



2025 Benefits Open Enrollment

oswald[®]

A **UNISON** RISK ADVISORS Company



Open Enrollment

Open Enrollment happens once per year & is the only time you can make changes to your plans without some type of Qualifying Event. If you do experience a Qualifying Event during the year, be sure to notify HR within 30 days.

Choose wisely & be sure you don't miss the deadline!

2025 Employee Benefit Highlights

1

We will remain with Anthem's ERChealth and PCP+ Direct Primary Care program.

- The same four Anthem plans available today will continue to be offered through Anthem ERChealth.
 - This also includes the PCP+ Marathon Health Clinic access (Formerly called Everside).
- Anthem's ERC program will offer additional rewards and services.
- There will be an increase to your cost share for the medical plan rates.

2

All Ancillary coverages will remain with Lincoln. There will be no plan design or rate changes!

- | | |
|-----------------------------------|----------------------------------|
| ➤ Dental | ➤ Voluntary Long-Term Disability |
| ➤ Life/AD&D | ➤ Voluntary Accident |
| ➤ Voluntary Life/AD&D | ➤ Voluntary Critical Illness |
| ➤ Voluntary Short-Term Disability | ➤ Voluntary Hospital Indemnity |

3

The vision plan will remain with EyeMed. There will be no plan design or rate changes!

2025 Medical Plan: 3-Tier PPO \$2,500

Benefits	Preferred Network	In-Network	Out-of-Network
Deductible – Single	\$2,500	\$5,000	\$22,500
Deductible – Family	\$5,000	\$10,000	\$45,000
Coinsurance	0%	20%	50%
Out-of-Pocket Maximum – Single	\$6,600		\$23,100
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance & copays)</i>	\$13,200		\$46,200
Office Visit Primary Care Physician Specialist Virtual Visit (LiveHealth Online)	\$20 Copay \$40 Copay \$0 Copay	\$35 Copay \$70 Copay \$0 Copay	Deductible, then 50%
Preventive Care Visit	Covered at 100%	Covered at 100%	Deductible, then 50%
Inpatient Hospital Services	Deductible, then 0%	Deductible, then 20%	Deductible, then 50%
Outpatient Surgical Services	Deductible, then 0%	Deductible, then 20%	Deductible, then 50%
Emergency Room	\$350 Copay, then 20%		
Urgent Care	\$75 Copay		Deductible, then 50%
Prescription Benefit			
Retail Rx (30-day) – Tier 1/Tier 2/Tier 3/Tier 4	\$10/\$40/\$70/\$25% up to \$350	\$20/\$50/\$80/\$25% up to \$450	Deductible, then 50%
Mail Order Rx (90-day)	\$25/\$100/\$175/25% up to \$350	Not Covered	Not Covered

This is an illustration of benefits. Please refer to the plan documents for details & final confirmation of coverage.

Commonly Used Network Pharmacies

To Find an

In-Network Provider:

www.anthem.com/find-care/

Level 1 Network		Level 2 Network	
CVS	Kroger	Acme	Meijer
Giant Eagle	Target	Costco	Walgreens
Walmart		Discount Drug Mart	Sam's Club
		Marcs	

- ❖ You will only receive a new ID card if you are enrolling for the first time, adding or removing dependents on your policy.
- ❖ **Reminder:** The Family Deductible and Out-of-Pocket Maximums are embedded, meaning the cost shares of one family member will be applied to the Individual Deductible and Out-of-Pocket Maximums
- ❖ **Reminder:** Deductibles and Out-of-Pocket Maximums are based on a Calendar Year. If you have already met your deductible between January 1 – May 31, it will not re-set until January 1, 2026.
- ❖ **New Plan Changes:** Physical Therapy, Occupational Therapy & Chiropractor visits are now the same as a Primary Care Physician visit. There is also a hearing aid benefit for children if requirements are met.

2025 Medical Plan: 3-Tier PPO \$5,000

Benefits	Preferred Network	In-Network	Out-of-Network
Deductible – Single	\$5,000	\$8,000	\$22,500
Deductible – Family	\$10,000	\$16,000	\$45,000
Coinsurance	0%	20%	50%
Out-of-Pocket Maximum – Single	\$9,450		\$24,500
Out-of-Pocket Maximum – Family (Includes deductible, coinsurance & copays)	\$18,900		\$48,900
Office Visit Primary Care Physician Specialist Virtual Visit (LiveHealth Online)	\$20 Copay \$40 Copay \$0 Copay	\$35 Copay \$70 Copay \$0 Copay	Deductible, then 50%
Preventive Care Visit	Covered at 100%	Covered at 100%	Deductible, then 50%
Inpatient Hospital Services	Deductible, then 0%	Deductible, then 20%	Deductible, then 50%
Outpatient Surgical Services	Deductible, then 0%	Deductible, then 20%	Deductible, then 50%
Emergency Room	\$350 Copay, then 20%		
Urgent Care	\$75 Copay		Deductible, then 50%
Prescription Benefit			
Retail Rx (30-day) – Tier 1/Tier 2/Tier 3/Tier 4	\$10/\$40/\$70/\$25% up to \$350	\$20/\$50/\$80/\$25% up to \$450	Deductible, then 50%
Mail Order Rx (90-day)	\$25/\$100/\$175/25% up to \$350	Not Covered	Not Covered

This is an illustration of benefits. Please refer to the plan documents for details & final confirmation of coverage.

Commonly Used Network Pharmacies

To Find an

In-Network Provider:

www.anthem.com/find-care/

Level 1 Network		Level 2 Network	
CVS	Kroger	Acme	Meijer
Giant Eagle	Target	Costco	Walgreens
Walmart		Discount Drug Mart	Sam's Club
		Marcs	

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- ❖ **Reminder:** Deductibles and Out-of-Pocket Maximums are based on a Calendar Year. If you have already met your deductible between January 1 – May 31, it will not re-set until January 1, 2026.
- ❖ **New Plan Changes:** Physical Therapy, Occupational Therapy & Chiropractor visits are now the same as a Primary Care Physician visit. There is also a hearing aid benefit for children if requirements are met.

2025 Medical Plan: HSA \$3,500

Benefits	In-Network	Out-of-Network
Deductible – Single	\$3,500	\$7,000
Deductible – Family	\$7,000	\$14,000
Coinsurance	20%	50%
Out-of-Pocket Maximum – Single	\$6,900	\$20,700
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance & copays)</i>	\$13,800	\$41,400
Office Visit		
Primary Care Physician	Deductible, then 20%	Deductible, then 50%
Specialist	Deductible, then 20%	Deductible, then 50%
Virtual Visit (LiveHealth Online)	Deductible, then 0%	N/A
Preventive Care Visit	Covered at 100%	Deductible, then 50%
Inpatient Hospital Services	Deductible, then 20%	Deductible, then 50%
Outpatient Surgical Services	Deductible, then 20%	Deductible, then 50%
Emergency Room	Deductible, then 20%	
Urgent Care	Deductible, then 20%	Deductible, then 50%
Prescription Benefit	Deductible, then Copays:	
Retail Rx (30-day) – Tier 1/Tier 2/Tier 3/Tier 4	\$10/\$50/\$100/25% up to \$250	Deductible, then 50%
Mail Order Rx (90-day)	\$25/\$125/\$250/25% up to \$250	Not Covered

This is an illustration of benefits. Please refer to the plan documents for details & final confirmation of coverage.

To Find an

In-Network Provider:

www.anthem.com/find-care/

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- ❖ **Reminder:** Deductibles and Out-of-Pocket Maximums are based on a Calendar Year. If you have already met your deductible between January 1 – May 31, it will not re-set until January 1, 2026.
- ❖ **New Plan Changes:** Physical Therapy, Occupational Therapy & Chiropractor visits are now the same as a Primary Care Physician visit. There is also a hearing aid benefit for children if requirements are met.

