2027

EMPLOYEE BENEFITS GUIDE

Sure-Dry

Open Enrollment 2026

November 23 - December 2, 2026

Welcome to the start of Open Enrollment! This guide will give you the information you need to make your 2027 benefit elections. We are also here to help at any time. Contact Yvette Woerishofer in person or at yvettew@SureDryBasements.com.

Our purpose is to Redefine our Industry. Year after year we want to redefine the experience you have working on this team and that includes the benefits we offer you. Throughout this guide, you will see many new benefits for 2027 that are designed to better meet your and your families' needs. Here are some of the new features available to everyone covered by our medical insurance.

- We are moving to the Cigna medical network with Personify as the company that pays our claims (called a "TPA"). Working with Personify means ***some medical expenses you pay in cash to providers we have a direct contract with will now count towards your deductible.***
- You will receive ***free, unlimited virtual urgent care.***
- You will receive ***free, unlimited virtual mental healthcare.***
- For your prescription needs, ClearSaveRx now automatically searches for the ***lowest cost prescriptions*** and that expense now counts towards your deductible.

And every employee, regardless of whether covered by our medical insurance, receives ***free access to the HealthJoy app***, a one-stop shop for all your benefit information and needs. It holds all your benefit cards and plans, answers your benefit plan questions, assists you in finding high quality, low-cost medical care providers, and even schedules your appointments.

As our manifesto says and we believe in our hearts: You are truly our most valuable asset. We hope our continued effort to elevate our benefits demonstrates that loud and clear.

To your health and wellbeing,

Nick Rainer
General Manager

Yvette Woerishofer
Human Resources Manager

2027 Benefits Guide

Sure-Dry

We strive to provide you and your family with a comprehensive and valuable benefits package that enables you to have a better life. That means we want to make sure you are getting the most out of your benefits. This guide will help you navigate the process and make the decisions easier for you.

Open enrollment is a brief period each year when you can choose all your benefits for the following calendar year. This year, open enrollment is from November 23-December 2, 2026. All employees, regardless of their current benefits, will need to log in to Paylocity and finalize their benefits by December 2, 2026. Elections made during the open enrollment period will become effective on January 1, 2027. For newly eligible or hired employees, benefits become effective on the first day of the month following 60 days of employment.

If you have questions about any of the benefits mentioned in this guide, please contact Yvette Woerishofer in person or at yvettew@SureDryBasements.com.

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Getting Started

Am I Eligible for Benefits?

If you are a full-time employee, working 30 hours or more per week, you are eligible to enroll in our benefits. In addition, the following family members are eligible for medical, dental, vision, and supplemental insurance.

- Your legal spouse
- Your dependent child(ren) or stepchild(ren) up to age 26
    - Children can be covered up to the last day of the month in which they turn 26
- Any child placed with you for adoption or for whom you have legal guardianship
- Disabled child(ren) who primarily depend upon you for support

When Do I Enroll?

- **New Hires**: Benefits start on the 1st of the month after 60 days of employment. Your HR software will notify you when it's time to sign up.
- **Newly Eligible**: Within 30 days of eligibility. Your HR software will notify you when it's time to sign up.
- **Qualifying Life Event (QLE)**: Submit a qualifying life event in your HR software within 30 days of the event. Examples of a QLE include:
    - Marriage, divorce, or legal separation
    - Birth or adoption of a child
    - Change in child's dependent status (i.e. reaching 26)
    - Death of a spouse, child, or other qualified dependent
    - Loss of coverage through another plan
- **Annually**: During Open Enrollment

How Can I Make Changes?

You may make changes to your contribution amounts for HSA or 401(k) at any time during the year. All other benefits require a QLE (described above) to make changes during the year.

- HSA Changes: Make changes by logging in to Paylocity.

- 401(k): Make changes to your contribution amount by logging into your account at www.principal.com.

Benefits Terminology

Annual Maximum | The total dollar amount that a health plan will pay for care for an individual or family member (under a family plan) for a specified benefit period, typically a calendar year.

