2026 BENEFITS ENROLLMENT

WARRIOR LOGISTICS | TRUE NORTH Insurance and Financial Strategies



YOUR BENEFITS, YOUR STORY

Benefits to fit your unique situation

April 2026 – March 2027

Driving Excellence in All That We Do! ***(TM)***

We Believe **WARRIORS** are Called.

We believe that all individuals are called to a higher purpose.

WARRIOR LOGISTICS strives to create an environment that empowers each "**WARRIOR**" to achieve his or her fullest potential.

Our **PROMISE** is your **Opportunity**. Warrior helps people **thrive**.



A NOTE FROM LEADERSHIP:

We strive to provide you and your family with a comprehensive and valuable benefits package that enables you to have a better life. We invite you to review the information in this booklet to gain a better understanding of how these benefits can support you and your family.

BENEFIT ELIGIBILITY & ENROLLMENT

- What's Changing This Enrollment
- Eligibility
- Enrollment Blueprint

PHYSICAL & MENTAL HEALTH

- Medical & Prescription Drug
- Telemedicine
- Dental
- Vision
- Employee Assistance Program (EAP)
- Life and AD&D
- Disability

ADDITIONAL PROTECTION

- Accident
- Critical Illness
- Hospital Indemnity
- Legal & ID Theft
- Pet Insurance
- Retirement 401(k)

RESOURCES

- Contact Information
- TrueAdvocate Team
- Important Notices Regarding Your Medical Plan

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.*

Created by TrueNorth Companies, LC for Warrior Logistics

TRUENORTH



WHAT'S CHANGING?

Every year, Warrior Logistics reviews the benefit package offering to ensure you and your family have access to benefits that best fit your needs. Changes listed below will be in effect April 1, 2026 through March 31, 2027.

Medical & Rx: NEW!

- Beyond Health Cigna Network
- Welldyne
- Personify
    - **Personify Health** administers your medical plan and helps you navigate your benefits by processing claims, providing ID cards, and connecting you with advocates who can answer questions and help you find care.
- Free Benefit Programs



BENEFITS ELIGIBILITY

Who is eligible to participate?

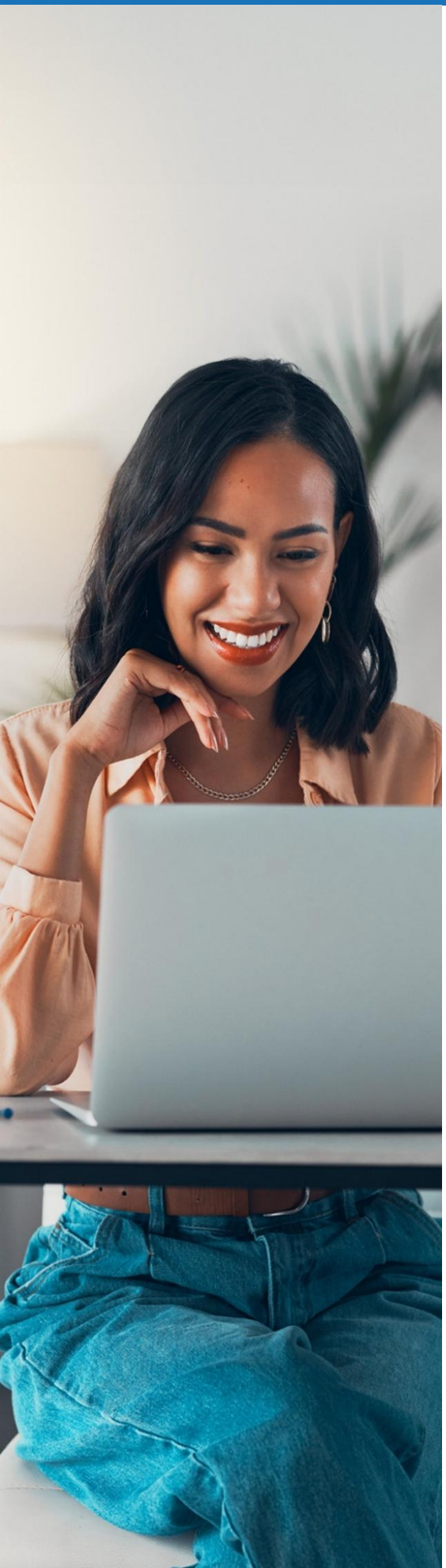
- Full-time employees working an average of 30 hours per week
- Your legal spouse
- Your unmarried dependent child (natural, adopted or step) up to age 26

When does coverage start?