2025 Medical Plan: HSA \$5,000

Benefits	In-Network	Out-of-Network
Deductible – Single	\$5,000	\$8,000
Deductible – Family	\$10,000	\$16,000
Coinsurance	25%	50%
Out-of-Pocket Maximum – Single	\$6,000	\$12,000
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance & copays)</i>	\$12,000	\$24,000
Office Visit Primary Care Physician Specialist Virtual Visit (LiveHealth Online)	Deductible, then 25%	Deductible, then 50% Deductible, then 50% N/A
Preventive Care Visit	Covered at 100%	Deductible, then 50%
Inpatient Hospital Services	Deductible, then 25%	Deductible, then 50%
Outpatient Surgical Services	Deductible, then 25%	Deductible, then 50%
Emergency Room	Deductible, then 25%	
Urgent Care	Deductible, then 25%	Deductible, then 50%
Prescription Benefit	Deductible, then Copays:	
Retail Rx (30-day) – Tier 1/Tier 2/Tier 3/Tier 4	\$10/\$35/\$60/25% up to \$250	Deductible, then 50%
Mail Order Rx (90-day)	\$25/\$90/\$150/25% up to \$250	Not Covered

This is an illustration of benefits. Please refer to the plan documents for details & final confirmation of coverage.

To Find an

In-Network Provider:

www.anthem.com/find-care/

- ❖ You will only receive a new ID card if you are enrolling for the first time, adding or removing dependents on your policy.
- ❖ **Reminder:** The Family Deductible and Out-of-Pocket Maximums are embedded, meaning the cost shares of one family member will be applied to the Individual Deductible and Out-of-Pocket Maximums
- ❖ **Reminder:** Deductibles and Out-of-Pocket Maximums are based on a Calendar Year. If you have already met your deductible between January 1 – May 31, it will not re-set until January 1, 2026.
- ❖ **New Plan Changes:** Physical Therapy, Occupational Therapy & Chiropractor visits are now the same as a Primary Care Physician visit. There is also a hearing aid benefit for children if requirements are met.

Medical Contributions

Spousal Surcharge

If your spouse has coverage available elsewhere through his or her employer, and you elect to cover him or her on the Meridian HealthCare plan, there will be a **\$75.00 per pay surcharge applied**. If you are enrolling your spouse, the surcharge will automatically be applied. If enrolling your spouse on our medical plan, please complete the **Affidavit of Spousal Employment & Health Care Coverage** within Paylocity.

Wellness Incentive

Meridian Healthcare’s plan is offered through ERC health. As an enrolled member in the program, we encourage you and your spouse to participate in the Preventive Care Campaign. Your wellness rate is contingent upon your participation in this program. If your spouse is enrolled, they must participate in order for you to obtain the maximum incentive effective July 1, 2026. Through ERChhealth, you will also have the opportunity to earn rewards for completing a preventive care exam and other challenges through the Sydney App.

Your 2025 Per Pay Cost (Does not include spousal surcharge)								
	PPO \$2,500 (3-Tier)		PPO \$5,000 (3-Tier)		HSA \$3,500		HSA \$5,000	
	Wellness	Non-Wellness	Wellness	Non-Wellness	Wellness	Non-Wellness	Wellness	Non-Wellness
Employee Only	\$68.89	\$93.69	\$60.35	\$85.35	\$44.07	\$69.07	\$0.00	\$25.00
Employee + Spouse	\$182.36	\$232.36	\$160.20	\$210.20	\$131.03	\$181.03	\$30.81	\$80.81
Employee + Child(ren)	\$166.01	\$191.01	\$145.84	\$170.84	\$119.28	\$144.28	\$28.05	\$53.05
Employee + Family	\$260.86	\$310.86	\$229.17	\$279.17	\$187.43	\$237.43	\$44.08	\$94.08

How does the High-Deductible Health Plan + HSA work?

Traditional Health Plan (PPO)



- Larger monthly premium
- Lower deductible
- Copays for Office Visits, Prescriptions & ER
- Preventive covered @ 100%

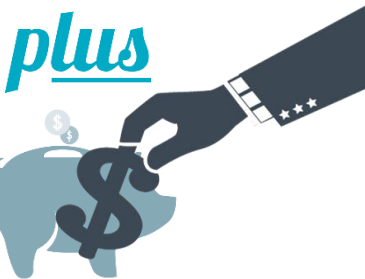
Traditional health plan

Premium

HDHP + HSA



- Lower monthly premium
- Higher deductible
- No Copays until the Deductible is met
- Preventive covered @ 100%



- Money into savings account

HDHP + HSA

Premium

HSA

Who is eligible for an HSA?

In order to be eligible to make pre-tax contributions to a Health Savings Account, individuals must:

- Be covered under an HDHP on the first day of the month that the account is established and the first day of the month in which deposits are made.
- Not also be covered under any other health plan that is not an HDHP. Certain types of limited benefit plans may be ok, such as a cancer policy, automobile policy or a fixed daily benefit policy (hospital indemnity).
- **Not be enrolled in Medicare benefits (including Part A).**
- Not be claimed as a dependent on another person's tax return.



2025 HSA Contribution Limits

Annual Contribution Rules

2025 Limit: \$4,300 for individuals & \$8,550 for families*

2026 Limit: \$4,400 for individuals & \$8,750 for families*

Additional Funding

Those 55 years of age or higher, but not entitled to Medicare benefits, can fund an additional \$1,000/year “catch-up” contribution!

Amount of Funding

Contributions above the annual limit are subject to income taxes and a 20% penalty

Don't leave
money
on the **TABLE** for the IRS

Reminders:

- Balance rolls over year to year (no “use it or lose it”)
- Employees own the account – you keep the money if you change jobs or insurance coverage
- You cannot contribute to a Flexible Spending Account and a Health Savings Account
- Visit www.IRS.gov & Publication 502 for a complete listing of eligible HSA expenses
- WesBanco (formerly Premier Bank) will provide you with a Debit Card once you sign up!

2025 FSA

Contribution Limits

Health Care

2025 Limit: \$3,300

- *Eligible Expenses: Medical, Dental, Vision
- *Full elected amount is available to you on July 1

Dependent Care

2025 Limit: \$5,000

- *Eligible Expenses: Before & After School programs, Summer Day Camp, Babysitting, Pre-School & Nursery School
- *Funds elected are only available to you as they are contributed out of payroll & expenses are eligible for reimbursement when they are incurred.

Limited Purpose

2025 Limit: \$3,300

- *Eligible Expenses: Dental & Vision care that are not covered by the health plan
- *Only available if electing the HSA \$3500 or HSA \$5000 plans

Reminders:

Open Enrollment for the FSA coincide with the calendar year. We will hold Open Enrollment in November for January 1, 2026.

- A Flexible Spending Account is a pre-tax benefit that allows you to pay for medical, dental & vision expenses using pre-tax dollars.
- Balance does not roll over each year (“use it or lose it”)
- Elections are irrevocable unless you experience a qualifying event
- Visit [www.IRS.gov](https://www.irs.gov) & Publication 502 for a complete listing of eligible expenses





Program Overview



Preventive Care Exam

\$100 reward for enrolled employees and spouses that complete an annual preventive care exam.

Preventive Cancer Screenings

Enrolled employees and spouses who complete age/sex specific preventive cancer screenings will earn rewards.

Eligible screenings include mammogram, colonoscopy, skin cancer, and prostate cancer.



PCP+ Concierge Primary Care

Exclusive access to concierge primary care available for members across Ohio.

PreventiveRx Plus

PreventiveRx Plus covers drugs that may keep an individual healthy because they may prevent illness and other health conditions.

Preventive Care Exam

- **Anthem covers one Preventive Care exam per calendar year**
- Enrolled employees and enrolled spouses who complete their annual Preventive Care/Wellness exam between 1/1/2025-12/31/2025 will be eligible for a \$100 reward through ERChealth this year
- This process will be automatic – no additional paperwork required
 - Anthem will pay the reward 60-90 days after your preventive exam claim is processed under your medical plan
 - If your preventive exam is processed as a diagnostic claim (due to conversations within the same visit):
 - You will need to ask your physician to re-code the visit as a Preventive visit

Preventive Exam Options



Primary Care Physician
(In-Person or Virtual)



Virtual Primary Care via Sydney

- KHealth: chat-based
- LiveHealthOnline: video-based



Minute Clinics

ERChealth PCP+

What is ERChealth PCP+?

