

# 2022 BENEFITS GUIDE

Be Well. Live Well. Choose Well.





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This Benefits Guide provides only a brief summary of the benefits available under the National Life Group Benefits Program. The official plan documents, summary plan descriptions, insurance contracts, and National Life policies legally govern the administration of the plans described in this guide and will apply if there is any discrepancy with the information in this guide. National Life reserves the right to modify, suspend, revise, and/or terminate any of the plans at any time and for any reason.

National Life Group® is a trade name of National Life Insurance Company, Montpelier, VT, Life Insurance Company of the Southwest, Addison, TX and their affiliates. Each company of National Life Group is solely responsible for its own financial condition and contractual obligations. Life Insurance Company of the Southwest is not an authorized insurer in New York and does not conduct insurance business in New York.

# 2022 Benefits Overview

The National Life Benefits Guide provides an overview of benefits offered to National Life employees.

## Be Well.

Everyone has different needs. Whether you are just out of school or established in your career, single or married, with children or without – no two people are exactly the same. A dynamic benefits program should reflect that. National Life recognizes your individuality and provides a flexible benefits program with choices to fit your lifestyle.

## Live Well.

As a National Life employee, you have access to a wide array of benefit plans and programs designed to encourage your and your family's wellbeing. Benefits include a choice of health plans as well as programs focused on delivering financial and family security, plus the flexibility you need to meet your goals at work and at home.

## Choose Well.

What kind of coverage is right for you? Do you pay for daycare for your children or have out-of-pocket health care expenses? Does contributing to the National Life Group 401(k) Plan fit into your long-term financial plan? Because everyone's situation is different, only you can choose the right balance of coverage and cost to meet your unique needs. Take time to look more closely at your benefit options and then act during the enrollment period to elect the benefits that are right for you and your family.

The benefit [video series](#) can help you understand the options available to you. Be sure to watch them to be fully informed.

All benefits and services are subject to change. Questions should be directed to the National Life Benefit Service Center by calling 802-229-3066.

## National Life Benefit Service Center

**CALL** 802-229-3066

Benefit Representatives are available  
Monday through Friday, 9:00 a.m. – 5:00 p.m. (ET)

**EMAIL** [yourbenefits@NationalLife.com](mailto:yourbenefits@NationalLife.com)

Send questions via email anytime;  
emails received after 5:00 p.m. ET Monday to Friday  
will be answered the following business day

## When Coverage Begins

As a new employee, benefits begin on your date of hire. If you do not elect any benefits, you'll receive only the basic disability, life insurance, and vision insurance coverages. You must wait until the next Annual Open Enrollment period (each November for the next January 1) to enroll in benefits, unless you experience a qualified life event (see page 7). Also see the "Notice of Special Enrollment Rights" on page 44 for more information.

The benefits you choose during the Annual Open Enrollment period will become effective on the following January 1. Other benefits may be elected during the year and take effect at that time (ie: Pet Insurance, LegalShield).

NEW for 2022:

The medical plan now covers  
enhanced gender affirming  
care and procedures.

# Enrollment

This is your opportunity to choose benefits coverage for you and your family.

## LEARN ABOUT YOUR OPTIONS

Read and review this guide and all benefit information available at [today.NationalLife.com/benefits](http://today.NationalLife.com/benefits) and on the National Life Benefits Portal at [NationalLife.hrintouch.com](http://NationalLife.hrintouch.com).

## REVIEW YOUR CHOICES AND COSTS

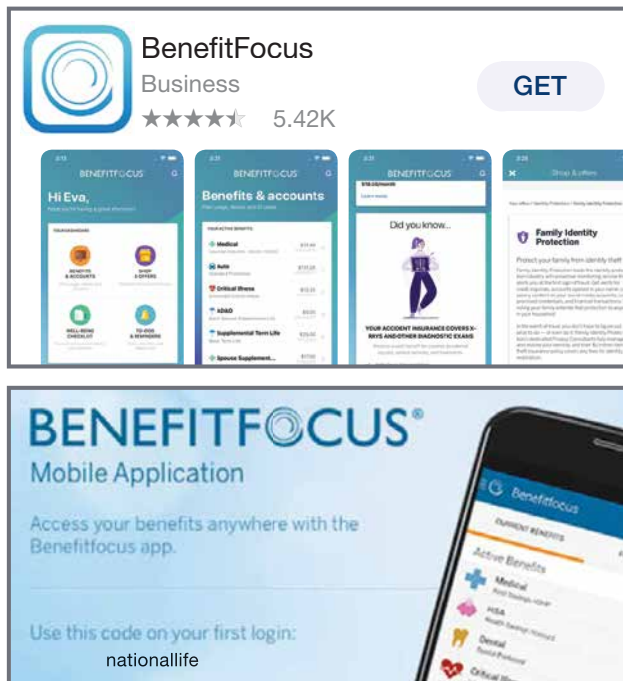
Compare your and your family's healthcare needs with the benefits available to you and their costs. Use the Benefits Portal and this booklet to find information and access tools that can help you estimate your medical needs and estimated out of pocket costs for the coming year.

## ENSURE YOUR DEPENDENTS MEET ELIGIBILITY CRITERIA

See "Eligibility" and "Dependent Verification" on page 6 to learn more.

## CONFIRM YOUR ELECTIONS

When enrolling online, look for the "Submitted Successfully" message before you log off. Print or save a confirmation of your enrollment for your records.



## Welcome to HR InTouch!

Once you log in, you will find a powerful website with interactive tools and videos to help you learn more about the company, your benefits and other topics of interest. Using HR InTouch, we hope that you will find everything you need to make better healthcare and benefit decisions.

### Log in to your account

Username\*

Password\*

Log in

## Access the National Life Benefits Web Portal on the GO!

To do so, you will need to download the BenefitFocus HR Intouch credentials. Then, you'll be able to view your benefits anywhere, anytime.

## Questions?

Contact the National Life Benefit Service Center at  
[yourbenefits@NationalLife.com](mailto:yourbenefits@NationalLife.com)  
or 802-229-3066

## How to Enroll

Visit: [www.NationalLife.hrintouch.com](http://www.NationalLife.hrintouch.com)

- Your username is your first name, last name initial, and last four digits of your SSN (ie: matthewt4321)
- Your password is your SSN without dashes or will be the password you changed it to after your first time logging in
- Review the benefits information available online and then click "Enroll Now" to make your elections.



## YOUR BENEFIT OPTIONS

During your enrollment period, you should review and make or change your elections for:

- Medical coverage (including HSA contributions if you elect the HSA Plan)
- Dental coverage
- Vision coverage (premiums paid by National Life)
- Participation in the Healthcare/Limited Purpose and/or Dependent Care Flexible Spending Accounts
- Long Term Disability buy-up options
- Optional life insurance\*
- Accidental death and dismemberment (AD&D) insurance
- Voluntary Critical Illness and Accidental Injury insurance
- Confirm beneficiaries for your 401(k), Pension, life insurance, and voluntary insurance as necessary

At any time during the year, you may elect or make changes to:

- Pet Insurance
- Legal Shield / Identity Theft Protection
- 401(k) Plan contributions
- HSA contributions

In addition, you automatically receive the following benefits which are paid in full by National Life:

- Basic Short Term (STD) and Long Term Disability (LTD) insurance
- Basic life insurance
- Employee Assistance Program (EAP)

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\*Evidence of insurability may be required, see page 31 for more information.

# Eligibility

You are eligible for the benefits described in this guide if you are in a full-time or full-time equivalent, benefit-eligible position, working at least 25 hours per week. If you are a part-time employee and switch to a full-time, benefit eligible position, you are entitled to enroll in these benefits immediately.

## Dependent Eligibility

You may enroll your eligible dependents in our medical, dental, vision, AD&D, Critical Illness, Accidental Injury, Hospital Care, and LegalShield plans. In order to enroll your dependents, you must also be enrolled in the benefit.

### ELIGIBLE DEPENDENTS INCLUDE:

- Your spouse, provided he or she qualifies as a “spouse” under federal law.
- Your domestic partner (including both same-sex and opposite-sex domestic partners), as long as you and your domestic partner have joint residency and established financial interdependence in at least two ways, such as joint bank account and loan/mortgage.
- **NOTE:** Employee paycheck contributions for domestic partner coverage are the same as for spouse coverage; the premiums, however, are deducted on a post-tax basis and the value of the benefits are subject to imputed income and taxation.
- Your children up to the last day of the month in which they turn 26. The term “children” or “child” means:
  - your natural child
  - your legally adopted child or child placed with you for adoption
  - your stepchild
  - your eligible foster child, defined as an individual who is placed in your care by an authorized placement agency or by judgment, decree or other order of any court of competent jurisdiction
  - a child for which a court has granted you legal custody
  - a child of your eligible domestic partner
- Your unmarried disabled child (no age limit) who is unable to earn a living due to a physical or mental handicap.
- Your natural or adopted children for whom you are required to provide coverage due to a Qualified Medical Child Support Order (QMCSO), up to the end date of the coverage period stipulated by the QMCSO or age 26, whichever comes first.

## EXCLUSIONS

Legally separated or former spouses are not eligible dependents, even if you have a court order requiring you to provide health insurance to your ex-spouse. Also, any person not described as eligible in a category listed is not a dependent for the purposes of these plans. Grandchildren, your parents, and other relatives or extended family members are not eligible for coverage.

## Dependent Verification

If you choose to cover dependents under any of National Life’s plans, you’ll need to know their Social Security numbers and birth dates to make your elections. National Life verifies that dependents you enroll meet the eligibility requirements for medical, dental, vision, and other benefits (if you elect to cover them).

Employees who are adding dependents to any National Life plans outside of a standard enrollment period will be asked to provide proof of dependent eligibility within 30 days of the eligibility date. If your dependents are not approved by the deadline, these dependents will not be enrolled in coverage.

Random audits may be conducted at any time and employees may be asked to provide acceptable documentation to confirm their dependents’ eligibility. If you do not provide the requested documentation for a dependent within 30 days of the request, or if a dependent is found not to meet eligibility requirements, that dependent will be removed from coverage.

The medical plan does require verification of your unmarried disabled child if they are 26 years of age or older.



## Making Changes During the Year

The benefit choices you make when you are first hired and during the Annual Open Enrollment period are generally effective for the calendar year. Certain qualifying life events (QLE), such as getting married or having a child, allow you to make changes to some benefits during the year. The rules for making changes to your benefits are determined by the federal government. Examples of qualifying life events are:

- Your marriage, divorce, legal separation or annulment;
- The birth of your baby, or adoption or placement of a child with you for adoption, or another change in the number of your dependents;
- Your dependent's/dependent of domestic partner's eligibility or ineligibility for coverage (for example, he or she reaches the plan's eligibility age limit, gains or loses other coverage);
- A change in coverage of your spouse or your dependent under another employer's plan (This would include election changes resulting from election cycles that differ from National Life's);
- Your qualification for a special enrollment under the Health Insurance Portability and Accountability Act of 1996 (HIPAA);
- A court order received by the plan, such as a Qualified Medical Child Support Order (QMCSO); or
- You, your spouse's/domestic partner's or your dependent's/dependent of domestic partner's qualification for Medicare or Medicaid.

It is your responsibility to notify the Benefit Service Center within 30 days of any qualifying event. Any change in coverage must be consistent with your life status change.

If you need to make an election change during the year or have questions about what constitutes a life status change, contact the Benefit Service Center at 802-229-3066 or [yourbenefits@NationalLife.com](mailto:yourbenefits@NationalLife.com).

### Qualifying Life Event Verification

In order to complete a QLE enrollment, you will be required to submit verification. If you do not submit the required documentation within 30 days from your event date, you and/or your dependents will not have benefits coverage. The Benefit Service Center will let you know what documentation is required based on your life event.

### Reaching age 65

When an employee or their spouse reaches age 65, they are not required to enroll in Medicare. Employee and spouses can stay on the National Life sponsored plans as long as the employee is in a full-time, benefit eligible position.