- New Hire coverage starts 1st of the month following 30 days

When can I enroll in or make changes to benefits?

- **New Hires:** Must submit your elections within 30 days of hire date
- **Qualified Life Events:** Must notify Human Resources with 30 days of the event. Coverage goes into effect on the date of event. Some examples of qualified events include:
    - Gain or loss of eligibility for another employer's coverage
    - Marriage
    - Divorce or legal separation
    - Birth of your child, adoption or placement for adoption
    - Death
    - Change in employment status that impacts your eligibility for benefits
    - Child support order
    - New entitlement or loss of Medicare or Medicaid (60 days to notify HR)
- **Open Enrollment**: Occurs annually with an effective date of April 1st



YOUR ENROLLMENT BLUEPRINT

Here are some last-minute reminders:

STEP 01

VISIT YOUR BENEFITS PORTAL

Website: https://mywarriorbenefits.com

STEP 02

EVALUATE YOUR OPTIONS

- Review available benefit options for the year.
- Use carrier resources and tools to make decisions.

STEP 03

ENROLL IN YOUR BENEFITS

- Be mindful of your enrollment deadline!
- Scan the QR code to take you directly to Paycor.

STEP 04

NEED HELP DECIDING?

Contact TrueNorth's TrueAdvocate Team

Phone: 888-655-9980

Email: trueadvocate@truenorthcompanies.com

RESOURCES

Coverage	Carrier/Plan Sponsor	Phone & Website
Physical & Mental Health		
Medical	Beyond Health	800-250-3063 www.beyondhealth.com
	Cigna Network	800-997-1654 www.cigna.com
Prescription Drugs	Welldyne	888-479-2000
Dental	Ameritas	800-999-9789 www.ameritas.com
Vision	Ameritas	
Life Insurance	UNUM	866-679-3054 www.unum.com
Disability Insurance	UNUM	
Additional Protection		
Suicide and Crisis Lifeline	988 Suicide & Crisis Lifeline	988lifeline.org
Paycor	Paycor	855-565-3298 www.Paycor.com
Personify	Medical Customer Service	844-482-5051 Beyondhealthsupport@personifyhealth.com
True Advocate	All other Benefits	888-655-9980 trueadvocate@truenorthcompanies.com

MEDICAL & RX

Administered by Beyond Health with the Cigna Medical Network and Welldyne for RX

The medical insurance benefit that uses a network of providers, hospitals, and pharmacies to provide employees and their families access to quality healthcare and protection against the cost of illness or injury.

Use In-Network Providers for the best value!
Visit hcpdirectory.cigna.com/web/public/consumer/directory to find a provider.
Log in to wellview.welldyne.com to manage your pharmacy benefits.

WALGREENS IS OUT-OF-NETWORK

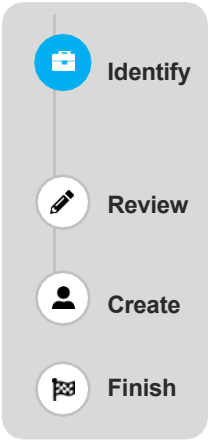
IN-NETWORK BENEFITS	HSA 6350	PPO 3500
Preventive Care	100% Covered	100% Covered
	Preventive Care is defined by the Affordable Care Act (ACA) Visit **HealthCare.gov** to access a list of covered preventive services by gender and age	
Office Visit Copay	0% after deductible	$30 PCP $60 Non-PCP $0 Telemed $100 Urgent Care
Emergency Room	0% after deductible	$300 Copay
Rx Copay	0% after deductible	$15 Tier 1 $40 Tier 2 $60 Tier 3
Deductible	$6,350 Single $12,700 Family	$3,500 Single $7,000 Family
Coinsurance	You pay 0%, plan pays 100%	You pay 0%, plan pays 100%
Out of Pocket Maximum	$6,350 Single $12,700 Family	$6,000 Single $12,000 Family
Weekly Per Pay Rates	**HSA 6350**	**PPO 3500**
Employee	$70.85	$108.92
Employee + Spouse	$211.85	$291.69
Employee + Child(ren)	$186.23	$258.46
Employee + Family	$339.92	$457.85



