

DELTA DENTAL | 800-237-6060
WWW.DELTADENTALVA.COM
GROUP NUMBER: 700238



Hilldrup offers dental insurance that helps pay for the cost of routine checkups, and many other types of dental work you might need. You may visit any dentist for your care; however, you will have lower out-of-pocket costs when you a visit a network provider.

With your PPO plan, you can visit any dentist; but you pay less out-of-pocket when you choose an in-network dentist. Out-of-network benefits are based on a percentile of the prevailing fee data for the dentist's zip code.

Visit the website or call the 800-number above to find a network provider.

In-Network Summary Member Responsibility	In-Network
Annual Benefit Maximum	$1,500
Benefit Roll-Over (non-orthodontic) To qualify, you must have at least one preventive exam and cleaning and have less than $750 in claims in a benefit year	Max roll-over: $375 per year up to $3,000 total when combined with Annual Benefit Max
Deductible Single / Family	$25 / $75 **(applies to Type 2 & 3 services only)**
Preventive Services: Type 1 2 oral exams and cleanings per year, x-rays	100% covered
Basic Services: Type 2 Fillings, simple extractions, root canals	20% after deductible
Major Services: Type 3 Crowns, prosthodontics, dentures	50% after deductible
Orthodontic Children up to age 19	50% $1,000 lifetime max
Healthy Smile Healthy You	One additional exam and cleaning per benefit year if diagnosed with: diabetes, pregnancy, certain cardiac conditions & cancer treatment. Contact Delta Dental prior to receiving additional treatment.
Hearing Aid Benefit	Average savings of 66% off retail pricing, Call 877.593.0051
Bi-Weekly Rate	
Employee	$8.00
Employee + Family	$16.00

Your Vision Plan

DAVIS VISION | 1-888-600-1600
WWW.GUARDIANANYTIME.COM/FPAPP/FPWEB
GROUP NUMBER: 573971



This coverage saves you money on optical wellness, as well as providing discounts on eyewear, contacts, and corrective vision services

- Extensive network of vision specialists and medical professionals
- Affordable coverage
- Quick and easy claim payments

You may go to any provider you wish. However, you will receive the deepest discounts using a **DAVIS VISION NETWORK PROVIDER**. Visit the website or call the 800-number above to find a network provider. Members may go to Costco, Wal-Mart, Target, Visionworks, Sam's Club and more!

In-Network Summary Member Responsibility	In-Network
Eye Exam	$10 copay
Materials Copay	$25 (waived for elective contact lenses)
Frames	$130 allowance + 20% discount on balance Extra $50 frame allowance at Visionworks
Contact Lenses **(in lieu of lenses and/or frames)**	$130 allowance + 15% discount on balance
Laser Correction Surgery Discount	40 to 50% off national average price at Davis Vision participating laser center
Frequency	Exam: every calendar year Lenses (glasses or contacts): every calendar year Frames: every two calendar years
Bi-Weekly Rate	
Employee	$2.04
Employee + Family	$4.93

Your Life and AD&D Plans

GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM

Life and AD&D insurance offers financial protection by providing you coverage in case of an untimely death or accident that takes away your income-earning ability. Life benefits are disbursed to your beneficiaries in a lump sum in the event of your death.

COMPANY-PAID LIFE INSURANCE AND ACCIDENTIAL DEATH & DISMEMBERMENT (AD&D)

Hilldrup provides all full-time employees with a Basic Life benefit that is equal to 1x base salary up to $150,000. Benefits are reduced by 33% at age 70 and 66% at age 75. AD&D will pay an additional benefit that is equal to your life benefit if loss is due to accident or injury. Hilldrup also provides $2,000 in Spouse Life and $1,000 in Child Life (for eligible dependents) at no cost to you. **Make sure to add your dependents in ADP to ensure coverage.**

OPTIONAL LIFE INSURNACE

In addition to the insurance provided by Hilldrup, you can purchase additional life insurance in $10,000 increments to a maximum of $500,000. Spouse coverage may be purchased in $5,000 increments to a maximum of $250,000. Benefits are reduced by 33% at age 70 and 66% at age 75. Coverage for eligible children can be purchased in amounts of $1,000 up to $10,000. You are required to purchase employee coverage in order to purchase coverage for your spouse and /or children.