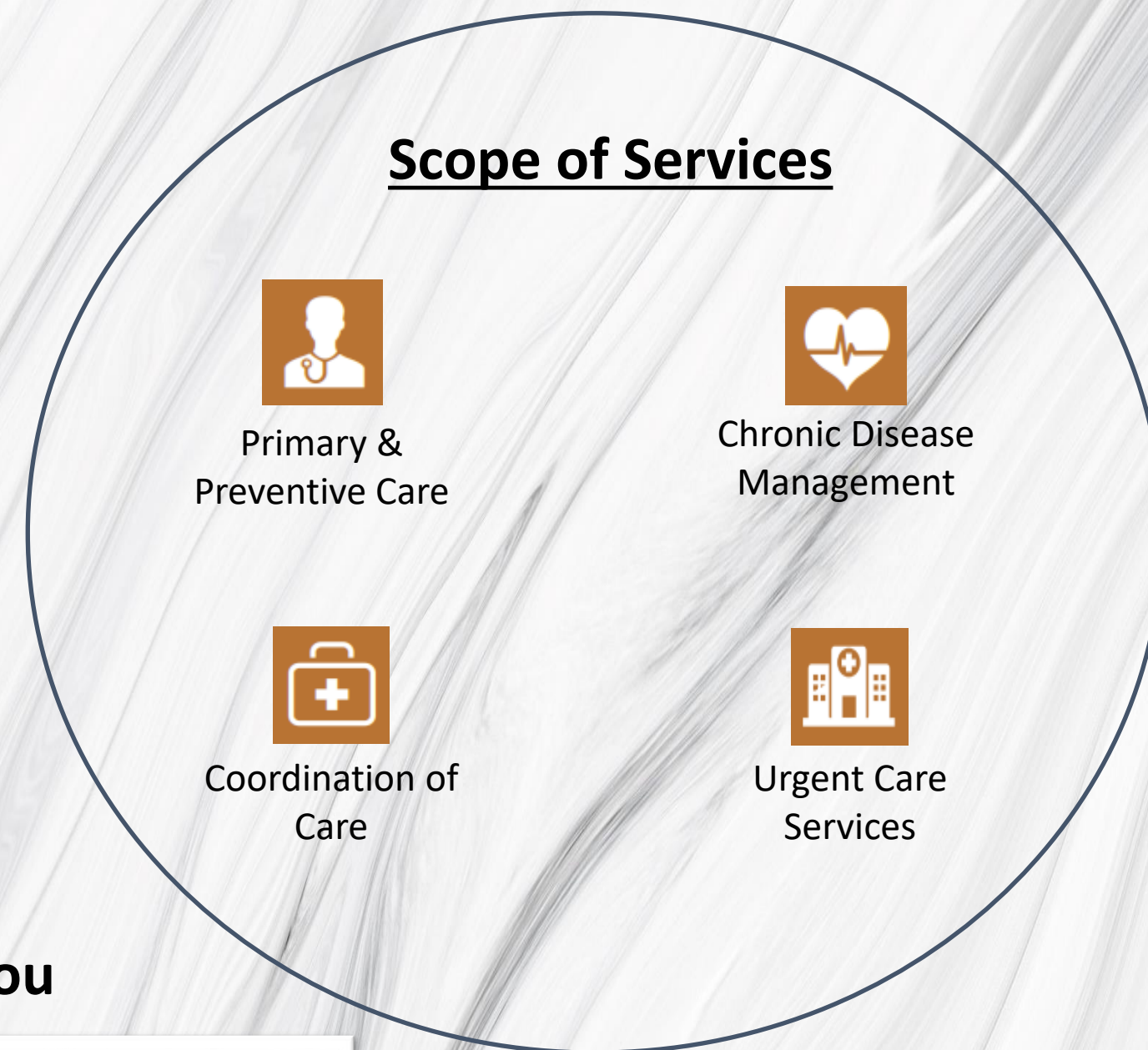
ERChealth PCP+ Direct Primary Care is an innovative physician service provided by Marathon Health. These patient-centered doctor's offices provide patients with a level of care that is unique to healthcare.

Benefits

- ✓ \$0 Copay
- ✓ Unlimited visits
- ✓ Personalized care
- ✓ Little or no wait time
- ✓ Longer appointments
- ✓ 24/7 telephonic access to your physician
- ✓ Same or next day urgent care visits

Fewer Patients = More Time for You

PCP+ Physicians have roughly 70% fewer patients compared to a typical primary care doctor.



ERChealth Next Generation

ERChealth PCP+

Before Enrolling in PCP+:

ERChealth PCP+ has two program requirements:

- 1

Members must seek all primary care needs from their PCP+ Physician
- 2

Members must have an annual preventive exam. Upon joining, members must schedule their first appointment within 90 days of enrolling.

Additionally, please consider the following before enrolling:

- ☐

Do I already have a Primary Care Physician?

▪

If yes, am I willing to choose a PCP+ Physician for all my primary care needs?
- ☐

Is there an ERChealth PCP+ location near my home?
- ☐

Do I like the idea of a \$0 Co-Pay?
- ☐

Do I regularly have visits with a physician to manage chronic conditions?

▪

If yes, the PCP+ model may provide cost savings

<div><div></div><div>Marathon Health</div></div> <div>ENROLLMENT OPTIONS: my.marathon.health 1-866-434-3255</div>	
NORTHEAST OHIO	SOUTHWEST OHIO
AKRON SOUTH MAIN 388 South Main St, Ste 201 Akron, OH 44311	FOURTH & MAIN 220 East Fourth St, Ste 130 Cincinnati, OH 45202
AKRON WHITE POND 789 White Pond Dr, Ste A Akron, OH 44320	GREEN TOWNSHIP 6355 Harrison Ave, Ste 8 Cincinnati, OH 45247
AVON SHEFFIELD 5445 Detroit Rd Sheffield Village, OH 44054	KINGS MILLS 2188 Kings Mills Rd Mason, OH 45040
BEACHWOOD 25700 Science Park Dr, Ste 120 Beachwood, OH 44122	SPRINGDALE TOWN CENTER 11568 Springfield Pike Springdale, OH 45246
CUYAHOGA FALLS 421 Graham Rd, Suite C Cuyahoga Falls, OH 44221	CENTRAL OHIO
MENTOR 7695 Mentor Ave Mentor, OH 44060	EASTON TOWN CENTER 3866 Townsfair Way Columbus, OH 43219
NORTH CANTON 5399 Lauby Rd, Ste 220 North Canton, OH 44720	HILLIARD 2391 Hilliard Rome Rd Hilliard, OH 43026
SEVEN HILLS 5700 Lombardo Center Dr, Ste 120 Seven Hills, OH 44131	PARKWAY CENTRE 4152 Buckeye Pkwy Grove City, OH 43123
NORTHWEST OHIO	
DEFIANCE 25568 Elliott Rd Defiance, OH 43512	
FREMONT 2380 Sean Dr Fremont, OH 43420	
WAPAKONETA 5 North Blackhoof St Wapakoneta, OH 45895	

PreventiveRx Plus

- Covers medications that may keep individuals healthy
- \$0 cost share on PPO
- Covers 6 conditions and up to 150 medications
- Diabetic supplies included
- See separate two-page attachment for the full list of medications

PreventiveRx Plus Drug List
PreventiveRx Plus Plan (Essential)



PreventiveRx covers drugs that may keep you healthy because they may prevent illness and other health conditions. You can get the products on this list at low or no cost to you depending on your benefit.