If the employee is on the HSA Plan, enrolling in Medicare can impact contributions being made to the health savings account. Please make sure you understand the impacts if you or your spouse enrolls even in Medicare Part A.



## MEDICAL

National Life has three medical plan options. Each of the plans encourage prevention while providing medical care when you need it. The plans offer different choices between your contributions and out of pocket cost for any health services you need during the year. This allows you to consider your unique needs and choose the coverage that works best for you and your family.

This section provides an overview of each medical plan and prescription drug coverage. You can go to the National Life Benefits Portal for more information on the plans or to use the guided shopping app to help you compare plans. You can also speak to a National Life Benefit Service Center representative by calling 802-229-3066 Monday-Friday, 9am-5pm ET.

## Understanding key medical and prescription drug terms

### MEDICAL TERMS

#### ANNUAL DEDUCTIBLE

The amount that you pay each year out of your own pocket before the plan begins paying a portion of your medical coverage. Expenses that count toward your deductible also count toward your out-of-pocket maximum.

#### COINSURANCE

The percentage of the total medical bill that you and the plan pay once the deductible is met. For example, if the plan pays 80%, your coinsurance will be 20%.

#### COPAY

A flat dollar amount that you pay for some services, such as office visits or prescriptions. Copays are not counted toward meeting your deductible, but do count toward the out-of-pocket maximum. Note that there are no copays in the HSA Plan.

#### OUT-OF-POCKET MAXIMUM

The maximum amount you could pay each year in deductibles, coinsurance, and copays. After you reach the out-of-pocket maximum, your plan pays 100% of eligible medical expenses for the rest of the calendar year.

### PRESCRIPTION DRUG TERMS

#### GENERIC DRUG

A drug approved by the FDA for the same effectiveness, quality, safety and strength as a brand-name drug. Note that a generic drug usually costs significantly less.

#### BRAND FORMULARY DRUG\*

A preferred (or formulary) drug is FDA-approved and selected by your prescription drug plan for safety and cost-effectiveness. These drugs cost more than generics but less than non-formulary drugs.

#### BRAND NON-FORMULARY DRUG\*

A brand-name drug that is not on the plan's preferred (or formulary) list. These medications will cost you the most.

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\* Formulary drug lists are subject to periodic change.

# Using Your Plan Wisely

There are many tools and resources available to help you make smart, cost-effective decisions about your and your family's healthcare throughout the year.

## Compare costs and quality

Visit [myCigna.com](https://myCigna.com) or download the myCigna app to find tools to help you compare prices on the health care services you need.

## Learn about what your plan covers

Your plan covers a wide range of services, from preventive care and doctor visits, to discounts on programs that help you improve or protect your health. Visit [myCigna.com](https://myCigna.com) if you have a question about your benefits or to learn more.

Using the healthcare plan wisely helps reduce your out-of-pocket costs and the costs that National Life pays toward your medical and pharmacy claims; which will help keep future healthcare cost increases to a minimum.

## Know where to go for care

You can seek care in many places, including your regular doctor, the National Life Health + Wellness Center, MDLIVE, walk-in clinics, urgent care centers and the emergency room. It's smart to choose the most cost-effective provider that will meet your needs. If you're not sure where to go, call Cigna One Guide at 800-244-6224 for more information.

## Choice is Good. More choice is Better.

If you can't make it to the National Life Health + Wellness Center or your personal doctor, Cigna Virtual Care through MDLIVE lets you get the care you need – including most prescriptions – for a wide range of minor conditions. Now you can connect with a board-certified doctor via secure video chat or phone, at home, at work, or while on vacation. When, where and how it works best for you, 24 hours a day, 7 days a week.

## Take advantage of preventive care!

Preventive care is designed to help you learn more about your current health status and identify potential health issues early when they are easier and less costly to treat. Under the National Life medical plans, in-network preventive care services are paid in full (subject to certain age and frequency limits) – there is no copay, deductible or other out-of-pocket expenses.

Examples of age specific preventive services include: annual physicals, well-baby and well-child care checkups, routine cancer screenings (such as a mammogram or colonoscopy), routine vaccinations and more. See your plan's Summary Plan Description or Cigna's Preventive Care flyer for a detailed list of covered preventive care services.

Help us to keep our healthcare costs in check by getting your preventive medical, dental and vision exams, as recommended.

# Health + Wellness Center in Vermont



## CONVENIENT ONSITE CARE

The National Life Health + Wellness Center is a full-service health center offering a variety of services that will help you lead a healthier life at little to no cost.\*

### Services available include:

- Flu shots and other immunizations
- Minor wounds and basic first aid
- Healthy Babies
- Preventative care such as a physical or other exam
- Lifestyle Management Programs (nutrition, stress, etc.)
- Blood pressure checks and cholesterol screening
- Receive Vitamin B12, Depo-Provera, or other routine medication injections
- Episodic care such as minor injury care, acute pain/strains, a cold, ear ache, sinus infection or flu
- Employee Assistance Program Counseling
- Medication adherence
- Chronic Disease Management (i.e. Diabetes care) in conjunction with your primary care provider
- Courtesy refills on maintenance medications for patients who are established with a primary care provider
- Virtual visits (telephonic or video) for acute concerns or follow-up visits
- And so much more!

**Onsite  
or Virtual  
EAP counselor  
available for consults  
with all employees.**

Appointments are  
recommended.

### Hours of Operation:

Monday and Wednesday: 7:30 AM – 4:00 PM

Tuesday and Thursday: 8:30 AM – 4:00 PM

Friday: 8:00 am – 11:00 AM

Contact the Health + Wellness Center  
for the EAP Counselor's hours.

PHONE: 802-229-7515

FAX: 802-229-7518

EMAIL: [NationalLifeHealthandWellnessCenter@evernorth.com](mailto:NationalLifeHealthandWellnessCenter@evernorth.com)

Note: Email should only be used for general questions.  
It should not be used for personal health questions.

\* The National Life Health + Wellness Center is free or a \$20 fee depending on the medical plan in which you are enrolled. You do not need to be enrolled in a National Life medical plan to use the Health Center.

# Medical and Prescriptions

The chart below provides a brief comparison of the coverage levels under the Cigna Medical plans.

IN- NETWORK	OPTION 1: HRA PLAN	OPTION 2: HSA PLAN	OPTION 3: OAP \$2,500
National Life Personal Care Account Funding	Employer HRA Contribution: Single Plan: \$750 2-Person/Family Plan: \$1,500	Employer HSA Contribution: Single Plan: \$750 2-Person/Family Plan: \$1,500	No National Life Personal Care Account Funding

MEDICAL			
<b>Deductible</b> • Single • 2-Person/Family	Medical deductible: \$1,500 \$3,000*	Combined Med & Rx deductible: \$2,000 \$4,000	Medical deductible \$2,500 \$5,000*
<b>Coinsurance</b>	After deductible: 20%	After deductible: 20%	After deductible: 30%
<b>Max Out-of-Pocket</b> • Single • 2-Person/Family	\$3,000 \$6,000*	\$3,000 \$6,000	\$4,000 \$8,000*
<b>Preventive Medical</b>	Paid at 100%	Paid at 100%	Paid at 100%
<b>Primary/Specialist office visit</b>	Applied to deductible, then coinsurance	Applied to deductible, then coinsurance	\$20/\$40
<b>All other medical expenses</b>	Applied to deductible, then coinsurance	Applied to deductible, then coinsurance	Applied to deductible, then coinsurance

PRESCRIPTIONS**			
<b>Rx Deductible</b> (Deductible does not apply to mail order Rx) • Single • 2-Person/Family	\$100 \$200	Medical deductible applies***	\$100 \$200
<b>Rx Generic</b>	\$20	10%	10%
<b>Rx Preferred</b>	\$30	20%	20%
<b>Rx Brand</b>	\$60	50%	50%
<b>Rx Maximum Out-of-Pocket</b> • Single • 2-Person/Family	\$3,600 OOP max \$7,200 OOP max	Combined Medical & Rx maximum out-of-pocket. Rx is paid 100% after maximum out-of-pocket	\$2,350 OOP max \$4,700 OOP max

## Find a Network Provider

To find a network provider in your area, call **Cigna One Guide** at **800-244-6224**, log on to [www.mycigna.com](http://www.mycigna.com), or access the myCigna app. Group number- **3209368**

Cigna One Guide is there to help with any questions you have. You can call them or chat via web and app.

See Cigna Summary of Benefits or the Summary Plan Description for a complete benefit listing.

\* Stacked Deductible and Out-of-Pocket (OOP) Maximum (HRA and OAP Plan only) - A stacked deductible and OOP maximum allows for multiple layers of deductibles and OOP maximums for individual family members. An individual's claims contribute to both an individual and family deductible. All individuals in a family contribute to the same family deductible and OOP maximum. Once an individual's deductible is met, coinsurance will be in effect for that individual until the individual OOP maximum is met.

\*\* Your prescription will be automatically filled with a generic (if available) unless your doctor specifically writes "dispense as written" on the prescription. If your physician writes you a prescription for a generic and you choose a brand drug, you will pay the brand co-pay plus the cost difference between the generic equivalent and the brand drug.

\*\*\* The HSA prescriptions are subject to the medical deductible before coinsurance applies. The deductible is waived for certain preventative prescriptions.



## Health Plan Costs for 2022

		HRA	HSA	OAP \$2,500
Annual Plan Cost	<b>Annual Plan Cost</b>			
	Single Plan	10,631.86	8,871.09	8,050.11
	2-Person Plan	21,197.29	17,717.14	16,106.56
	Family Plan	27,670.06	23,124.68	21,458.33
	<b>NLGroup Annual Contribution</b>			
	Single Plan	7,238.81	7,238.81	7,238.81
	2-Person Plan	14,324.31	14,324.31	14,324.31
	Family Plan	18,372.56	18,372.56	18,372.56
	<b>Employee Annual Contribution</b>			
	Single Plan	3,393.05	1,632.28	811.30
Bi-Weekly	2-Person Plan	6,872.98	3,392.83	1,782.25
	Family Plan	9,297.50	4,752.12	3,085.77
	<b>Payroll Deductions</b>			
	Single Plan	130.50	62.78	31.20
	2-Person Plan	264.35	130.49	68.55
	Family Plan	357.60	182.77	118.68

### Where are the discounts for premium reduction?

National Life has changed how we handle medical premiums. No more jumping through hoops to get the lowest premium. Now ALL employees qualify for the lowest premium.

The incentives are still available and have moved to myCigna.com. You can still earn the \$500 for an annual physical and \$500 for completing the health assessment with biometric screening. If getting a physical at your family doctor, do not forget to take the [Wellness Screening Form](#) with you and ask your doctor to do the biometric screening.

Should you leave the company and need COBRA for a period of time, your rate will be calculated using the Annual Plan Cost and will include a 2% administration fee.

# HOW THE PLANS WORK

## The HRA PLAN

The HRA Plan works like a regular medical plan, you'll first meet your deductible, then pay coinsurance until you reach your out-of-pocket maximum.

The prescription program on the HRA Plan utilizes a co-pay for prescriptions and has an out-of-pocket maximum which is separate from the medical out-of-pocket. See page 17 for options when filling a prescription.

In the HRA Plan you'll receive a company-funded Health Reimbursement Account, or HRA. It's an account that National Life contributes to on your behalf, helping you pay for qualified, out-of-pocket medical expenses, like deductibles and coinsurance. National Life will contribute \$750 if you are enrolled in a single plan and \$1,500 if you are enrolled in a two-person or family plan. For new hires and those enrolling during the year, the amount will be pro-rated based on enrollment date.

As with anything, it's important to know your options and be informed so you can make the right choices for you and your family.

Cigna One Guide is available to help you make smarter, informed choices and get the most from your plan. It's Cigna's highest level of support that combines the ease of a powerful app with the personal touch of live service. One Guide personal support, tools and reminders can help you stay healthy and save money.

### IT'S EASY TO USE

HRA funds roll over year-to-year and never expire, unless you change health plans or leave the company.