OPTIONAL ACCIDENTIAL DEATH & DISMEMBERMENT (AD&D)

In addition to the insurance provided by Hilldrup, you can purchase additional AD&D in $10,000 increments to a maximum of $500,000. Spouse coverage may be purchased in $5,000 increments to a maximum of $250,000. This benefit pays out if loss is due to accident or injury. Benefits are reduced by 33% at age 70 and 66% at age 75. Coverage for eligible children can be purchased in amounts of $1,000 up to $10,000. You are required to purchase employee coverage in order to purchase coverage for your spouse and /or children.

EVIDENCE OF INSURABILITY

As a new hire, Evidence of Insurability (EOI) is required to purchase insurance above $150,000 for yourself and above $50,000 for spouse Life Insurance coverage. If you or your spouse have medical conditions that make it difficult to purchase life insurance on your own, this amount is important to you. EOI requires you to complete a medical questionnaire, obtain a physical (at the carrier's request) and receive carrier approval before your insurance goes into effect. New hires may elect up to the Guaranteed Issue without EOI. If you do not elect during your initial new hire enrollment period, an EOI will be required for employee's increasing coverage by more than $50,000 or amounts over $150,000 and for spouse's coverage over $50,000.

NAME YOUR BENEFICIARIES

It's important to name a beneficiary for both your company paid and optional life insurance. If you do not, your benefit will be paid according to insurance company guidelines. You are automatically listed as the beneficiary for any dependent life insurance you may select.

Calculate Your Voluntary Life Cost Per Month

Company Paid Life and AD&D: Paid 100% by Hilldrup.

Voluntary Life and AD&D: Rate is based on age and benefit volume. Spouse rate is based on Employee's Age.

EMPLOYEE

_____ ÷ 1,000 = _____ x _____ = _____
Volume Desired | # of Untits | **Employee** Age From Rate Table | Monthly Cost

SPOUSE

_____ ÷ 1,000 = _____ x _____ = _____
Volume Desired | # of Untits | **Employee** Age From Rate Table | Monthly Cost

CHILD

_____ ÷ 1,000 = _____ x _____ = _____
Volume Desired | # of Untits | Rate from Table | Monthly Cost

Age	Voluntary Life Rate per $1,000 of coverage
<30	$0.074
30 – 34	$0.100
35 – 39	$0.152
40 – 44	$0.217
45 – 49	$0.360
50 – 54	$0.646
55 – 59	$1.140
60 – 64	$1.712
65+	$2.726
Child	$0.079

	Voluntary AD&D Rate per $1,000 of coverage
Employee	$0.030
Spouse	$0.030
Child	$0.030

Your Short & Long-Term Disability



GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM
GROUP NUMBER:
STD: 552347 Voluntary LTD: 550083

Full-time eligible employees receive Company Paid Short-Term Disability, at no cost to you! Long-Term Disability is available to purchase. Disability insurance provides income replacement in the event you are unable to work due to a non-work-related accident or illness. If you are eligible to receive benefits from Social Security, and/or Disability (state and federal), your benefits will be reduced by that amount.

Benefit Summary	Company Paid Short-Term Disability	Voluntary Long-Term Disability* Available to select classes
% Income Replacement	60% up to $1,600/week	50% up to $5,000/month
Benefits Begin	8th Day of Disability	91st Day of Disability
Maximum Benefit Payment Period	13 Weeks	To age 65
Pre-Existing Conditions	Not Applicable	For the first 12 months of enrollment, lookback exclusion for diagnosis within past 12 months

*EOI is required for those newly electing long-term disability outside of their new hire enrollment.

Calculate Your Disability Cost Per Month

Company Paid Short-Term Disability: Paid 100% by Hilldrup.

Voluntary Long-Term Disability: Rate is based on your age and your salary.