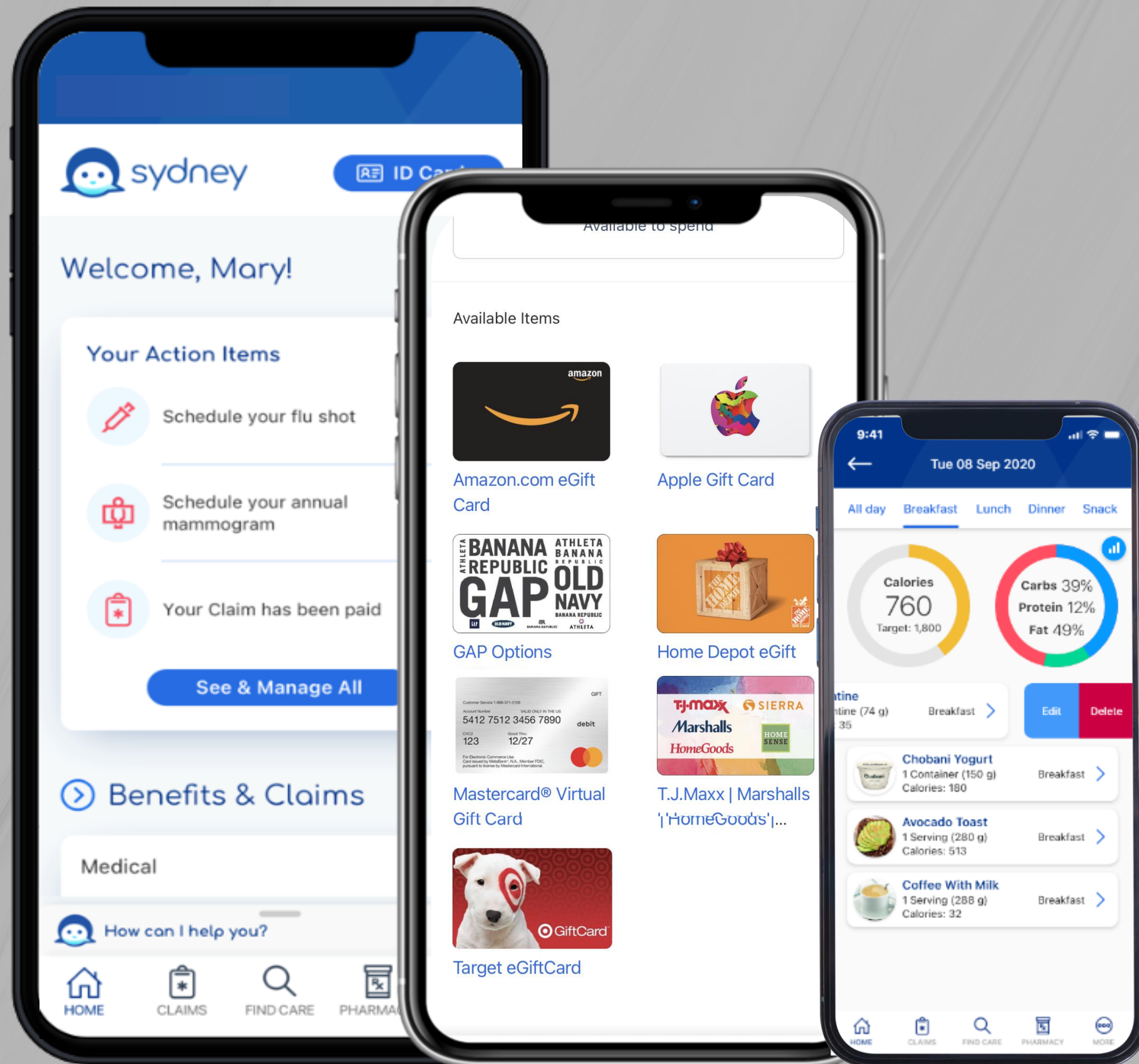
This list includes only prescription products. Brand-name drugs are listed with a first capital letter. Non-brand drugs (generics) are in lowercase letters.

Most brand-name drugs that have a generic equivalent available are not covered under this PreventiveRx benefit.

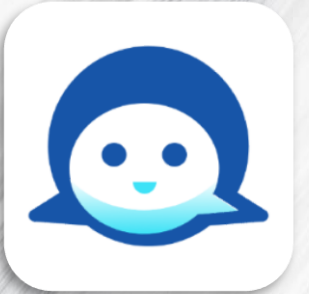
Drugs* listed below may be covered for plans with the Essential Drug List. If your plan has a different drug list, please check to see if these drugs are included on your drug list. PreventiveRx Plus drugs are only covered if they are included on your specific drug list.

*Some drugs may be excluded from your benefits. Please refer to your Certificate or Evidence for Coverage for coverage limitations and exclusions.

HEART HEALTH AND HIGH BLOOD PRESSURE acebutolol amlodipine/ benazepril atenolol atenolol/ chlorthalidone benazepril benazepril/ hctz betaxolol bisoprolol fumarate bisoprolol/ hctz captopril captopril/ hctz carvedilol enalapril enalapril/ hctz fosinopril fosinopril/ hctz labetalol lisinopril lisinopril/ hctz metoprolol succinate er metoprolol tartrate metoprolol/ hctz moexipril nadolol nebivolol perindopril pindolol propranolol propranolol er propranolol/ hctz quinapril quinapril/ hctz ramipril sorine sotalol sotalol af timolol	trandolapril trandolapril/ verapamil OSTEOPOROSIS alendronate sodium amabelz calcitonin salmon Climara Pro Combipatch dotti estradiol estradiol/ norethindrone etidronate evamist Fosamax Plus D fyavolv ibandronate sodium jinteli lopreeza mimvey mimvey lo Premarin (oral) Premphase Prempro raloxifene risedronate risedronate DR ASTHMA Advair Hfa Arnuity Ellipta Breo Ellipta budesonide suspension budesonide/ formoterol Flovent Diskus Flovent HFA fluticasone/ salmeterol inhalation powder	formoterol nebulization solution QVAR RediHaler Symbicort Trelegy Ellipta wixela inhub DIABETES <i>Diabetic supplies including blood glucose meters, test strips and lancets require a prescription to be covered by this plan. Only blood glucose meters & blood glucose test strips by Lifescan & Roche will be covered by this benefit.</i> acarbose alogliptin alogliptin/metformin alogliptin/pioglitazone Farxiga glimepiride glipizide glipizide er glipizide xl glipizide/ metformin glyburide glyburide micronized glyburide/ metformin Glyxambi Humalog Humalog Junior Kwikpen Humalog Kwikpen Humalog Mix 50/50 Humalog Mix 50/50 Kwikpen Humalog Mix 75/25	Humalog Mix 75/25 Kwikpen Humulin 70/30 Humulin 70/30 Kwikpen Humulin N Humulin N Kwikpen Humulin R Humulin R U-500 Humulin R U-500 Kwikpen Insulin Lispro Insulin Lispro Junior Kwi Insulin Lispro Kwikpen Insulin Lispro Protamine Janumet Janumet XR Januvia Jardiance Lantus Lantus Solostar Levemir Levemir Flextouch Lyumjev Lyumjev KwikPen metformin metformin er (generic for Glucophage XR) miglitol nateglinide Ozempic pioglitazone pioglitazone/ metformin pioglitazone/ glimepiride repaglinide repaglinide/ metformin Rybelsus Soliqua Symlinpen 120 Symlinpen 60 Synjardy
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Sydney App & Rewards



- Re-sets 7/1/25
- \$300 per enrolled employee and enrolled spouse
- Members currently accessing Sydney have no additional steps on 7/1/25
- Menu of 8 different options – all of those shown plus Uber/Uber Eats
- Anthem.com account login credentials is the same as those used for Sydney app

Smart Rewards Menu

Your choice on how to reach \$300 maximum



Preventive Screenings

- Wellness or well woman exam - \$100 per plan year
- Cancer screenings - \$50 per plan year (complete 1 of the following 4 options)
 - ✓ Mammogram
 - ✓ Colonoscopy screening
 - ✓ Prostate screening
 - ✓ Skin Cancer screening



Steps Tracking

- \$25 per month
- 240,000 steps requirement
- Manual logging or sync device
 - ✓ Google Fit
 - ✓ Fitbit
 - ✓ Garmin
 - ✓ iHealth
 - ✓ Misfit
 - ✓ Apple Health



Health Assessment

- \$50 per plan year



Anthem Programs

- ConditionCare - \$100 per plan year
- Building Healthy Families - \$75 per plan year
- Well-Being Coach - \$100 per plan year

All Smart Rewards earned from 7/1/2024 – 6/30/2025 must be redeemed in the Sydney app or on Anthem.com by 9/30/2025.

