



2024

EMPLOYEE BENEFITS ANNUAL REFERENCE GUIDE

Benefits Effective
January 1, 2024–December 31, 2024

This publication contains important information about your employee benefit program.

Please read thoroughly.

HEALTHEDGE

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Open Enrollment is October 30-November 13, 2023

Now is the time to focus on you.

You are a vital part of our success. That's the reason we invest so much into our benefit plans that helps protect your health, your income, and so much more. It is important for you to learn about the options we offer and consider how they can help you build a secure future.

Just a few of the things your benefits help you with include:

- Managing your health and ensuring you have access to great medical care when you need it.
- Maximizing the tax advantages of Health Savings Accounts and Flexible Spending Accounts.
- Protecting your income and reducing your financial exposure from a serious illness or injury.

Take a few minutes to get familiar with the benefits we offer. Start by reviewing this enrollment guide. It's time well spent. For additional information on your 2024 benefits, visit the Benefit Portal. This information site features additional communications materials, benefits videos, benefits summaries, and FAQs.

Take Action! The 2024 Open Enrollment event will open in UKG starting 10/30/2023. Employees are responsible for submitting their own elections and saving the confirmation page as proof of those elections by 11/13/2023. All benefits will become effective 1/1/2024.

HealthEdge is committed to maintaining a superior level of comprehensive benefits and making key protections available to you. We encourage you to review this information with your family to ensure you understand your options and are prepared to make informed choices regarding your benefits. Should you have any questions, the Aetna Concierge team will have a staff of dedicated benefit support specialists ready to help you navigate the enrollment process and answer any questions you might have. In addition to the service center, the HR Benefits team is also available for any questions or concerns.

The member concierge can be reached in three ways and is available M-F, 8 a.m.-6 p.m.—availability window is applicable to all time zones.

1. Calling [855.627.5518](tel:855.627.5518)
2. Downloading the mobile app: text "AETNA" to [90146](tel:90146) to receive the Aetna Health App
3. Website: www.aetna.com

**Thank you for being a part of HealthEdge—
please take time to review the attached guide to
learn more about our great benefits.**



The Benefits We Offer

HealthEdge Software Inc. provides a full range of coverage that provides financial protection and helps you build a secure future. We pay for all or a majority of the cost of many of these benefits. Benefits become effective on 1/1/2024.

- Medical and Prescription Coverage
- Dental Coverage
- Vision Coverage
- Health Savings Account
- Flexible Spending Accounts
- Basic Life Insurance and AD&D
- Voluntary Life and AD&D
- Short-Term Disability
- Long-Term Disability
- Critical Illness Benefit
- Accident Benefit
- Hospital Indemnity Benefit
- Identity Theft Protection
- Prepaid Legal
- Pet Insurance
- Employee Assistance Program
- Mental Health Services
- Financial Planning

2024 Benefit Changes

We are adding additional **benefit offerings**, providing more personalized options for employees to choose from.

- Reduced premiums for the HDHP
- Enhanced employer contributions for the HSA
- Enhanced out-of-network coverage for mental health claims on all medical plans
- Removal of clinical radiology prior authorization requirement on all medical plans
- Dental plan buy-up option
- Increased voluntary life and AD&D self and spouse maximums
- Increased 401(k) employer match
- HIV Services and Treatment Enhancement
- Addition of Family Source EAP program
- Reduced premiums for the Dental base plan

Please review plans carefully as rates, out-of-pocket costs, and coverage have changed for many plans.

- Increased deductibles for all medical plans
- Increased out-of-pocket costs and premiums for co-pay medical plans
- Removal of One Medical

Who We Cover

For medical, Rx, dental, and vision coverage, all employees, including full-time employees, interns, part-time employees, and co-ops, are eligible for benefits.

For all other benefits, only full-time and part-time regular employees who are scheduled to work 30 hours per week or more are eligible.

Your dependents may include:

- Your legal spouse/domestic partner
- Your children up to age 26 (children may include biological children, adopted children, step-children, foster children, domestic-partner's children, and children for whom you have legal guardianship)
- Your children over age 26 who are unmarried and unable to support themselves due to a physical or mental disability which began prior to age 26

DOMESTIC PARTNER COVERAGE

The IRS requires employers to tax employees on the cost of the coverage to add a domestic partner to insurance coverage. This is known as imputed income. This additional tax may add up to a considerable extra cost to you, contact HR@healthedge.com for more details.

MID-YEAR ELECTION CHANGES

The benefit choices you make remain in effect for the entire calendar year. You may only make certain changes to your benefit elects during the year if you experience a Qualifying Life Event (i.e., marriage, birth/adoption of child, loss of dependent child status, etc.), and request appropriate coverage changes with 30 days following the event. To request a mid-year election change or obtain more information, contact Human Resources at hr@healthedge.com.

* The 2024 Benefit Highlights are meant to provide a summary of material modifications to the HealthEdge Software Inc. Employee Benefits Plan.

Aetna Medical Plan Options

Health care needs are different for everyone. That's why our medical plan offers multiple options so that you can choose the coverage best suited to your needs and budget.

We offer three medical plans that offer comprehensive health care benefits. With each plan, you have different options when it comes to Savings Accounts and Spending Accounts. Please see more information on pages 17 through 19, as well as the graphics below. Each option gives you access to high-quality medical providers. The difference is that each option carries different employee contribution and out-of-pocket costs.

What's the Right Option for You?

When reviewing your choices, it's important to understand not only what your plan will cost you per paycheck, but what is your financial responsibility when you use the plan.

When comparing medical plan options:

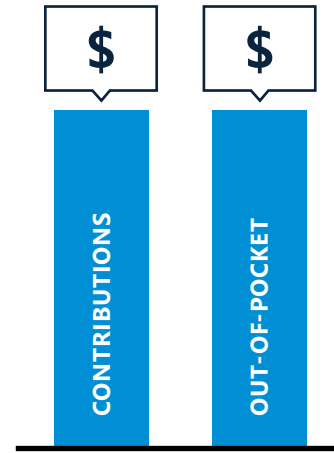
- Out-of-pocket costs, employee contributions, and the HSA employee contribution are made whether you need care or not.
- While deductibles, copays, and coinsurance only apply when and if you need care.

HDHP OPTION (HSA ELIGIBLE)



The HDHP option allows for both in-network and out-of-network care. This option has the lowest employee contributions with possible out-of-pocket costs such as the annual deductibles and out-of-network coinsurance. This plan has a Health Savings Account option which includes a company provided contribution to help with any out-of-pocket costs and for future usage including retirement.

CORE & BUY-UP OPTIONS (FSA ELIGIBLE)



The PPO copay option also allows both in-network and out-of-network care. This option has slightly higher employee contributions, lower annual deductibles, minimal flat dollar copays and possible coinsurance. However, you lose eligibility to the HSA which includes the employer contribution. You could instead consider enrolling in the eligible Healthcare FSA to help with annual medical costs but there is no employer contribution to the FSA.

Your Aetna 2024 Medical Plan Summary

HealthEdge Software, Inc. offers three medical plan options through Aetna for you to choose from. For more information and participating providers, visit www.aetna.com.

