



# 2026 Benefits Open Enrollment

# Open Enrollment: 6/30/26 – 7/7/26

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

**Choose wisely & don't miss the deadline!**

- Complete your elections in **Paylocity** no later than Tuesday, July 7<sup>th</sup>
- **PASSIVE ENROLLMENT:** If you are not making changes to your benefits, your current benefit elections will carry over in 2026.
- If you are not electing any of the benefits, you will need to log in to **Paylocity** to waive coverage.

## **Reminders:**

- ✓ Qualifying Events:
  - Marriage
  - Divorce
  - Birth or Adoption
  - Loss of Coverage
  - Change in Employment

# 2026 Employee Benefit Highlights

1

The medical plans are moving to UMR utilizing United Healthcare's Choice Plus Network.

- This vendor and network change has allowed your cost to remain the same on the PPO plans and HSA plans for 2026... keeping more money in your pockets!
- We will continue to offer two PPO plans and two HDHP plans with *minimal* plan design changes.
- Your pharmacy benefits will be managed through TrueRx, which will work directly with UMR.
  - Any specialty or high-cost medications will be filtered through the SHARx program, which will offer a sourcing solution to help provide you with your medication at a more affordable cost.

2

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

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

3

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

4

Your preferred Health Savings Account Administrator will remain with WesBanco. Keep an eye out for updates in the near future!

5

Your Flexible Spending Account Administrator will remain with Streamline HR

# Medical Plan – \$2,500 PPO



2026 | Carrier Change to UMR

In-Network Benefits	In-Network	Out-of-Network
Deductible – Single	\$2,500	\$22,500
Deductible – Family	\$5,000	\$45,000
Coinsurance	80%	50%
Out-of-Pocket Maximum – Single	\$6,600	\$23,100
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance &amp; copays)</i>	\$13,200	\$46,200
Office Visit Primary Care Physician Specialist	\$35 Copay \$70 Copay	50% after Deductible
Preventive Care Visit	Covered at 100%	50% after Deductible
Inpatient Hospital Services	20% after Deductible	50% after Deductible
Outpatient Surgical Services	20% after Deductible	50% after Deductible
Emergency Room	\$350 Copay, then 20%	
Urgent Care	\$75 Copay	50% after Deductible
<b>Prescription Benefit</b>		
Retail Rx (30-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	\$10/\$40/\$70/25% up to \$350	
Mail Order Rx (90-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	\$25/\$100/\$175/25% up to \$350	

**Plan Highlights:**

- Network = United Healthcare Choice Plus
- To Find a Provider:
  - Visit [www.umar.com](http://www.umar.com)
  - Find a provider
  - Search by “United Healthcare Choice Plus” → then “View Providers”
  - Enter your location and then search by doctor, facility or service

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

# Medical Plan – \$5,000 PPO



2026 | Carrier Change to UMR

In-Network Benefits	In-Network	Out-of-Network
Deductible – Single	\$5,000	\$22,500
Deductible – Family	\$10,000	\$45,000
Coinsurance	80%	50%
Out-of-Pocket Maximum – Single	\$9,450	\$24,450
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance &amp; copays)</i>	\$18,900	\$48,900
Office Visit Primary Care Physician Specialist	\$35 Copay \$70 Copay	50% after Deductible
Preventive Care Visit	Covered at 100%	50% after Deductible
Inpatient Hospital Services	20% after Deductible	50% after Deductible
Outpatient Surgical Services	20% after Deductible	50% after Deductible
Emergency Room	\$350 Copay, then 20%	
Urgent Care	\$75 Copay	50% after Deductible
<b>Prescription Benefit</b>		
Retail Rx (30-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4 Mail Order Rx (90-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	\$10/\$40/\$70/25% up to \$350 \$25/\$100/\$175/25% up to \$350	

## Plan Highlights:

- Network = United Healthcare Choice Plus
- To Find a Provider:
  - Visit [www.umar.com](http://www.umar.com)
  - Find a provider
  - Search by “United Healthcare Choice Plus” → then “View Providers”
  - Enter your location and then search by doctor, facility or service