Support Options

Anthem Health Guides:

- Concierge Customer Service
- Discuss EOBS, claims, pre-authorizations, etc.
- Help finding in network doctors
- Member Services # on back of ID card or chat in Sydney

ERChHealth Service & Support:

- Members can directly connect with ERChHealth advocates regarding questions or concerns related to the program
 - *Preventive Exams*
 - *Rewards*
 - *Sydney App*
- Visit <https://erchealthsupport.com> to message an ERChHealth advocate

Dental Low Plan

BENEFITS	In-Network	Out-of-Network
Deductible (Per Person) • Family 3x Per Person Deductible (\$150)	\$50	
Annual Maximum • Per Person Per Calendar Year	\$1,000	
Preventive & Diagnostic • Exams/Cleanings/X-Rays	100%	100%
Basic Services • Fillings/Extraction/Repairs	80%	80%
Major Services • Crowns/Bridges/Dentures	50%	50%
Orthodontia	Not Covered	

Find a Provider:

Dental Network: DentalConnect

- www.lincolfinancial.com
- Or call (800) 423-2765-4695

Dental Per Pay Deductions		
	Low Plan	High Plan
Employee	\$9.23	\$12.02
Employee & Spouse	\$17.90	\$23.59
Employee & Child(ren)	\$21.68	\$31.40
Employee & Family	\$32.78	\$46.77

Dental High Plan

BENEFITS	In-Network	Out-of-Network
Deductible (Per Person) • Family 3x Per Person Deductible (\$150)	\$50	
Annual Maximum • Per Person Per Calendar Year	\$1,500	
Preventive & Diagnostic • Exams/Cleanings/X-Rays	100%	100%
Basic Services • Fillings/Extraction/Repairs	90%	90%
Major Services • Crowns/Bridges/Dentures	60%	60%
Orthodontia • Dependents up to age 19	50%	50%
Orthodontia Lifetime Maximum	\$1,000	

Out of Network Coverage

You can visit any dentist you wish, but your plan maximum will stretch further if you go to an in-network dentist. Out-of-network fees are based on a Maximum Allowable Charge (MAC). This means that Lincoln establishes a maximum allowable charge for each procedure, and they will pay up to that amount for the covered service. If your dentist charges a higher fee, you will be responsible for the difference.

Maximum Rollover

Lincoln will roll over a portion of your unused annual maximum to build up an account balance for larger claims in the future, To qualify you must have one visit with a paid claim and must not have exceeded the paid claims threshold (\$800 for High Plan and \$600 for Low Plan per calendar year). You can rollover up to \$500 on the High Plan and \$350 on the Low Plan per calendar year if you remain in-network, \$350 on the High Plan and \$250 on the Low Plan per year if you visit an out-of-network provider. Your MaxRewards® account cannot exceed the \$1,250 limit on the High Plan and the \$1,000 limit on the Low Plan.

Vision Plan

BENEFITS	EyeMed Network	
	In-Network	Out-of-Network
Eye Exam	\$10 Copay	Up to \$35
Lenses <ul style="list-style-type: none">• Single lined• Bifocal lined• Trifocal lined	\$25 Copay	Up to \$25 Up to \$40 Up to \$60
Frames	\$120 Allowance + 20% Off	Up to \$95
Contacts – Medically Necessary	\$0 Copay	Up to \$200
Contacts – Elective	\$135 Allowance + 15% Off	Up to \$105
Exam Frequency	Every 12 Months	
Lens Frequency	Every 12 Months	
Frame Frequency	Every 24 Months	

- **Vision Network:** EyeMed
- **Find a Provider:** www.eyemed.com
- **Customer Customer Service:** 866-299-1358

Vision Per Pay Deductions	
Employee	\$2.22
Employee & Spouse	\$5.64
Employee & Child(ren)	\$5.64
Employee & Family	\$5.64

Additional Benefits: 100% Company-Paid

LIFE/ACCIDENTAL DEATH & DISMEMBERMENT

- Meridian Healthcare provides a life insurance benefit of a flat amount of \$20,000 at no cost to you. This also includes AD&D coverage.
- Available to all full-time eligible employees working 30 hours or more per week.
- The benefit will reduce by 50% at age 70 and by an additional 25% at age 75.
- You can change your beneficiary at any time.

2025 Voluntary Disability Benefits

Short-Term Disability insurance provides a cash benefit when you are out of work for up to 26 weeks due to an injury, illness, surgery, or recovery from childbirth. You have the option to purchase this benefit, so please see Paylocity for pricing.

- Please note that all full-time employees receive sick leave in the amount of 96 hours each year to accrue monthly by pay periods and you can accumulate up to 960 hours. Please take this into consideration when deciding if short-term disability will be beneficiary for you.

Benefit	60% of weekly salary (\$25 minimum, \$2,000 maximum)
Elimination Period	7 days for an accident 7 days for an illness/surgery
Duration	Up to 26 weeks or until disability ends (whichever is earlier)



Long-Term Disability provides a cash benefit after you are out of work for 180 days or more due to injury, illness, or surgery. You have the option to purchase this benefit, so please see Paylocity for pricing.

Benefit	60% of your monthly salary limited to \$10,000 per month
Elimination Period	180 Days
Own Occupation Period	24 Months
Maximum Coverage Period	5 Years
Pre-Existing Conditions	3 months prior / 12 months insured



2025 Voluntary Life/AD&D Benefits

- Employee Paid Benefit
- Employee Benefit:
 - \$10,000 increments up to \$500,000 or 5x annual earnings, whichever is less
 - Employee Guarantee Issue is \$150,000 (no medical questions asked)
 - Open Enrollment: Can increase coverage up to 2 increments (\$20,000) without needing to complete a Medical Questionnaire (EOI).
- Spouse Benefit:
 - \$5,000 increments up to 50% of Employee Benefit
 - Spouse Guarantee Issue is \$30,000 (no medical questions asked)
 - Open Enrollment: Can increase coverage up to 2 increments (\$10,000) without needing to complete a Medical Questionnaire (EOI).
- Child Life Benefit:
 - \$1,000, \$2,000, \$4,000, \$5,000 or \$10,000 policy
 - Child Guarantee Issue is \$10,000 (no medical questions asked)



- **Please see Paylocity for pricing**
- **You can change your beneficiary at any time**

2025 Voluntary Accident Benefits

- Pays you when someone in your family suffers from an unexpected injury
- Protects your savings, eases the financial pain
- Accident insurance **helps cover your deductible, copays/coinsurance** – spend the \$ however you want
- Fully portable
- Pays you \$50 annually for Wellness/any follow-up doctors’ office visits
- Please see Paylocity for plan rates

Accident Benefits	Low Plan	High Plan
X-Ray	\$20	\$30
Dislocation	\$50-\$1,500	\$100-\$2,625
Fracture	\$50-\$2,000	\$100-\$3,500
Therapy (Occupational, Physical, Chiropractic)	\$25 per visit	\$50 per visit
Burns (2 nd Degree / 3 rd Degree)	\$50-\$500 / \$250-\$5,000	\$100-\$1,000 / \$375-\$10,000
Hospital / ICU Admission	\$500 / \$1,000	\$1,000 / \$1,500
Ambulance / Air Ambulance	\$150 / \$750	\$225 / \$1,125

**To be used for medical expenses after the medical plan has paid its portion*

2025 Voluntary Critical Illness Benefits

- Employee Paid Benefit
- Provides a large, lump sum benefit to help you through your recovery after suffering a major health event
- Choose a \$15,000 or \$30,000 Benefit
 - If you elect coverage for yourself, you can enroll your spouse and/or child
 - Spouse Benefit: \$7,500 or \$15,000 (up to 50% of employee amount)
 - Child Benefit: \$7,500 or \$15,000 (up to 50% of employee amount)
- Benefits paid on top of any other medical, disability or supplemental plan coverage
- Fully portable at any age, however, rates may change
- Rates are based on age and benefit amount – please see Paylocity for pricing