Medical Insurance	HDHP Plan	Core Plan*	Buy Up Plan
In-Network			
Referral Required	No	No	No
HDHP HSA Funding	\$750 individual/ \$1,500 family	N/A	N/A
PCP Copay	Deductible and coinsurance	\$30	\$20
Specialist Copay	Deductible and coinsurance	\$60	\$40
Emergency Room Copay	Deductible and coinsurance	\$350	\$250
Urgent Care Copay	Deductible and coinsurance	\$50	\$40
Teladoc	\$0	\$0	\$0
Inpatient Stay	Deductible and coinsurance	Deductible and coinsurance	\$500 per admittance
Diagnostic Test (x-ray, blood work)	Deductible and coinsurance	Deductible and coinsurance	No charge
Imaging (CT/PET Scans, MRI, etc.)	Deductible and coinsurance	Deductible and coinsurance	\$250 copay per procedure
Deductible	\$3,200 individual/ \$6,400 family	\$1,600 individual/ \$3,200 family	\$500 individual/ \$1,000 family
Coinsurance	20%	20%	10%
Out-of-Pocket Maximum	\$4,000 individual/ \$8,000 family	\$4,000 individual/ \$8,000 family	\$2,000 individual/ \$4,000 family
Prescription Copays	Deductible and coinsurance	\$30/\$70/\$100	\$30/\$50/\$70
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Out-of-Network			
Deductible: Individual/Family	\$5,000 individual/ \$10,000 family	\$2,000 individual/ \$4,000 family	\$1,000 individual/ \$2,000 family
Coinsurance	50%	30%	20%
Out-of-Pocket	\$8,000 individual/ \$14,000 family	\$4,000 individual/ \$8,000 family	\$4,000 individual/ \$8,000 family

Notes: Coinsurance for all plans and services (outside of preventative care) reflects what the plan pays after deductible is met.

Key Notes: Preventative care is covered 100% before deductible.

All Plans: deductibles are embedded. With an embedded deductible, if you have family coverage, benefits will begin for an individual covered person once that covered person meets their individual deductible, and benefits will begin for the rest of the family when any combinations of covered persons meets the family deductible. No one person will pay more toward the deductible than that person's individual embedded deductible.

HOW YOUR MEDICAL PLAN WORKS

You Pay	You + The Plan Pays	The Plan
Deductible	Coinsurance	Costs Above the Out-of-Pocket-Maximum
The costs you cover on your own, including copays	The costs you share with the plan	Once your out-of-pocket-maximum has been met, the plan covers qualified medical expenses until the end of the year

OptumRx Prescription Coverage

OptumRx prescription coverage is included in your Aetna medical plan option. Your prescription coverage details are as follows:

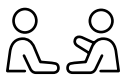
	HDHP		Core Plan		Buy Up Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Generic Retail	20% coinsurance	Not covered	\$5 copay	Not covered	\$5 copay	Not covered
Preferred Brand	20% coinsurance	Not covered	\$30 copay	Not covered	\$30 copay	Not covered
Non-Preferred Brand	20% coinsurance	Not covered	\$70 copay	Not covered	\$50 copay	Not covered
Generic Mail	20% coinsurance	Not covered	\$10 copay	Not covered	\$10 copay	Not covered
Preferred Brand Mail	20% coinsurance	Not covered	\$60 copay	Not covered	\$60 copay	Not covered
Non-Preferred Brand Mail	20% coinsurance	Not covered	\$210 copay	Not covered	\$150 copay	Not covered
Specialty	20% coinsurance	Not covered	\$100 copay	Not covered	\$70 copay	Not covered

KEY NOTES

- Copays apply prior to deductible on both the Core and Buy-Up Plans.
- Coinsurance for the HDHP (outside of preventive care) reflects what the plan pays after deductible is met. Preventive care is covered 100% before deductible.

CONTROLLING HEALTH CARE COSTS

The rising cost of health care is a concern for all of us. Keeping costs to a minimum contributes to lower premiums in future years. Here are some tips on how you can help lower the cost of healthcare.



Use network providers. You will receive a higher level of benefits if you use providers who participate in the network.



Request generic rather than brand name prescription drugs. Generic medications, while just as effective are considerably less expensive. Use the mail order option.



Consider seeing your family physician rather than a specialist. Family physicians can often provide the same level of care for a variety of illnesses and conditions.



Regularly schedule your preventive care visits. The healthier you are the less vulnerable you are to disease, reducing doctor's visits and prescription medicines.

If we become wiser health care consumers, we can each do our part to lower the cost of health care! To view the OptumRx formulary and covered preventive drugs, go to [OptumRx.com](https://www.optumrx.com).

LGBTQ+ Benefits

As HealthEdge, we are committed to providing comprehensive benefits coverage for all.

Standard Benefits

Our plans are available to same-sex spouses and domestic partnerships.

- Medical Benefits
- Virtual Care—
Teladoc and One
Medical
- Dental Care
- Vision Care
- All other voluntary
benefits allowing
dependents on the
plan

Please note that this document is not a guarantee that all services listed below will be rendered. Instead this document captures the covered healthcare services and treatment options that are provided by the company as well as resources to clarify these offerings. Feel free to consult with the contacts listed below respecting additional requirements and procedures for gaining access to covered services.



Transgender-Inclusive Healthcare Offerings

Healthcare Services and Treatment Options

HealthEdge offers transition assistance through our Aetna Medical Plans. These services include:

- Behavioral health services
- Gender support services
- Hormone therapy and medications
- Reproductive services
- Gender affirmation surgery

Prior authorization is required for some procedures.

Additional benefits and procedures that may be covered under the plan, when deemed medically necessary. You can find out which surgeries are covered or excluded, and which services have limits by calling Member Services. The resources below will give you more information about our gender affirmation policy and breast surgery providers.

- [**Aetna standard gender affirmation clinical policy**](#)
- [**Breast reduction and augmentation surgery providers \(PDF\)**](#)

Short-term time off work may be applicable through FMLA and/or other state leave laws.

EXTERNAL CONTACTS

Aetna Concierge

855.627.5518

Website: www.aetna.com

Mobile App: Text "AETNA" to **90156** to receive the app

INTERNAL CONTACTS

hr@healthege.com

Travel and Lodging For Gender Affirming Services

We offer a travel and lodging reimbursement to ensure you have access to covered gender affirming services if there is no provider within 100 miles of your home.* You must be receiving care from an in-network provider, or a precertification-approved out-of-network provider, to be eligible for this travel and lodging reimbursement.

The lodging reimbursement is \$50 per night per patient. If you are traveling with a companion, such as a spouse or partner, reimbursement will be up to \$100 per night. Total reimbursement is limited to \$4,000 per trip.

Before you travel, contact your Aetna customer service representative using the phone number on the back of your Aetna member ID card to verify provider availability (not required for abortion services).

To get reimbursed for travel and/or lodging costs, you must submit a claim form with your receipts.

* Services must be legally permissible in the state the member is traveling to receive covered services.