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

# Medical Plan – \$3,500 HDHP



2026 | Carrier Change to UMR

In-Network Benefits	In-Network	Out-of-Network
Deductible – Single	\$3,500	\$7,000
Deductible – Family	\$7,000	\$14,000
Coinsurance	80%	50%
Out-of-Pocket Maximum – Single	\$6,900	\$20,700
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance &amp; copays)</i>	\$13,800	\$41,000
Office Visit Primary Care Physician Specialist	20% after Deductible 20% after Deductible	50% after Deductible
Preventive Care Visit	Covered at 100%	50% after Deductible
Inpatient Hospital Services	20% after Deductible	50% after Deductible
Outpatient Surgical Services	20% after Deductible	50% after Deductible
Emergency Room	20% after Deductible	
Urgent Care	20% after Deductible	50% after Deductible
<b>Prescription Benefit</b>		
Retail Rx (30-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	<b>Once your deductible is met, then:</b> \$10/\$50/\$100/25% up to \$250	
Mail Order Rx (90-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	\$25/\$125/\$250/25% up to \$250	

## Plan Highlights:

- Network = United Healthcare Choice Plus
- To Find a Provider:
  - Visit [www.umar.com](http://www.umar.com)
  - Find a provider
  - Search by “United Healthcare Choice Plus” → then “View Providers”
  - Enter your location and then search by doctor, facility or service

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

# Medical Plan – \$5,000 HDHP



2026 | Carrier Change to UMR

In-Network Benefits	In-Network	Out-of-Network
Deductible – Single	\$5,000	\$8,000
Deductible – Family	\$10,000	\$16,000
Coinsurance	75%	50%
Out-of-Pocket Maximum – Single	\$6,000	\$12,000
Out-of-Pocket Maximum – Family <i>(Includes deductible, coinsurance &amp; copays)</i>	\$12,000	\$24,000
Office Visit Primary Care Physician Specialist	25% after Deductible 25% after Deductible	50% after Deductible
Preventive Care Visit	Covered at 100%	50% after Deductible
Inpatient Hospital Services	25% after Deductible	50% after Deductible
Outpatient Surgical Services	25% after Deductible	50% after Deductible
Emergency Room	25% after Deductible	
Urgent Care	25% after Deductible	50% after Deductible
<b>Prescription Benefit</b>		
Retail Rx (30-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	<b>Once your deductible is met, then:</b> \$10/\$35/\$60/25% up to \$250	
Mail Order Rx (90-day) – Tier 1 / Tier 2 / Tier 3 / Tier 4	\$25/\$90/\$150/25% up to \$250	

## Plan Highlights:

- Network = United Healthcare Choice Plus
- To Find a Provider:
  - Visit [www.umar.com](http://www.umar.com)
  - Find a provider
  - Search by “United Healthcare Choice Plus” → then “View Providers”
  - Enter your location and then search by doctor, facility or service

# 2026 Pharmacy Benefits

Prescription Type	\$2,500 PPO		\$5,000 PPO		HDHP/HSA \$3,500		HDHP/HSA \$5,000	
	Retail (30-day supply)	Mail Order (90-day supply)	Retail (30-day supply)	Mail Order (90-day supply)	Retail (30-day supply)	Mail Order (90-day supply)	Retail (30-day supply)	Mail Order (90-day supply)
Generic	\$10	\$25	\$10	\$25	Ded, then \$10	Ded, then \$25	Ded, then \$10	Ded, then \$25
Preferred Brand	\$40	\$100	\$40	\$100	Ded, then \$50	Ded, then \$125	Ded, then \$35	Ded, then \$90
Non-preferred Brand	\$70	\$175	\$70	\$175	Ded, then \$100	Ded, then \$250	Ded, then \$60	Ded, then \$150
Specialty	25% up to \$350		25% up to \$350		Ded, then 25% up to \$250		Ded, then 25% up to \$250	