Signing up is easy

ACTIVATE YOUR PERSONIFY HEALTH ACCOUNT

Personify Health simplifies healthcare management. You have access to tools and resources that can help you easily navigate your health plan. Visit login.personifyhealth.com or open the app and select **Create an account**.



Follow the progress bar as you complete these easy steps:

Tell us who you are. We'll ask for a few details about you and your sponsor organization to check your eligibility. Have your ID card handy—you'll need your Group ID and Member ID.

Legal and privacy. Review and agree to the rules, data collection and privacy policy.

Create your account. Add your email, make a password and give us some additional details to customize your experience.

You're all set. Your account is ready. Click **Take Me There** to sign in.

Key Features & Benefits -

- Access and download your digital health plan ID card
- View your medical plan status (deductible and out-of-pocket)
- Request new physical ID cards
- Submit and review medical claims
- View Explanations of Benefits (EOBs)
- Find in-network providers and doctors
- Schedule appointments
- Access a licensed clinical team at no cost

Download the app.

personify HEALTH

Prescription Drug Benefits

- Contact WellDyne Customer Care team at **855-876-5483**
- 24/7 Access to Manage prescriptions, setup mail order, drug formulary and pricing, pharmacy locator and more by logging into WellDyne WellView Member Portal at **WellView.WellDyne.com**
- Health and Prescription updates, sign-up for WellConnect text messages through the WellView Member Portal
- **Important Note: Pharmacy Network Does NOT include Walgreens**

Download the WellView mobile app!

Find the WellView icon in Apple or Google Play

WellDyne Drug Savings Programs

Drug Importation Program

International sourcing is a safe, reliable way to get your medication at a lower cost. On behalf of your benefit plan, WellDyne offers drug importation for certain specialty and high-cost maintenance medications.

1. WellDyne will identify members taking an eligible medication.
2. The International sourcing team will contact member via phone call and text to inform them about program and help with enrollment.
3. Receive a 90-day supply of your medication at your doorstep.

Cost Plus Drugs

- Fill a 90-day supply – shipped to your home
- What you pay accumulates towards your deductible and out of pocket
- If you're signed up for WellDyne WellConnect; WellDyne will send you a text message if your medication is available through Cost Plus.

Get started today in 3 easy steps!

Find your medication
Go to **costplusdrugs.com/medications/** to find your generic drugs on our Medication List.

Create your account
Go to **costplusdrugs.com/create-account/** and enter your basic health information. Make sure to complete all steps.

Ask your doctor to send a new prescription to "Mark Cuban Cost Plus Drug Co."
Put the email address you used to create your account on the Rx.