Helpful Resources

[Transgender Services from Aetna](#)

[Travel and Lodging Member Letter](#)

[Travel and Lodging Reimbursement Form](#)

[One Medical Affirming Care](#)

[Pre-Authorization Process](#)

[Claim Denial Appeals Process](#)



Family Formation

Healthcare Services and Treatment Options

All medical plan options provide coverage for basic and comprehensive infertility services. The services are subject to any deductibles, co-insurance, co-pays, etc., that the employee chooses to elect.

- Covered services include the diagnosis and evaluation of the underlying medical cause of infertility; artificial insemination, which includes intrauterine (IUI)/intracervical (ICI) insemination.
- Allows access to the Institutes of Excellence infertility network. This network offers high-quality, high-value infertility care and has proven, successful treatment rates. It includes clinics that specialize in assisted reproductive technology (ART), including IVF and elective single embryo transfer (eSET).

Life-time maximum benefit under the health plan is \$30k, combined for in-network and out-of-network benefits.



Travel and Lodging

We offer a travel and lodging reimbursement to ensure you have access to covered abortion and infertility services if there is no provider within 100 miles of your home.* Except for abortion services, you must be receiving care from an in-network provider, or a precertification-approved out-of-network provider, to be eligible for this travel and lodging reimbursement.

The lodging reimbursement is \$50 per night per patient. If you are traveling with a companion, such as a spouse or partner, reimbursement will be up to \$100 per night. Total reimbursement is limited to \$4,000 per trip.

Before you travel, contact your Aetna customer service representative using the phone number on the back of your Aetna member ID card to verify provider availability (not required for abortion services).

To get reimbursed for travel and/or lodging costs, you must submit a claim form with your receipts.

* Services must be legally permissible in the state the member is traveling to receive covered services.

EXTERNAL CONTACTS

Aetna Infertility Care

800.575.5999 (TTY: 711)

Aetna Concierge

855.627.5518

Website: www.aetna.com

Mobile App: Text "AETNA" to 90156 to receive the app

INTERNAL CONTACTS

hr@healthedge.com

HealthEdge Parental Bonding Leave

The Company will provide an eligible employee with leave to bond as a parent with their newborn child, newly adopted child, new foster care child, or with a child newly placed in their legal custody*. Bonding leave is available to all eligible employees for up to 14 weeks of consecutive time off to bond with a new child.

HealthEdge bonding leave is 100% paid for employees tenured 1 year or more; unpaid for those employees here less than one year.

Please reference the full policy located in UKG for more information.

* Surrogate mothers and sperm donors are not eligible for Bonding Leave. Employees that give birth will be eligible for 6-8 weeks of disability based on delivery type.

INTERNAL CONTACT

hr@healthedge.com



HIV Services and Treatment

HealthEdge employees and their covered dependents have access to HIV prevention, care, and pharmacy benefits including:

- HIV testing including self-treatment options
- Pre-exposure prophylaxis (PrEP) (preventive drugs covered at 100%, see below \$0 cost share preventive care medications list)
- Post-exposure prophylaxis (PEP)
- Antiretroviral therapy (ART) including the injectable treatment

HIV Services and Treatment Enhancement! Starting in January 2024 HealthEdge will have a copay customization to ensure \$0 preventive drugs covered with no form requirements.

Helpful Resources

Preventive Care Medications—\$0 cost share

EXTERNAL CONTACTS

Aetna Concierge

855.627.5518

Website: www.aetna.com

Mobile App: Text "AETNA" to 90156 to receive the app

INTERNAL CONTACTS

hr@healthedge.com

medications and products

Premium Standard Formulary

Premium Formulary Exclusions

Headspace Care

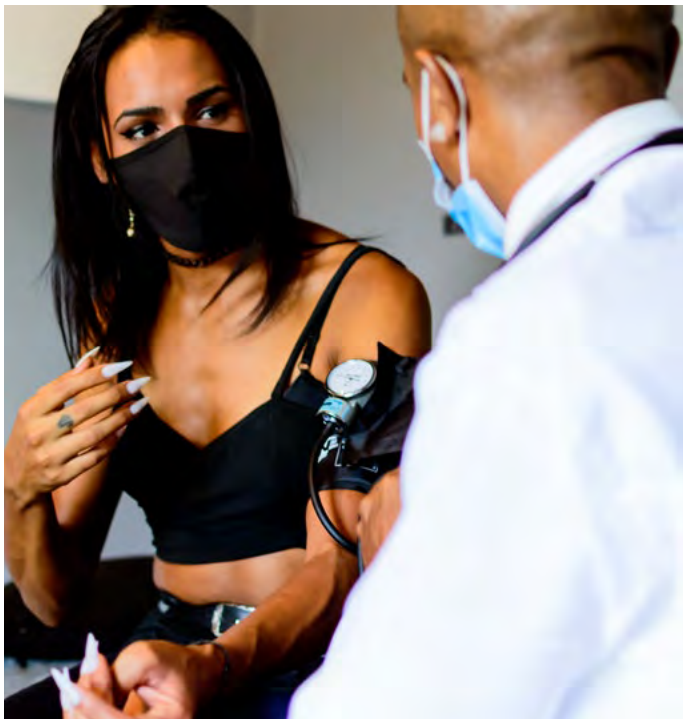
Headspace Care is an app-based solution that offers confidential on-demand emotional and mental health support for you and your dependents, age 18+. Headspace Care celebrates the LGBTQIA+ community and provides access to:

- 24/7 coaching
- Self-care activities
- Video therapy and psychiatry

To get started with Headspace Care today:

- **Download the Headspace Care Emotional Support app.**
- In the app, tap "Create account" then "My Organization."
- Follow the instructions and you're all set!

Monthly Mental Health 101 webinars are available. **Register for an interactive session** and live Q&A led by a Headspace Care coach to learn how you and your adult dependents can use your Ginger benefit.



Employee Assistance Program (EAP)

You have access to an Employee Assistance Program through Prudential, called GuidanceResources.

The EAP is a confidential assistance program to help address the personal issues you and your adult dependents are facing. You are given unlimited telephonic support from a counselor who can provide immediate help with issues of concern. Additionally, you have access to a web library that provides numerous LGBTQ+ resources such as:

- Understanding your rights
- LGBTQ Adoption Guide
- Supporting an LGBTQ Child
- And more!

Utilize your EAP today:

- Call: **800.311.4327**
- Online: **[guidanceresources.com](https://www.guidanceresources.com)**; Web ID: GEN311

Dental Benefits

Delta Dental PPO Base and Buy up Plans

Your dental health is an important part of your overall wellness. Dental coverage is provided through Delta Dental of Massachusetts. This dental plan combines the freedom to choose any dentist with the cost-savings advantage of choosing an in-network dentist. You will receive the greatest benefit from your plan when you visit a dentist in Delta’s network.

When looking for a Provider in-network remember there are two provider networks available with our dental plan options.

- The Delta Dental PPO network delivers the greatest savings, but have fewer dentists to choose from.
- The Delta Dental Premier network is the largest dentist network, but the savings aren’t as significant.

To find a participating provider within the Delta Dental network, and to determine if they are a PPO or Premier provider, log on to www.deltadentalma.com.