Conditions	Level of Benefit
Heart Attack	100%
Stroke	100%
Invasive Cancer	100%
End Stage Renal (kidney) Failure	100%
Major Organ Failure	100%
Arterial/Vascular Disease	100%
Noninvasive Cancer (in situ)	25%
Covered Supplemental Conditions	Advanced Huntington’s Disease: 25% Advanced Alzheimer’s Disease: 100% Advanced ALS/Lou Gehrig’s Disease: 25% Advanced Multiple Sclerosis: 25%
Covered Childhood Conditions	Cerebral Palsy: 100% Cleft Lip/Palate: 100% Down Syndrome: 100% Type 1 Diabetes: 100%

2025 Voluntary Hospital Indemnity Benefits

- If you or a covered family member have to go to the hospital for an accident or injury, hospital indemnity insurance provides a lump-sum cash benefit to help you take care of unexpected expenses — anything from deductibles to childcare to everyday bills.
- You will receive a \$50 cash benefit every year you and any of your covered family members complete a single covered exam, screening, or immunization
- Please see Paylocity for plan rates



Core Benefits	
Hospital/ICU Admission	\$1,000 first day admission
Hospital/ICU Confinement	\$100 Hospital / \$500 ICU per day to a max of 15 days per year, per insured
Dependent Age Limits	Childbirth to 26 years (26 if full time student)
Treatments Covered	Sickness and Injury
Newborn Care	\$100 per day
Health Assessment Benefit	\$50
Portable	Yes; Extended Continuation

**To be used for medical expenses after the medical plan has paid its portion*

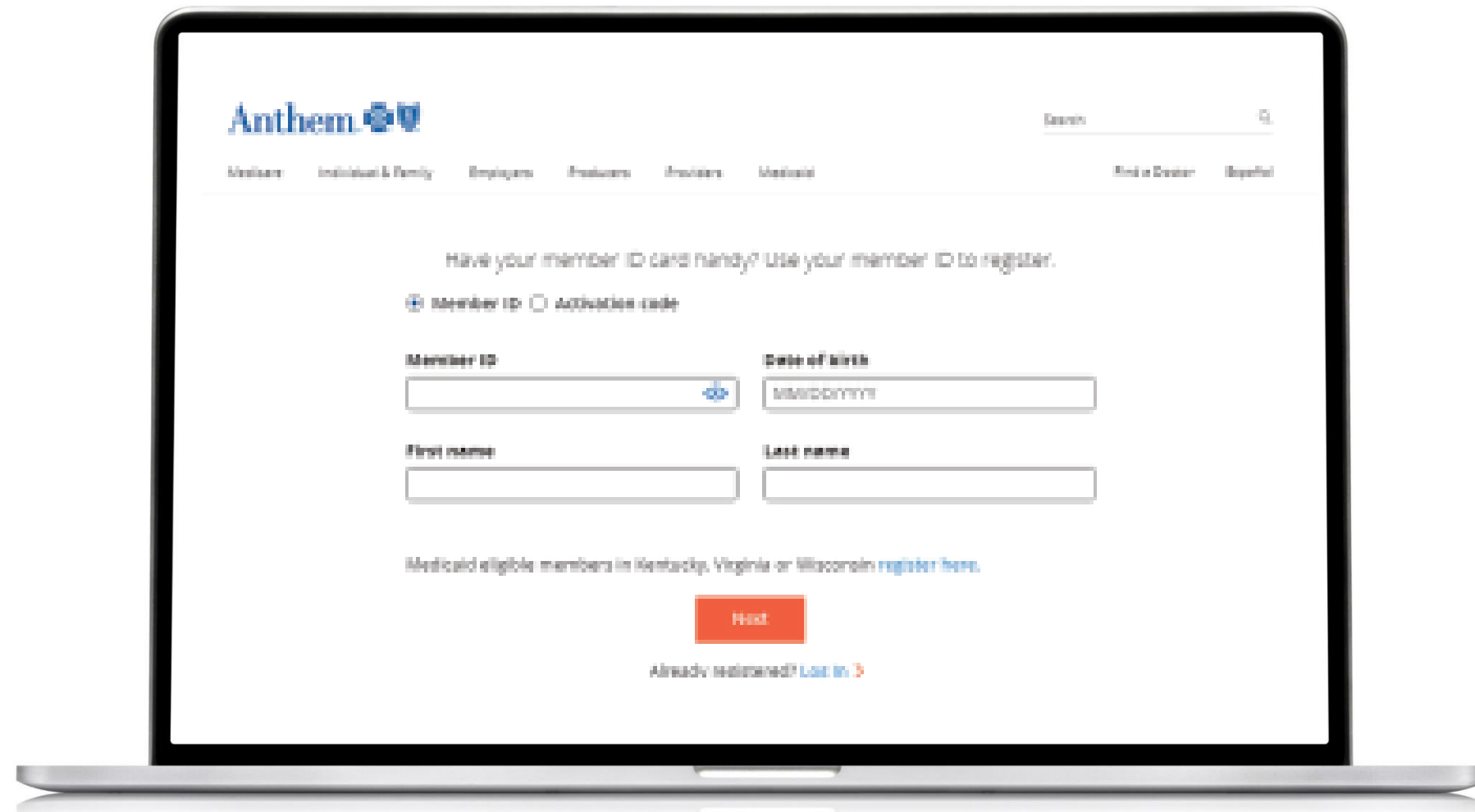
Anthem Online Registration

Anthem's convenient, secure member-only site where you can manage your health insurance benefits 24/7.

- Check your deductible
- Review your Explanation of Benefits (EOB) statements
- Find a doctor in your network
- Additional programs, discounts, money-saving tools and educational resources

Creating your account is simple:

- Visit www.anthem.com/register
- Provide the information requested
- Then follow the instructions and you'll be ready to go!

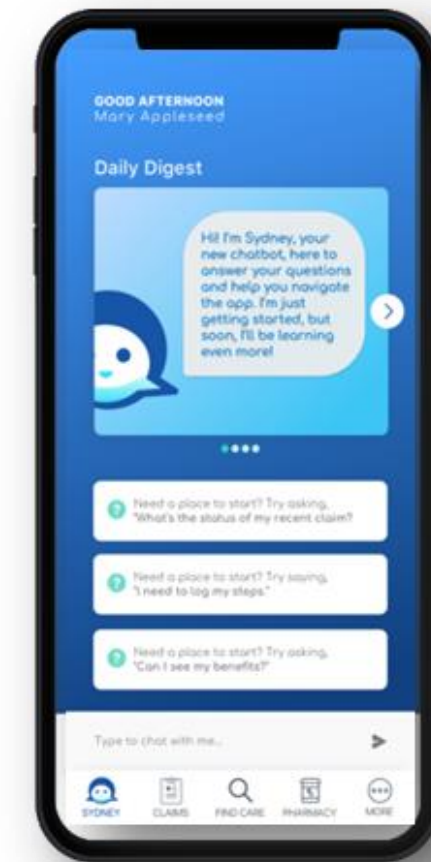


Sydney Mobile App

Download the app for access to:

- Claims history and out-of-pocket spending
- Know before you go and save money – estimate costs
- Find providers and compare quality and patient satisfaction ratings
- Email or fax your digital ID card
- *Find Care – compare costs by searching doctors & hospitals in network, and filter by your physician preferences

Search “Sydney” in the App Store or Google Play



Provider Search

https://www.anthem.com

For Employers ▾

For Producers ▾

For Providers ▾

COVID-19 Info

Search

Español



Insurance Plans ▾

Member Support ▾

Health & Wellness Resources ▾

Find Care

Log In

Members

Find doctors, hospitals
and more in your plan.

Guests

Not a member? Browse
our network directories.

Answer a few questions and then select a
plan/network to search.