Scan the QR code or visit costplusdrugs.com to get started

Virtual Visits: 98point6



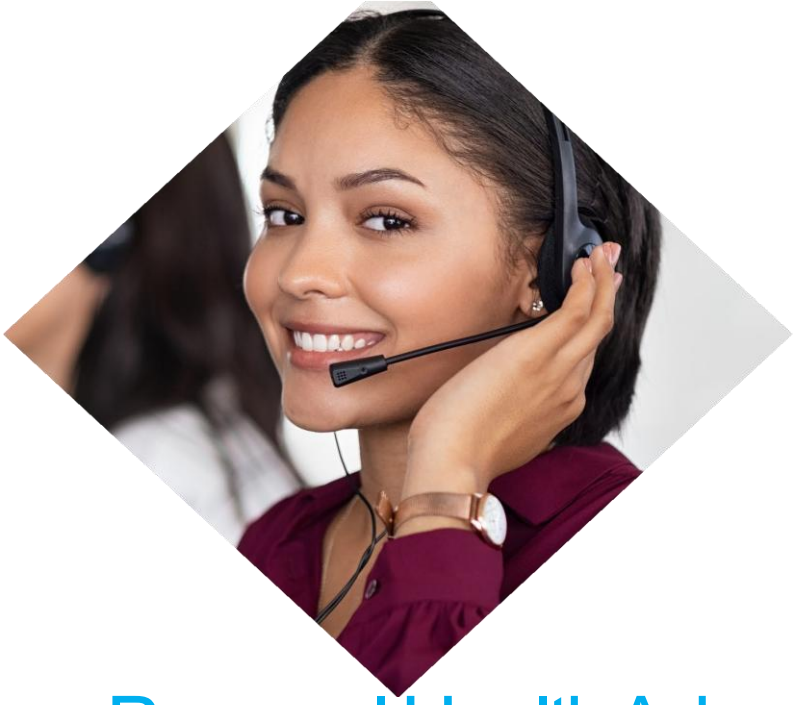
98point6 is a great alternative to urgent care and emergency room visits because it provides you 24/7/365 access to U.S. board certified doctors - receive the treatment you need in an easy and timely manner. In addition, you have the ability to send your visit results to your primary care physician. Download the Teladoc app to get started: [http://www.98point6.com/bevcap.](http://www.98point6.com/bevcap)

24/7/365	Quality Doctors	No ER Wait	100% Covered

GET STARTED REMOTE HEALTH CARE CAN TREAT MANY COMMON HEALTH ISSUES

Teladoc doctors can diagnose many health issues like cold and flu symptoms, allergies, rash, skin problems, and so much more! If medically necessary, a prescription will be sent to the pharmacy of your choice.

- Abdominal Pain/Cramps
- Cold and Flu Symptoms
- Respiratory Infection
- Allergies
- Dizziness
- Sinusitis
- Animal/Insect Bites
- Eye Infection
- Sore Throat
- Asthma
- Headaches/Migraines
- Sprains and Strains



FREE BENEFITS PROGRAM

Personal Health Advocate

The Personal Health Advocate delivers a higher level of customer service than you've ever experienced and is provided for your insurance needs. The Personal Health Advocate is available to answer your health care questions and guide you through the complexities of your medical plan — at no cost to you. They can also warm transfer for questions related to prior authorization, case management and/or maternity management programs.

FREE MEDICAL CARE

If you require surgery or imaging, contact the Personal Health Advocate to see if the services are eligible for one of the contracted surgery centers for a zero out-of-pocket cost to you.

HOW PERSONAL HEALTH ADVOCATE TAKES CARE OF YOU

BENEFITS

- Encourage appropriate use of recommended prevention care.
- Assist with finding cost effective, high-quality clinical care.
- Connect personal and family needs to available benefits
- Find a Network Provider

CLAIMS

- Ensures deductible and/or co-payments are correct
- Help with claims and billing errors
- Foster communication between member, physicians, and insurance companies

CLINICAL

- Guide members to appropriate level of care for their needs
- Locate lower-cost and hard-to-find drugs
- Identify top medical institutions, specialized medical programs and providers.

FOR QUESTIONS OR ADDITIONAL INFORMATION

Contact the Personal Health Advocate

844-482-5051 or Beyondhealthsupport@personifyhealth.com



Preferred Surgery Centers

Need surgery? No out-of-pocket costs?

- **WHAT ARE THE BENEFITS TO USING A PREFERRED SURGERY CENTER?**

- » Receive high-quality care from top-rated surgeons
- » A superior patient experience and outstanding customer service
- » Pay nothing out-of-pocket! Your health costs (deductible and coinsurance) are waived*
- » Travel expenses for you and an adult caregiver are reimbursable

•The following expenses for member and an adult caregiver who travel to the surgery center are covered: mileage, hotel, per diem food allowance during stay and first post-surgery prescription paid.

• Member must elect to have surgical procedure performed at one of the plan's Preferred Surgical Centers. A wide range of procedures can be performed at our Preferred Surgical Centers.