	Delta Dental Base Plan			Delta Dental Buy Up Plan		
	PPO Network	Premier Network	Out-of-Network	PPO Network	Premier Network	Out-of-Network
Preventive Services						
Exam, Cleanings, X-rays, Fluoride Treatments for all ages, (not subject to the deductible)		100%			100%	
Calendar Year Deductible						
Individual/Family		\$50/\$150			\$25/\$75	
Basic Services						
Filings, Simple Extractions, Oral Surgery, White Fillings		20% after deductible			10% after deductible	
Major Services						
Crowns, Bridges, Dentures, TMJ		50% after deductible			25% after deductible	
Annual Maximum						
		\$1,500 per person			\$2,500	
Orthodontics						
		Not covered			50%	
Orthodontics Lifetime Maximum						
		N/A			\$2,500	

Note: Coinsurance for all plans and services (outside of preventive care) reflects what the plan pays after deductible is met. Preventive care is covered 100% before deductible.

This summary of Benefits is a brief review of benefits. For complete details about coverage, exclusions, limits, and other plan features, refer to plan documents, carrier contracts, certificates of coverage, and other legal documents. If there is any discrepancy between the legal documents and this booklet, the legal documents will govern.

WHAT DOES PREVENTIVE DENTAL CARE TYPICALLY COVER?

Every dollar spent on preventive care can save you money later on procedures that are more urgent, complex, and costly.



Routine dental checkups and cleanings should be scheduled every six months. Your dentist **MAY** recommend more frequent or fewer visits, depending on your dental health history.



Professional fluoride treatments can be a key defense against cavities if you're at high risk for decay, for 2024 fluoride treatment is covered under our plan for all ages!



Dental sealants go a step beyond fluoride by providing a thin, plastic coating to the chewing surface of your teeth. Preventive Sealants are covered for those up to age 15, or ages 16-19 if a cavity is detected and are at risk for decay.



X-ray images of your mouth may be taken by your dentist or dental hygienist to better evaluate your oral health. These images go beneath the surface to provide a more detailed look inside your teeth and gums.



Vision Benefits

VSP Vision

Vision care coverage is provided through VSP Vision. VSP allows you to receive vision care services from any provider you wish. When you access vision care from VSP network providers, most eligible services are covered at 100%, subject to copays. Vision care accessed from non-network providers is covered at different levels.

To view a list of VSP network providers, visit their website at www.vsp.com. You can call VSP at **800.877.7195**.

	Vision Service Plan	
	Base Plan	Buy-Up Plan (New!)
WellVision Exam Every 12 Months	\$10 copay	\$10 copay
Prescription Glasses Every 12 Months	\$25 copay	\$25 copay
Lenses Every 12 Months	Included in Prescription Copay	Included in Prescription Copay
Single Lenses	Covered in full	Covered in full
Bifocal Lenses	Covered in full	Covered in full
Trifocal Lenses	Covered in full	Covered in full
Frames Every rolling 12 months	\$150 allowance after copay and then 20% discount for the amount above the allowance	\$300 allowance and then 20% discount for the amount above the allowance
Elective Contacts every rolling 12 months (instead of glasses)	\$150 allowance	\$300 allowance
Extra Discounts and Savings	VSP offers savings on such items as non-covered lens options, additional glasses/sunglasses, and laser vision correction. Please see the plan summary or contact VSP for more details.	
Plan Enhancements Second pair of glasses or allowances for additional contact lenses	N/A	\$25 copay, \$300 allowance

This summary of Benefits is a brief review of benefits. For complete details about coverage, exclusions, limits, and other plan features, refer to plan documents, carrier contracts, certificates of coverage, and other legal documents. If there is any discrepancy the legal documents will govern.



Health Savings Accounts (HSA)

Most people use their HSAs during their working years to pay for medical expenses that aren't covered by insurance, such as deductibles, copayments, and non-covered items.

A better strategy is to treat your HSA like an additional Retirement Accounts.

- Fully fund the HSA during your working years and pay current medical expenses from non-HSA sources to the extent you can.
- Invest those HSA savings into optional investment funds offered by Payflex.
- Remember to periodically monitor your HSA investment fund performance at Payflex.

HSAs Deliver Triple Tax Savings

- You don't pay income tax on the money you contribute.
- You don't pay taxes on the interest you earn in your account.
- You don't pay taxes when you use the money to pay for qualified healthcare expenses.

Note states subject to state income tax such as CA and NJ.

Additional benefits to the Health Savings Accounts:

- Unlike 401(k) or Roth IRAs, you aren't simply deferring taxes or paying taxes now to save later. **Money contributed to an HSA is never taxed as long as used for qualified medical expenses.**
- Beginning at age 65, a distribution from an HSA to pay non-medical expenses is taxed the same as a distribution from a traditional IRA.
- You can use it to manage your tax bracket during retirement and to reduce your lifetime income taxes.
- HSAs do not require minimum distributions during your lifetime.
- Your spouse can inherit your HSA and have the same benefits as you.



PER PAYCHECK Contribution Elections: There is an employer contribution to the elected HSA for 2024. In addition to this, employees can make a pre-tax contribution election as part of their open enrollment event in UKG.

How much can you contribute?	2024 Annual IRS Contribution Limit	2024 Annual HealthEdge Software Inc. Contribution	Your 2024 Maximum Contribution Amount
Individual Coverage	\$4,150	\$750	\$3,400
Family Coverage	\$8,300	\$1,500	\$6,800

* Total IRS contributions limits for 2024 are cumulative of HealthEdge Software Inc funding. Individuals age 55 or older in 2024 can contribute an additional \$1000 in "catch-up" contributions.

To be eligible to contribute to an HSA, you must meet the following criteria:

- You must be enrolled in the Aetna HDHP medical plan option.
- You are not covered by a general purpose healthcare FSA (including your spouse’s general purpose healthcare FSA), a health reimbursement arrangement, or any other medical coverage that is not an HDHP.
- You are not claimed or eligible to be claimed as a dependent on anyone else’s tax return.
- Other insurance or accounts now allowed with HSA:
 - Part A and/or Part B Medicare (in some cases, drawing Social Security benefits automatically enrolls you in Medicare Part A)
 - TRICARE or TRICARE For Life
 - Any VA benefits used within previous three months, unless used for a service-connected disability

Go to www.PayFlex.com for a list of qualified expenses

Things to Remember

- **IRS guidelines dictate eligibility:** make sure you meet the criteria
- **To get the Employer Contribution:** you need to elect the HSA in UKG and contribute your own dollars annually
- **If you waive the HSA benefit:** you are also waiving the Employer contribution
- **If you contribute \$0:** you will not receive the Employer contribution



Flexible Spending Accounts (FSA)

Reduce your tax bill while putting aside money for health and dependent care needs.

Flexible Spending Accounts (FSAs) allow you to put aside money for important expenses and help you reduce your income taxes at the same time. HealthEdge Software offers the following Flexible Spending Accounts—a Health Care Flexible Spending Account, Limited Purpose Health Care Spending Account (only for dental and vision expenses), and a Dependent Care Flexible Spending Account.

Healthcare FSA	Limited Purpose FSA	Dependent Care FSA
Deductibles, copays, prescription and over-the-counter drugs, medical equipment, etc.	Dental and vision expenses	Babysitters, daycare, day camp, home nursing care, etc.