Present your CIGNA ID card

You do not pay anything at the time of your visit

Your provider's office bills CIGNA for the service

CIGNA will use funds from your HRA, if available, to pay the bill

Your Explanation of Benefits (EOB) from CIGNA shows any payments and remaining balance

# HOW THE PLANS WORK

## The HSA PLAN

The HSA Plan is a high deductible health plan and provides coverage for the same services as other plans, like doctor's visits, hospitalization, and prescriptions.

You will need to reach your deductible before the insurance starts to pay for many services. You'll then pay coinsurance until you reach the out-of-pocket maximum.

The prescription program on the HSA Plan works a little differently than the other plans. See page 17 for options when filling a prescription.

- **Preventive and Maintenance Medications:**

Most prescription drugs that are considered preventive or maintenance (you take them regularly to control a chronic health issue such as diabetes or high blood pressure) are not subject to the deductible. You pay 20% coinsurance for these medications, and the plan pays the rest.

- **All Other Medications:**

All other prescriptions are subject to the deductible. You pay the full cost for these medications until the deductible is reached. Once the deductible is met, you pay coinsurance for prescriptions and the plan pays the rest.

- **Important Note:**

In the HSA Plan, your prescription costs count toward the plan deductible and out-of-pocket maximum. There is no separate Prescription Drug out-of-pocket as in the other medical plans offered.

In the HSA Plan, you have access to a Health Savings Account or HSA. You can put tax-free money from your paycheck into the HSA to pay for qualified health related expenses. HSAs are regulated by the IRS with special eligibility rules. More information can be found on page 18.

National Life will also contribute to the HSA throughout the year. National Life will contribute \$750 if you are enrolled in a single plan and \$1,500 if you are enrolled in a two-person or family plan. Contributions are made in two installments (half in January and half in July). For new hires and those enrolling during the year, the amount will be pro-rated based on enrollment date.

As with anything, it's important to know your options and be informed so you can make the right choices for you and your family.

Cigna One Guide is available to help you make smarter, informed choices and get the most from your plan. It's Cigna's highest level of support that combines the ease of a powerful app with the personal touch of live service. One Guide personal support, tools and reminders can help you stay healthy and save money.

### THE HSA IS AS EASY AS SWIPING A DEBIT CARD

HSA funds roll over year to year and never expire, but unlike the HRA, you can take these funds with you, even if you leave the company!

Present your CIGNA ID card

You do not pay anything at the time of your visit

Your provider's office bills CIGNA for the service

CIGNA will use funds from your HSA, if available, to pay the bill

Your Explanation of Benefits (EOB) from CIGNA shows any payments and remaining balance

# HOW THE PLANS WORK

## The OAP PLAN

The OAP Plan features the lowest bi-weekly premiums of our three medical plan options.

Just like the other plans, you'll have to meet your deductible, then pay coinsurance until you hit your out-of-pocket maximum.

However, the OAP Plan is the only option that features copays for doctor's visits, meaning you'll pay a set fee each time you visit the doctor.

The prescription program on the OAP Plan utilizes a coinsurance for prescriptions and has an out-of-pocket maximum which is separate from the medical out-of-pocket. See page 17 for options when filling a prescription.

The OAP Plan does not feature National Life account funding, however, you may elect and fund your own Flexible Spending Account to pay for qualified health related expenses.

As with anything, it's important to know your options and be informed so you can make the right choices for you and your family.

Cigna One Guide is available to help you make smarter, informed choices and get the most from your plan. It's Cigna's highest level of support that combines the ease of a powerful app with the personal touch of live service. One Guide personal support, tools and reminders can help you stay healthy and save money.



**Cigna One Guide® enhanced customer service gives you guidance when you need it the most.**  
**Now it's easier for you to take control of your health and health spending.**

Cigna One Guide service can help you make smarter, informed choices and get the most from your plan. It's the highest level of support that combines the ease of a powerful app with the personal touch of live service. One Guide personal support, tools and reminders can help you stay healthy and save money.

Making health care decisions can be confusing. There are so many questions:

- Are you paying too much for a prescription?
- Is this provider in your network?
- How can you make healthier choices?

Cigna One Guide service is there to help you find answers to questions like these and many more.

The Cigna One Guide solution combines digital technology with personalized customer service. With One Guide, you have the one-on-one support you need to take control of your health — and your health spending. Whether it's choosing a plan, finding a provider, or exploring ways to improve your health, One Guide is here to help.

You can access a personal guide via app, chat, online or phone, when you need guidance, support or answers.

**Your One Guide team is a click away to help you:**

**UNDERSTAND YOUR PLAN**

- Know your coverage and how it works
- Get answers to all your health care or plan questions

**GET CARE**

- Find an in-network doctor, lab or urgent care center
- Connect to health coaches, pharmacists and more
- Stay on track with appointments and preventive care
- Take advantage of dedicated one-on-one support for complex health situations

**SAVE AND EARN**

- Maximize your benefits and earn incentives
- Get cost estimates and service comparisons to avoid surprises

To reach Cigna One Guide call 800-244-6224  
log on to [mycigna.com](https://mycigna.com), or access the myCigna app.

# Options When Filling Your Prescription

## Retail Pharmacy

For short-term medications (up to a 30-day supply), take your medical ID card to a participating retail pharmacy.

## Cigna 90 NOW Retail Pharmacy

For certain long-term maintenance medications (up to a 90-day supply), take your medical ID card to a participating Cigna 90 NOW retail pharmacy. Go to the [90-Day Network](#) on [cigna.com](#) to find a Cigna 90 NOW retail pharmacy.

## Mail Service Pharmacy

For long-term maintenance medications (up to a 90-day supply) delivered to your home, go to [Prescriptions](#) on myCigna.com or the [myCigna app](#) and register for mail delivery service. All maintenance medications delivered to you will be managed directly through Express Scripts Pharmacy, a Cigna company.

## Specialty Pharmacy

For specialty prescriptions, see [Price a Medication](#) on myCigna.com or the [myCigna app](#) to determine the price and participating specialty pharmacy. Accredo, Cigna's specialty pharmacy, provides 24/7 access to hundreds of trained pharmacists and nurses experienced in complex conditions that require specialty medications. To speak with an Accredo representative, you can call 877.826.7657.



## Other Pharmacy Management Programs

Cigna provides pharmacy management programs to help improve the safety and cost-effectiveness of your prescription drug coverage.

For more information on either program described on this page, contact Cigna at 800-244-6224.

## Step Therapy

Step Therapy is designed to find the safest and most cost-effective drug therapy for certain conditions that require medication regularly. Step Therapy may require the use of a generic or lower-cost alternative first. At any time, if your doctor believes an alternative medication is not right for you due to medical reasons, he or she can request prior authorization for coverage of a Step Therapy medication. Participants may benefit from this program by finding an effective generic medication at the lowest cost.

Some of the therapeutic categories covered by Step Therapy include allergy/nasal antihistamines, contraceptives, osteoporosis, anti-inflammatory/COX-2 inhibitors, hypertension, and diabetes. To find out if your medication is part of the step therapy program, use the formulary look up tool on the pharmacy page of [myCigna.com](#) or call Cigna at 800-244-6224.

### HOW IT WORKS

When filling your prescription, the pharmacist runs the prescription through the system and is alerted of the Step Therapy program requirement. If your six-month history shows that the first line drug was previously dispensed, then the second line or higher cost medication can be dispensed. However, if there is no record of a first line drug being dispensed previously, then you must try the first line drug first or go through the prior authorization process.

Prior authorization is a process where the doctor submits a medication request form stating the reason why the patient must have the second line drug filled at the pharmacy without going through the Step Therapy process.

## Prior Authorization

Some medications on your plan need Cigna approval to be covered. This helps assure you receive coverage for the right medication in the proper amount. If you're taking a medication that requires approval, ask your provider to call Cigna first. To see if your medication requires prior authorization, see [Price a Medication](#) on myCigna.com or the myCigna app.

## Quantity Limits

Some medications are covered for a certain quantity or a specific number of days. This helps assure that you receive coverage for the right medication in the proper amount. If your medication has a quantity limit, ask your provider how this may affect you. To receive coverage for a larger quantity, the provider should call Cigna to request approval. To check if your medication has quantity limits, see [Price a Medication](#) on myCigna.com or the myCigna app.

# The Health Savings Account (HSA)

When you enroll in the HSA Plan, you will be enrolled in and can choose to contribute to a tax-advantaged Health Savings Account (HSA). The HSA is your personal account, so you decide how to use it. You can use it to pay for eligible healthcare expenses you incur, including your deductible and coinsurance. Any money you don't use stays in your HSA, making it a tax-free way to save for future healthcare needs, including certain retiree medical and long-term care insurance premiums.

## What are the tax benefits of an HSA?

An HSA has many tax benefits!

1. **Contributions:** They're taken out of your paycheck before taxes, which reduces your taxable income.
2. **Withdrawals:** Funds you use to pay for eligible healthcare expenses are not taxed.
3. **Earnings:** The funds in your account earn tax-free interest. Plus, you can invest amounts over \$2,000 in the investment options available, and any earnings are also tax-free.

## Who is eligible to open an HSA?

To be eligible to open and contribute to an HSA with National Life, you must meet certain criteria set by the IRS:

- You must be covered by an HSA-compatible medical plan, such as the HSA Plan, and you cannot be covered by any other medical plan that is not an HSA-compatible medical plan (including a spouse's healthcare plan).
- You cannot be enrolled in Medicare.
- You cannot be eligible to be claimed as a dependent on someone else's tax return.
- You must be a U.S. resident.
- You may not be in active military service or, if you are a veteran, you may not have received veterans' benefits within the last three months.

For complete details on HSA eligibility, visit the IRS website and refer to Publication 969. If you do not meet these criteria, you may still elect the HSA Plan; however, you may not open an HSA.

## How much can I contribute to an HSA?

The IRS sets limits on how much can be contributed to an HSA in a given year. For 2022, those limits are \$3,650 for an individual and \$7,300 for two-person or a family. Individuals who will be age 55 or older by December 31, can make catch-up contributions of an additional \$1,000 per account holder per calendar year. HSA annual limits are a combination of the amount you contribute **plus** the amount National Life contributes.

In addition to payroll deductions, you may also contribute (up to the IRS limits) to your HSA at any time via check or an electronic fund transfer from a bank account. If you've already paid taxes on funds that you contribute to your HSA, you may claim a deduction on these funds on your tax return for the year in which the contributions were made.

## What expenses can I pay for with my HSA?

You can use your HSA funds to pay for eligible healthcare expenses such as dental treatment, vision services like eye exams and prescription glasses, hospital and ambulance services, prescription medications, and much more. You can find a list of eligible expenses on [myCigna.com](https://myCigna.com), in IRS Publication 502 available at [www.irs.gov](https://www.irs.gov), or by calling 800-TAX-FORM.

The expenses can be for yourself or anyone who is considered your dependent for income tax purposes — even if they are not covered under your medical plan. This includes your spouse and children. It does not include a domestic partner or an adult child (who is not a qualified tax dependent); however, if you cover your domestic partner or adult child under the HSA Plan, they may open their own HSA since they are covered by an HSA compatible plan (provided they meet other eligibility requirements).

Important! Your HSA contributions are available for use only after they are deposited each pay.

## How do I use and manage my HSA?


When you enroll in the HSA Plan, you will be automatically enrolled in a Health Savings Account. You'll receive information from HSA Bank which will include information on using and managing your HSA, as well as a convenient debit card. When you have an eligible expense at a provider's office or pharmacy, just swipe your card like you would any credit or debit card. You can also be reimbursed from your HSA through an electronic transfer to a linked bank account, or request a check to be mailed to your home address.

The HSA Bank site, accessible through [myCigna.com](https://myCigna.com) or the myCigna app is where you can check your HSA balance, review claims you have paid from your HSA, submit out-of-pocket expenses for reimbursement, and more!

## What if I opened an HSA last year?

If you enrolled in the HSA Plan last year, you are already enrolled in your HSA. However, your HSA contribution does not roll over. The HSA contribution must be elected on an annual basis. If you do not make a contribution election during enrollment or want to change your contribution election to the HSA, you can do so at any time by visiting the National Life Benefits Portal at [NationalLife.hrintouch.com](https://NationalLife.hrintouch.com).