_____ ÷ 12 = _____ / 100 x _____ = _____

Annual Salary | Monthly Salary | Age Rate from Table | Monthly Cost

Age	Voluntary LTD Rate per $100 of covered payroll
15 – 24	$0.20
25 – 29	$0.22
30 – 34	$0.33
35 – 39	$0.50
40 – 44	$0.72
45 – 49	$1.06
50 – 54	$1.38
55 – 59	$1.56
60 – 99	$1.27

Your Accident Plan



GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM
GROUP NUMBER: 550083

Accident insurance helps to pay for expenses incurred during an off-the-job accident. Benefit payments can help you with our medical deductibles and copays, and cover household expenses like groceries, mortgage payments and childcare. The below is a summary of covered benefits. To see full benefit plan design and exclusions, see your plan document.

	BENEFIT
Accident ER Treatment	$175
Accident Follow-Up Visit – Doctor	$50 up to 6 treatments
Air Ambulance	$1,000
Ambulance	$200
Appliance Wheelchair, leg or back brace, crutches, walker, walking boot	Up to $500
Blood/Plasma/Platelets	$300
Burn – Skin Graft	50% of burn benefit
Chiropractic Visits	$50 per visit, up to 6
Concussions	$200
Dislocations	Schedule up to $5,000
Emergency Dental Work	Crown: $300 Extraction: $75
Eye Injury	$300

	BENEFIT
Fracture	Schedule up to $6,000
Hospital Admission	$1,000
Hospital Confinement	$250 per day, up to 1 year
Initial Physician's Office/ Urgent Care Visit	$100
Lodging (more than 50 mi away)	$125 per day, up to 30 days
Physical Therapy	$35 per day, up to 10 days
Surgery	Benefit based on type
Tendon/Ligament/Rotator Cuff	1: $500 2 or more: $1,000
Traumatic Brain Injury	$4,000
X-Ray	$40

Bi-Weekly Rate	
Employee	$6.43
Employee + Spouse	$10.43
Employee + Child(ren)	$10.82
Employee + Family	$14.82

Your Critical Illness

GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM
GROUP NUMBER: 550083

When you or a family member suffers a serious illness like stroke or heart attack, Critical Illness insurance can help with expenses that medical insurance doesn't cover like deductibles or out-of-pocket costs or services like experimental treatment. Critical Illness supplements your medical and disability income insurance. The lump sum benefit is paid to you upon diagnosis. To see full benefit plan design and exclusions, see your plan document.



	BENEFIT	
Benefit Amount	• Employee: $5,000 to $20,000 in $5,000 increments • Spouse: $2,500 to $10,000 in $2,500 increments, max of 50% of Employees' benefit • Child: 25% of Employee's benefit to a maximum of $5,000	
Covered Conditions	**1st Occurrence**	**2nd Occurrence**
Cancer and Benign Tumor		
• Spinal Cord Tumor	• 100% of lump sum	• 0% of lump sum
• Carcinoma In Situ	• 100% of lump sum	• 0% of lump sum
• Skin Cancer	• $500 per lifetime	• 0% of lump sum
Heart Disorders		
• Coronary Artery Disease (Stent, Angioplasty, Thrombectomy)	• 10% of lump sum	• 0% of lump sum
• Coronary Artery Disease (requiring a bypass)	• 100% of lump sum	• 0% of lump sum
Lung & Vascular Disorders	• 10% of lump sum	• 0% of lump sum
• Aneurysm	• 50% of lump sum	• 25% of lump sum
• Stroke		
Neurological Disorders	• 50% of lump sum	• 0% of lump sum
• Alzheimer's Disease	• 50% of lump sum	• 0% of lump sum
• Multiple Sclerosis	• 50% of lump sum	• 0% of lump sum
• Parkinson's Disease		
Chronic Disorders	• 30% of lump sum	• 0% of lump sum
• Crohn's Disease	• 10% of lump sum	• 0% of lump sum
• Epilepsy	• 30% of lump sum	• 0% of lump sum
• Lupus		
Child Covered Conditions		
• Autism Spectrum Disorder	• 100% of lump sum	
• Congenital Heart Defect	• 100% of lump sum	
• Multisystem Inflammatory Disease	• 100% of lump sum	
Notes	• Pre-Existing condition limits do apply • Benefits reduce by 50% at age 70	

Group Critical Illness Rates

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a Critical Illness.

Your premium for you and your spouse is based on your age and will not increase as you grow older. Child cost is included with employee election.