Go to www.PayFlex.com for a complete list of covered expenses.

How Flexible Spending Accounts Work

- You must elect or re-elect to contribute to the FSA plan(s) each year.**
- Your contributions are deducted from each paycheck on a pre-tax basis in equal installments throughout the calendar year.
- As you incur healthcare or dependent care expenses through the year, use your FSA card to pay for eligible expenses at the point of sale, or submit a claim for reimbursement. You have until 3/31/2024 to file a claim for 2023.

2024 Annual Maximum Contribution Limit	
Health Care Flexible Spending Account	\$3,200
Limited Purpose Health Care Flexible Spending Account	\$3,200
Dependent Care Flexible Spending Account	\$5,000

Note: Per IRS regulations, annual FSA elections may need to be reduced on the level of employee participation. If this becomes necessary, all impacted employees will be notified about necessary adjustments.

Health Care FSAs

Important Grace Period Information by Plan Year

2024 Grace Period: If you have not spent all amounts in your health FSA at the end of the year, you may continue to incur claims during the Grace Period, which will extend to 3/15/2024. During this time you can continue to incur claims and use up all amounts remaining in your health FSA.

Any monies left at the end of the end of the Grace Period will be forfeited. You will have 90 days after the end of the plan year to submit any expenses for reimbursement that were incurred prior to the end of the grace period.

You must elect or re-elect to contribute to the FSAs each year

Note: Per IRS regulations, annual FSA elections may need to be reduced based on the level of employee participation. If this becomes necessary, all impacted employees will be notified about necessary adjustments.



Life Insurance

Always be there financially for your loved ones.

You likely don't think of a scenario where you're no longer there for your family, but you need to ensure their future is financially secure. HealthEdge Software, Inc. knows how difficult it can be to provide this peace of mind on your own, which is why we have made it a priority to give you the ability to assemble a complete Life Insurance portfolio.

Basic Term Life and Accidental Death and Dismemberment Insurance

HealthEdge provides eligible employees with Basic Term Life and Accidental Death and Dismemberment (AD&D) coverage at no cost to you and enrollment is automatic.

Basic Term Life	1 times your annual salary up to a maximum of \$500k.
Accidental Death and Dismemberment	If you are seriously injured or lose your life in an accident, you may be eligible for a benefit up to your Basic Term Life coverage.

Voluntary Life and Accidental Death and Dismemberment Insurance

You may also choose to purchase Voluntary Life and Accidental Death and Dismemberment Insurance coverage in addition to the company-paid benefit. You pay the total cost of this benefit through convenient payroll deductions.

Voluntary Life		
In addition to Basic Life, employees can pay to have additional employee coverage which then allows you to elect coverage for the rest of your family as well.		
Employee Coverage	Spouse/Domestic Partner Coverage	Child(ren) Coverage
<ul style="list-style-type: none"> ■ \$25k increments up to \$500k; then \$250k increments up to \$1 million. ■ Employees must elect voluntary coverage in order to elect spouse and/or child coverage ■ Increases in coverage up to 5× annual earnings, or \$150k are guaranteed; any amounts that exceed the Guaranteed Issue amount (\$150k) are subject to EOI 	<ul style="list-style-type: none"> ■ \$5k increments up \$100k; then \$25k increments up to \$250k. ■ Cannot elect more than 100% of the employee coverage ■ Any amounts that exceed the Guaranteed Issue amount (\$50k) are subject to EOI 	<ul style="list-style-type: none"> ■ \$2k increments up to a maximum of \$10k ■ Cannot elect more than 100% of the employee coverage
Accidental Death and Dismemberment		
You are automatically enrolled in voluntary Accidental Death and Dismemberment coverage when you elect Voluntary life.		
Employee, Spouse/Domestic Partner, and Child(ren) Coverage		
An amount equal to the amount for which are you are insured under the Voluntary Life Coverage for Self, Spouse, Child.		

Evidence of Insurability (EOI) Requirement

Any election increases or late entrants must submit EOI satisfactory to Prudential. **Employees will receive a “To-Do Task” in their email inbox after submitting their elections if EOI is required. Once you submit this task, you will receive an email with a link to the provider website where you can complete the EOI form. You have 60 days to complete the form.**

REMEMBER: If you live in a Community Property State (AZ, CA, ID, LA, NV NMTX, WA, WI, or AK) and you are married, you must designate your spouse as a primary beneficiary (at least 50%) unless you complete a beneficiary designation form which is notarized and includes your spouse’s signature.

Disability Insurance

Our company-paid short-term and long-term disability benefits provide protection if you can't work due to a disabling injury or illness. Disability insurance protects a portion of your income, relieving you of the anxiety of depleting your savings to pay your bills.

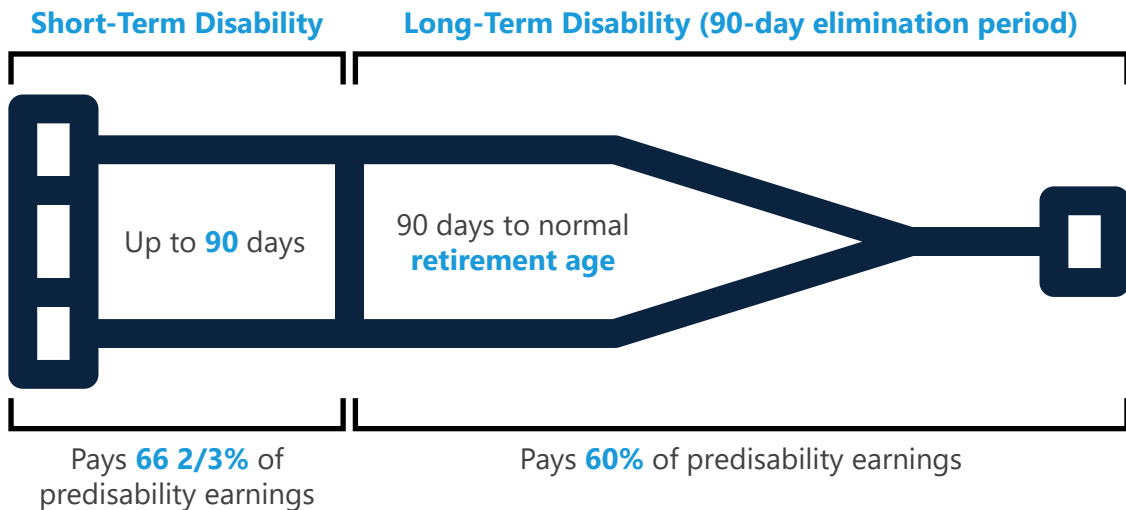
Short-Term Disability Insurance

Short-Term Disability Insurance replaces a portion of your income if an injury or illness forces you out of work for an extended period of time.

HealthEdge Software Inc. provides basic short-term disability coverage at no cost to you and enrollment is automatic. The benefit pays 66 2/3% of weekly pre-disability earnings as the date of disability, weekly maximum benefit of \$1,500. The benefit duration period is 90 days or the date your long-term disability benefit begins. HealthEdge will cover the remainder of your weekly income.