# The Health Reimbursement Account (HRA)



When you enroll in the HRA Plan, you will be enrolled in the Health Reimbursement Account. The HRA is owned and funded by National Life and is used to pay for eligible medical expenses.

### AN ANNUAL HRA

At the start of the plan year, National Life deposits a specific dollar amount to your HRA based upon your tier level (single, two-person, or family). Your account is used to pay 100% of eligible health care expenses until the money is used up.

The money used from your HRA counts toward your deductible, reducing your share. You are responsible for the remainder of your deductible. When you reach your deductible, you and your plan share the costs (coinsurance).

Unused money rolls over each plan year up to the maximum out-of-pocket amount. If you leave National Life or switch plans, the funds in the account stay with National Life.

# Flexible Spending Accounts

When you enroll in your benefits, you may elect to set aside money on a pre-tax basis - before federal and state taxes are withheld - to reimburse yourself for certain healthcare and dependent care expenses throughout the year. The Flexible Spending Account (FSA) allows you to pay for a wide range of common, out-of-pocket health care and dependent care expenses with pre-tax dollars.

If you do not spend all the money you have elected for your flexible spending account for that year, the remaining money will be forfeited. The grace period gives you an extra 2 ½ months at the end of the year to incur expenses before you lose it. The grace period is from January 1 – March 15. You have until April 30 to submit claims for expenses incurred during the previous benefit period. Thanks to the Covid-19 Relief Bill signed in December 2020, your 2021 FSA funds will be available to you to use through the end of 2022.

For a complete list of eligible expenses, visit [www.irs.gov](http://www.irs.gov) and click on “Forms and Publications” to see Publication 502 for healthcare expenses or 503 for dependent care expenses or call the IRS at 800-829-3676 or visit [Cigna.com](http://Cigna.com).

There are three types of Flexible Spending Accounts available to our employees.

1. **Health Care FSA (HCFSA)** can be used if you are enrolled in the HRA Plan<sup>1</sup>, OAP Plan, or any other non-HSA plan and allows pre-tax reimbursement of eligible health related costs (medical, dental, vision, prescription, and durable medical goods) not covered or reimbursed by insurance. This includes expenses incurred by you, your spouse and/or any dependents. You will have the option of receiving a debit card or not. If you do not choose the debit card, you will have to submit for reimbursement.
2. **Limited Purpose Health Care FSA (LPFSA)** can be used if you are enrolled in the HSA Plan. The LPFSA allows pre-tax reimbursement of eligible dental and vision expenses only until your medical deductible has been met, at which time it can also be used for medical expenses.
3. **Dependent Care FSA (DCFSA)** can be used for daycare expenses for a child or elder tax dependent that allows you (and your spouse if you are married) to work. It cannot be used for a dependent's healthcare. Maximum annual contribution is \$5,000.<sup>2</sup> You may elect a Dependent Care FSA regardless of which medical plan you choose.

National Life Group offers a matching contribution of up to \$1,000<sup>3</sup> for those who qualify for and contribute to a dependent care flexible spending account.

## Points to Ponder

- You decide how much to contribute to either or both Flexible Spending Accounts. The annual amount you elect to contribute is then deducted evenly from your paychecks throughout the year, before taxes are deducted. You save on federal and most state taxes.
- Remember that if you enroll in the HSA Plan, you can use a Limited Purpose FSA for dental and vision expenses only until you reach the deductible on your HSA Plan.
- When you have an eligible expense, such as daycare for your child or a healthcare co-payment, you're paid back from the tax-free money you set aside so you never pay taxes on this income.
- Very important! Because of the pre-tax benefits, the IRS rules require that you forfeit any money left in your account at the end of the year. This means you must plan carefully.
- Expenses must be incurred prior to March 15 of the following year. You have until April 30 to submit your expenses incurred from the prior calendar year through March 15.

More information on each FSA can be found at [today.NationalLife.com/benefits](http://today.NationalLife.com/benefits)

1 If you are enrolled in the HRA Plan and choose a Health Care FSA, the funds in your HRA will be used to FIRST pay for medical expenses billed to Cigna before you can use your FSA Funds to pay for medical expenses. FSA Funds can also be used to pay for all other qualified health related expenses.

2 If you are married and your spouse also has a Dependent Care FSA, your combined contribution limit is \$5,000 a year. If you are married and file a separate tax return, your maximum annual contribution is \$2,500. In addition, if you are married, you cannot contribute more than the lower of your or your spouse's earned income for the year. Additional limits apply if your spouse is disabled or a full-time student.

3 Your contribution and National Life's contribution combined cannot be more than \$5,000.

# SAVINGS TIPS

Take advantage of preventive check-ups and screenings. These services help you to stay healthy and identify problems early and are covered at 100% by National Life medical plans when you use in-network providers.

- Select in-network providers. Providers in your plan's network have agreed to charge discounted fees for their services. That's why you'll pay less when you see in-network providers than when you see providers who are not in the plan's network.
- Use the National Life Health + Wellness Center, a general practitioner, or an urgent care center instead of the Emergency Room (ER). The ER is one of the most expensive places to get care, so only use it for true medical emergencies. If you have a health issue that can't wait until you can go to the National Life Health + Wellness Center or see your doctor, visit an urgent care center or walk-in clinic, or call MDLIVE.
- Use MDLIVE. This program allows you to get an appointment with a board-certified physician 24 hours a day, using a landline or cell phone, or via video on your computer, smartphone or tablet.
- Use My Health Assistant on [myCigna.com](https://myCigna.com) or call the number on the back of your ID Card to engage with a Health Coach. These programs provide personalized wellness coaching, access to diabetes prevention and smoking cessation programs, and expert guidance in managing chronic conditions.
- Generics first for your prescription drugs. Let your doctor know our plans prescribe generic drugs first as these are less costly than brand names, but just as effective. And, if you take certain medications regularly ("maintenance" drugs), use the home delivery service to lower your out-of-pocket cost.

Because National Life medical plans are self-insured by the company, using these tips will help to keep our healthcare costs down for everyone. It also is advantageous to always be an informed consumer of healthcare.

# Points to Ponder

## DISEASE MANAGEMENT SERVICES

Chronic conditions – such as heart disease, asthma and diabetes – can lead to decreased quality of life and high medical costs when they are not well managed. The disease management services available through Cigna can help. These programs will identify members of National Life medical plans who can benefit from these services and reach out to offer individualized support in managing these chronic conditions and their associated costs, helping to keep our overall healthcare costs as low as possible. (Your health information is kept confidential in accordance with HIPAA privacy laws.)

## USE THE NATIONAL LIFE HEALTH + WELLNESS CENTER

The National Life Health + Wellness Center is a full-service health center offering convenient care with a variety of services that will help you lead a healthier life. The Health + Wellness Center will help you save money as well. Visits are free or only \$20 depending on the health plan in which you are enrolled.

## USE VIRTUAL CARE!

MDLIVE gives you an easy way to access licensed, board-certified doctors via telephone or online video consultation (Cigna members only). Pay only a small copay which is less than the cost of a visit to a doctor, urgent care center, walk-in clinic, or emergency room. MDLIVE doctors are available 24/7 and can diagnose non-emergency medical problems, recommend treatment, and even call a prescription into your pharmacy, when necessary. We encourage you to use MDLIVE any time you can't get to your regular doctor or the National Life Health + Wellness Center – when traveling, after hours or on holidays. Just go to [MDLIVEforCigna.com](https://MDLIVEforCigna.com) | 888-726-3171

## PRIOR AUTHORIZATION OF MEDICAL SERVICES

Unnecessary medical tests and procedures raise healthcare costs for everyone. Yet many doctors may still recommend expensive services that do not improve patient outcomes and may even compromise patient safety and quality of care.

To help ensure these services are accurately prescribed and do not incur unnecessary costs, certain advanced radiology and cardiology procedures will require prior review and approval initiated by your physician. This includes MRI, CT and PET scans, diagnostic cardiology, and cardiac rhythm implant devices. Pre-approval is not required for services performed in an emergency room, urgent care center, or during an inpatient hospital stay.



# myCigna Tools and Resources

[myCigna.com](https://mycigna.com) is your personalized Cigna Website. Your online account gives you access to a variety of features including finding care and costs, viewing claims, managing spending accounts, and accessing wellness options through programs such as Healthy Rewards, health coaches, and incentive awards. Access myCigna today from the single sign-on link from National Life Today.

## Programs Offered

### Close Gaps in Care

At Cigna, they want to help you do everything you can to improve or maintain your health. If they notice that you've missed a doctors appointment in your care plan, haven't refilled a prescription or have had a gap in your care that could affect your health, they may start a conversation during a regular coaching call to see how we can help.

### Case Management

If you or a loved one is faced with a medical condition, it's understandable to feel overwhelmed. Ask for a case manager who is your personal Nurse Advocate and is ready to support you at every step of your journey toward better health – helping you understand your health plan benefits, so that you can access services that go beyond medical treatment – quickly, easily and seamlessly.

### Treatment Decision Support

Your health coach will help you understand your condition, discuss treatment options, remind you to refill your prescription, visit your doctor or follow-up on other forms of care, or just help you learn how to develop healthier habits for a healthier you.

### Stress Management, Weight Management, and Tobacco Cessation

Your health coach will work with you to set smart goals for success.

### Chronic Condition Support

Your health coach will help you create a personal care support plan, understand medications or your doctor's orders, identify triggers that affect your condition, learn your treatment options, and know what to expect if you need to spend time in the hospital.

### OMADA

Omada is a digital lifestyle change program. Omada combines the latest technology with ongoing support so you can make the changes that matter most – whether that's around eating, activity, sleep, or stress. It's an approach shown to help you lose weight and reduce the risks of type 2 diabetes and heart disease. The program is no additional cost if you or your covered adult dependents are enrolled in one of our medical plans with Cigna. Take the 1-minute health screener to see if you are eligible: [omadahealth.com/nationallife](https://omadahealth.com/nationallife).

## MotivateMe

The MotivateMe Incentive Awards program rewards you for healthy behaviors. And that's important, because taking healthy actions will help reduce your risk of illness, disease and costly medical treatment. With MotivateMe, you'll work toward achieving real results that mean a real, healthy change for you.

Take care with things like getting a physical, a dental cleaning, completing a health assessment with biometric screening, participating in health coaching or the Omada program, and getting cancer screenings to earn gift card awards\*. The best reward is your good health.

## Health Coaching and Programs

Cigna offers a variety of programs to help you get healthy and live well. They are so excited to get to know you, they may even call you to talk about ways you can work together to help you manage your health.

Programs they offer have been chosen to help you take steps toward a healthier life, and you may be eligible for an incentive when you participate. Cigna does their best to suggest programs you might be interested in by listening to you and looking at information like your health assessment answers and claim information.

\* Incentive awards may be subject to tax; you are responsible for any applicable taxes. Please consult with your personal tax advisor for assistance.



The myCigna Mobile App makes it easy to check if a doctor is in your plan's network, so you can avoid out-of-network costs. And myCigna has fingerprint access, so you're always just one touch away from your:

- Provider directory
- Coverage details
- Account balances
- Deductible expenses
- Claims information, and more



### Overcome whatever life sends your way.

iPrevail is a digital therapeutics platform, designed by experienced clinicians to help you take control of the stresses of everyday life and challenges associated with life's difficult transitions.

iPrevail helps you:

- Overcome feelings of anxiety and loneliness
- Reduce negativity and feelings of depression
- Decrease stress from relationships, work, school and daily life
- Build resilience and positivity

Start by signing up for iPrevail on [myCigna.com](https://myCigna.com).<sup>3</sup> After completing a short quiz, you will be matched with a personalized support program. Each week you will cover a new concept, with new social and clinical activities. You can send messages to your coach and others, day or night, 24/7.

## Healthier Pregnancies Every Step of the Way.

The Cigna Healthy Pregnancy® app is designed to help you and your baby stay healthy during pregnancy. This valuable resource offers you an easy way to track and learn about your pregnancy. It also provides support for baby's first two years!

