



Employee Benefits Guide



2023

L LUNA DATA
SOLUTIONS



This guide is intended to provide a summary of the main features of your benefits package. It is much shorter and less technical than the legal documents and contracts that govern your benefits. We have made every effort to ensure the information in this summary is accurate; however, in the case of any discrepancy, the provisions of the legal plan documents and insurance certificates will govern.

The more you understand the various elements of your benefits, the better prepared you will be to take full advantage of the benefits we provide for you and your family. This benefits guide is a resource that will answer questions most employees have. We have also provided phone numbers of benefit plan vendors and other contacts so you can manage your personal issues more efficiently. Finally, if you have additional questions concerning your benefits or need assistance, please do not hesitate to contact your Human Resources department or Marsh McLennan Agency.



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2023 PROGRAM HIGHLIGHTS



Medical – Three medical plans from **United Healthcare**. All plans include no cost preventive care, telemedicine and prescriptions.

Dental – Your dental coverage is with **Mutual of Omaha**. The plan includes no-cost cleanings and exams, coverage for major services and no waiting periods.

Vision – Full featured vision plan through **Mutual of Omaha** powered by the EyeMed network of providers.

Life and AD&D Insurance – Employer paid \$15,000 term life and AD&D.

Supplemental Life – Option to purchase up to **\$500,000** in additional insurance for yourself and up to **\$250,000** for your spouse.

Accident and Critical Illness Insurance – These voluntary benefits help offset out-of-pocket expenses with benefits paid directly to you.

Additional Benefits – We also provide our employees with a number of no-cost services to help with personal Legal, Financial and Travel related tasks.



BENEFITS ELIGIBILITY AND LIFE EVENTS

WHO IS ELIGIBLE?

To participate in **Luna Data Solutions, Inc.** Benefits Program, you must meet the following criteria:

- Be a full-time employee as defined in our employee handbook and
- Make selections in ADP within the first 60 days from your date-of-hire or during annual Open Enrollment

Dependents eligible for coverage include:

- Your spouse by legal marriage;
- Common-law spouse for whom you have proper documentation;
- Domestic partner for whom you have proper documentation;
- Dependent children up to age 26, includes step-children, legally adopted children, children placed for adoption, foster children, and children for whom legal guardianship has been awarded to you or your spouse;
- Dependent children, regardless of age, provided they are incapable of self-support due to a disability and are fully dependent on you for support as indicated on your tax return.

WHEN DOES COVERAGE BEGIN?

The benefit elections you make are effective:

New Hire – 1st of the month following 60 days

Open Enrollment – July 1st

WHEN DOES COVERAGE END?

Your benefit coverage will end on the last day of the month in which:

- Your regular work schedule is reduced below the minimum hours required to receive benefits;
- Your current employment ends;
- You stop paying your share of the coverage during an unpaid leave of absence.

- The last day of the month in which you terminate employment or cease to be eligible;
- The last day of the month in which children turn age 26.

MAKING CHANGES DURING THE YEAR

Qualifying Events allow you to make changes before Open Enrollment. When one of the following occurs, you have 30 days to contact Human Resources with the appropriate documentation to make changes to your coverage.

Your requested change in coverage must be consistent with your qualifying event.

Examples of qualifying events include:

- Change in your legal marital status;
- Change in the number of your dependents (Example: birth, adoption, or if a child is no longer an eligible dependent);
- Change in your spouse's employment status
- Change in status from full-time to part-time or part-time to full-time
- Entitlement to Medicare or Medicaid;
- Qualified Medical Child Support Order (QMCSO) or legal change of custody.

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DAYS

You have 30 days from the qualifying life event to report the event to Human Resources. Qualifying life events will require documentation.

ENROLLING IN BENEFITS

PREPARING TO ENROLL

Luna Data Solutions, Inc. provides its employees the best possible coverage available. As a committed partner in your health and welfare, **Luna Data Solutions, Inc.** absorbs a significant amount of the costs.

Your share of the premiums for medical, dental, vision and FSA is deducted from your pay on a pre-tax basis. Please note that employee contributions for coverage vary depending on the level of coverage elected.

Keep in mind that you may select any combination of medical, dental and/or vision plan coverage categories. For example, you could select medical coverage for you and your family but elect dental and vision coverage for yourself only. The only requirement is that you must elect coverage for yourself in order to elect dependent coverage in any given plan.