Long-Term Disability

HealthEdge Software Inc. also provides Long-Term Disability Insurance to protect your finances when your disability continues beyond the period covered by the short-term disability plan. This benefit is also fully paid for by the company and enrollment is automatic. The monthly benefit is 60% of monthly predisability earnings; maximum monthly benefits \$10,000. Benefits are effective on date of hire and LTD benefits begin after 90 days of disability.



Accident Benefit

Accident coverage provides you with a lump-sum payment after an accident to use as you see fit. This payment can help with out-of-pocket expenses such as deductibles, copays, transportation to medical centers, childcare, and more.

Accident coverage includes benefits for:

- Injuries: fractures, dislocations, concussions, lacerations, eye injuries, torn knee cartilage, ruptured discs, second- and third-degree burns
- Medical services and treatments: ambulance, emergency care, therapy services, medical
- Testing (including X-rays, MRIs, CT scans), medical appliances, and certain types of surgeries
- Hospitalization: hospital admission, confinement, and inpatient rehab after an accident
- Additional benefits: accidental death, dismemberment, loss and paralysis; supplemental benefit for lodging

Plan Features

- **Guaranteed Acceptance:** There are no health questions or physical exams required.
- **Family Coverage:** Coverage options are available for your eligible spouse, domestic partner, and children.
- **24/7 Coverage:** Benefits are paid for accidents that happen on and off the job.
- **Portable Coverage:** You can take your policy with you if you change jobs or retire.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.

Prudential's Wellness Benefit

Complete an eligible health screening test, and you will receive a benefit payment to use however you'd like. Employees, spouses, and domestic partners can receive an annual benefit payment of \$50.

How the Accident Benefit Works

Sam tears a knee ligament that requires extensive treatment and rehab. Even with medical insurance, this will cost Sam **\$2,000 out-of-pocket** in deductibles and coinsurance.

Fortunately, Sam has the Accident Benefit. **This coverage paid Sam a total benefit of \$1,920.**

Rather than \$2,000 out of his savings, the injury only costs Sam \$80...much better.

How Sam's Accident Benefit was Calculated	
Medical Service	Benefit
Ground ambulance	\$360
Emergency room	\$225
Ligament surgery repair	\$825
Major diagnostic exam	\$240
Physical therapy	\$270 (\$45 per visit for six visits)
Total benefit	\$1,920

This scenario does not reflect the benefits of a specific accident insurance plan schedule. The benefits are generic benefits for the purposes of this example to show how the benefit total of an accident insurance plan is calculated. The plan offered to you may provide different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you.

Critical Illness Benefit

You can protect yourself from the unexpected costs of a serious illness.

Even the most generous medical plan does not cover all of the expenses of a serious medical condition like a heart attack or cancer. This critical illness benefit pays a full lump sum amount directly to you if you are diagnosed with a covered illness. The benefit is paid in addition to any other insurance coverage you may have.

How the Critical Illness Benefit Works

Paul Smith's wife was diagnosed with cancer. Following the initial cancer diagnosis, the Smiths received a \$10,000 lump-sum benefit, which could be used for anything the couple needed. This money is paid directly to the couple for them to use towards treatment, household expenses, etc.

This scenario does not reflect the benefits of a specific critical illness insurance plan schedule. The plan offered to you may provide different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.

Some covered illnesses include:

- Heart Attack
- Stroke
- Cancer
- Major Organ Transplant
- End Stage Renal (Kidney) Failure
- Coronary Artery Bypass Surgery
- Carcinoma In Situ

Benefit Amounts

- **Employee:** Increments of \$10k, up to \$30,000.
- **Spouse/Domestic Partner:** Increments of \$10k, up to \$30k or 100% of the Employee amount.
- **Children:** Increments of \$5k, up to \$15k or 50% of Employee amount.

Plan Features

- **Guaranteed Acceptance:** There are no health questions or physical exams required.
- **Family Coverage:** Coverage options are available for your eligible spouse, domestic partner, and children.
- **Portable Coverage:** You can take your policy with you if you change jobs or retire.

Prudential's Wellness Benefit

Complete an eligible health screen test, and you will receive a benefit payment to use however you'd like. Employees, spouses, and domestic partners can receive an annual benefit payment of \$50.

Hospital Indemnity Benefit

Receive payments to help cover the cost of a hospital stay.

If you are admitted into a hospital, it doesn't take long for the out-of-pocket costs to add up. The Hospital Indemnity benefit provides a lump sum amount directly to you if you are admitted into a hospital for care, such as childbirth, surgery, and illness. The lump sum benefit is paid even if you have other coverage.

You are eligible for a lump sum benefit amount as soon as you are admitted, and the dollar amount can increase depending on how long you stay.

Plan Features

- **Guaranteed Acceptance:** There are no health questions or physical exams required.
- **Family Coverage:** You can elect to cover your spouse and children.
- **Payroll Deduction:** Premiums are paid through convenient payroll deductions.
- **Portable Coverage:** You can take your policy with you if you change jobs or retire.

How the Hospital Indemnity Insurance Works

Cindy is admitted to the hospital for treatment of COVID-19. Over the course of their illness, she spends 14 days in the hospital, including four days in an intensive care unit and six days in an inpatient rehabilitation unit. Thankfully, Cindy's condition improves, and she is well enough to return home. She uses her Hospital Indemnity Insurance to help cover her medical bills, so she can focus on what matters most—making a full recovery.

How Cindy's Hospital Indemnity Benefit was Calculated		
Medical Service	Sample Benefit	Total
Hospital admission	\$1,000 per admission	\$1,000
Length of stay in hospital	\$200 per day (4 days)	\$800
Intensive care unit	\$400 per day (4 days)	\$1,600
Inpatient rehabilitation unit	\$100 per day (6 days)	\$600
Total sample benefit		\$4,000

This scenario does not reflect the benefits of a specific Hospital Indemnity Insurance plan schedule. The benefits are generic benefits for the purposes of this example to show how the benefit total of a Hospital Indemnity plan is calculated. The plan offered to you may provide different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.

Lifestyle Programs

We offer a variety of other benefits that give you options beyond healthcare and income protection.

Prepaid Legal

This prepaid legal plan from MetLife can ease the biggest stresses—finding and paying for legal expertise when you need it most. Life events can lead to unexpected legal concerns that are difficult to handle alone. Enrolling in a legal insurance plan reduces the stress of finding and paying for an attorney when it matters most.

MetLife offers a prepaid legal plan that provides support and protection for unexpected personal legal issues.

You can use your MetLife prepaid legal plan for:

- Establish will and/or trust
- Child custody
- Divorce
- Much more

As a member, you have access to a national network of attorneys who are matched to your specific legal needs. Being a MetLife member also save you time and costly legal fees. But most importantly, it gives you confidence.

Identity Theft Protection

Digital thieves constantly discover new ways to extract your personal information, open credit accounts in your name, sell you sensitive data on the dark web, and take over your financial accounts.

MetLife provides Identity Theft Protection that monitors multiple gateways into your identity and credit and alerts you of fraudulent activity.