There's a lot to keep track of when you're pregnant. The Cigna Healthy Pregnancy app can help make it simple. The app can guide you in talking with your provider about an issue, track your weight, help provide support and resources to actively manage your pregnancy and even promote a relaxing minute for you and your baby.



Download the Cigna Healthy Pregnancy app now.<sup>1</sup>

It's easy to use. Just enter your due date and myCigna® user ID and password.



## Worry Less. Enjoy Life More.

Cigna is committed to helping you take control of your health – and that includes your emotional health. That's why they partnered with Happify, a free app with science-based games and activities that are designed to help you:

- Defeat negative thoughts
- Gain confidence
- Reduce stress and anxiety
- Increase mindfulness and emotional well-being
- Boost health and performance

Using Happify is fun, free, quick and easy. Sign up and download the free app today at [happify.com/Cigna](https://happify.com/Cigna).<sup>2</sup>

<sup>1</sup> The downloading and use of the Cigna Healthy Pregnancy app is subject to the terms and conditions of the app and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply. This app is for educational purposes only. Medical advice is not provided. Do not rely on information in this app as a tool for self-diagnosis. Always consult your provider for appropriate examinations, treatment, testing and care recommendations. In an emergency, dial 911 or visit the nearest hospital.

<sup>2</sup> The downloading and use of the Happify mobile app is subject to terms and conditions of the app and the online stores from which it is downloaded. Standard mobile phone and data usage charges apply. The Happify website and mobile app are for educational purposes only. They do not provide medical advice tailored to you in any way. They do not constitute medical advice and are not a substitute for proper medical care provided by a physician. Do not rely on the website or app information as a tool for self-diagnosis. Always consult with your doctor for appropriate examinations, treatment, testing and care recommendations. Happify, Inc. is an independent company and is solely responsible for its products and services. Cigna makes no representations or warranties as to the quality or accuracy of the information provided on the Happify website or mobile app. Cigna assumes no responsibility and shall have no liability under any circumstances arising out of the use or misuse of such products.

<sup>3</sup> Registering on and using iPrevail is subject to terms and conditions. Standard mobile phone and data usage and charges apply. iPrevail's website and mobile app are for educational purposes only.

Services do not provide medical advice or treatment and are not a substitute for medical assessments, treatments and licensed medical care. Information presented by iPrevail is not to be used for self-diagnosis. Always consult with your doctor regarding treatment, testing and medical advice. Prevail Health Solutions is an independent company and is solely responsible for its products and services. Cigna makes no representations or warranties as to the quality or accuracy of the information provided on the iPrevail website or mobile app. Cigna assumes no responsibility and shall have no liability under any circumstances arising out of the use or misuse of such products.

Eliminate the stigma associated with mental health and make therapy available to all and enjoy the benefits of online psychiatry!

## MDLIVE® for Cigna®

### MDLIVE Psychiatry

Let's face it – life can be difficult. Whether it's everyday stress or an unexpected crisis, it's easy to feel overwhelmed. If you need someone to support you in facing life's challenges, our carefully vetted board-certified psychiatrists are here to help. Get the care you need at a time and place that works for you.

See a psychiatrist via secure phone or video using your computer or smartphone. It can take weeks to see a psychiatrist for the first time; it takes only days with MDLIVE.

MDLIVE treats a wide range of behavioral conditions including depression, anxiety, relationships, PTSD, addiction, LGBTQ support, and more. MDLIVE doctors can send prescriptions right to the nearest pharmacy. MDLIVE is more affordable than conventional behavioral healthcare.

### GET STARTED TODAY!

#### Step 1: Register for free.

Setting up your secure account only takes about 15 minutes. Then, you're ready for your visit. Don't forget to download our app and always be prepared.

#### Step 2: Find a doctor.

Search through our network of board-certified doctors and choose the one that's right for you. You can wait to see a doctor right away or schedule your appointment for a time that works for you.

#### Step 3: Start your visit.

Speak to your doctor on the phone or online. They'll go through your symptoms, recommend a treatment and can even send a prescription to your nearest pharmacy if you need one.



Founded in 2012 with the mission to eliminate the stigma associated with mental health and make therapy available to all, Talkspace has been used by over one million people.

Talkspace is an online therapy service that connects users to a dedicated, licensed therapist via private messaging (text, voice, video) or live video session. The platform is fully HIPAA compliant and uses banking grade encryption to protect data.

Talkspace treats a wide range of behavioral conditions including depression, anxiety, relationships, PTSD, addiction, eating disorders and more.

### GET STARTED TODAY\*!

- Visit [talkspace.com/cigna](https://talkspace.com/cigna) to register – available to active Cigna members, including dependents (13+) and spouses. For dependents under the age of 18, parental consent may be required.
- Complete intake and assessment to see your curated list of therapist matches.
- Review professional profiles and choose your dedicated therapist.
- Create an account and download the app (iOS and Android) for easy future access.
- Messaging can begin the same day as registration.

\* Engaging with a Talkspace therapist via a live video session is subject to the same co-pay or co-insurance (after deductible) that would apply to an in-person visit. For messaging, there is a clock running in the background calculating the amount of time spent texting. Once these minutes add up to a billable CPT code (usually 30 or 60 minutes), then a claim is submitted, and the member would have their cost-share amount applied. On average, a week of texting with a provider is equal to about one 60-minute session, although this does vary. Boundaries and expectations are established at the onset of treatment, just as they would for an office visit, so any overuse of texting is monitored and corrected if necessary. Talkspace also ensures the texting is being used to gain improvement.

# Critical Illness Insurance

Being diagnosed with a critical illness can happen to anyone at any time. Even with medical coverage, out-of-pocket expenses can quickly add up. That's why having Critical Illness Insurance is important.

Cigna's Critical Illness Insurance can help provide you and your family with the additional financial protection you may need for expenses associated with an unexpected covered critical illness – so you can focus on getting better. Critical Illness Insurance provides you with a lump-sum benefit for diagnosis of a covered critical illness or specified event like a heart attack or stroke. It can help you pay for expenses such as travel, room and board, transportation, child care or treatment options not covered by traditional insurance. What you do with the money is up to you.

Choose the coverage that works best for you and your family. Your cost will depend on the level of coverage you choose. Rates can be found at [today. NationalLife.com/benefits](https://www.nationallife.com/benefits) or on the National Life [Benefits Portal](https://www.nationallife.com/benefits). The policy is portable, which means you can take it with you if your employment status changes.

You can select a benefit amount of \$10,000, \$20,000, \$30,000, \$40,000 or \$50,000. Evidence of insurability is required for benefit amounts above the guaranteed issue coverage of \$30,000. Your Spouse is eligible for 50% of your benefit amount. Your Dependent Child(ren) is eligible for 25% of your benefit amount. No evidence of insurability is required for spouse and/or child(ren).

Payments will be made directly to you, not to the doctors, hospitals or other health care providers. You will receive a check mailed directly to your home. The payment you receive is yours to spend as you see fit and may be used to cover ongoing household bills like:

- Groceries
- Mortgage and car payments
- Child care
- Or any other way you want; the choice is yours.

## Points to Ponder

### ADDITIONAL FINANCIAL PROTECTION

When you or your family needs it the most to help with out-of-pocket expenses.

### COST-EFFECTIVE

You can sign up for this coverage at economical group rates, which means you may pay less for your coverage.

### CONVENIENT

Cigna makes it easy to apply for a claim via phone, email, fax, or regular mail.

### PORTABLE

You can take your coverage with you if you leave National Life – benefits won't change if you port your coverage.

### CONSIDER YOUR OPTIONS

Weigh the benefits and costs of this coverage at the same time you are considering your medical plan options to see how they can work together.

### OFFSET YOUR DEDUCTIBLE

Critical Illness Insurance can help pay for or offset your deductible and coinsurance if you experience a critical illness.

### WELLNESS BENEFIT

This policy includes a \$50 wellness benefit paid per person per calendar year for a covered health screening or test, such as a mammogram, stress test or colonoscopy.



## Accidental Injury Insurance

An accident can happen to anyone at any time. Even with medical coverage, out-of-pocket expenses can quickly add up. That's why having Accidental Injury Insurance is important.

If you have an accident, it can lead to extra out-of-pocket costs, beyond what your medical plan may cover. Cigna's Accidental Injury Insurance can help by paying you for treatments or injuries resulting from a covered accident. It can help you pay for expenses such as rehabilitation, transportation, child care, travel or other out-of-pocket expenses. What you do with the money is all up to you. Coverage continues after your first covered accident and can help provide protection for future covered accidents.

Choose the coverage that works best for you and your family. Your bi-weekly cost will depend on the level of coverage you choose. Rates can be found at [today.NationalLife.com/benefits](https://today.NationalLife.com/benefits) or on the National Life [Benefits Portal](#). You can choose to cover yourself, your spouse, and eligible children up to age 26. The policy is portable, which means you can take it with you if your employment status changes.

Payments will be made directly to you, not to the doctors, hospitals or other health care providers. You will receive a check mailed directly to your home. The payment you receive is yours to spend as you see fit and may be used to cover ongoing household bills like:

- Groceries
- Mortgage and car payments
- Child care
- Or any other way you want; the choice is yours.

Accidental Injury Insurance provides benefits for over 150 different covered conditions, such as:

- Emergency Care Including ambulance transportation
- Hospitalization
- Fractures
- Dislocation
- 2nd and 3rd degree Burns
- Lacerations
- Surgery
- Concussions
- Dislocations
- Eye Injury
- Emergency Dental

## Points to Ponder

### **COST-EFFECTIVE**

You can sign up for this coverage at economical group rates, which means you may pay less for your coverage.

### **CONVENIENT**

Cigna makes it easy to apply for a claim via phone, email, fax, or regular mail.

### **PORTABLE**

You can take your coverage with you if you leave National Life – benefits won't change if you port your coverage.

### **CONSIDER YOUR OPTIONS**

Weigh the benefits and costs of this coverage at the same time you are considering your medical plan options to see how they can work together.

### **OFFSET YOUR DEDUCTIBLE**

Accidental Injury Insurance can help pay for or offset your deductible and coinsurance if you experience a covered accident.

### **EVIDENCE OF INSURABILITY**

Evidence of Insurability (proof of good health) is never required.



## Hospital Care (Indemnity) Insurance

A hospital stay can happen at any time, and it can be costly. Cigna Hospital Care can help you and your loved ones have additional financial protection. It can help cover these unexpected events – so you can focus on getting better.

Even with medical coverage, out-of-pocket costs can add up. But with Cigna Hospital Care, you receive a check after a qualified hospitalization resulting from a covered injury or illness. You can use the money however you'd like. For example, it can help you pay for expenses related to child care, travel, or other out-of-pocket expenses. There are no copays, deductibles, coinsurance, or network requirements. And benefits aren't reduced because you receive a payment from any other coverage you have, such as medical, accidental injury or critical insurance.

Hospital Care Insurance pays benefits for hospitalizations resulting from a covered injury or illness. Coverage continues after the first hospitalization, to help you have protection for future hospital stays.

Choose the protection that works best for you or your family. Your bi-weekly cost will depend on the level of coverage you choose. Rates can be found at [today.NationalLife.com/benefits](https://today.NationalLife.com/benefits) or on the National Life [Benefits Portal](#). You can choose to cover yourself, your spouse, and eligible children up to age 26. The policy is portable, which means you can take it with you if your employment status changes.

### Points to Ponder

#### **ADDITIONAL FINANCIAL PROTECTION**

Protection for you and your family when you need it most.

#### **COST-EFFECTIVE**

You can sign up for this coverage at economical group rates, which means you may pay less for your coverage.

#### **CONVENIENT**

We make it easy. Your insurance premiums can be deducted from your paycheck.

#### **PORTABLE**

You can take your coverage with you if you leave National Life – benefits and rates won't change if you port your coverage\*.

#### **OFFSET YOUR DEDUCTIBLE**

Hospital Care Insurance can help pay for or off set your deductible and coinsurance if you experience a covered accident.