HOW TO ENROLL

1. **Understand Your Choices** – This guide contains very useful reference material to help you prepare for Annual Enrollment. Keep it handy so you can refer to it throughout the year.
2. **Gather Your Personal Information** – Be sure to have the Social Security numbers and birth dates for any dependents you plan to enroll.
3. **OR Call Marsh McLennan Agency Benefits** – A team of customer service representatives is ready to answer your questions. Refer to the inside back cover for contact information.
4. **Review Your Paystub** – Review your pay stubs to ensure your plan selections are properly reflected. Immediately report any discrepancies to HR.

Open Enrollment 2023
June 13th – June 19th





MEDICAL BENEFITS OVERVIEW



Eligible employees have a choice of three United Healthcare medical plans. Each plan covers the same services and includes all the essential benefits and features mandated by law; however, your total annual cost (payroll deductions plus out-of-pocket expenses) will vary by plan. Below is a high-level overview of plan similarities and differences. Additional details about each plan can be found on the next page and in **ADP**.

	Low Plan \$6,350 HSA (DDYL)	Mid Plan \$3,000 PPO (BCWK)	High Plan \$2,000 PPO (BCX8)
No-Cost Preventive Care	✓	✓	✓
Copays for Office Visits	✓	✓	✓
Copays for Prescriptions	✓	✓	✓
Deductible for Prescriptions	✓	✗	✗
Out-of-Network Benefits	✓	✓	✓
<u>No Referral</u> needed to See Specialist	✓	✓	✓

SEMI-MONTHLY (24) DEDUCTIONS

	Low Plan	Mid Plan	High Plan
Employee Only	\$72.25	\$101.29	\$132.20
Employee & Spouse	\$288.98	\$352.87	\$420.88
Employee & Child(ren)	\$234.80	\$289.98	\$348.72
Employee & Family	\$469.60	\$562.53	\$661.45

MEDICAL PLAN HIGHLIGHTS



Below is a high-level overview of plan similarities and differences. Please refer to the Summary of Benefits and Coverage, available in ADP for a listing of benefits, exclusions and limitations.



WHAT YOU PAY	Low Plan \$6,350 HSA (DDYL)	Mid Plan \$3,000 PPO (BCWK)	High Plan \$2,000 PPO (BCX8)
Calendar Year Deductible (Individual/Family)	\$6,350/\$12,700	\$3,000/\$6,000	\$2,000/\$4,000
Out-of-Pocket Limits (Individual/Family) <i>Includes copays, coinsurance and deductible</i>	\$6,350/\$12,700	\$6,350/\$12,700	\$6,000/\$12,000
Coinsurance (<i>Your responsibility after deductible</i>)	0%	50%	80%
MEDICAL SERVICES			
Network		Choice Plus	Choice Plus
Referral to See Specialist	Not Required	Not Required	Not Required
Preventive Care	No charge	No charge	No charge
Physician Office Visit	0% after deductible	\$50 copay	\$30 copay
Specialist Office Visit	0% after deductible	\$50 copay	\$60 copay
Urgent Care	0% after deductible	\$100 copay	\$75 copay
Virtual Visits (Telephonic)	0% after deductible	\$0 copay	\$0 copay
Emergency Room	0% after deductible	50% after deductible	\$250 copay + 80% after deductible
ER Physician Services	0% after deductible	50% after deductible	80% after deductible
Hospitalization	0% after deductible	50% after deductible	80% after deductible
Out-Patient Procedures	0% after deductible	50% after deductible	80% after deductible
Complex Imaging/Diagnostics	0% after deductible	50% after deductible	80% after deductible
NON-NETWORK BENEFITS			
Note: All ERs are considered in-network if it is a true emergency. <i>Refer to Summary of Benefits and Coverage for details.</i>	Included	Included	Included
PHARMACY BENEFITS			
RX Deductible	Medical Deductible Must Be Satisfied	\$0	\$0
Tier 1—Generic (Preferred/Non-Preferred Pharmacy)	0% after deductible	\$10	\$10
Tier 2—Generics (Preferred/Non-Preferred Pharmacy)	0% after deductible	\$30	\$30
Tier 3—Brand (Preferred/Non-Preferred Pharmacy)	0% after deductible	\$50	\$50
Mail Order (90 Day Supply)	2.5 x copay	2.5 x copay	2.5 x copay

All deductibles and Out-of-Pocket maximums reset on January 1st of each year.