Bi-Weekly	Tobacco User Status	Issue Age < 30	Issue Age 30-39	Issue Age 40-49	Issue Age 50-59	Issue Age 60-69	Issue Age 70+
Employee							
$5,000	Non-Tobacco	$1.32	$1.95	$3.66	$6.72	$10.54	$20.16
	Tobacco	$1.92	$3.04	$6.61	$13.78	$23.41	$43.26
$10,000	Non-Tobacco	$2.10	$3.29	$6.48	$12.14	$19.24	$37.65
	Tobacco	$3.30	$5.46	$12.38	$26.27	$44.99	$83.85
$15,000	Non-Tobacco	$2.89	$4.63	$9.29	$17.57	$27.94	$55.15
	Tobacco	$4.69	$7.88	$18.15	$38.75	$66.57	$124.45
$20,000	Non-Tobacco	$3.67	$5.97	$12.11	$22.99	$36.64	$72.64
	Tobacco	$6.07	$10.31	$23.92	$51.24	$88.15	$165.04
Spouse							
$2,500	Non-Tobacco	$0.89	$1.25	$2.22	$3.98	$6.15	$11.38
	Tobacco	$1.19	$1.79	$3.69	$7.51	$12.59	$22.93
$5,000	Non-Tobacco	$1.28	$1.92	$3.62	$6.69	$10.50	$20.12
	Tobacco	$1.88	$3.00	$6.58	$13.75	$23.37	$43.22
$7,500	Non-Tobacco	$1.67	$2.59	$5.03	$9.40	$14.85	$28.87
	Tobacco	$2.57	$4.21	$9.46	$19.99	$34.16	$63.52
$10,000	Non-Tobacco	$2.06	$3.25	$6.44	$12.11	$19.20	$37.62
	Tobacco	$3.26	$5.42	$12.35	$26.23	$44.95	$83.82

Your Cancer Plan

GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM
GROUP NUMBER: 550083

This coverage includes benefits for treatments or procedures due to Cancer. These include chemotherapy, radiation, surgery, experimental treatment, and much more. This benefit supplements your medical and disability income insurance. The benefit pays based on the treatments you receive related to a covered cancer diagnosis. Please see your certificate booklet for specific benefits.



	BENEFIT
Initial Diagnosis Benefit Amount	Employee: $12,500 Spouse: $12,500 Child: $12,500
Benefit Waiting Period Time after effective date during which initial Diagnosis benefits will not be payable	30 days
Radiation / Chemotherapy	Benefit based on schedule Up to $10,000 per year
Pre-Existing Condition	12-month look back / 12-month exclusion
Extended Care Facility/Skilled Nursing	$100/day up to 90 days/yr
Home Health Care	$50/visit up to 30 visits/yr
Hospice	$50/day up to 100 days/lifetime
Hospital Confinement	$300/day for first 30 days $600/day for 31st day thereafter per confinement
ICU Confinement	$400/day for first 30 days $600/day for 31st day thereafter per confinement
Outpatient or Ambulatory Surgical Center	$250/day, 3 days per procedure
Reconstructive Surgery	Benefit based on schedule
Second Surgical Opinion	$200/surgery procedure
Surgical Benefit	Benefit based on schedule Up to $4,125
Skin Cancer	Benefit based on schedule
And More!	See full booklet for details

Group Cancer Rates

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a Cancer diagnosis.

The premium for you and your spouse is based on your age and will not increase as you grow older.

Bi-Weekly	Issue Age	Rate
Employee	<30	$2.45
	30-39	$4.63
	40-49	$9.45
	50-59	$17.35
	60-64	$26.20
	65+	$35.32
Employee + Spouse	<30	$5.34
	30-39	$10.14
	40-49	$20.05
	50-59	$34.81
	60-64	$50.91
	65+	$67.46
Employee + Child(ren)	<30	$3.89
	30-39	$6.07
	40-49	$10.89
	50-59	$18.79
	60-64	$27.64
	65+	$36.76
Employee + Family	<30	$6.78
	30-39	$11.57
	40-49	$21.49
	50-59	$36.25
	60-64	$52.35
	65+	$68.90

NEW

Your Hospital Indemnity Plan

GUARDIAN | 888-600-1600
WWW.GUARDIANANYTIME.COM
GROUP NUMBER: 550083

Similar to Accident and Critical Illness Plans, Hospital Indemnity provides a lump-sum benefit to use for expenses related to a hospital stay. Expenses covered include: hospital admission, hospital confinement, lodging, transportation and more.