Coordination of Benefits (COB) | When an individual has more than one health care plan, this is the process that the plans use to determine the amount that each will pay.

Deductible | A fixed dollar amount that the individual/family must pay out of pocket each calendar year before the plan will begin reimbursing for non-preventative health expenses.

- **High-Deductible Health Plans (HDHP):** Those with single coverage pay up to the deductible amount and then the plan pays 100% of medical expenses. With family coverage, each person covered by the plan has their expenses capped at the individual deductible amount ("embedded deductible") - then the remaining family meets the family deductible before the plan pays 100% of medical expenses.
- **Preferred Provider Organization (PPO):** You pay co-pays for medical services and prescription drugs up to your deductible amount. Thereafter, you pay co-insurance (a certain percentage of the service) up to your out-of-pocket maximum.

Explanation of Benefits (EOB) | A document provided by the insurance company detailing the services that were paid for on an individual's behalf and listing the amount an employee has spent towards the deductible.

Formulary | A list of prescription drugs covered by the health plan, often structured in tiers that subsidize low-cost generics at a higher percentage than more expensive brand-name or specialty drugs.

Health Savings Account (HSA) | Those covered by an HDHP can defer pre-tax dollars from their paycheck into this account up to an annual limit set by the IRS. HSA funds may be used to pay for medical expenses whether the deductible has been met or not, and no tax is owed on funds withdrawn from an HSA to pay for medical expenses.

In-Network & Out-of-Network | In-network means those medical providers with whom the health plan has an agreement to care for its members. Health plans cover a greater share of the cost for in-network health providers and less (or none) for those providers that are out-of-network.

Lifetime Maximum | The maximum amount a plan will pay over the course of a lifetime. It may apply to an individual or a family and typically applies to specific treatments such as orthodontic treatment.

Out-Of-Pocket Maximum | The most an individual/family could pay during a coverage period for their share of the costs of covered services.

Premium | The amount that must be paid for a health insurance plan by covered employees, by their employer, or shared by both. Your yearly premium for any insurance plan is divided by 24 and that amount is deducted

from your paycheck over the course of the year in the 1st and 2nd paychecks of each month. Medical, dental, and vision premiums are paid on a pre-tax basis; all other premiums are paid on a post-tax basis.

Medical Insurance

We offer the three medical plans listed below. One is a PPO and the other two are High-Deductible Health Plans. Premiums are listed in the back of this guide.

- **Health Savings Account (HSA):** If you are covered by one of high-deductible health plans, you may choose to contribute pre-tax dollars from your paycheck to a Health Savings Account through the company. Money in this account can be used to pay for your medical expenses. See the Health Savings Account section in this guide for more information.
- **Medical Providers:** Our medical providers are as follows and you can find their contact information at the back of this guide.
    - Cigna is our network of medical providers.
    - Personify is our TPA, the company that administrates our medical insurance claims.
    - First Stop Health provides $0 virtual urgent care and virtual mental healthcare.
    - HealthJoy is the app that brings all our benefit information together in one place.

Medical Plan Options	Traditional Plan	Base HDHP Plan	Low Premium HDHP Plan
Employee Only Deductible	$3,000	$5,000	$7,500
Employee + 1/Family Deductible	$6,000 (embedded deductible)	$10,000 (embedded deductible)	$9,100 (embedded deductible)
Out of Pocket Maximum	$6,000 single $12,000 family	$5,000 single $10,000 family	$7,500 single $9,100 family
Preventive Exams	Covered at 100%	Covered at 100%	Covered at 100%
Coinsurance	You pay 20%	n/a	n/a
Other Office Visits & Other Services	Co-pays $35 - Primary Care $35 - Urgent Care $75 - Specialist $500 - ER	Pay for until deductible met	Pay for until deductible met
Prescription Drugs	Co-pays Tier 1: $10 Tier 2: $35 Tier 3: $50 Preferred Biosimilar & Generic Specialty Drugs: $150 Prefered Brand Specialty Drugs: $200	Pay for until deductible met	Pay for until deductible met
Virtual Urgent Care through First Stop Health	$0	$0	$0
Virtual Mental Healthcare through First Stop Health	$0	$0	$0
HealthJoy App (see section this guide)	$0	$0	$0

Prescription & Pharmacy

Your medical insurance plan covers prescriptions. Our Pharmacy Benefit Manager is Vivid Clear, and you can find their contact information at the back of this guide.