Through the ID theft plan you are provided:

- Credit monitoring
- Annual credit report and credit score
- Bank account takeover reports
- Password manager
- Secure devices
- Checking and savings account application alerts
- And more

Pet Insurance

A voluntary pet insurance plan through MetLife is available to HealthEdge Software Inc. employees for dogs, cats, birds, and a variety of exotic pets at a discounted rate.

Visit www.metlife.com/mybenefits to enroll online or call **800.438.6388** to enroll through a customer service representative. You are eligible to enroll in Pet Insurance at any time through the year.

Financial Planning

Financial Planning is available to all U.S. based HealthEdge employees through Janney Montgomery Scott LLC.

The team at Hundley McGovern Wealth Management helps individuals and families achieve their long-term financial goals, with services and solutions tailored to fit their unique needs, preferences, and goals. Our focus is specific and with a purpose—to bring a deep level of knowledge and experience to our client relationships.

- Planning for retirement
- Saving for college expenses
- Recommending investment strategies
- Providing for future generations
- Supporting personal and professional goals
- Managing retirement income
- Helping businesses, corporations, and institutions with investment advice, investment banking services and execution services

Set up Your First Consultation

Call today at [215.862.1561](tel:215.862.1561)

Zoe Lyle

zlyle@janney.com

More details are available on the Benefits Portal.





Retirement

HealthEdge offers employees retirement benefits through Empower Retirement.

Employees have access to Traditional 401(k) and Roth 401(k) accounts.

- Traditional 401(k) uses pre-tax funds and reduces your overall taxable income. The funds grow tax-deferred, and taxes are owed when withdrawn.
- Roth 401(k) uses post-tax dollars with no tax deduction. The funds grow tax free and no taxes are due at withdrawal.

Employee Contributions

- Contribute up to the 2024 annual IRS limit of \$23,000
- Catch-Up Contributions for those age 50+ is \$7,500
- Contributions are taken out, pre-tax, from each paycheck
- Employee contributions are always 100% vested

Company Match

We match 50% of the first 9% of deferrals for a maximum of 4.5% match from the company. The match is credited every paycheck.

All new match dollars into the account are immediately vested. All match dollars granted prior to 1/1/2023 will remain on the previous 4-year vesting schedule.

Wellness

Headspace Care

Whether you're feeling stressed, overwhelmed, anxious, depressed, or anything else, you're not alone. We value the dedication you bring to work and we care about your mental health and well-being. That's why we're offering Headspace Care at no cost to you.

Headspace Care is an app that offers confidential, on-demand emotional and mental health support for your life challenges through coaching via text-based chats, self-care activities, and video-based therapy and psychiatry—all from the privacy of your smartphone.

Coaches are available to chat 24/7, 365 days per year. Private video sessions with a therapist or psychiatrist are available outside of business hours on evenings and weekends.

You and your dependents age 18 and older will have unlimited access to Headspace Care coaching services and self-care activities.

Lastly, you can rest assured that no one at HealthEdge will have access to who is using Headspace Care services or to the conversations between you, your coach, your therapist, and your psychiatrist. Your information is securely stored and protected by law, as described in their Privacy Policy and Terms of Service.

Employee Assistance Program

You have access to an Employee Assistance Program (EAP) through Prudential, called GuidanceResources.

Confidential Counseling on Personal Issues

Your Employee Assistance Program (EAP) is a confidential assistance program to help address the personal issues you and your dependents are facing. This service, staffed by experienced clinicians, allows unlimited telephonic support from a counselor who can provide immediate help with issues of concern and help connect you with support groups and resources in your community for ongoing help. Call any time with personal concerns, including:

- Depression
- Stress and anxiety
- Marital and family conflicts
- Alcohol and drug abuse
- Job pressures
- Grief and loss

Starting January 2024, HealthEdge has added FamilySource, a concierge type service offering support with childcare, elder care, education, adoptions, pet care, and personal convenience.

WE ARE AVAILABLE 24 HOURS A DAY, 7 DAYS A WEEK

Call: **800.311.4327**

TDD: **800.697.0353**

Online: **guidanceresources.com**

Your company Web ID: GEN311

2024 Employee Contributions

Below are the employee and dependent contributions amounts for benefits effective January 1, 2024–December 31, 2024 for eligible employees.

Pre-Tax Contributions

Employee contributions are automatically deducted on a pre-tax basis, before Federal Income or Social Security Taxes are withheld. This means that you will pay less tax and have more money to spend and save. If you do not want your benefits deducted pre-tax, you must notify HR in writing. Under the IRS tax regulations, contribution deductions for a domestic partner are not eligible on a pre-tax basis.

If you are a HealthEdge employee that is paid bi-weekly your per pay period contribution can be found using the following calculation: Monthly rate × 12 (months in 2024) divided by 26 (pay periods in 2024).

Example: \$20 (Monthly cost of benefit) × 12 (months in 2024) divided by 26 (paychecks in 2024) = \$9.23 per pay period

	Semi-Monthly Contributions			
	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Employee + Family
Aetna—HDHP Plan with HSA	\$44.08	\$88.67	\$84.52	\$122.36
Aetna—PPO Core Plan	\$80.14	\$160.27	\$151.84	\$298.05
Aetna—Buy Up Plan	\$142.69	\$288.12	\$273.03	\$388.28
Delta Dental Base Plan	\$3.40	\$7.13	\$9.55	\$13.26
Delta Dental Buy Up Plan	\$4.33	\$9.07	\$12.15	\$16.87
VSP Vision Base Plan	\$2.00	\$3.00	\$3.25	\$5.25
VSP Vision Buy Up Plan	\$4.46	\$8.32	\$8.78	\$14.04

	Monthly Contributions			
	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Employee + Family
Aetna—HDHP Plan with HSA	\$88.15	\$177.33	\$169.03	\$244.72
Aetna—PPO Core Plan	\$160.27	\$320.54	\$303.67	\$596.09
Aetna—Buy Up Plan	\$285.38	\$576.24	\$546.05	\$776.56
Delta Dental Base Plan	\$6.80	\$14.25	\$19.09	\$26.51
Delta Dental Buy Up Plan	\$8.65	\$18.13	\$24.30	\$33.74
VSP Vision Base Plan	\$4.00	\$6.00	\$6.50	\$10.50
VSP Vision Buy-Up Plan	\$8.92	\$16.63	\$17.56	\$28.08

Additional Benefit Contributions

Accident		
Coverage Tier	Monthly Base Rate	Semi-Monthly
Employee Only	\$9.48	\$4.74
Employee + Spouse	\$13.61	\$6.81
Employee + Children	\$13.85	\$6.93
Family	\$21.40	\$10.70

Hospital Indemnity		
Coverage Tier	Monthly Base Rate	Semi-Monthly
Employee Only	\$15.03	\$7.52
Employee + Spouse	\$31.00	\$15.50
Employee + Children	\$22.17	\$11.09
Family	\$39.87	\$19.94