- **Pharmacy Benefit Manager (PBM): TrueRx**
  - Works behind the scenes with local pharmacies to provide medications at competitive pricing when you need them!
  - Visit [TrueRx.com](https://www.truerx.com) to locate pharmacies, view prescriptions and check drug pricing
  - Reach out to the TrueRx team at 866-921-4047
- **High-Cost Maintenance & Specialty Medications Solution: SHARx**
  - Works behind the scenes to pursue multiple avenues to help members afford maintenance prescriptions
  - Any medication over \$350 per month is considered “high-cost” and SHARx will intervene to find the same high-quality medications, but at a much lower cost
  - Reach out to the SHARx team at 314-451-3555, option 1, or email [SHARx@sharxplan.com](mailto:SHARx@sharxplan.com) with questions



# 2026 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

As an enrolled member in the Meridian’s medical plan, we encourage you and your spouse to participate in completing your annual preventive care exam. Your wellness rate is contingent upon your completion of your annual preventive care exam. If your spouse is enrolled in the medical plan, they must participate in order for you to obtain the maximum incentive effective July 1, 2026.

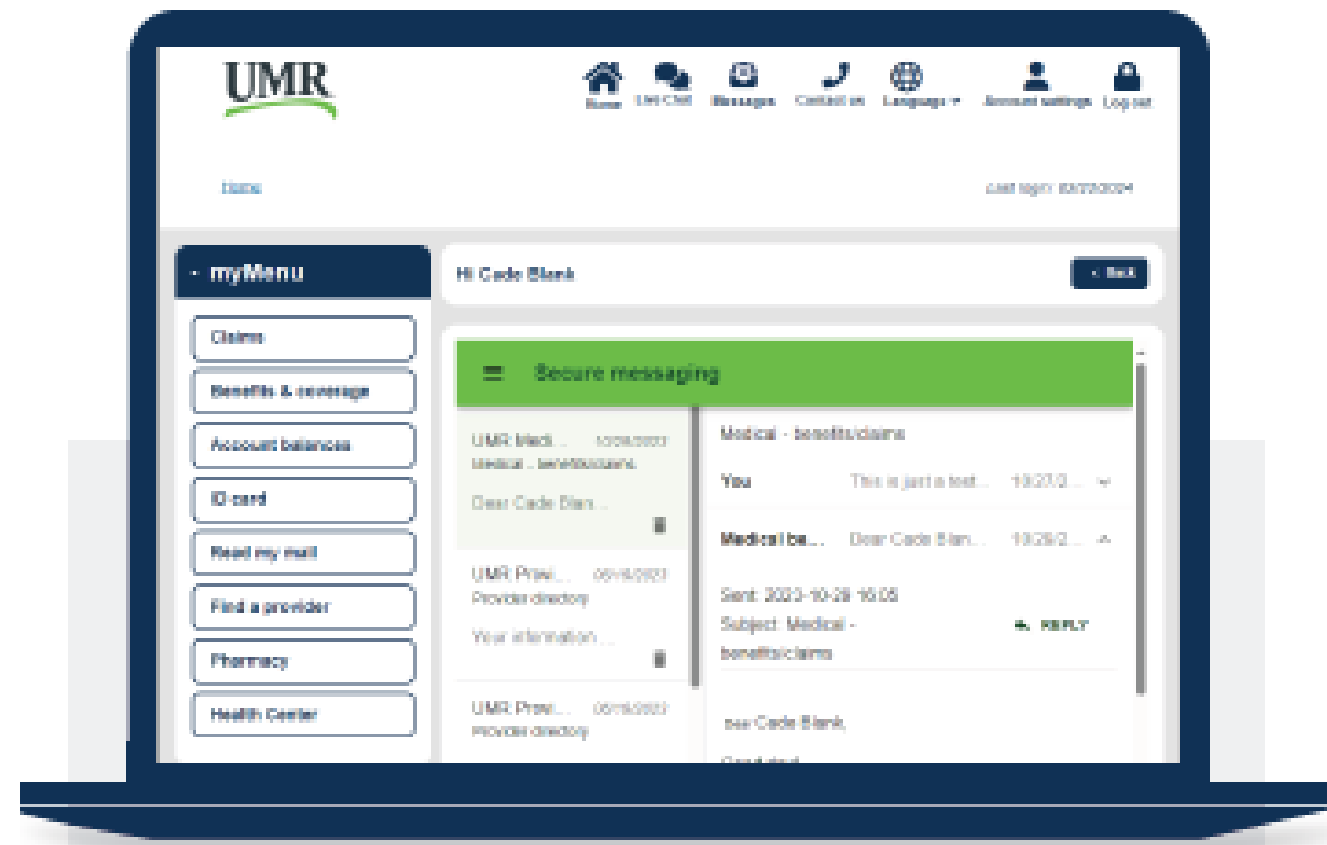
Your 2026 Per Pay Cost (Does not include spousal surcharge)								
	PPO \$2,500		PPO \$5,000		HSA \$3,500		HSA \$5,000	
	Wellness	Non-Wellness	Wellness	Non-Wellness	Wellness	Non-Wellness	Wellness	Non-Wellness
Employee Only	\$68.69	\$93.69	\$60.35	\$85.35	\$44.07	\$69.07	\$0.00	\$25.00
Employee + Spouse	\$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