Here are a few important notes about accessing prescriptions:



- **Short-Term Use Drugs:** If you (or family member) are taking a generic prescription drug for short-term use, you will fill that prescription at a local pharmacy.

- **Maintenance Drugs:** If you (or family member) are on a generic prescription drug that is considered a "maintenance" prescription, you will be required to use HyVee's mail order for the drugs to be covered by the plan. See HyVee's mail order number at the back of this guide.

- **Brand Name & Specialty Drugs:** If you are on a brand name or specialty drug, fill your prescription to your local pharmacy. Vivid Clear will typically fill the prescription for a limited amount of months and notify SHARx. SHARx will then contact you to onboard you into their program and look to fill the prescription for you at a reduced cost. If SHARx cannot fill the prescription, Vivid Clear and Amber Pharmacy (specialty drug pharmacy) will step in to source the medication for you.

    - **SHARx** is a prescription savings and advocacy program designed to reduce the cost of high-priced brand name and specialty medications for you and your families. SHARx uses global procurement and non-insurance sourcing methods to find medications at the lowest possible price. We offer this service at no charge to you. SHARx' contact information is at the back of this guide.

- **No CVS and Walgreens:** These pharmacies often charge the highest price and so we have chosen to exclude them from our medical insurance, meaning you cannot use your company insurance to fill prescription drugs at those pharmacies. If you do, you will pay the store's cash price for the prescription, and your purchase will not count toward your medical insurance deductible. We recommend using pharmacies like Walmart, and Kroger for lower-priced drugs.

- **ClearSaveRx:** When you are filling a prescription, our medical insurance will automatically look for the cheapest price for you and apply that coupon. You no longer need to search for Rx coupons. Additionally, that prescription expense will now count towards your deductible!

- **Generics:** To save money on your prescription costs, choose generic drugs whenever possible.

Virtual Mental Healthcare

Life is not always easy. Sometimes a personal or professional issue can affect your work, health, and general wellbeing. During these tough times, it is important to have someone to talk to and let you know you are not alone. All employees and family members covered by one of our medical plans are invited to contact **First Stop Health** to take advantage of free and unlimited mental healthcare. First Stop Health's contact information is at the back of this guide.



Dental Insurance

We have two dental insurance plans through Delta Dental - one with orthodontia coverage and one without.

- **Annual Deductible:** $50 per person / $150 per family
- **Annual Maximum Benefit:** $1,500 (for each person on the plan)
- **Lifetime Maximum Benefit for Orthodontia:** 50% coverage of orthodontia treatment up to $3,000 (for each person on the plan, including adults)
- **Preventive Services (cleanings, exams, x-rays):** Covered at 100%
- **Basic Services (fillings, oral surgery):** You pay 15% after your deductible
- **Major Services (crowns, dentures, bridges):** You pay 50% after your deductible



You have the option to see any provider you wish, but you will receive the greatest benefits when you choose an in-network dentist. For a complete list of in-network providers near you, visit www.deltadental.com and select "Member Tools." Dental insurance rates are at the back of this guide.

Vision Insurance

We offer vision insurance through EyeMed. You have the option to see any provider you wish, but you will receive the greatest benefits when you choose an in-network provider. For a complete list of in-network providers near you, visit EyeMed's Enhanced Provider Locator on www.eyemed.com. Vision plan rates are at the back of this guide.