MORE ABOUT YOUR MEDICAL BENEFITS

PRESCRIPTION BENEFITS

Generic Drugs –These medications are a safe and effective alternative to the higher cost brand drugs. They offer the same therapeutic benefit as brand equivalents but at a much lower cost.

Brand Drugs – Brand medications are higher cost medications that typically do not have a generic equivalent. If there is a generic equivalent and you choose to take the brand, payment of the difference between the cost of a brand name drug and a generic may be required.

Specialty Drugs –These are higher-cost medications used to treat complex medical conditions. They typically require special handling and administration.

Preferred Participating Pharmacies – Use in-network pharmacies to maximize your prescription drug benefits. Within the network of participating pharmacies, there is a subset of pharmacies whose pricing is lower than regular network pricing. Use these pharmacies to save even more on your prescriptions. You can find out more about your pharmacy benefits online at www.myuhc.com.

PRE-AUTHORIZATIONS

Preauthorization establishes in advance the medical necessity or experimental/investigational nature of certain care and services covered under your medical plan. Preauthorization ensures that the requested care and services will not be denied. Generally speaking, you should seek a preauthorization for:

- Inpatient hospital stays
- Outpatient procedures
- Specialty medications/ Infusion therapies
- Cardiac testing and imaging
- Non-emergency medical transportation
- Extended care services
- Certain Behavioral Health and Dependency services other than office visits

Preauthorization does not guarantee payment of benefits. Actual availability of benefits is always subject to other requirements of the Plan, such as limitations and exclusions, payment of premium, and eligibility at the time of care and services are provided.

PREVENTIVE SERVICES – 100% COVERED

The Affordable Care Act requires all health plans to provide preventive care services with no out-of-pocket expense to the member. Allowed preventive services must be covered without your having to pay a copayment or co-insurance or meet your deductible. This applies only when these services are delivered by a network provider. For more details about federally mandated preventive services, visit healthcare.gov

- Blood pressure, diabetes, and cholesterol tests
- Many cancer screenings, including mammograms and colonoscopies
- Counseling on topics such as quitting smoking, losing weight, eating healthfully, treating depression, and reducing alcohol use
- Regular well-baby and well-child visits
- Routine vaccinations against diseases such as measles, polio, or meningitis
- Counseling, screening, and vaccines to ensure healthy pregnancies
- Flu and pneumonia shots

UNITED HEALTHCARE NETWORK PROVIDERS

To ensure you receive the maximum value out of your medical insurance, it is important that use providers and facilities in the UHC network.

FINDING A PROVIDER

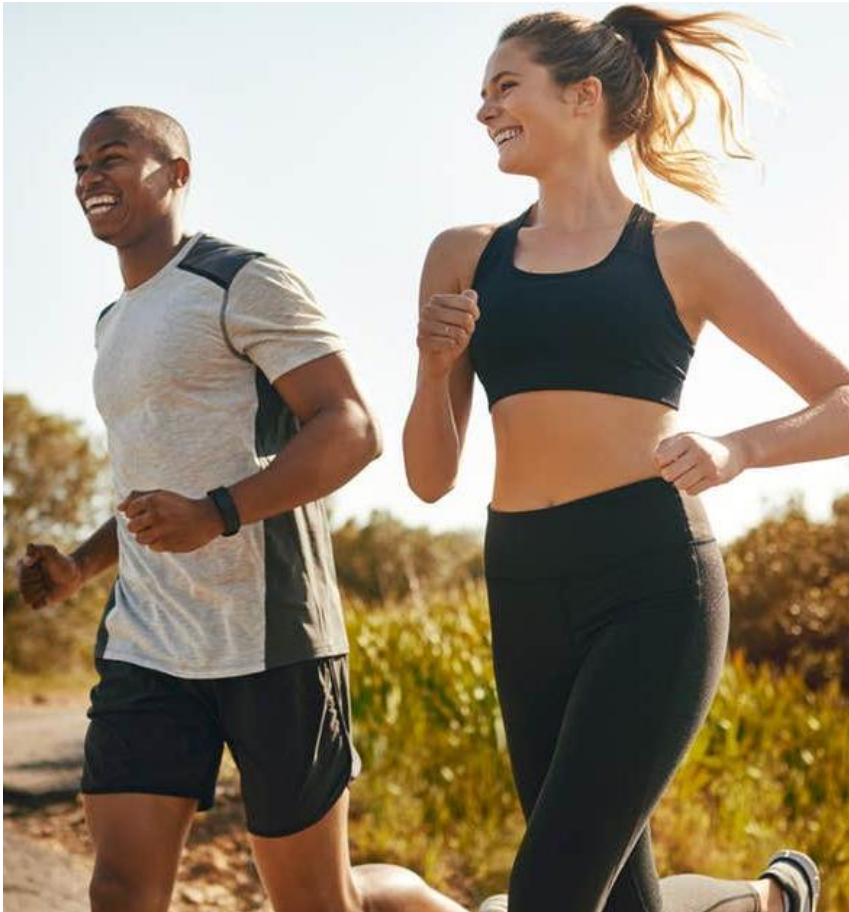
To see if your doctor is in network or to find a network facility physician go to www.uhc.com then:

1. Near the top of the page, click **"Find a Doctor"**.
2. Choose **"Search as Guest"** under the **"Guest Provider Search"** banner.
3. Complete the series of questions as shown below.
4. For network choose: **"Choice Plus"**
5. Enter your your search criteria.



WHERE TO GET CARE

You have many choices of where to seek medical attention. However, some healthcare providers may be more expensive than others. Use the guidelines below to help you decide which makes the most sense for your medical needs.



VIRTUAL VISITS\TELEMEDICINE \$

The licensed physicians, physician's assistants and nurses can diagnose non-emergency medical problems, recommend treatment, and even call in a prescription to your pharmacy. Call for such things as:

- Flu symptoms
- Urinary tract infections
- Sinus issues
- Pink eye

CONVENIENT CARE CLINICS \$

These clinics are usually within retail stores such as Walmart and Walgreens and HEB. They're typically staffed by nurse practitioners or physicians assistants and treat minor ailments such as:

- Minor skin conditions or cuts
- Flu shots
- Common infections

DOCTOR'S OFFICE \$

Your physician knows your health history and you can build a partnership together for your long-term health. See your physician for:

- Routine check-ups
- Preventive care
- Immunizations
- Treatment for long-term issues

URGENT CARE \$\$\$

Make use of an urgent care clinic for more serious illnesses or non-life threatening injuries that need immediate attention, such as:

- Minor strains, or sprains
- Broken bones or simple fractures
- Cuts that may need stitches
- Minor burns

EMERGENCY ROOM \$\$\$\$

If you have a life threatening situation or late-night trauma, go to the ER. If a situation is life threatening, call 911.

Go to the ER if you experience:

- Difficulty Breathing
- Sudden change in vision
- Chest pain
- Slurred speech
- Head, eye or spinal injuries



Watch out for Freestanding ERs!

They often look just like an Urgent Care Clinic but the cost can be significantly higher...often 10 or 15 times the cost of an Urgent Care. Look for the word "Emergency" in the name. Still unsure? Ask the admissions clerk if you will be charged an ER copay or an Urgent Care copay.

Speak to a licensed doctor by web, phone or mobile app in minutes. Virtual visits or telemedicine let members have a live consultation with board-certified doctors, dermatologists or therapists. This can happen 24 hours a day, seven days a week by web, phone, or mobile app.



Get access to quality healthcare without ever leaving your home, your job or wherever you are. Find out how easy it is to receive affordable, quality care without traveling to the doctor's office! And, a virtual visit can cost less than going to the urgent care clinic or emergency room.



Visit a doctor, counselor, psychiatrist or dermatologist by mobile app, video or phone.



Visits are convenient, private and secure. Protection of your personal information is our priority.



Avoid the inconvenience and high costs of going to the emergency room or urgent care center.



Prescriptions can be sent directly to your local pharmacy if medically necessary.

Telemedicine doctors and therapists can prescribe medical treatment for a wide range of conditions.

GENERAL MEDICAL	DERMATOLOGY	BEHAVIORAL HEALTH
Cold and flu	Skin infections	Stress and anxiety
Bronchitis	Acne	Depression
Allergies	Skin Rash	Addiction
Pink eye	Abrasions	Domestic abuse
Respiratory infections	Moles and warts	Grief counseling

CHOOSING A DOCTOR









- Finding a virtual visits doctor is easy. Call **(855-615-8335)**
- Go to www.myuhc.com/virtualvisits
- Download the UnitedHealthcare app

UNTIED HEALTHCARE ONLINE/MOBILE ACCESS

Use **MyUHC.com**, the secure member portal from **United Healthcare** to get immediate access to health and wellness information such as claims and plan benefits, deductible balances and much more.