What type of care are you searching for?

Medical ▾

Providers for Behavioral Health & Substance Use Disorder Services are
listed under Medical Care.

What state do you want to search with?

Ohio ▾

What type of plan do you want to search with?

Medical (Employer-Sponsored) ▾

Select a plan/network

Blue Access PPO ▾

Continue

Care Providers

792 results within 20 miles of 44685 matching or similar to Family/General Practice, Internal Med

Finding care in Blue Access PPO plan.

[Change Plan](#)

Sort by:

Benefit Tier ▾

Filter

[Clear All](#)

Primary Care Physician

☐ Serve as PCP

Distance

20 Miles ▾

Profile

Recognitions

☒ Tier 1

☐ Cooperative Care

☐ Site of Service

☐ Total Care

List View

Map View

☐ JOSHUA P. HARBERT, D.O.

3333 Massillon Rd Ste 102
Akron, OH 44312
Summit County, OH

(330) 926-3235

2.06 miles 7 min

[Get Directions](#)

In-Network Medical
Plan

Male
PCP ID:
000001366861

[Family Medicine](#)

3 Recognitions/Tier

[View Details](#)

☐ VALERIE A. JOHNSON, M.D.

In-Network Medical

4 Recognitions/Tier

[View Details](#)

Recognitions/Tier

Provider's Recognitions (3)

Tier 1

1

Total Care

Close

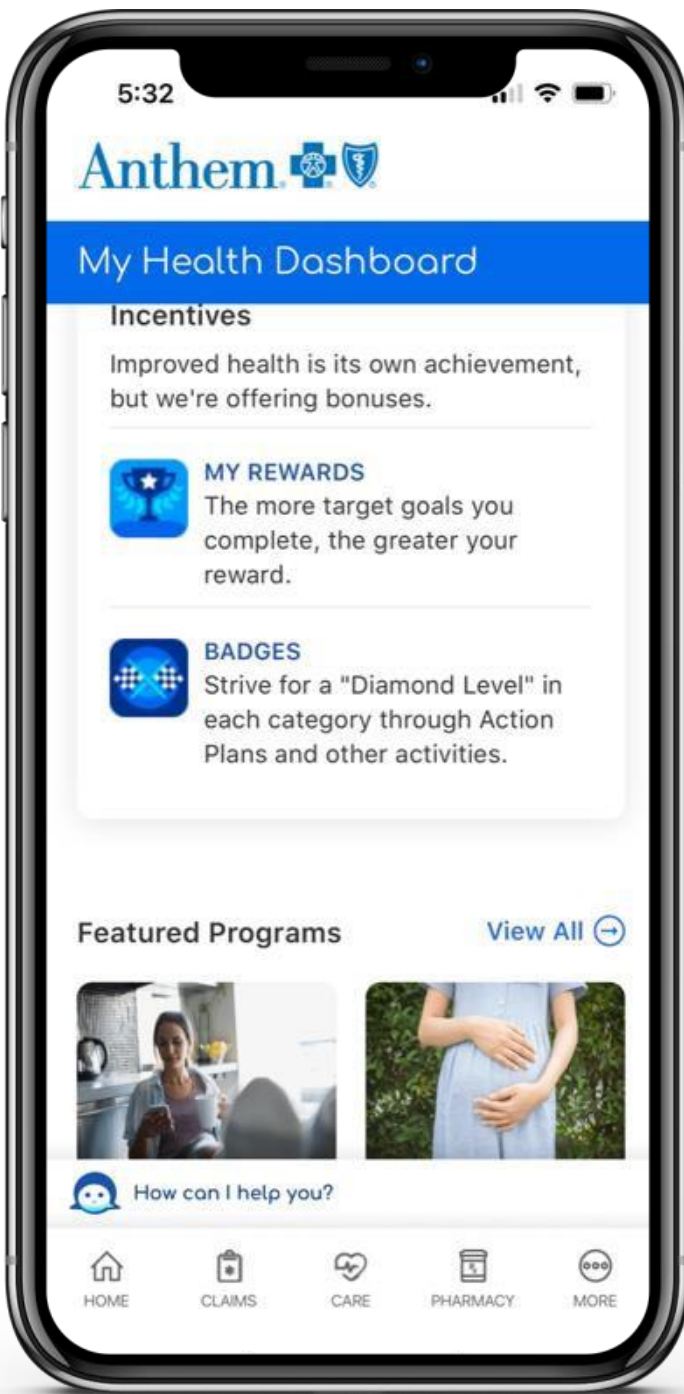
Think about using a tier 1 provider, which may result in lower costs for you.



My Health Dashboard

Empower healthy habits with Anthem's exclusive Nutrition Tracker

(Available to all Medical enrollees)



My Health Dashboard offers your employees targeted information for their specific needs. With this feature, they can access:



Action plans.



Links to personal wellness trackers, including our exclusive Nutrition Tracker.



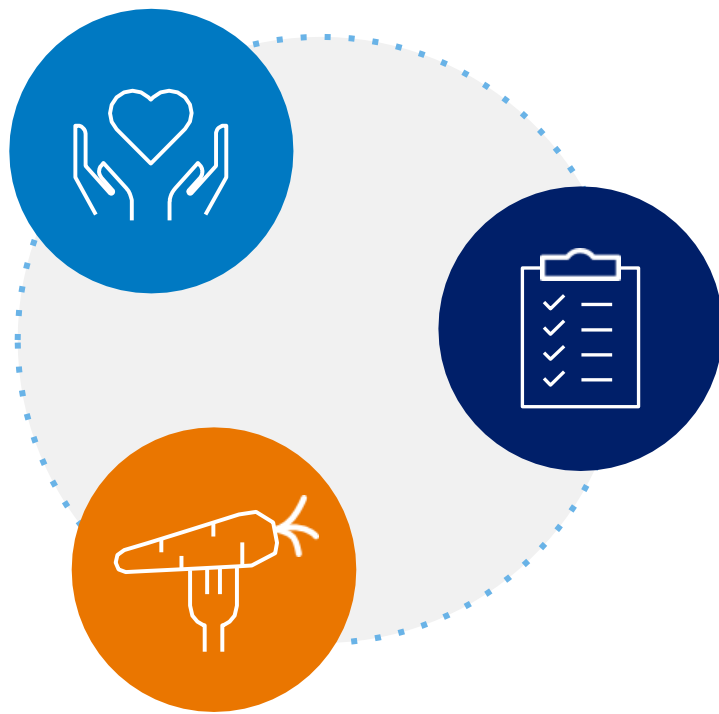
Incentives, Smart Rewards, and badges.



Personalized, smarter care programs.



Health News



Our Nutrition Tracker is offered at **no cost**.

Similar commercial products cost between \$5 and \$20 a month.

- **Recognize and track** an entire meal in real time.
- **Scan** whole foods, labels, and bar codes.
- **View reports** for suggestions on how to improve their well-being.
- **Receive personalized nutrition coaching** from professionals.
- **Share nutritional information** with their providers.

Nutrition Tracker **balances** health plan information with real-time nutrition education.

↑
View care team; search for care from home screen

Have you used LiveHealth Online yet?

It's not new, but COVID has created a surge in utilization with Americans going virtual for medical care & visits.

When you need care, LiveHealth Online is ready to help. No need to make an appointment. Just log in at livehealthonline.com or use the app, and see a board-certified doctor in a few minutes.

When your own doctor isn't available, use LiveHealth Online if you have:

- Pinkeye
- A cold
- The flu
- A fever
- Allergies
- A sinus infection
- And more

A doctor can assess your condition, provide a treatment plan and even send a prescription to your pharmacy, if it's needed.*

What will a visit cost?

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs — usually \$59 or less.

On LiveHealth Online, you can:

- **See a board-certified doctor 24/7.** You don't need an appointment to see a doctor. They're always available to assess your condition and send a prescription to the pharmacy you choose, if needed.¹ It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection or another common health issue.
- **Visit a licensed therapist in four days or less.**² Have a video visit with a therapist to get help with anxiety, depression, grief, panic attacks and more. Schedule your appointment online or call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.
- **Consult a board-certified psychiatrist within two weeks.**³ If you're over 18 years old, you can get medication support to help you manage a mental health condition. To schedule your appointment call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.