Preferred Advanced Imaging Providers

You have access to a concierge scheduling program for advanced radiology including MRI, CT and PET scans.

WHY USE A PREFERRED IMAGING PROVIDER?

Imaging costs are 100% covered when you utilize an advanced imaging provider by scheduling with a Care Manager, at a time and place convenient to you. By utilizing an advanced imaging network, you have access to a national network with over thousands of facilities.

FOR QUESTIONS OR ADDITIONAL INFORMATION

Contact the Personal Health Advocate

844-482-5051 or Beyondhealthsupport@personifyhealth.com

* HDHP plans may require annual deductible to be met. Please see your Human Resources contact for more details.

Digital Physical Therapy

FREE BENEFITS PROGRAM

The digital physical therapy program uses technology to provide quality, convenient and connected care to patients in the comfort of their own homes. No need to worry about transportation, traffic or the weather. You can safely recover from home, on your schedule, with your licensed physical therapist always available.

HOW IT WORKS

1. When you receive an order for physical therapy, you or your provider may contact the Personal Health Advocate **844-482-5051** to authorize therapy.
2. The Personal Health Advocate will submit authorization and referral on your behalf.
3. The team will contact you to schedule your initial evaluation.

WITH YOUR BENEFIT, GET ACCESS TO:

- Convenient video visits
- Medical Evaluation & diagnosis
- Personalized treatment including physical therapy & more
- Non-opioid pain medication & management if needed
- Support to help you manage pain, regain strength, & enjoy life

GEM Sleep

You now have access to virtual sleep apnea care.

Sleep Evaluation

GEM sleep test includes:

- Testing
- Clinician Review
- Diagnosis
- Treatment recommendation & prescription (if needed)

Sleep Apnea Treatment

GEM makes it easy to get the right treatment:

- Virtual mask fitting
- Multiple treatment options
- Mask & machine guarantee
- CPAPs ready to ship
- Team of experts will help you track your progress
- 1:1 Support
- Live virtual visits available

*If you have a concern of sleep apnea or if you have been diagnosed but not treated, you might qualify for this program.

FOR QUESTIONS OR ADDITIONAL INFORMATION

Contact the Personal Health Advocate

844-482-5051 or Beyondhealthsupport@personifyhealth.com

Nurturing Together

FREE BENEFITS PROGRAM

Support for Expecting and New Parents

Free program available through your health plan

When you're expecting a baby or caring for a newborn, it helps to have trusted support and guidance. The **Nurturing Together Program**, provided through Personify Health, connects you with a **dedicated prenatal nurse** who can support you throughout your pregnancy and up to **six weeks after delivery**.

How the Program Helps

Your nurse can assist with:

- Understanding pregnancy and newborn care
- Managing pregnancy-related concerns like nausea, diabetes, or high blood pressure
- Finding in-network obstetricians and pediatricians
- Learning about breastfeeding and accessing a breast pump
- Connecting with lactation consultants and community resources
- Answering general parenting and health questions

Free Diapers Incentive

Get a **1-year subscription of free diapers** upon completing the program.
(Must register before the first day of the 3rd trimester — 28 weeks)

Why Enroll

This program is offered **at no cost to you** as part of your benefits.
It's an easy way to get personal guidance and peace of mind during this exciting time.

Get the most from your benefits by enrolling **early in your pregnancy**—or even when you're planning to start a family.



FOR QUESTIONS OR ADDITIONAL INFORMATION

Contact the Personal Health Advocate

844-482-5051 or Beyondhealthsupport@personifyhealth.com

Note: Program materials are for educational purposes and do not replace your doctor's care. Always consult your physician about medical decisions or concerns.

FREE BENEFITS PROGRAM



Chronic Care Management

With chronic care management from Personify Health, a licensed registered nurse will assist and support you as you navigate treatment of your diagnosed condition.

Services:

You'll receive personalized assistance from an assigned clinician who will:

- Provide condition-specific education and support materials.
- Help decrease the frequency or intensity of symptoms and hospitalizations.
- Assist in locating discounted medications.
- Develop a diet management plan tailored to you.