There is also a mobile app! Once you have registered online you can download the mobile app and have many of the same resources right at your fingertips.



-  Profile Preferences
-  ID Card Management
-  Monthly Health Topics
-  Claim History
-  Benefits and Claims
-  Member Care Profile
-  Provider Finder
-  Discount Programs

IT'S EASY TO GET STARTED...

6. Go to www.myuhc.com
7. Click Register under "New Member?".
8. Use the information on your UHC ID card to complete the process.



Good news—your health plan comes with a new way to earn up to \$300. UnitedHealthcare Rewards is included in your health plan at no additional cost.

There's so much good to get

With UHC Rewards, a variety of actions—including many things you may already be doing—lead to rewards. The activities you go for are up to you—same goes for ways to spend your earnings. Here are some ways you can earn:

Reach daily goals

- Track 5,000 steps or 15 active minutes each day, or double it for an even bigger reward
- Track 14 nights of sleep

Complete one-time reward activities

- Go paperless
- Get a biometric screening
- Take a health survey
- Connect a tracker

Personalize your experience by selecting activities that are right for you—and look for new ways of earning rewards to be added throughout the year.

There are 2 ways to get started

[On the UnitedHealthcare® app](#)

- Scan this code to download the app
- Sign in or register
- Select the Menu tab and choose UHC Rewards
- Activate UHC Rewards and start earning
- Though not required, connect a tracker and get access to even more reward activities



[On myuhc.com](#)

- Sign in or register
- Select UHC Rewards
- Activate UHC Rewards
- Choose reward activities that inspire you and start earning



Your health

Get in on an experience that's designed to help inspire healthier habits

Your goals

Personalize how you earn by choosing the activities that are right for you

Your rewards

Earn up to \$300 and use it however you want

Call customer service at 1-866-230-2505



Healthier habits, healthier lifestyle

Get support with Real Appeal®
an online weight loss program



Support to help you reach your goals at \$0 out-of-pocket

Real Appeal is rooted in clinical research and designed to help you achieve lasting results. The program is available to you and eligible family members at no additional cost as part of your health plan benefits.

Take small steps toward healthier habits

Set achievable nutrition, exercise and weight loss goals, and track your progress from your daily dashboard.

Support and community along the way

Stay focused on your goals with online group sessions led by coaches and a caring community of members.



Our Success Kit. Delivered to your door.

You'll get tools and resources like weight and food scales, exercise equipment, food guides and more.

Visit myuhc.com>Health Resources > Real Appeal

APPLE FITNESS+

Now included in your health plan

UHC is committed to providing a variety of health and wellness options, which is why we've added 12 months of Apple Fitness+ to your health plan — at no additional cost.

The First Fitness Service Powered By Apple Watch

Your journey to a healthier body and mind starts here. Apple Fitness+ brings to life real-time fitness metrics from Apple Watch to your iPhone, iPad and Apple TV— and helps keep you motivated with:

- 11 workout types, ranging from HIIT to core to yoga
- New workouts added every week, lasting from 5 to 45 minutes
- Handpicked music from your favorite artists



Get Started
Go to myuhc.com

**United
Healthcare**

Apple Fitness+

DENTAL PLAN HIGHLIGHTS



Everyone deserves a healthy smile. With our dental insurance offering through **Mutual of Omaha** you can keep your family smiling with affordable dental coverage that makes it easy to visit your dentist for regular cleanings and preventative care as well as for major treatments.



	Dental Plan
Annual Benefit Maximum	\$1,500
Calendar Year Deductible (waived for preventive services)	\$50 / \$150 Family
Preventive Services Cleanings, oral exams, x-rays, sealants etc.	100%, deductible waived
Basic Services Fillings, simple extractions, etc.	10% after deductible
Major Services Crowns, Root Canals, Bridgework, General Anesthesia, etc.	40% after deductible
Orthodontic Services <i>Adult & Child(ren)</i>	Not Included
Non-Network Benefits	Reimbursement up to what 9 out of 10 area providers would charge.