Cost

HSA Plan: \$0 (after deductible)

PPO Plan: \$0

Sign up for LiveHealth Online today – it's quick and easy

Go to livehealthonline.com or download the app and register on your phone or tablet.



Lincoln Financial Online Registration

Access your benefits anytime at www.LincolnFinancial.com

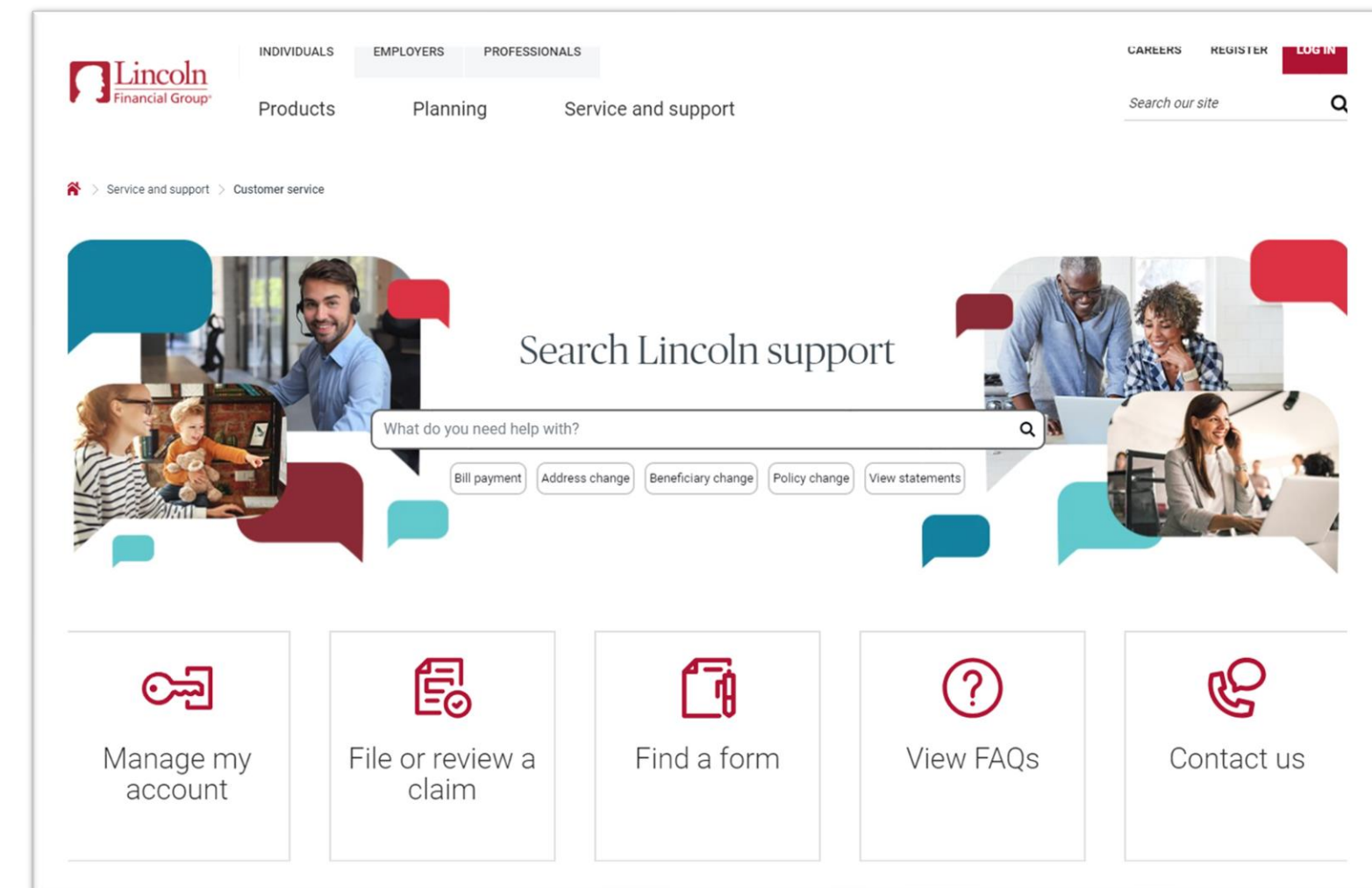
- Access coverage information
- Track your claim status
- Find contact information for customer service and claims
- Download certificates and claim forms

Creating your account is simple:

- Visit www.LincolnFinancial.com
- Choose “Register”, then select “Individual” under **Employee Benefits**
- Enter your personal information and create your username and password.

For assistance without signing in to your account:

- ❑ Call (800) 423-2765
- ❑ Visit www.LincolnFinancial.com
 - Select the **Service and Support** drop-down menu
 - Choose **Customer Service**
 - Choose the **Contact Us**, **Find a form**, and **Start a claim** tabs to access the information you need



We are here for YOU.

There are FREE resources available to you that are
completely CONFIDENTIAL

(Available to all employees, regardless of eligibility status)

Lincoln Financial EmployeeConnect: Employee Assistance through ComPsych

- Contact **EmployeeConnect** 24/7/365:
 - Phone: (888) 628-4824
 - Online: www.GuidanceResources.com (Username: LFGSupport // Password: LFGSupport1)
 - Mobile App: [GuidanceNow](#)
- Services available:
 - Counseling: Up to 5 phone or video consultations, per issue, per year, with licensed counselors
 - Legal Advice: In-person consultations with network lawyers, including one free 30-minute in-person consultation per legal issue
 - Up to 25% off subsequent meetings
 - Financial Planning: Counseling with a certified professional financial planner for assistance on topics such as retirement, buying a car, college planning and more.

Lincoln Financial TravelConnect: Global Assistance Program through On Call International

- Contact **TravelConnect** if you travel more than 100 miles from home and need access to emergency medical help or travel services
 - US & Canada Phone: (866) 525-1955
 - International Phone: (603) 328-1955
- All services must be arranged in advance by On Call International

We are here for YOU.

There are FREE resources available to you that are
completely CONFIDENTIAL

(Available to all employees, regardless of eligibility status)

Lincoln Financial LifeKeys: Support during unexpected challenges

- Services include:
 - Discounts on shopping and entertainment
 - Help with important life matters
 - Protection against identity theft
 - Online will preparation
 - Guidance and support for your beneficiaries
 - Grief counseling
 - Legal support
 - Financial Services
 - Comprehensive information – finding child/elder care, financing a home, moving/relocation
- To access *LifeKeys* services:
 - Visit www.GuidanceResources.com
 - Web ID: LifeKeys
 - Download the GuidanceNow mobile app
 - Call (855) 891-3684

What do I need to do now?

1. Open Enrollment

- **This is a passive enrollment, so you will only need to make elections in Paylocity if you are making plan changes!**

2. Make sure your beneficiary is up-to-date

3. Check out our benefits website which will have all new information updated this month

☐ <https://www.mymeridianbenefits.com>

4. Keep your medical ID card – cards will only be issued to those making changes

Any Questions?

Feel free to reach out to your Oswald team members:

Jenna Oravec – Oswald Companies
joravec@oswaldcompanies.com 234-255-2151

Rachael Smetanka – Oswald Companies
rsmetanka@oswaldcompanies.com 330-344-9043



Thank you!

Benefit Carrier Contact List				
Carrier	Benefit	Policy #	Website	Customer Service
Anthem	Medical	L01758	www.anthem.com	(844) 995-1727
	Pharmacy	L01758		
Lincoln Financial Group	Dental	1152883	www.LincolnFinancial.com	(800) 423-2765
	Life/AD&D	1152883		
	Short-Term Disability	1152883		
	Long-Term Disability	1152883		
	Accident	1152883		
	Critical Illness	1152883		
	Hospital Indemnity	1152883		
EyeMed	Vision	1035347	www.eyemed.com	866-299-1358