Critical Illness			
Employee		Spouse	
\$10K Monthly	\$10K Semi-Monthly	\$10K Monthly	\$10K Semi-Monthly
\$3.54	\$1.77	\$3.56	\$1.78
\$4.30	\$2.15	\$4.31	\$2.16
\$5.46	\$2.73	\$5.53	\$2.77
\$6.65	\$3.33	\$6.70	\$3.35
\$7.97	\$3.99	\$8.07	\$4.04
\$11.84	\$5.92	\$11.79	\$5.90
\$17.32	\$8.66	\$16.87	\$8.44
\$25.25	\$12.63	\$24.26	\$12.13
\$34.85	\$17.43	\$33.16	\$16.58
\$51.79	\$25.90	\$49.10	\$24.55
\$63.26	\$31.63	\$60.11	\$30.06
\$20K Monthly	\$20K Semi-Monthly	\$20K Monthly	\$20K Semi-Monthly
\$7.08	\$3.54	\$7.12	\$3.56
\$8.60	\$4.30	\$8.62	\$4.31
\$10.92	\$5.46	\$11.06	\$5.53
\$13.30	\$6.65	\$13.40	\$6.70
\$15.94	\$7.97	\$16.14	\$8.07
\$23.68	\$11.84	\$23.58	\$11.79
\$34.64	\$17.32	\$33.74	\$16.87
\$50.50	\$25.25	\$48.52	\$24.26
\$69.70	\$34.85	\$66.32	\$33.16
\$103.58	\$51.79	\$98.20	\$49.10
\$126.52	\$63.26	\$120.22	\$60.11
\$30K Monthly	\$30K Semi-Monthly	\$30K Monthly	\$30K Semi-Monthly
\$10.62	\$5.31	\$10.68	\$5.34
\$12.90	\$6.45	\$12.93	\$6.47
\$16.38	\$8.19	\$16.59	\$8.30
\$19.95	\$9.98	\$20.10	\$10.05
\$23.91	\$11.96	\$24.21	\$12.11
\$35.52	\$17.76	\$35.37	\$17.69
\$51.96	\$25.98	\$50.61	\$25.31
\$75.75	\$37.88	\$72.78	\$36.39
\$104.55	\$52.28	\$99.48	\$49.74
\$155.37	\$77.69	\$147.30	\$73.65
\$189.78	\$94.89	\$180.33	\$90.17

Critical Illness Child					
\$5K Monthly	\$5K Semi-Monthly	\$10K Monthly	\$10K Semi-Monthly	\$15K Monthly	\$15K Semi-Monthly
\$4.49	\$2.24	\$8.97	\$4.49	\$13.46	\$6.73





Voluntary Life	
Employee Rate/\$1,000	
0-24	\$0.08
25-29	\$0.08
30-34	\$0.09
35-39	\$0.12
40-44	\$0.16
45-49	\$0.26
50-54	\$0.39
55-59	\$0.67
60-64	\$1.02
65-69	\$1.86
70+	\$3.81
Spouse Rate/\$1,000	
0-24	\$0.080
25-29	\$0.080
30-34	\$0.090
35-39	\$0.119
40-44	\$0.164
45-49	\$0.255
50-54	\$0.394
55-59	\$0.667
60-64	\$1.020
65-69	\$1.860
70+	\$3.809
Child(ren) Life	
Per/\$1,000	\$0.10

Voluntary AD&D	
Rate Per \$1,000 of Benefit—Employee	\$0.03
Rate Per \$1,000 of Benefit—Spouse	\$0.03
Rate Per \$1,000 of Benefit—Children	\$0.04

Coverage Tier	ID Theft Monthly Base Rate	
	Protection	Protection Plus
Employee	\$6.95	\$10.95
Family	\$12.95	\$18.95

Coverage Tier	Legal	
	Ultimate Monthly	Ultimate Semi-Monthly
EE + Dependents	\$21.25	\$10.63

This document contains selected highlights of the company's employee benefit plans. If any statement herein (other than statements designated as summaries of material modifications) or any other communication, conflicts with the applicable plan documents, the plan documents will govern. HealthEdge reserves the right to amend, modify or terminate its benefit plans in any respect and at any time, with or without notice.

2024 Benefits—Annual Reference Guide

Benefit Plan	Vendor	Phone Number	Website/App
Medical	Aetna Group # 161533	855.627.5518	Website: www.aetna.com App: Aetna mobile app
Rx	Optum Rx Group # RXHESWI	844.775.7416	Website: www.OptumRx.com App Name: OptumRx
Dental	Delta Dental Group # 004229	800.817.0500	Website: deltadentalma.com App Name: Delta Dental Mobile App
Vision	VSP Group # 30045907	800.877.7195	Website: www.vsp.com App Name: VSP Vision Care On the Go
Health Savings Account	Payflex Employer # 151922	844.729.3539	Website: www.payflex.com App Name: PayFlex Mobile
Flexible Spending Accounts	Payflex Employer # 151922	844.729.3539	Website: www.payflex.com App Name: PayFlex Mobile
Critical Illness	Prudential Group # 70759	844.455.1002	Website: www.prudential.com/mybenefits
Accident	Prudential Group # 70759	844.455.1002	Website: www.prudential.com/mybenefits
Hospital Indemnity	Prudential Group # 70759	844.455.1002	Website: www.prudential.com/mybenefits
Basic and Voluntary Life/ AD&D	Prudential Policy # (Life) 70759 Policy # (ADD) 70759	800.524.0542	Website: www.prudential.com/mybenefits
Short and Long Term Disability	Prudential Policy # (STD) 70759 Policy # (LTD) 70759	877.367.7781	Website: www.prudential.com/mybenefits
Identity Theft Protection	Metlife Employer # 5392474	800.438.6388	Website: www.metlife.com/mybenefits App Name: MetLife US App
Legal Insurance	Metlife Employer # 5392474	800.438.6388	Website: www.metlife.com/mybenefits App Name: MetLife US App
Pet	Metlife Employer # 5392474	800.438.6388	Website: www.metlife.com/mybenefits App Name: MetLifePet
Employee Assistance Program	Prudential Group # 70759	800.311.4327	Website: Guidanceresources.com Web ID: Gen11
Mental Health Services	Headspace Care	N/A	Website: www.headspacecare.com App Name: Headspace Care
Financial Planning	Janney	215.862.1561	Zoe Lyle zlyle@janney.com
Retirement	Empower	800.338.4015	Website: www.empowerretirement.com

HR/BENEFIT SUPPORT: hr@healthedge.comPAYROLL QUESTIONS: payroll@healthedge.com**AETNA CONCIERGE**

Available Monday-Friday, 8 a.m.–6 p.m. through the member phone number, website, or mobile App

Phone Number: **855.627.5518**Website: www.aetna.comMobile App: text "AETNA" to **90156** to receive the app

About This Guide

This guide highlights your benefits. Official plan and insurance documents govern your rights and benefits under each plan. For more details about your benefits, including covered expenses, exclusions, and limitations, please refer to the individual summary plan descriptions (SPDs), plan document, or certificate of coverage for each plan. If any discrepancy exists between this guide and the official documents, the official documents will prevail. HealthEdge Software Inc reserves the right to make changes at any time to the benefits, costs, and other provisions relative to benefits.

For Important Notices please go to the Benefit Portal.





This benefit guide is only intended to highlight some of the major benefit provisions of the company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan's summary plan descriptions for further detail. Should this guide differ from the summary plan descriptions, the summary plan descriptions prevail.