# UMR | United Healthcare

## Activate your UMR Account on or after July 1st

You will have access to tools and resources that can help you easily navigate your health plan. Visit [www.umar.com](http://www.umar.com) or download the UMR app to create an account.



## Ongoing Condition CARE Coaching

UMR's CARE program is available to help members living with a chronic condition. If you have one of the following conditions, you may be eligible for help. If you meet the qualifications, you will receive a letter in the mail and/or a phone call or email from UMR to enroll in the program. You can also call UMR to self-enroll.

- ALS, multiple sclerosis, myasthenia gravis or rheumatoid arthritis
- Hypertension, heart failure or coronary artery disease
- Asthma or COPD
- Depression or anxiety
- HIV/AIDS, hepatitis C or sickle cell anemia
- Ulcerative colitis or Crohn's disease
- Breast, prostate, colorectal or lung cancer
- Diabetes (type 1 or 2)
- Chronic kidney disease

## To help manage unexpected costs:



**Know the price you'll pay ahead of time**

Under the **Find costs and care** menu option, use the **Health cost estimator** to look up a treatment or procedure in your area.



**Quickly see what you spent on health care this year**

Under the **Claims** menu option, see a breakdown by the types of services, so you can see where all your money went.



**Make sure you get your in-network discount**

Under the **Find costs and care** menu option, select **Find a provider** to do a quick search of participating doctors and facilities near you.

Download the UMR app:



Scan the code or visit your app store to download our app today.



# 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.
- Cannot be covered under any other health plan that is not an HDHP.
- **Not be entitled to benefits under Medicare.**
- Not be claimed as a dependent on another person's tax return.

## Why choose an HSA?

### Triple Tax Savings

- Contributions are tax deductible = reduces taxable income!
- Earnings/Growth are tax-free
- Withdrawals for qualified Medical Expenses are tax-free

### NO Use it or Lose it provision

- Balance rolls over
- Contribute up to the annual maximum each year

### Employee Owns the Account

- You keep the money even if you change jobs or insurance
- Comprehensive & easy investment options
- Save for retirement

USE IT OR **KEEP IT**

# 2026 HSA Contribution Limits

## 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](http://www.IRS.gov) & Publication 502 for a complete listing of eligible HSA expenses
- WesBanco will provide you with a Debit Card once you sign up!