- **Eye exams:** Every 12 months with a $20 co-pay; the rest of the exam cost if paid for
- **Lenses:** Every 12 months get new lenses with a co-pay of $25 (for single lined, bifocal, trifocal, or lenticular)



- **Frames:** Every 24 months get new frames with a $140 allowance and 20% discount on anything over that amount

Contacts: Every 12 months, in lieu of glasses, order your contacts with a $140 allowance and 15% discount on anything over that amount

Extras: 40% off prescription sunglasses, 20% off non-prescription sunglasses, 40% off hearing exams from Amplion Hearing Network, and 15% off retail price or 5% off promotion price for Lasik or PRK in the U.S. Laser Network

Pre-Tax Savings Accounts



Paylocity is our provider for Health Savings Accounts (HSA), Flex Spending Account (FSA), Dependent Care Flexible Spending Accounts, and Limited Medical Flexible Spending Accounts.

Dependent Care Account: You can enroll in the Dependent Care FSA regardless of your medical insurance enrollment.

- Each calendar year, you can contribute up to a $7,500 per household (or $3,750 for a married couple who files taxes separately).
- As you contribute pre-tax, you can withdraw these funds to pay for expenses related to dependent care, like daycare expenses and before/after school programs.
- Before enrolling, make sure you think through your total dependent care expenses for the year as you have only until March 15 of the following year to use the funds. You will forfeit any funds that remain.

Healthcare Flex Spending Account (FSA):

- In 2027, you can contribute up to $3,500 with individual coverage or $7,000 with family coverage. You choose how much to contribute, and that amount is deducted from your paycheck before taxes
- Receive a benefits debit card when you enroll. Use your card to pay for eligible expenses and keep your receipts in case you're asked to verify a purchase.
- Use your 2027 funds by March 15, 2028. Estimate your expenses before enrolling. Any funds remaining after the March 15 deadline will be forfeited.
- Health Care FSA generally makes you ineligible to contribute to an HSA while you have FSA coverage. A Limited Purpose FSA may be an option for eligible dental and vision expenses.

Limited Purpose Flexible Spending Account: Lets you set aside pre-tax dollars from your paycheck to help pay for eligible dental and vision expenses. You can use this account alongside a Health Savings Account (HSA).

- For 2027, the IRS allows you to contribute up to $3,500, subject to your plan's contribution limit.
- You can use your funds for eligible expenses such as dental cleanings, fillings, orthodontia, eye exams, prescription glasses, and contact lenses.
- Before enrolling, estimate what you expect to spend on dental and vision care for the year. Check the plan's deadlines for incurring expenses and submitting claims. Unused funds may be forfeited depending on the plan's rules.

Health Savings Account (HSA):

- To take advantage of the HSA, you must be enrolled in one of the company's high-deductible medical plans.
- All contributions and withdrawals for qualified medical expenses are income tax-free.
- Any interest earnings and investment growth from deposits are income tax-free.

Unlike other accounts, an HSA is one of the only savings vehicles that allows you to put money in on a before-tax basis through payroll contribution, grow your savings tax-free (interest and investment earnings are not taxed), and take the money out income tax-free for qualified medical expenses.

During your enrollment, you can select your annual HSA contribution. That contribution will be divided into 24 deductions throughout the year. As your money is deposited into your HSA and your funds accumulate, you can withdraw them to pay for eligible medical, dental, and vision expenses. You can change your amount of contribution at any time throughout the year.

The limit for HSA contributions in 2027 is $4,500 for singles and $9,000 for families.

Life & Short-Term Disability Insurance

We want to protect you and your loved ones in the case of death or disability. That is why we offer you Basic Life and AD&D, Voluntary Life and AD&D, and Short-Term Disability Insurance through Mutual of Omaha.

Basic Life and AD&D

Life insurance pays a benefit (called a death benefit, which is usually a lump sum) to a beneficiary (whomever you choose to receive the benefit) after your death. **The company provides you with a $50,000 life & AD&D insurance policy at no cost to you.**

Voluntary Life Insurance and AD&D



You have the option to purchase an additional amount of Life and AD&D coverage.

- **Guaranteed coverage** of up to $200,000 for you and $50,000 for your spouse. No medical questions if you enroll when you are first eligible or are increasing only $10,000 from your previous year's amount (unless it's the first time that amount takes you over the guaranteed coverage amount).
- **Employee**: Up to $500,000 in increments of $10,000; maximum of five times salary.
- **Spouse**: Up to $250,000 in increments of $10,000; no higher than your spouse's amount.
- **Children**: Either a $5,000 or $10,000 option is available.