#### **CONSIDER YOUR OPTIONS**

Weigh the benefits and costs of this coverage at the same time you are considering your medical plan options to see how they can work together.

\* Under most plans, coverage is portable under the age of 70 and ends at age 100. Review the plan documents for details.



## Value-added programs and services

Cigna wants you and your family to be healthier and more secure. That's why they provide you a variety of programs and services available to use at any time. With Cigna Critical Illness, Accidental Injury, and/or Hospital Care insurance, you get access to the following programs (note: these are NOT insurance and do not provide reimbursement for financial losses):

- **[CignaWillCenter.com](#)**. Online tools for you (and your spouse) to create state-specific legal documents for wills and powers of attorney, and valuable resources for estate and funeral planning. Support for will preparation, estate planning, power of attorney and medical authorization for minors.
- **Cigna Identity Theft**. Identity theft prevention and resolution services, including personal assistance and guidance, plus education and tools to help prevent identity theft in the future.
- **Cigna Healthy Rewards®**. Discounts on health and wellness services, including vision and hearing care, diet programs, fitness centers, massage, chiropractic care and acupuncture.
- **Cigna Health Advocacy Services**. Personalized assistance for you and your family members (including parents and parents-in-law) with a wide range of health care and health insurance challenges.

## How to file a claim

You can find claim forms in the “Find Forms” section on [Cigna.com](#). Forms are also available on [NLToday under BENEFITS - Plan Information & Forms](#). If you need help, or have questions, call us at 800-754-3207. Please remember:

- Always seek appropriate medical attention immediately.
- Call Cigna to start your claim.

To file a claim, make sure you have:

- **Personal information** –  
Including your date of hire and Social Security number.
- **Employer information** –  
Your employer's name, address and phone number.
- **Doctor information** –  
Name, address and phone number.

# Dental

National Life has one dental plan. You may enroll yourself and your eligible dependents or you may waive coverage. You do not have to be enrolled in a medical plan to elect dental coverage - or cover the same dependents under medical and dental. Review the summary below to understand how the plan works.

NOTE: You will not receive identification cards for the dental plan, however, you can print cards from [myCigna.com](http://myCigna.com) or download the myCigna app.

Plan Covers	Preventive (Class I) 100%	Basic (Class II) 80%	Major (Class III) 60%	Implants (Class IX) 60%	Orthodontic (Class IV) 60%
Services	<ul style="list-style-type: none"><li>• Oral Exams</li><li>• Cleanings</li><li>• X-rays</li><li>• Fluoride Application</li><li>• Sealants</li><li>• Emergency Care</li></ul>	<ul style="list-style-type: none"><li>• Fillings</li><li>• Endodontics</li><li>• Periodontics</li><li>• Oral Surgery</li><li>• Anesthesia</li><li>• Repairs to Bridges, Crowns, and Inlays</li><li>• Repairs to Dentures</li></ul>	Installations of: <ul style="list-style-type: none"><li>• Inlays and Onlays</li><li>• Prosthesis Over Implant</li><li>• Crowns</li><li>• Bridges</li><li>• Dentures</li><li>• Stainless Steel/ Resin Crowns</li></ul>	Full tooth implants subject to plan maximum	Teeth straightening is not subject to plan deductible
Maximums	————— These services subject to Calendar Year ————— Maximum of \$1,500				Lifetime \$2,000
Deductible	N/A	————— \$50 per person ————— ————— Up to \$150 for a family —————			N/A

## Bi Weekly Payroll Deductions

Single	\$6.02
2-Person	\$11.18
Family	\$19.56

## Coverage for Oral Surgery

Our dental plan covers certain (but not all) surgical procedures. In some cases, oral surgery may be covered by your medical plan. Make sure you know what your medical plan and/or dental plan will pay before you have any oral surgery. Remember to check if the oral surgeon is in-network to save money.

## Find a Network Provider

To find a network provider in your area, please call CIGNA at 800-244-6224 or log on to [www.mycigna.com](http://www.mycigna.com).  
Group number- 3209368

## Points to Ponder

- You and the company share the cost of dental coverage.
- Preventive cleanings and exams are covered twice per year at 100% if you go to an in-network, PPO dentist. It is not necessary that appointments are six months apart, just twice per calendar year.
- Schedule preventive cleanings and exams for yourself and your family members twice a year to get the most value out of your plan coverage and maintain good dental health.
- Maintaining good dental health is just as important as taking care of your medical health. In fact, your dentist can identify many medical issues, including heart disease, during a routine dental exam.

# Vision

National Life provides the VSP Base Plan at no premium cost to the employee. All benefit eligible employees are automatically enrolled in the plan. You may enroll your eligible dependents during the enrollment period. You do not have to be enrolled in a medical plan to elect vision coverage. You also have the option to enroll in the Buy-Up Plan for extra benefits!

BENEFIT	DESCRIPTION	YOUR COVERAGE WITH A VSP PROVIDER	
		COPAY	FREQUENCY

## THE VSP BASE PLAN

<b>Well Vision Exam</b>	Focuses on your eyes and overall wellness	\$10	Every calendar year
<b>Prescription Glasses</b>		\$25	See frame and lenses
<b>Frame</b>	<ul style="list-style-type: none"> <li>\$200 featured frame brands allowance</li> <li>\$180 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$100 Walmart®/Sam's Club®/Costco® frame allowance</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 40% on other lens enhancements</li> </ul>	\$0 \$80 - \$90 \$120 - \$160	Every calendar year
<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> </ul>	– Up to \$60	Every calendar year
<b>Primary Eyecare</b>	<ul style="list-style-type: none"> <li>Retinal screening for members with diabetes</li> <li>Additional exams and services for members with diabetes, glaucoma, or age-related macular degeneration.</li> <li>Treatment and diagnoses of eye conditions, including pink eye, vision loss, and cataracts available for all members.</li> <li>Limitations and coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> </ul>	\$0 \$20 per exam	As needed
<b>Lightcare™</b>	<ul style="list-style-type: none"> <li>\$180 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts</li> </ul>	\$25	Every other calendar year

## THE VSP BUY-UP PLAN

Provides an increased frame allowance and the ability to get new frames every year!

<b>Frame</b>	<ul style="list-style-type: none"> <li>\$220 featured frame brands allowance</li> <li>\$200 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$110 Walmart®/Sam's Club®/Costco® frame allowance</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>VSP EasyOptions (members can choose one of these upgrades)</b>	<ul style="list-style-type: none"> <li>An additional \$50 frame allowance, or</li> <li>Fully covered premium or custom progressive lenses, or</li> <li>Fully covered light-reactive lenses, or</li> <li>Fully covered anti-glare coating, or</li> <li>An additional \$50 contact lens allowance</li> </ul>	Included in Prescription Glasses	Every calendar year
<b>Your Bi-Weekly Contribution</b>	\$2.42 Member only    \$3.52 Member + 1    \$6.29 Member + family		

## Plan Information

VSP Member Services: (800) 877-7195 or log on to [www.vsp.com](http://www.vsp.com)

Group number: 30017510

Call Member Services for out-of-network plan details.

Coverage with a participating retail chain may be different. Once your benefit is effective, visit [vsp.com](http://vsp.com) for details. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business.

# Life Insurance

National Life provides \$50,000 of company-paid basic life insurance at no cost to you! You may buy additional, voluntary coverage for yourself up to five times your annual salary. These are National Life term products.

The basic life insurance and any voluntary life would pay a benefit to your beneficiary if you were to die. The policies are convertible, which means you can continue coverage if your employment status changes.

Voluntary term life insurance can be issued up to 5 times annual salary. Guaranteed issue at time of hire is 3 times annual salary. Any amount over 3 times your salary requires Evidence of Insurability (EOI). During the Annual Open Enrollment period, any amount chosen or increased that is more than 1 times your annual salary will require EOI.

Premium rates for voluntary term life are calculated based on your coverage amount, age, and tobacco usage. Your rate will be calculated when you enroll and will change as your salary changes.

See plan information and rate table on the National Life [Benefit Portal](#) or at [today.NationalLife.com/benefits](http://today.NationalLife.com/benefits).



## REMEMBER TO NAME A BENEFICIARY

Certain benefits, such as your Life Insurance, AD&D coverage, the National Life Group 401(k) Plan, and Pension require you to name a beneficiary. This is the person or entity who would receive the assets of these benefits in the event of your death. Each plan requires a separate beneficiary election. Take time during the Annual Open Enrollment to name a beneficiary or, if you have already done so, review this information for accuracy. Remember, if you do not name a beneficiary, your assets would be distributed according to the terms of your plan which may not be how you would prefer them to be distributed.

## Points to Ponder

- National Life pays the full cost of your basic life insurance coverage; you pay the full cost of any voluntary life coverage you elect.
- There are no changes to our life plans, but you should still review these coverages and update your elections and beneficiaries if needed.
- Typically, the right amount of coverage will depend on your age, your family situation, and other personal saving you may have.
- Remember, National Life offers employees a 50% discount on first year premiums for any National Life life product purchased for themselves.

## Converting NLG paid Basic Term Life and Voluntary Term Life after retirement or separation of service.

As an employee, you can convert both the voluntary term life and the NLG paid term life of \$50,000. The rating is determined by whether you utilize nicotine.

The new policy must be converted to a permanent policy and the face amount must match the term life amount. If you have both basic and voluntary life, they can be combined into one permanent policy, but the face amount must match the two term policies combined.

The new policy shall not

- (a) include Disability or Accidental Death Benefits (except the insurance coverage may provide for waiver of premium upon disability), or
- (b) exceed the amount of Group Life Insurance and/or Voluntary Insurance that it replaces.

To receive a better premium class, the agent would need to collect the form 20114, HIPPA and labs; to add ABR, NLG needs the 20114, HIPPA and ABR disclosures.

The normal conversion paperwork is the Term Conversion Application 20007, Agent report 1441G, illustration and initial premium would be needed to apply for the conversion.

The term conversion paperwork should be sent to Contract Change.

# Group Accident Travel Insurance

National Life provides Group Accident/Travel Insurance, through Federal Insurance Company (CHUBB), at no cost. All employees, officers, and directors of National Life are covered 24 hours a day, 7 days a week, while traveling on Company business which is at the authorization, direction and expense of National Life.

Benefits are provided in the amount of \$250,000 if an accident results in a covered loss and from an insured hazard. The description of benefits is provided in the Summary Plan Description.

Employees have the right to name a beneficiary on their policy. To make a beneficiary change, employees must have the change:

1. in writing
2. filed with the National Life Group People Center
3. provided to the insurance company at the time of the claim or at such other time as they may request

If no beneficiary is named, claims will be made according to the following schedule:

1. Spouse
2. Equal shares to your surviving children
3. Equal shares to your surviving parents
4. Equal shares to your surviving brothers and sisters
5. Your estate

Claim forms should be completed within 20 days of the date of loss and provided to the People Center or the Insurance Risk Manager for processing.

## Important Information

Customer Service – 888-987-5920  
Policy number – 9906-61-55  
Group ID: N2CHUEB



# Voluntary AD&D Insurance

You are able to purchase Accidental Death and Dismemberment (AD&D) coverage for yourself and your dependents.

## Coverage Options

### FOR AN INSURED EMPLOYEE

Employee only coverage is a minimum of \$10,000 to a maximum of \$300,000, in increments of \$10,000. Amounts above \$250,000 cannot exceed 10 times your annual salary. Family coverage is available to dependent children and spouse of the employee.

### FOR AN INSURED DEPENDENT CHILD

If an Insured Dependent Child suffers a loss for which a benefit is payable under the Policy and there is an Insured Spouse on the date of the accident causing the loss, the Insured Dependent Child's Principal Sum is the lesser of \$30,000 or 10% of the Insured's Principal Sum on the date of the accident causing the loss. If there is no Insured Spouse on the date of the accident causing the loss, the Insured Dependent Child's Principal Sum is the lesser of \$45,000 or 15% of the Insured's Principal Sum on the date of the accident causing the loss.