### Annual Contribution Rules

#### 2026 Limits:

\$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

# 2026 FSA

## Contribution Limits

### Health Care

**2026 Limit: \$3,400**

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

### Dependent Care

**2026 Limit: \$7,500**

- \*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

**2026 Limit: \$3,400**

- \*Eligible Expenses: Dental & Vision care that are not covered by the health plan
- \*Only available if electing the HSA \$3,500 or HSA \$5,000 plans

### Reminders:

**Open Enrollment for the FSA coincide with the calendar year. We will hold Open Enrollment in November for January 1, 2027.**

- 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](http://www.IRS.gov) & Publication 502 for a complete listing of eligible expenses



# Dental Low Plan

2026 | Lincoln Financial Group

BENEFITS	In-Network	Out-of-Network
Deductible • Single • Family	\$50 \$150	\$50 \$150
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/Implants/Bridges/Dentures	50%	50%
Orthodontia	Not Covered	

- **Dental Network:** DentalConnect
- **Find A Provider:** [www.lincolffinancial.com](http://www.lincolffinancial.com)
  - Or call (800) 423-2765

Dental Per Pay Deductions	
Employee	\$9.23
Employee & Spouse	\$17.90
Employee & Child(ren)	\$21.68
Employee & Family	\$32.78

### 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.



# Dental High Plan

2026 | Lincoln Financial Group

BENEFITS	In-Network	Out-of-Network
Deductible • Single • Family	\$50 \$150	\$50 \$150
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/Implants/Bridges/Dentures	60%	60%
Orthodontia • Dependents up to age 19	50%	50%
Orthodontia Lifetime Maximum	\$1,000	

- **Dental Network:** DentalConnect
- **Find A Provider:** [www.lincolffinancial.com](http://www.lincolffinancial.com)
  - Or call (800) 423-2765

Dental Per Pay Deductions	
Employee	\$12.02
Employee & Spouse	\$23.59
Employee & Child(ren)	\$31.40
Employee & Family	\$46.77

### 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

2026 | EyeMed

BENEFITS	EyeMed Network	
	In-Network	Out-of-Network
Eye Exam	\$10 Copay	Up to \$35
Lenses <ul style="list-style-type: none"> <li>• Single lined</li> <li>• Bifocal lined</li> <li>• Trifocal lined</li> </ul>	\$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](http://www.eyemed.com)
- **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.

# 2026 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)



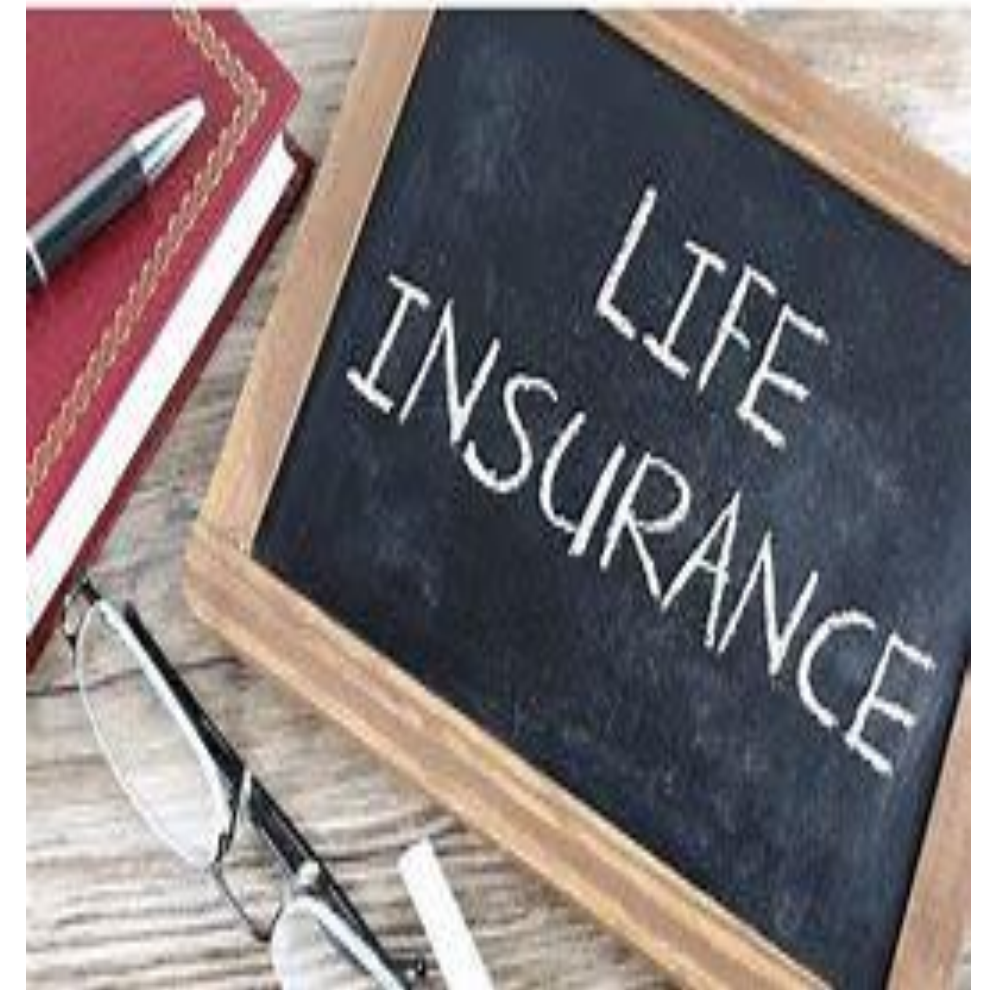
Long-Term Disability provides a cash benefit after you are out of work for 180 days or more due to injury, illness, or surgery. You have the option to purchase this benefit, so please see Paylocity for pricing.