In 2027, we are moving to Mutual of Omaha for our life insurance. If this is your first time enrolling or you had life insurance through the company in 2026, you will be able to sign up for the guaranteed coverage with no questions asked. If your last year's coverage exceeds the guaranteed issue, you can keep that amount of coverage with no medical questions asked.

Plan Beneficiary

Please review and update your beneficiary information through Paylocity. This will help ensure that your life insurance benefits are directed according to your wishes.



Short-Term Disability Insurance

Employees can elect a Short-Term Disability (STD) policy through Mutual of Omaha. STD is an income protection plan. Should you become unable to work for a period due to a disability, it will replace 60% of your income with up to $2,000 per week for up to 26 weeks. Benefits begin on the first day of hospitalization due to injury or illness; otherwise, STD benefits start after a 7-day waiting period.

The STD policy does exclude payment for 6 months for pre-existing injuries or illnesses that started up to 3 months before enrolling in the policy. *This pre-existing condition exclusion does not apply in 2027 if you were enrolled in STD in 2026 as Mutual of Omaha will "grandfather" your past coverage.*

Supplemental Insurance through Mutual of Omaha

Accident Insurance

Employees can elect Accident Insurance to help cover expenses related to an accident. In addition to the benefits below, the plan pays a once-a-year $50 wellness screening benefit per covered person. There are no health questions or pre-existing condition limitations for this benefit.

- **Helps your finances after a mishap.** When you or another member has a covered accident, like a fall, that requires medical attention, you can receive cash benefits to help cover the unexpected costs.
- **Helps cover related expenses.** While health plans may cover direct costs associated with an accident, you can use accident benefits to help cover related expenses like lost income, childcare, and deductibles.
- **Pays cash benefits directly to you.** Accident Insurance can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are payable directly to you.

Hospital Indemnity Insurance

Employees can elect Hospital Indemnity Insurance to help cover hospital stay expenses. In addition to the benefits below, the plan pays a once-a-year $50 wellness screening benefit per covered person. There are no health questions or pre-existing condition limitations for this benefit.

- **Helps protect your finances.** When you are facing a hospital stay, you can receive a benefit to help pay for unexpected expenses not covered by your health plan.
- **Helps cover related expenses.** While health plans may cover direct costs associated with an illness or injury, you can use your Hospital Indemnity benefits to help cover related expenses.
- **Pays cash benefits directly to you.** Hospital Indemnity payments can be used however you want, and they pay in addition to any other coverage you may already have. Benefits are payable directly to you.

Critical Illness Insurance

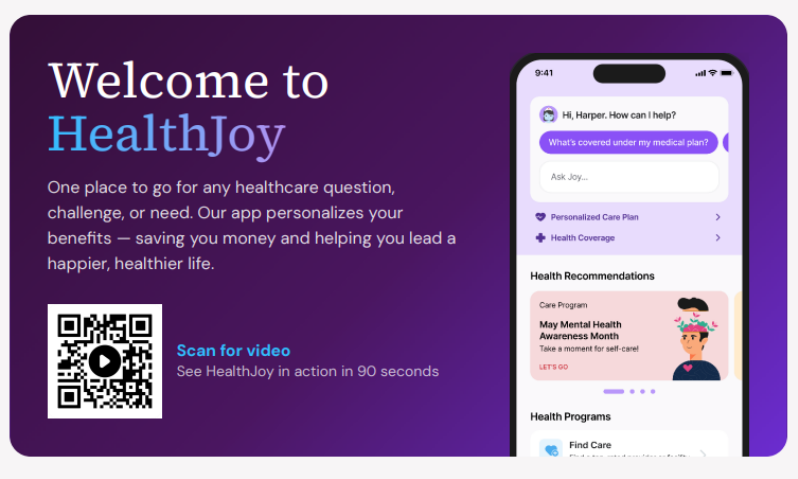
Employees can elect Critical Illness Insurance to receive a lumpsum benefit for employees or covered spouses/children diagnosed with a covered critical illness, like a heart attack, stroke, or cancer. In addition to the benefits below, the plan pays a once-a-year $50 wellness screening benefit per covered person. There are no health questions asked for this coverage. If you were diagnosed with a critical illness prior to enrolling, that critical illness will not be eligible for reimbursement UNLESS you were covered by critical illness coverage during the previous year. *Mutual of Omaha will "grandfather" your coverage from 2026.*