CHRONIC CONDITIONS INCLUDED:

- Congestive heart failure
- Metabolic syndrome
- Diabetes mellitus
- Mental Health
- Asthma
- Chronic obstructive pulmonary disease
- Hypertension
- Substance Abuse

Case Management

Specialized clinicians will work one-on-one with you, your caregiver, healthcare team and health plan to provide personalized assistance when a prolonged, progressive, catastrophic or high-cost illness/condition occurs.

Services:

- Learn about your illness
- Understand your treatment and medications
- Understand what your doctor wants you to do
- Make a self-care plan
- Identify network providers and centers of excellence
- Coordinate specialist referrals
- Explore available medication assistance programs
- Explore community resources
- Understand your health plan benefits
- Navigate the healthcare system

FOR MORE INFORMATION CONTACT THE PERSONAL HEALTH ADVOCATE

844-482-5051 or Beyondhealthsupport@personifyhealth.com

FREE BENEFITS PROGRAM

Personalized Specialty Infusion Care

Quantify

Quantify is a national infusion provider that offers local and home-based specialty therapy services. Their integrated model makes specialty therapy care easier and more accessible.

What makes Quantify Different?

- **$0 yearly out-of-pocket expenses***
- **$0 copays for each treatment***
- **In-home infusions available in all 50 states**
- **We provide 24/7 nursing support for all your health needs**

What's Included?

- **Expert care, wherever you are**
- **24/7 clinical support and real-time health insights**
- **Support for your whole health**
- **Precision treatment and medication**

1. If eligible, you will receive a call with information on setting up a consultation to learn more.
2. A dedicated team member will reach out to discuss, and help you enroll in, your treatment plan — whether at home or at one of our 65+ locations nationwide.
3. Our team will work with your current provider to ensure an easy transition to your new specialty care.
4. We'll send you everything you need to prepare for your first home or in-clinic appointment, including simple step-by-step guides to get started.
5. When it's time for your treatment, we make sure everything is ready for an easy experience. Your care team will be there to answer any questions and keep you comfortable.
6. Experience ongoing support with regular check-ins, 24/7 access to your care team, and continuous monitoring to enhance your overall well-being.

DENTAL

Administered by Ameritas

Dental care is an important part of your overall health. This plan provides you with no-cost, in-network preventive care, as well as coverage for basic care and major procedures.

Dental Network: Dental Select
Use In-Network Providers for the best value! Visit www.ameritas.com to search for providers.

SERVICES	PPO MAC CLASSIC IN-NETWORK
Preventive Services	100% covered
Deductible	$50 Single / $150 Family <<applies to Basic & Major services>>
Annual Maximum	$1,000 per person per year
Basic Services	You pay 20% coinsurance (after deductible), plan pays 80%
Major Services	You pay 50% coinsurance (after deductible), plan pays 50%

Weekly Per Pay Rates	
Employee	$4.70
Employee + Spouse	$9.98
Employee + Child(ren)	$10.85
Employee + Family	$15.58

VISION

Administered by Ameritas

Enroll in vision coverage to save money on eligible vision care expenses, such as eye exams, glasses and contact lenses.

Use In-Network Providers for the best value!
Visit www.ameritas.com to search for providers.

SERVICES	IN-NETWORK
Exam 1 every 12 months	$10
Eyeglasses	
Frames 1 every 24 months	$100 allowance
Lenses 1 every 12 months	$10
Contacts	**Please note:** Contact lenses are in place of lenses and frame.
Elective Contacts 1 every 12 months	$115
Medically Necessary 1 every 12 months	100% Covered
Contact Lens Fitting & Evaluation 1 every 12 months	$10

Weekly Per Pay Rates	
Employee	$1.80
Employee + Spouse	$3.05
Employee + Child(ren)	$3.18
Employee + Family	$4.99

LIFE / AD&D

Administered by UNUM

Life insurance provides your named beneficiary(ies) with a benefit in the event of your death. Accidental Death and Dismemberment (AD&D) insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes death or dismemberment (i.e., the loss of a hand, foot or eye).