SEMI-MONTHLY (24) PAYROLL DEDUCTIONS

	Dental Rate Per Paycheck
Employee Only	\$16.55
Employee & Spouse	\$33.10
Employee & Child(ren)	\$45.08
Employee & Family	\$62.91

Finding a Network Dentist

1. Go to MutualofOmaha.com/dental
2. Select "Visit Member Portal" located under Access Benefit Information.
3. Use the "Provider Quick Search" on the right.
4. Enter your search criteria.

VISION PLAN HIGHLIGHTS



Whether you wear glasses or have perfect eyesight, you should have your vision checked annually. Many illnesses and conditions such as diabetes can be identified through a routine eye exam. Below is a brief summary of the benefits available to you under our vision plan. Remember: go to an in-network provider to maximize the value of your vision plan.



	In-Network	Out-of-Network
Vision Network	EyeMed Network	N/A
Eye Exams	\$10 copay	Reimbursed Up to \$37
Lenses		
Single/Bifocal/Trifocal	\$10 Copay	Reimbursed up to \$32/\$48/\$76
Standard Progressives	\$65 Copay	Up to \$48
Frames	Up to \$150 + 20% off the balance	Reimbursed up to \$66
Contact Lenses		
Lenses (in lieu of glasses)	\$150 Allowance	Reimbursed \$102
Frequency		
Exams	Once Per 12 Months	Once Per 12 Months
Lenses and Contacts	Once Per 12 Months	Once Per 12 Months
Frames	Once Per 24 Months	Once Per 24 Months
Other Benefits and Lens Options		
Scratch Coating	\$0 Copay	\$12
UV or Tint	\$0 Copay	\$12
Laser Correction	15% off Retail or 5% promo pricing	N/A

SEMI-MONTHLY (24) PAYROLL DEDUCTIONS

	Vision Plan per Paycheck
Employee Only	\$3.92
Employee & Spouse	\$7.83
Employee & Child(ren)	\$7.44
Employee & Family	\$11.70



Finding a Network Vision Care Provider

5. Go to MutualofOmaha.com/vision
6. Select "Locate a Provider" located in the middle of the page.
7. Enter zip code or search by doctor.



LIFE INSURANCE

Discussing what might happen to your family if you were not around to provide for them is not always the easiest conversation. Life insurance can help you plan for your family's future needs.

EMPLOYER PAID TERM LIFE AND AD&D

Luna Data Solutions, Inc. provides, at no cost to you, life and accidental death insurance for you. In the event of your death, the basic life coverage would pay your beneficiary(ies) a benefit of **\$15,000**.

In the event of accidental death, beneficiary(ies) would receive an additional benefit **equal to the benefit amount described above**. If you lose a limb or suffer other permanent disability as the result of an accident, you may be eligible for other benefit payments under the AD&D plan. These are determined according to the injury.

SUPPLEMENTAL LIFE AND AD&D

You may purchase additional insurance in increments of **\$10,000** up to **\$500,000**, not to exceed 5 times your annual salary. An Evidence of Insurability form is required for any amount over **\$100,000**. This is referred to as the "Guarantee Issue".

Spouses may enroll in increments of **\$5,000** up to a maximum of **\$250,000** but not exceeding 100% of the life insurance you elected for yourself. An Evidence of Insurability form is required for amounts over **\$25,000**.

You can also purchase a **\$10,000** policy for your children ages 6 months to 26 years. Note that the child premium covers all children.

EVIDENCE OF INSURABILITY

Newly hired employees electing over the Guarantee Issue amount and late entrants...those who waived coverage the first time it was offered...will need to complete an **Evidence of Insurability**. Completion of an Evidence of Insurability will also be necessary if you decide to increase your benefit at a later date.

BENEFICIARY INFORMATION

Please verify that your beneficiary information is correct and up-to-date. In the event of your death, policy proceeds will be paid according to your most recent beneficiary designation. You may name primary and contingent (secondary) beneficiaries. You are the beneficiary for Life and AD&D coverage on your dependents.

ACCIDENT INSURANCE



Don't let an accident catch you off guard. Protect your family's finances with Accident Insurance. An accident insurance policy supplements your medical coverage and provides a cash benefit, **paid directly to you**, should you seek medical attention due to an accident.

The benefit amount varies based on the nature of the injury and treatment required. Coverage is available to you, your spouse, and children. Refer to the benefits summary in **ADP** for a complete list of benefits and exclusions.