Please see your certificate booklet for specific benefits.



	BENEFIT
Hospital Admission	$1,250 per admission Up to 5 admissions per year, per insured
ICU Admission	$1,250 per admission Up to 5 admissions per year, per insured
Hospital Confinement	$100 per day Up to 15 days per year, per insured
ICU Confinement	$200 per day Up to 15 days per year, per insured
Hospital Short Stay	$200 per day Up to 1 day per year, per insured
Newborn Nursery Care	$100 per day Up to 1 day per year
Newborn Increased Admission / Confinement Benefit for NICU	25% increase to newborn NICU benefits
Infertility Hospital Stay	$300 per day, up to 1 day per year Lifetime maximum of 2 days per insured
Child Organized Sports	25% increase to child benefits
Treatments covered	Sickness and injury
Bi-Weekly Rate	
Employee	$7.02
Employee + Spouse	$14.88
Employee + Child(ren)	$11.28
Employee + Family	$19.13

Dependent Care Reimbursement Account



OPTUM BANK
800-243-5543 | WWW.OPTUMBANK.COM

You can put money into a Dependent Daycare Reimbursement Account on a pre-tax basis. This money can be used for daycare for your child, such as preschool, before/after school programs and adult daycare. The maximum amount you can contribute per year is $7,500 ($3,570 if married filing separately). Elections are based on a calendar year basis (Jan-Dec). If you don't use the money in a calendar year, you lose it!

Dependent Care Eligible Expenses:

- Care for your child who is under age 13
    - Before and after school care
    - Babysitting and nanny expenses
    - Daycare, nursery school and preschool
    - Summer day camp
- Care for your spouse or relative who is physically or mentally incapable of self-care and you claim them as a dependent on your tax return

How Dependent Care Reimbursement works:

- Employees set aside a portion of their salary before taxes are paid
- This money is automatically deducted from the paycheck and held in the employee's Dependent Care Reimbursement Account
- As expenses for qualified items are incurred, employees submit them to Optum Bank via claims and receive reimbursement from their Dependent Care Reimbursement Account

Employee Assistance Program (EAP)

Online: http://www.guidanceresources.com/
App: GuidanceNow℠
Web ID: Guardian

The Employee Assistance Program is provided by ComPsych® GuidanceResources® and offers counseling, legal and financial consultation, work-life assistance and crisis intervention services to you and your household family members.



Why is your employer providing access to an EAP?

Because your employer cares about you and your dependents. The EAP can be used free of charge as needed when you or your dependents are facing emotional, financial, legal or other concerns.

Are the services confidential?

Yes, the EAP is strictly confidential. No information about your participation in the program is provided to your employer.

Why might my family or I use the services?

There are many reasons to use these services. You may wish to contact the EAP if you:

- Are feeling overwhelmed by the demands of balancing work and family
- Are experiencing stress, anxiety or depression
- Are dealing with grief and loss
- Need assistance with child or elder care concerns
- Have legal or financial questions
- Have concerns about substance abuse for yourself or a dependent

ComPsych GuidanceResources Worldwide | Guardian

What happens when I call?

When you call, you will speak with a GuidanceConsultantSM, a master's- or PhD-level counselor who will collect some general information about you and will talk with you about your needs. The GuidanceConsultantSM will provide the name of a counselor who can assist you. You can then set up an appointment to speak with the counselor over the phone or schedule a face-to-face visit.

What counseling services does the EAP provide?

3 face-to-face or virtual sessions per person, per issue, per year

The EAP provides free short-term counseling with counselors in your area who can help you with your emotional concerns. If the counselor determines that your issues can be resolved with short-term counseling, you will receive counseling through the EAP. However, if it is determined that the problem cannot be resolved in short-term counseling in the EAP and you will need longer-term treatment, you will be referred to a specialist early on and your insurance coverage will be activated.