Designate Your Beneficiary(ies)

Designate your beneficiary(ies) and review them annually to ensure they are up to date.

BASIC LIFE / AD&D (COMPANY-PAID)

This benefit is provided at NO COST to you.

	Benefit
Employee	$25,000

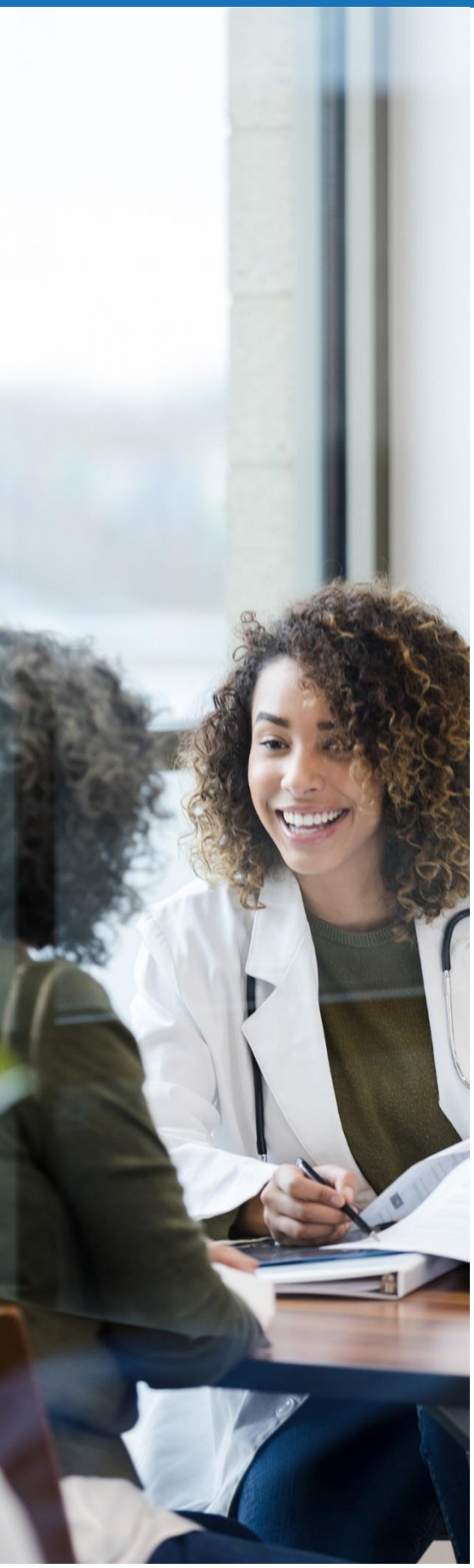
SUPPLEMENTAL BASIC LIFE / AD&D (EMPLOYEE-PAID)

You may enhance your life benefit by purchasing supplemental insurance. Cost is based on your age and coverage amount elected.

Employee	Up to 5 times salary in increments of $10,000. Not to exceed $500,000. Guarantee issue is $100,000.
Spouse	Up to 100% of employee amount in increments of $5,000. Not to exceed $500,000. Guarantee issue is $25,000.
Children	The lesser of 100% of employee amount or $10,000 in increments of $2,000. Not to exceed $10,000.

**Age reductions may apply. Refer to the benefit plan document.*

Evidence of Insurability (EOI): If you are a late enrollee or requested coverage over the Guaranteed Issue amount, your coverage may require an additional approval from the insurance company. Please note you are considered a late enrollee if you did not elect coverage when initially offered. If you are not a new hire and wish to increase or enroll for the first time you will need to complete a health questionnaire for approval.



DISABILITY

Administered by UNUM

Short-term disability insurance provides you benefits to replace part of your lost income when you become unable to work due to a covered injury or illness.

BENEFITS*	SHORT-TERM Employee Paid
Coverage amount	Up to 60% of weekly income
Accident benefits begin	Day 15
Illness benefits begin	Day 15
Maximum payment period	11 weeks
Maximum Benefit	$1,000 weekly

**Age reductions may apply. Refer to the benefit plan document.*

Designate Your Beneficiary(ies)

Designate your beneficiary(ies) and review them annually to ensure they are up to date.