Accident Plan	
ACCIDENT TREATMENT	
Emergency Room	\$200
Urgent Care	\$125
Ground Ambulance/Air Ambulance	\$300/\$1,500
HOSPITALIZATION	
Hospital Admission	\$1,500
Hospital Daily Confinement	\$300 per day
Hospital ICU Confinement	\$600 per day
Diagnostic Exams	\$300
Rehab Facility Confinement	\$150 per day
COMMON INJURY BENEFITS	
Fracture	Up to \$6,000
Dislocation	Up to \$9,000
Burns	Up to \$15,000
Lacerations	Up to \$800
Accidental Death Benefit	\$25,000 employee; \$10,000 spouse; \$5,000 child

SEMI-MONTHLY (24) PAYROLL DEDUCTIONS

	Accident per Paycheck
Employee Only	\$5.80
Employee & Spouse	\$8.76
Employee & Child(ren)	\$11.48
Employee & Family	\$15.07

CRITICAL ILLNESS INSURANCE



As an active employee of **Luna Data Solutions, Inc.** you can give your family the extra security they need to lessen the financial impact of a serious illness by purchasing Critical Illness insurance.

Even the best health insurance will not cover 100 percent of expenses. Critical Illness coverage helps protect your assets by paying you a lump sum benefit in the event of a heart attack, stroke, cancer diagnosis or other critical illness.

Coverage features and benefits can be found below. Your premium is based on your age and election amount. **Per paycheck cost for this plan can be found in ADP.**



Critical Illness Benefits	
COVERAGE OPTIONS	
Employee Benefit	\$10,000 to \$20,000 in \$10,000 increments
Guarantee Issue Amount	Elect up to \$20,000 without answering health questions
Spouse Benefit <i>(Employee must elect coverage for spouse to be eligible)</i>	\$10,000 to \$20,000 in Increments of \$10,000 Benefit cannot exceed 100% of Employee election
Spouse Guarantee Issue Amount	Elect up to \$20,000 without answering health questions
Child(ren)	Each Child: 50% of employee's benefit , up to \$10,000 .
Child Guarantee Issue Amount	Elect up to \$10,000 without answering health questions
COVERED CONDITIONS	
Heart/Circulatory	Heart Attack, Heart Transplant, Stroke – 100%
Organ	Heart Valve Surgery, Coronary Artery Bypass, Aortic Surgery – 25%
	Major Organ Transplant/Placement on UNOS List – 100%
	End-Stage Renal Failure – 100%
	Acute Respiratory Distress Syndrome (ARDS) – 25%
Cancer	Cancer (invasive) – 100%
	Bone Marrow Transplant – 50%
	Carcinoma in Situ, Benign Brain Tumor – 25%
Childhood Conditions	Cerebral Palsy, Structural Congenital Defects – 100%
	Genetic Disorders, Congenital Metabolic Disorders – 100%
	Type 1 Diabetes – 100%
ADDITIONAL BENEFITS	
Health Screening Benefit	Receive a \$50 benefit once per year when you get a wellness test such as an annual physical, pap smear, mammography and colonoscopy.
Late Entrant	If you waived coverage the first time it is offered, you will need to complete a health questionnaire for any elected amount.
Pre-existing Condition Period	If you have been treated, diagnosed or taken medication for a debilitating condition within 12 months of enrollment, you may be excluded from receiving benefits for up to 12 months .

ADDITIONAL BENEFITS



Luna Data Solutions, Inc. is pleased to provide to you and your family...**at no cost...** these two valuable benefits.

WILL PREPARATION SERVICES

How can you have peace of mind that in the event of your death, your property will be distributed according to your wishes? Or your children will be cared for by those you choose? The answer is by having a will.

The online will preparation service through **Mutual of Omaha powered by Epoq** offers a secure account space that allows you to prepare wills and other legal documents. Create a will that's tailored to your unique needs from the comforts of your own home. The following documents are provided FREE:

- Last Will and Testament
- Power of Attorney
- Healthcare Directive
- Living Trust

Create Your Will Today!

1. Go to www.willprepservices.com
2. Register using the code **MUTUALWILLS**

TRAVEL ASSISTANCE

Taking a trip? Our travel assistance services provided by **Mutual of Omaha powered by AXA** can help you avoid unexpected bumps in the road anywhere in the world. This 24-hour emergency service is available to you, your spouse and dependent children on any more than 100 miles from home.