- **For you.** You can choose a $20,000 benefit, with no medical questions asked.
- **For your spouse.** If you elect coverage for yourself, you can choose a $10,000 benefit, no medical questions asked.
- **For your child(ren).** A $10,000 benefit included for free if you enroll in the plan.

HealthJoy App

We offer every employee free access to the Healthjoy app available for download on the App store or Google Play. HealthJoy is one platform that replaces all other benefits websites and tools. With this app:

- You have access to all your benefits cards. No more worrying about whether you have your card when you head to your health provider!
- Search for providers with real cost scores, quality ratings, and appointment scheduling so you can find the lowest-cost, highest quality provider you need. HealthJoy will even suggest the providers that are best for you.
- JoyAI in the app is your personal health assistant. It's trained on our benefits plans so it can answer your questions in plain language, provide plan comparisons, answer coverage questions, look up providers for you, and give you cost estimates instantly.
- JoyAI is backed by a human concierge team that handles complex situations such as claims disputes, appointment scheduling, and care coordination. It's available 24/7/365 to help you!



1 **Download the App**

Scan the QR code on this flyer, or search "HealthJoy" in the App Store or Google Play. The app works on Android, iPhone, and iPad.

2 **Sign Up**

Open HealthJoy, tap "Sign Up," and enter the email address tied to your employee benefits. A few security questions may follow if you use a different address.

3 **Activate**

You'll get an activation link by email or text after we verify your identity and plan benefits. Create a password of at least eight characters and you're in.

Retirement Plan | 401(k) Savings Plan through Principal

We offer all full-time employees and qualifying part-time employees (outlined by IRS) the option to participate in our 401(k) plan. We have two types of 401(k) plans and you can participate in either or both.

- **Pre-Tax (Traditional) |** Your contributions are not taxed at the time you defer them from your paycheck. Instead, taxes are paid on withdrawals, including any earnings. Getting a tax break at the time of investment will leave more money in your pocket now – money that you can invest, save, or spend.
- **Post-Tax (Roth) |** Roth contributions are taxed at the time you defer them from your paycheck. You will not pay taxes on qualified withdrawals, including any earnings.

The company will do a dollar-for-dollar match, up to 5%, based on the company's profitability each year. To get the match, you must be actively employed on December 31st of each year. To enroll in the plan, 1) visit

www.principal.com/enroll to create an account and enter your contribution amount or 2) text the word "**enroll**" to **78259**.



Enrollment Process

Open Enrollment runs November 23 through December 2. Starting November 23, follow the steps below to open your benefits enrollment in Paylocity.

- On your phone: Open the Paylocity app and tap the Open Enrollment banner. If you don't see it, tap Menu (the bars at the bottom right), then Benefits and Open Enrollment.
- On your computer: Sign in to Paylocity. Open Benefits, select the Open Enrollment event, and start your enrollment.

Review your plan options and costs, confirm who you'd like to cover, and select or waive coverage.

- Adding dependents? Have each dependent's Social Security number and date of birth handy before you begin.
- Employer-paid life insurance: You're required to name at least one beneficiary. Click Add Beneficiaries in Paylocity and enter the person you want to receive your life insurance benefit. If your name appears by default, select or add your intended beneficiary before submitting.

Submit your selections by December 2 and save a copy of your enrollment confirmation for your records.

Have questions about your options or need help enrolling? Reach out to HR. We're happy to help!