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



# 2026 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**

# 2026 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 <sup>nd</sup> Degree / 3 <sup>rd</sup> 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

# 2026 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%

# 2026 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

Hospital Indemnity 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

# Lincoln Financial Online Registration

Access your benefits anytime at [www.LincolnFinancial.com](http://www.LincolnFinancial.com)

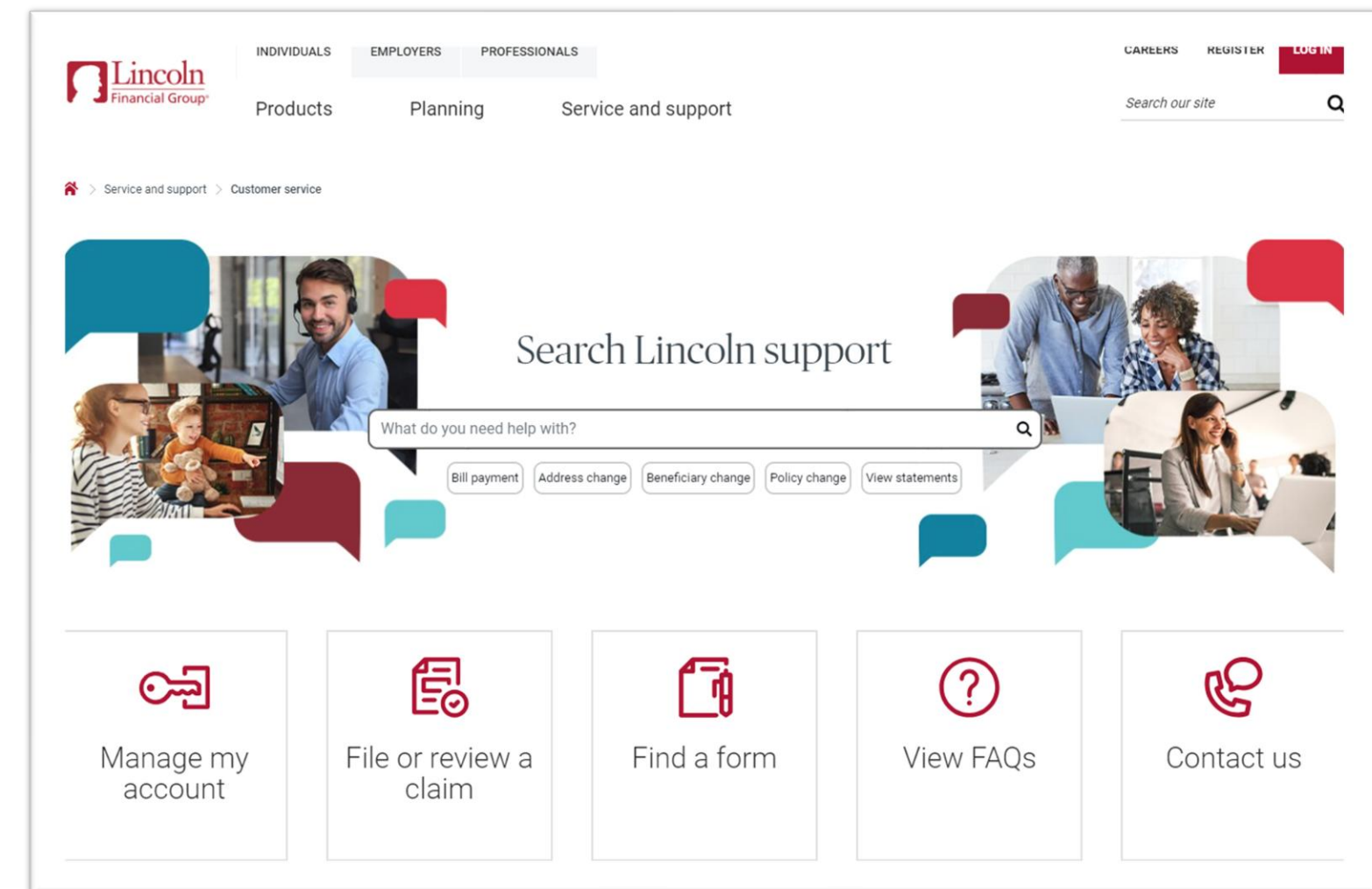
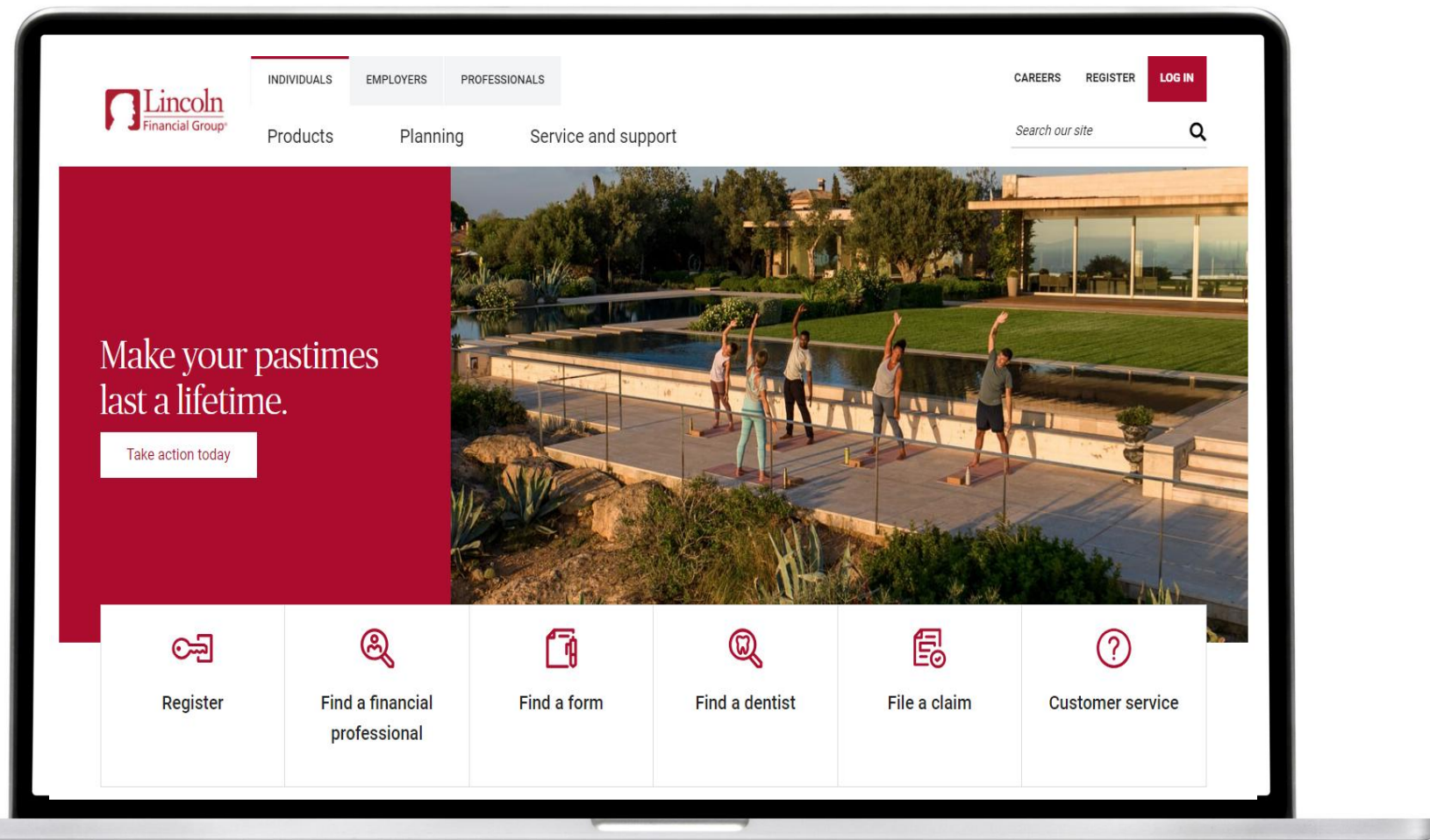
- Access coverage information
- Track your claim status
- Find contact information for customer service and claims
- Download certificates and claim forms