Evidence of Insurability (EOI): If you are a late enrollee or requested coverage over the Guaranteed Issue amount, your coverage may require an additional approval from the insurance company. Please note you are considered a late enrollee if you did not elect coverage when initially offered.

BENEFITS VOCABULARY

WELCOME TO YOUR BENEFITS!

To better understand your coverage, it's helpful to be familiar with **benefits vocabulary**. Take a moment to review these terms, which may be referenced throughout this guide.

Balance Bill – When a health care provider bills a patient for the difference between what the patient's health insurance chooses to reimburse and what the provider chooses to charge.

Copay – A fixed dollar amount you pay the provider at the time of service; for example, a $25 copay for an office visit or a $10 copay for a generic prescription.

Coinsurance – The percentage paid for a covered service, shared by you and the plan. Coinsurance can vary by plan and provider network. Review the plans carefully to understand your responsibility. You are responsible for coinsurance until you reach your plan's out-of-pocket maximum.

Deductible – The amount you pay each calendar year before the plan begins paying benefits. Not all covered services are subject to the deductible; for example, the deductible does not apply to preventive care services.

Emergency Room Care – Care received at a hospital emergency room for life- threatening conditions.

In-Network Care – Care provided by contracted doctors within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.

Out-of-Network Care – Care provided by a doctor or at a facility outside of the plan's network. Your out-of-pocket costs may increase and services may be subject to balance billing.

Out-of-Pocket Maximum – The maximum amount you pay per year before the plan begins paying for covered expenses at 100%. This limit helps protect you from unexpected catastrophic expenses.

Premium – The complete cost of your plans. You share this cost with your employer and pay your portion through regular paycheck deductions.

Preventive Care – Routine health care including annual physicals and screenings to prevent disease, illness, and other health complications. In-network preventive care is covered at 100%.

Urgent Care – Urgent care is not the same as emergency care. Visit urgent care for sudden illnesses or injuries that are not life-threatening.

Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems.

Preferred generic drugs – Generic drugs have the same active ingredients and work the same way as the brand-name drugs they copy. They usually cost less than the brand-name versions.

Preferred brand drugs – These drugs are included in a plan's list of covered drugs and may not have a generic version. They cost more than generic drugs but less than non-preferred brand drugs.

Specialty drugs – These drugs are used to treat ongoing health conditions and can be costly. They often require special handling and may have to be ordered through a specialty pharmacy.

MEC Plan – Minimum Essential Coverage. A MEC plan is health insurance that meets the federal government's standard for coverage.

BENEFITS 101

Deductible

Amount you pay for healthcare **BEFORE** your insurance starts to pay.

Coinsurance (aka Cost Share)

A **percentage** of the cost of care you are responsible to pay for **AFTER** you have met the deductible.

Co-Payment (aka Copay)

Fixed amount of money you pay each time you or your dependents receive care.

Out of Pocket Maximum (OPM)

Greatest amount of money you can spend on healthcare for the year.

- Does not include premiums or costs that your insurance plan does not cover.

DEDUCTIBLE

+

COINSURANCE

COPAYMENT

Out of Pocket Maximum



Do You Have Questions About Your Benefit Programs and Aren't Sure Who to Contact?

THE TRUENORTH TRUEADVOCATE TEAM IS HERE TO HELP!

You can contact one of our Advocates
Monday – Friday from 7:30 am – 5:00 pm CT

Our team can assist with:

- Benefit coverage questions
- Ordering an ID card
- Claim questions and explanation of benefits
- Finding a form
- Provider search
- Choosing a plan that works for you

(888) 655-9980

trueadvocate@truenorthcompanies.com

WARRIOR LOGISTICS

TRUENORTH



REQUIRED ANNUAL NOTICES

IMPORTANT NOTICES FROM WARRIOR LOGISTICS REGARDING THE GROUP HEALTH PLAN

In compliance with insurance regulations, we provide information regarding the health benefits we offer and what options you have as an employee.

DOWNLOAD YOUR COPY AT www.paycor.com

NOTES

NOTES