### FOR AN INSURED SPOUSE

If an Insured Spouse suffers a loss for which a benefit is payable under the Policy and there is an Insured Dependent Child on the date of the accident causing the loss, the Insured Spouse's Principal Sum is 50% of the Insured's Principal Sum on the date of the accident causing the loss. If there is no Insured Dependent Child on the date of the accident causing the loss, the Insured Spouse's Principal Sum is 60% of the Insured's Principal Sum on the date of the accident causing the loss.

## Benefits

**Accidental Death Benefit.** If injury to the Insured Person results in death within 365 days of the date of the accident that caused the Injury, the Company will pay 100% of the Principal Sum.

**Accidental Dismemberment Benefit.** If injury to the Insured Person results, within 365 days of the date of the accident that caused the Injury, in any one of the losses specified below, the Company will pay the percentage of the Principal Sum shown below for that Loss.\*

For Loss of	Percentage of Principal Sum
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
Speech and Hearing in Both Ears	100%
One Hand or One Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%
Hearing in One Ear	25%
Thumb and Index Finger of Same Hand	25%

Premium rate per \$1,000 of Principal Sum is as follows:

Employee Only Coverage \$0.007 bi-weekly

Employee & Family Coverage \$0.011 bi-weekly

## Important Information

Customer Service – 800-551-0824

Policy number – PAI 0009121587

Group ID: National Life Insurance Company

\* "Loss" of a hand or foot means complete severance through or above the wrist or ankle joint. "Loss" of sight of an eye means total and irrecoverable loss of the entire sight in that eye. "Loss" of hearing in an ear means total and irrecoverable loss of the entire ability to hear in that ear. "Loss" of speech means total and irrecoverable loss of the entire ability to speak. "Loss" of thumb and index finger means complete severance through or above the metacarpophalangeal joint of both digits. If more than one Loss is sustained by an Insured Person as a result of the same accident, only one amount, the largest, will be paid.

# Short Term and Long Term Disability

Disability benefits replace a portion of your income if you are not able to work because of an illness or injury. National Life provides basic Short Term and Long Term Disability benefits at no cost to you. You may elect to increase your Long Term Disability coverage through the voluntary “buy-up” plan.

If elected, you are required to contribute toward the cost of voluntary “buy-up” LTD insurance. Your contributions will be made on a post-tax basis. This means that (under the law as of the date the policy was issued) your Monthly Benefit may be treated as non-taxable for the purposes of filing your Federal Income Tax Return. It is recommended that you contact your personal tax advisor.

Premium rate per \$100 of additional coverage is as follows:

<40 years old = \$0.04  
40 - 54 years old = \$0.12  
55+ years old = \$0.28

	Short Term Disability	Long Term Disability
<b>When Benefits Begin</b>	Date of Hire. Note: You must apply and submit medical evidence to begin payments	After a continuous disability period of six months (180 days), provided you are disabled as determined by Reliance Standard Life (RSL)  Note: You must apply and submit medical evidence to begin payments
<b>Benefit Amount</b>	<b>Company-paid Short Term Disability*:</b> 100% of your bi-weekly earnings as defined by the plan up to 12 weeks and 65% of your bi-weekly earnings as defined by the plan from weeks 13 up to 26, may be reduced by disability income from other sources	<b>Company-paid Long Term Disability:</b> 60% of your basic earnings as defined by the plan (\$15,000 maximum benefit per month) minus disability income from other sources  <b>Buy-up Plan:</b> An additional 10% for a total of 70% of your basic earnings as defined by the plan (\$16,250 maximum benefit per month) minus disability income from other sources
<b>How Long Benefits Continue</b>	For as long as you remain disabled as determined by the administrator or up to 26 weeks, whichever is less	For as long as you remain disabled as determined by RSL or reach age 65 (If you are disabled on or after age 62, benefit duration is determined based on age when disabled)  Note: Benefits will not be payable for any disability caused by: an intentionally self-inflicted injury; an act of war (declared or undeclared); commission of a felony; injury or sickness occurring while confined in any penal or correctional institution.
<b>Important Information</b>	Contact Benefits in the People Center	Reliance Standard Customer Service: 800-351-7500 <a href="http://www.reliancestandard.com">www.reliancestandard.com</a> Group number: 12310

\* If you live in a state which provides state-mandated disability coverage, your STD benefit may be reduced by the amount you receive from the state plan.

# LegalShield® and IDShield<sup>SM</sup>

**Have you ever** needed your will prepared or updated, worried about being a victim of identity theft, lost your wallet, signed a contract, worried about entering personal information on-line, received a moving traffic violation, or been pursued by a collection agency? LegalShield and IDShield can help you with the protection you need.

## What is LegalShield?

LegalShield has been offering legal plans for over 40 years, creating a world where everyone can access legal protection and afford it. Expected and unexpected legal questions arise every day and with LegalShield on your side, you will have access to a quality law firm 24/7, for covered personal situations. From real estate to speeding tickets to Will preparation, and beyond, LegalShield is available to help you with any personal legal matter – no matter how traumatic or how trivial it may seem.

### THE LEGALSHIELD MEMBERSHIP INCLUDES:

- Personal Legal advice on unlimited issues
- Letters/calls made on your behalf
- Contracts & documents reviewed (up to 15 pages)
- Residential Loan Document Assistance
- Lawyers prepare your Will, your Living Will and your Health Care Power of Attorney
- Moving Traffic Violations (available 15 days after enrollment)
- IRS Audit Assistance
- Trial Defense (if named defendant/respondent in a covered civil action suit)
- Uncontested Divorce, Separation, Adoption and/or Name Change Representation (available 90 days after enrollment)
- 25% Preferred Member Discount (Bankruptcy, Criminal Charges, DUI, Other Matters, etc.)
- 24/7 Emergency Access for covered situations
- Consultation on unlimited matters concerning your small business; with up to 1 hour of legal research per matter, including issues like patents, copyright, immigration, trademarks, document & contract review, and debt collection. Additional premium applies for small business coverage.

## What is IDShield?

Identity theft has been one of the top consumer complaints filed with the FTC for 20 years straight. Victims are spending an exorbitant amount of time and money dealing with it. The criminals are getting smarter. That's why you need identity theft protection that is more than a website. IDShield's Licensed Private Investigators will do whatever it takes for as long as it takes to restore your identity to its pre-theft status. You have their \$5 million service guarantee!

### THE IDSHIELD MEMBERSHIP INCLUDES:

#### Privacy Monitoring

Monitoring your name, SSN, date of birth, email address (up to 10), phone numbers (up to 10), driver's license & passport numbers, and medical ID numbers (up to 10) provides you with comprehensive identity protection service that leaves nothing to chance.

#### Security Monitoring

SSN, credit card (up to 10), and bank account (up to 10) monitoring, sex offender search, financial activity alerts and quarterly credit score tracking keep you secure from every angle. With the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18.

#### Consultation

Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications and lost wallet protection.

#### Full Service Restoration

Complete identity recovery services by Kroll Licensed Private Investigators and the \$5 million service guarantee ensure that if your identity is stolen, it will be restored to its pre-theft status.

IDShield plans are available at individual or family rates. A family rate covers the member, member's spouse and up to 8 dependents up to the age of 18.

To find a provider in your area log on to [www.legalshield.com/member-login](http://www.legalshield.com/member-login) or call 866-288-5229

LegalShield legal plans cover the member; member's spouse; never married dependent children under 26 living at home; dependent children under age 18 for whom the member is legal guardian; never married, dependent children up to age 26 if a full-time college student; and physically or mentally disabled dependent children. An individual rate is available for those enrollees who are not married, do not have a domestic partner and do not have minor children or dependents. No family benefits are available to individual plan members.

# Pet Insurance

Nationwide pet insurance helps you cover veterinary expenses so you can provide your pets with the best care possible without worrying about the cost.

## Coverage Highlights

We offer a choice of reimbursement options so you can find coverage that fits your budget. All plans have a \$250 annual deductible and \$7,500 maximum annual benefit. Coverage includes:<sup>1</sup>

- Accidents
- Cancer
- Illnesses
- Dental diseases
- Behavioral treatments
- Hereditary and congenital conditions
- Rx therapeutic diets and supplements
- And more



Select  
the level  
of coverage  
you prefer



## Included with every policy

- 24/7 access to veterinary experts (\$110 value)
- Available via phone, chat and email
- Unlimited help for everything from general pet questions to identifying urgent care needs
- Save time and money by filling pet prescriptions at participating in-store retail pharmacies across the U.S.
- Rx claims submitted directly to Nationwide
- More than 4,700 pharmacy locations

## Additional highlights

- Exclusive product for employer groups only
- Preferred pricing for employees
- Multiple-pet discounts
- Guaranteed issuance

## Important Information

Customer Service

877-738-7874 or [www.PetsNationwide.com](http://www.PetsNationwide.com)

<sup>1</sup> Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions. Reimbursement options may not be available in all states.

<sup>2</sup> Starting prices indicated. Final cost varies according to plan, species and ZIP code.



## Other National Life Benefits

In addition to the health and welfare benefit elections that are typically made once a year (when you are first hired or during the Annual Open Enrollment period), National Life offers several benefits that are available to you during the year. Your participation may be automatic, or you decide whether to enroll and when to elect coverage. Summaries of these programs are provided on the following pages; more information is available on NLToday and in the Employee Guidebook.

# Employee Assistance Program

## Face-to-Face Assistance

<b>Service Level</b>	<ul style="list-style-type: none"> <li>• 24/7 Telephonic Access 888-371-1125</li> <li>• Provider Referrals</li> </ul>		
<b>Participant Services</b>	<ul style="list-style-type: none"> <li>• Telephonic Consultation</li> <li>• Crisis Intervention Services</li> <li>• Community Resources</li> <li>• Life at Work Resources</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Rewards</li> <li>• Emotional Wellbeing Online (Assessment Tools, FAQ, Article Library, Online Access &amp; Referral, Quarterly Awareness Series)</li> </ul>	<ul style="list-style-type: none"> <li>• Up to 3 face-to-face session per issue for you and/or your family</li> </ul>

## Full-Service Life Events

<b>Telephonic Services</b>	<ul style="list-style-type: none"> <li>• <b>Child Care</b> Child care centers, family child care homes, in-home care, baby-sitting agencies, nanny agencies and au pair agencies, preschools/nursery schools, before and after school programs</li> <li>• <b>Senior Care</b> Home health agencies, nursing homes, assisted living facilities, continuing care retirement communities, social and recreational programs, long distance care-giving, backup care, respite care</li> <li>• <b>Prenatal Care</b> Birthing methods, nutrition, exercise and diet, childcare pre-planning, breastfeeding and formula feeding</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Parenting</b> Child development, sibling rivalry, separation anxiety, sleep and bedtime routines, toilet training, child safety, discipline, raising adolescents</li> <li>• <b>Summer Care</b> Residential camps, day camps, traditional camp programs, specialized camp programs</li> <li>• <b>Special Needs</b> Common childhood illnesses, children with multiple disabilities, developmental delays, mentally challenged/ill</li> <li>• <b>Pet Care</b> Veterinarians, insurance, pet-sitting resources, obedience training, pet store, pet supply catalogs</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Adoption</b> State adoption specialists, adoption support groups, private adoption, national adoption organizations</li> <li>• <b>Education</b> Kindergarten programs, before-and-after-school programs, public schools, undergraduate and graduate programs</li> <li>• <b>Legal</b> 30 minute free consultation, 25% discount on usual fees, referrals to local providers, coverage for most legal issues</li> <li>• <b>Financial Information</b> Spending habits, budgeting strategies, managing credit, debit management, debt consolidation, financial planning information</li> </ul>
<b>Online Services</b>	<ul style="list-style-type: none"> <li>• <b>Family &amp; Care-giving</b> Adoption, Child Care, Parenting, Senior Care, Education, Pet Care</li> <li>• <b>Health and Well-Being</b> Live Healthy, Health &amp; Aging, Common Health Concerns</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Daily Living</b> Consumer Information, Travel &amp; Recreation, Finances, Legal Issues</li> <li>• <b>Self-Search Provider Locators</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Education Materials</b></li> <li>• <b>Personal Assessments</b></li> <li>• <b>Interactive Tools</b></li> <li>• <b>Assisted Search – Email</b></li> <li>• Website: <a href="http://myCigna.com">myCigna.com</a></li> <li>• Employer ID: nationallife</li> </ul>
<b>Referrals and Fulfillment</b>	<ul style="list-style-type: none"> <li>• Up to 3 Qualified Referrals where available; if additional needed consumer calls back</li> </ul>	<ul style="list-style-type: none"> <li>• Life Events Turnaround Time: 12 business hours; emergency is 6 business hours</li> </ul>	<ul style="list-style-type: none"> <li>• Online and Print Fulfillment Materials</li> </ul>

## Important Information

Customer Service –  
888-371-1125; [www.myCigna.com](http://www.myCigna.com)  
Employer ID - nationallife

The National Life Health + Wellness Center  
has an on-site EAP Counselor.  
Stop by the Health Center or call ext. 7515 to make an appointment.