Can my children use the EAP?

Yes. The EAP is a confidential benefit for employees and their household family members.

Legal Support & Identity Theft



LEGAL RESOURCES
800-728-5768
WWW.LEGALRESOURCES.COM

Did you know more than 70% of American households will have a legal need this year? You can protect yourself and your family through Legal Resources. You can enroll in the Legal Plan as well as Identity Theft Protection.

Members agree to a 12-month enrollment commitment.

Legal Plan Coverage

Employees are able to enroll in our Legal Resources membership. After enrollment, you will receive your membership card(s) containing contact information for your law firm. If you need legal plan services, you are able to call your law firm directly to set up an appointment.

Receive help with any of the following

- General advice & consultation
- Family & elder law
- Criminal matters
- Wills & estate planning
- Traffic violations
- Real estate
- Civil actions
- Prep & review of routine legal documents

Identity Theft Protection

It's critical that we protect our personal information with a comprehensive identity theft protection plan. Identity fraud is happening everywhere, and identity theft recovery can be daunting. Legal Resources members with an identity protection plan through their employer receive a number of identity theft services.

- Monitor: on-going monitoring to keep your personal information secure
- Alert: early warning system with prompt email notifications, allowing you to take action before damage is done
- Control: Know and improve your credit score, keep keystrokes, pin numbers and credit card info safe
- Resolve: 24/7 access to white glove resolution experts

Bi-Weekly Rate		
Legal Only	$8.77	
Identity Theft	**Individual**	**Family**
Basic	$1.85	$4.15
Gold	$2.77	$6.46
Platinum	$4.62	$9.69

To view differences in plan levels, log into myhilldrupbenefits.com

PET INSURANCE



PET'S BEST
888-984-8700
WWW.PETSBEST.COM/HILLDRUP

Pet insurance reimburses you for vet bills when your pet is sick or injured to help take the financial worry out of vet visits. This coverage is for dogs and/or cats.

How it Works

1. **Get Treatment:** If your pet becomes ill or injured, get treatment from any veterinarian of your choice.
2. **File a Claim:** Online and mobile app filing available. No need to send medical records unless requested.
3. **Get Cash Back:** Most claims are processed in 5 days or less and can be deposited directly into your bank account.

BENEFIT	Essential	Plus	Elite
Annual Coverage Limit for Unexpected Accidents and Illnesses	$5,000 – Unlimited	$5,000 – Unlimited	$5,000 – Unlimited
Annual Deductible Options	$50 - $1,000	$50 - $1,000	$50 - $1,000
Reimbursement Percentage Options	70% – 90%	70% – 90%	70% – 90%
Accidents, Illnesses, Cancer, Hereditary Conditions, Emergency Surgeries, Rx Meds	X	X	X
Accident and Illness Exam Fees associated with the diagnosis of your pet for an eligible injury or illness. (Not routine exams)		X	X
Rehabilitative, Acupuncture & Chiropractic coverage to treat eligible illness & injury			X
Routine Care Coverage	Available to purchase		

Price varies on location, age and breed of pet. Average monthly premium cost is $25 to $65

ENROLL DIRECTLY WITH PET'S BEST
BY PHONE OR ONLINE
888-948-8700
PetsBest.com/Hilldrup

Additional Benefits

Hilldrup provides you access to several other benefits to help support you and your families. Please contact Human Resources for additional detail and questions.



	BENEFIT
Employee Discount Program	• Exclusive discounts on car rentals, hotels, movie tickets and more
Tuition Reimbursement	• Undergraduate and graduate coursework
Certification Reimbursement	• Training and certification courses, etc.
Christmas Club Account	• Bi-weekly payroll deductions • Hilldrup makes final, one (1) week contribution for you
Company Paid Holidays	• Ten (10) annually
Paid Maternity Leave	• Twelve (12) weeks after one year of service
Paid Parental Leave	• Six (6) weeks after one year of service
Paid Time Off	• Hours allotted annually based on years of service starting with 120 hours; pro-rated based on start date
Wellness	• Full access to our corporate fitness center

Created by TrueNorth
for Hilldrup