Provider Contact List

Medical and Prescription Drug

Personify (administrates claims)

Email: support@personifyhealth.com

Website: www.personifyhealth.com

Member Services Number : 800-843-3831

Ci*gna (Medical Provider Network)*

Website: www.cigna.com

Vivid Clear (Pharmacy Benefits Manager)

Phone: 877-848-4379

Website: www.vividclearrx.com

Vision

EyeMed

Phone: 866-939-3633

Website: portal.eyemedvisioncare.com

Health Savings Accounts, Dependent Care Accounts, Health Care Flex Spending Account and Limited Medical FSA

Paylocity

888-873-8205

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New PTO/ETO & Sick Time offerings

Effective January 1, 2027

Sure-Dry is adding one week (40 hours) of annual time off at every service tier and introducing three sick days per year for full-time employees.

PTO & ETO

Eligible full-time employees earn paid time off (PTO) each paycheck based on years of service from their hire date. Fully commissioned employees are ineligible for PTO/Sick Time. System Design Specialists earn unpaid Earned Time Off (ETO/Sick Time) at the same rates and annual amounts shown below.

Years of Service	Hours per paycheck	Annual time off
0-2 years	4.61	15 days (120 hours)
3-5 years	6.15	20 days (160 hours)
6-14 years	7.69	25 days (200 hours)
15+ years	9.23	30 days (240 hours)

Rates shown apply to employees working eight hours per day and 40 hours per week. Full-time employees working more than 30 but fewer than 40 hours accrue time off according to their agreed schedule with Sure-Dry.

PTO Carryover & Payout

- January 1, 2027: Your full positive PTO balance at the end of 2026 carries over.
- Future years: Starting at the end of 2027, up to 40 hours of unused PTO carries over. Hours above 40 expire.
- Separation: Sure-Dry pays out up to 40 hours of accrued, unused PTO, but not sick time

Requesting Time Off

Submit planned vacation in Paylocity and get manager approval at least two weeks before your first day off. If you take the time off without meeting that deadline, it comes out of your sick day bank. Approval depends on staffing. When requests overlap and coverage is limited, longer service generally gets preference. Use paid PTO in increments of at least four hours.

Sick Days

- Three days per year. Your bank renews January 1. Unused days expire and are ineligible for payout.
- New hires can use sick days after completing 90 days of employment.
- Illness or emergency. Call your supervisor as early as possible and by the start of your workday.

- Two or more consecutive sick days. Give your supervisor a doctor's note when you return.

2027 Bi-Weekly Premium & Rates

**The rates listed below are based on 24 deductions throughout 2027.*

Medical	$3,000/$6,000 PPO Plan	$5,000/$10,000 HDHP Plan	$7,500/$9,100 HDHP Plan
Employee Only	$171.78	$139.47	$128.31
Employee + Spouse	$452.72	$245.73	$226.07
Employee + Child(ren)	$301.44	$227.70	$209.48
Family	$560.59	$361.94	$332.99

Dental	No Orthodontia Plan	Orthodontia Plan
Employee Only	$6.85	$10.94
Employee + 1	$13.61	$21.75
Family	$23.74	$36.75

Vision	
Employee Only	$0.00
Employee + Spouse	$2.05
Employee + Child(ren)	$2.28
Family	$4.43

Supplemental Coverage	Hospital	Accident	Critical Illness	Short-Term Disability
Employee Only	$4.51	$3.87	*This is calculated based on your age and tobacco usage - see details when you enroll.*	*This is calculated based on your weekly income - see details when you enroll.*
Employee + Spouse	$9.42	$6.89		
Employee + Child(ren)	$7.78	$7.53		
Family	$12.69	$10.55		

Life Insurance	
Employee	*You can elect up to $500k in increments of $10k. The maximum is 5x your salary. Rates are based on your age. See specific details when you enroll.*
Spouse	*You can elect up to $250k in increments of $10k. The maximum is 100% of the employee's paid life insurance. You must elect employee life insurance to elect spouse life insurance. See specific details when you enroll.*
Child(ren)	*$5,000 or $10,000 for each child. The cost is $0.13 per $1,000 of coverage.*