Creating your account is simple:

- Visit [www.LincolnFinancial.com](http://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](http://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](http://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](http://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: 6/30/26 – 7/7/26
  - This is a **PASSIVE** enrollment. If you do not make any changes during Open Enrollment, your current benefit elections will automatically carry over to the new plan year. Please note that if you wish to waive coverage, you must actively make that election in Paylocity. Make sure your beneficiary is up-to-date.
2. Check out our benefits website which will have all new information updated for July 1<sup>st</sup>.
  - <https://www.mymeridianbenefits.com>
3. New ID cards will be issued to those enrolling in medical
  - If you are changing plans, you will receive two sets of ID cards. The second ID card will be the correct ID card that you will want to use.

## *Any Questions?*

Feel free to reach out to your Oswald team members:

Summer Lawrence – Oswald Companies  
[slawrence@oswaldcompanies.com](mailto:slawrence@oswaldcompanies.com) 330 294-0753

Jenna Oravec – Oswald Companies  
[joravec@oswaldcompanies.com](mailto:joravec@oswaldcompanies.com) 234-255-2151

# Thank you!

Benefit Carrier Contact List				
Carrier	Benefit	Policy #	Website	Customer Service
UMR / TrueRx / SHARx	Medical	TBD	<a href="http://www.umar.com">www.umar.com</a>	TBD
	Pharmacy	TBD	<a href="http://www.TrueRx.com">www.TrueRx.com</a> <a href="http://www.app.sharxplan.com">www.app.sharxplan.com</a>	(866) 921-4047 (314) 451-3555
Lincoln Financial Group	Dental	1152883	<a href="http://www.LincolnFinancial.com">www.LincolnFinancial.com</a>	(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	<a href="http://www.eyemed.com">www.eyemed.com</a>	(866) 299-1358