Use your travel assistance phone number to access:

- Travel document requirements
- Inoculations and health advisories
- Consulate and embassy locations
- Emergency medical evacuation
- Prescription replacement assistance
- In-country legal and interpreter referrals
- Emergency message services
- Emergency medical evacuation services
- Referrals to western-trained, English-speaking medical providers
- Passport replacement assistance

Worldwide Travel Assistance

- US: 800-856-9947
- International: 312-935-3658



EMPLOYEE ASSISTANCE PROGRAM



Life's not always easy. Sometimes a personal or professional issue can get in the way of maintaining a healthy, productive life. Your Employee Assistance Program (EAP) can be the answer for you and your family. And it's available to your entire household, even if they are not enrolled in a plan.

EAP IS THERE TO HELP

EAP assists employees and their eligible dependents with personal or job-related concerns, including:

- Emotional well-being
- Family and relationships
- Legal and financial
- Healthy lifestyles
- Work and life transitions
- Legal and financial matters

EAP BENEFITS

- Access to EAP professionals 24 hours a day, seven days a week
- Provides information and referral resources
- Service for employees and eligible dependents
- Robust network of licensed mental health professionals
- Three face-to-face sessions, with a counselor (per household per calendar year)

- Resources for substance use and addiction
- Dependent and elder care resources

LEGAL AND FINANCIAL

- Online will preparation
- Legal library and online forms
- Financial tools and resources

WHAT TO EXPECT

You can trust your EAP professional to assess your needs and handle your concerns in a confidential, respectful manner. Our goal is to collaborate with you and find solutions that are responsive to your needs.

There is no cost to you for utilizing EAP services. If additional services are needed, your EAP will help locate appropriate resources in your area.

Don't Delay if you need help

Visit mutualofomaha.com/eap or call 800-316-2796 for confidential consultation and resource services.

TIPS AND TRICKS

- Make sure your provider is in-network. The network all three plans is the **Choice Plus** network. Instructions for finding a provider can be found on page 8.
- Save time and money by using the **Virtual Visits** that come with all our plans. See page 10 for more information.
- Take advantage of the no-cost preventive services that are included with your plan. All in-network preventive services are covered at 100% (no deductible and/or copay). See page 7 for details.
- Be sure to obtain a **pre-authorization** from United Healthcare for any in and/or out-patient procedures. This will ensure they are approved by prior to your service date. They will also provide you with a good idea of how it will be covered.
- Save time and money by asking for generic medications and by using your mail order pharmacy.
- Be sure to use a Participating Pharmacy to obtain the lowest copay option. See a list of these pharmacies at www.myuch.com.
- A **freestanding Emergency Room** (ER) looks and feels like an urgent care center. You will pay the ER copay if you visit a freestanding Emergency Room.
- Use an in-network vision provider. If not, you will need to file a claim for a reimbursement.
- **Beneficiaries should be over 18.** If not, they will not receive any insurance settlement until they reach the age of 18.
- **Don't wait to buy Life or Disability Insurance.** If you wait until later to elect, you will be required to complete an Evidence of Insurability form.

CUSTOMER SERVICE & CONTACT INFORMATION

The **Marsh McLennan Agency Benefits Advocate Center** is available to you as a liaison in your dealings with insurance carriers. Please contact them with any questions regarding your employee benefits package.

Phone: [Crystal Chavez at \(210\) 249-2380](tel:2102492380)
[Kim Rodriguez at \(210\) 249-2364](tel:2102492364)
 (Monday – Friday 8:00 am – 5:00 pm)

Benefit	Carrier	Customer Service	Website
Medical	United Healthcare	866-633-2446	myuhc.com
Virtual Visits	United Healthcare	855-615-8335	myuhc.com/virtualvisits
Real Appeal	United Healthcare	Online Access Only	enroll.realappeal.com
Dental	Mutual of Omaha	800-927-9197	mutualofomaha.com/dental
Vision	Mutual of Omaha	833-279-4358	mutualofomaha.com/vision
Life & AD&D	Mutual of Omaha	800-655-5142	mutualofomaha.com
Accident Coverage	Mutual of Omaha	800-655-5142	mutualofomaha.com
Critical Illness Coverage	Mutual of Omaha	800-655-5142	mutualofomaha.com
Will Preparation Services	Mutual of Omaha	Online Access Only	willprepservices.com
Travel Assistance	Mutual of Omaha	800-856-9947	N/A
Employee Assistance Program (EAP)	Mutual of Omaha	800-316-2796	mutualofomaha.com/eap