# National Life Group 401(k) Plan

National Life offers a 401(k) retirement savings plan to help you save for your retirement. A 401(k) plan is one of the best ways to save for retirement, and National Life encourages all eligible employees to take advantage of this benefit, so that you can ensure a more secure financial future.

National Life Group's 401(k) plan allows you to make payroll contributions, up to 50% of your salary. You are automatically enrolled at a 6% contribution to the Target Date Funds\* starting with your first paycheck and are immediately 100% vested in these contributions.

On top of your contributions to the 401(k), National Life will make a matching contribution based on your base compensation. Unlike your contributions, you are not 100% vested in the matching contributions until you have completed two years of service or are age 55.

For employees hired prior to 1/1/2021

- Annual Base Compensation \$45,000 or less – 75% match up to 6% of salary
- Annual Base Compensation \$45,001 or more – 50% match up to 6% of salary

For employees hired after 12/31/2020

- 100% match up to 6% of salary

There are 3 ways to save in the National Life Group 401(k) Plan along with catch-up contributions.

- Pre-tax contributions that come out of your pay before taxes are deducted helping you save now.
- Roth after-tax contributions which come out of your pay after taxes have been withheld. These contributions aren't taxed when paid out at retirement and investment earnings may not be taxed.
- The plan also allows you to make traditional after-tax contributions in addition to pre-tax and Roth after-tax contributions for additional savings and for those unexpected emergencies. Matching contributions are not made on traditional after-tax contributions.
- Pre-tax and Roth Catch-up contributions are also available for anyone age 50 and older.

## Beneficiary Choices

Beneficiaries are elected and updated on the Total Retirement Platform. Beneficiaries should be reviewed and update as needed.

## Automatic Increase in Annual Contribution

You can hit your savings goal gradually with automatic enrollment in Contribution Accelerator. This service automatically raises your contribution rate 1% each March until it reaches 12%. You can opt-out of auto-escalation any time by going to the Prudential website.

## Self-Directed Brokerage

You also have more options when it comes to investing your National Life Group 401(k) account. The Self-Directed Brokerage Account provides participants significantly expanded investment choices in addition to the core investments in the plan. A \$50 annual account fee is charged for any open Self-Directed Brokerage Account, regardless of the account balance. The fee will be deducted from your Core Account balance.

Self-Directed Brokerage Account Eligibility Requirements:

- \$20,000 minimum account balance to open a Self-Directed Brokerage Account
- Initial transfer to the Self-Directed Brokerage Account of at least \$2,500 or more
- Subsequent transfers to your Self-Directed Brokerage Account of at least \$1,000 or more
- Minimum of 50% must remain in the Core Account at all times

The fee is not related to the transfer of or the trades within these accounts and is payable annually.

## Investment Choices

The National Life Group 401(k) plan provides multiple investment choices, including stocks, target dated funds, bonds, or money market investments. This flexibility allows you to spread your contributions, or diversify, among different types of investments, making your retirement portfolio less susceptible to market changes.

Consult with your financial adviser to help you determine how to best use your National Life Group 401(k) plan to prepare for your financial future.

## Retirement Platform

The National Life Group 401(k) Plan is administered by Prudential Retirement. You can go to their website ([prudential.com/online/retirement](https://prudential.com/online/retirement)) for helpful articles, planning tools, and calculators – and to make changes to your account at any time during the year. You can also call Prudential Retirement at 877-778-2100 for assistance.

\* Target Date Funds, or age-based funds, are designed to provide a simple investment solution through a portfolio with an asset allocation mix that becomes more conservative as your retirement date approaches. Mutual Funds are sold by prospectus. For more complete information, please download or request a prospectus from the retirement plan administrator. Please read it and consider carefully a Fund's objectives, risks, charges, and expenses before you invest or send money. The prospectus contains this and other information about the investment company. There is no guarantee that a "Target Date" investment will provide adequate retirement income. The participant may lose money by investing in target date funds, including losses near and following retirement.

# Educational Assistance

After three months of employment, the company will reimburse  $\frac{2}{3}$ , up to a maximum of \$5,250 per calendar year, for expenses incurred by an employee for continuing education through an accredited program that either offers growth in an area related to his or her current position or might lead to promotional opportunities.

Approved courses can include college credit courses, continuing education unit courses, seminars and certification tests. Participants must receive a "C-" or better for undergraduate courses and "B-" or better for graduate courses or obtain certification documenting successful completion of a course for non-graded courses to receive any reimbursement.

The company has also partnered with the University of Arizona Global Campus to provide a free college degree program and with Champlain College to assist employees in earning degrees at a reduced cost.

The University of Arizona Global Campus Leadership Grant enables employees accepted into the program to take as many courses per year as possible towards a degree. Employees may not incur any out-of-pocket expenses while pursuing either an under-graduate or graduate degree.

## NLGROUP UNIVERSITY

To enhance your learning experience, specific courses are available to assist in your skill building and professional development.

## LOMA'S FELLOW LIFE MANAGEMENT INSTITUTE (FLMI)

Employees have full access to the Life Office Management Association (LOMA) series of specialized life insurance courses leading to insurance industry designations and certifications, which are pre-paid 100% by NLGroup. The cost associated to any LOMA coursework counts toward the annual maximum of \$5,250.

## CLU, ChFC DESIGNATIONS

Through course study and testing, employees can earn:

- The Chartered Life Underwriter (CLU) designation, the highest level designation available in the life insurance profession
- The Chartered Financial Consultant (ChFC) designation, evidence of an extensive education in financial planning



## Adoption Assistance

National Life Group's Adoption Program provides reimbursement for certain expenses incurred in the adoption of children such as:

- Adoption agency fees
- Legal fees
- Maternity fees (child's natural mother)
- Temporary foster care charges (immediately preceding placement of the child with the adopting family)
- Other medical expenses as needed

All employees who have completed at least one year of service are entitled to a reimbursement of 80% of eligible charges that you are required to pay, up to a maximum benefit of \$2,000. Eligible charges include amounts for which the employee is personally liable as a result of the adoption in any of the categories previously mentioned.

Eligible expenses may be submitted to the People Center for reimbursement up to six months following the date the child has been placed in the home.



# TIME OFF

## Holidays

Employees are eligible for 9 paid holidays per year.

Days include:

- New Year's Day
- Martin Luther King Jr. Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas

## Combined Time Off

National Life uses a combined time off (CTO) program as opposed to traditional vacation and sick leave programs. Employees may use CTO for any purpose including vacations, unpaid holidays, illness or time away from work for personal or family matters.

Non-exempt employees accrue time, can carry over up to 40 hours to the next calendar year, and, should they decide to leave the company, will be paid any accrued, unused time in their final paycheck.

Years of Service	2022 CTO Days
0 to 2	22
3 to 5	24
6 to 10	26
11 to 15	28
16 & Up	30

Exempt employees have no maximum number of days, nor do they accrue time or have hours to roll over to the next calendar year. Should they decide to leave the company, they will not receive a payout of unused time.

## Volunteer Time

National Life encourages and supports participation in volunteer activities that align with the mission of National Life's Charitable Foundation and giving guidelines. Regular full and part-time employees may use up to 40 hours per year to volunteer in the community.

## Bereavement Leave

All benefit-eligible employees are given up to four days of paid time off due to the death of an immediate family member (spouse, parent, stepparent, sibling, child, stepchild, grandchild, and father/mother/son/daughter in-laws) and up to two days of paid time off due to the death of an extended family member (grandparent, aunt, uncle, niece, nephew, and first cousin).

## Other Types of Leave

Refer to page 42 and the leave of absence policies on NLToday for additional information on other types of leave including:

- Family Medical Leave Act (FMLA)
- Paid Parental Leave (including birth of a child)
- Paid Family Leave
- Military Leave

If you need to request a leave of absence call 802-229-3177 or send an email to [benefits@NationalLife.com](mailto:benefits@NationalLife.com)

## Paid Family Leave

After 12 months of employment and at least 1,250 hours worked, employees have access to six weeks of paid family time for a qualified Family and Medical Leave Act (FMLA) covered absence. Qualified absences include caring for a seriously ill family member and assisting a family member called for active duty.

## Paid Parental Leave

All employees are eligible for six weeks of paid leave to bond with a newborn, adopted, or newly placed child in your home.

Birth mothers are eligible for an additional six weeks of short term disability paid time off after the birth of a child. This time is in addition to the Paid Parental Leave for a total of 12 weeks of paid leave after the birth of a child.

## Family and Medical Leave Act (FMLA)

Under FMLA, employees can take up to 12 weeks of unpaid, job-protected leave during a 12-month period. Reasons for taking leave include birth of a child; placement for adoption or foster care; a serious health condition that makes the employee unable to perform ones job duties; to care for the employee's spouse, son or daughter, or parent who has a serious health condition.

Eligible employees with a spouse, child, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use FMLA entitlement to address certain qualifying exigencies.

Time does not have to be taken consecutively with the exception of the paid bonding time with a newborn or newly placed child.

## Mother's Room

National Life provides a spacious, private room to support women balancing their return to work with their needs as mothers of young children. The room offers a clean, secure, and comfortable environment for women who need to express breast milk during their work shift.

You may reserve space in the room by signing up with the People Center.

## Care@Work Backup Care

Backup Care is available using Care.com's vetted network of in-center child care facilities and in-home caregivers for children and adults. Backup Care is short-term care, when regular care is not available. National Life provides four subsidized back-up care days per year. Employee co-pays are \$6/hr for in-home Backup Care and \$10/day for in-center Backup Care. To register and sign up for back-up care, go to [NationalLife.care.com](https://www.NationalLife.care.com).



# Additional Programs/Services\*

## Lifestyle Improvement for Employees (LIFE) Program

- Promotes lifelong good health and encourages employees to take steps to improve or maintain their health and wellbeing
- Cardio room, weight room, aerobics studio and lockers at our Vermont location
- Workout facilities and fitness classes are available onsite at our Vermont and Texas locations. A small fee may apply for some classes. Open to all employees 7 days a week; 5am to 9pm
- On-site PAR course on the Vermont campus (walking trail through woods with workout stations), basketball hoop, horseshoe pit, volleyball court, and snowshoe trails
- The Vermont campus is certified as a Bicycle Friendly Business by the League of American Bicyclists. Covered bike parking, loaner bikes and a maintenance station for our bike commuters

## Alternative Transportation Program

- An incentive program to encourage employees to use alternate transportation to get to/from work

## Recreation Association

- Provides activities for employees and their family members
- Holiday parties, sporting events, trips to casinos, attractions and shows
- Obtain discounts from local merchants

## On-site Cafeteria on the Vermont campus

- Breakfast, lunch and snack items at reasonable prices

## Employee Appreciation Events

- Special events hosted by management to show appreciation for employee contributions to the company's success
- Includes barbecues, dinners, and ice cream socials

## Share the Good Campaign

- Thank the nonprofit organizations who support our communities by donating to them each year through our Share the Good Campaign
- National Life Group Foundation will match a maximum of \$2,000 of donations to up to three of your chosen nonprofit organizations
- You can have the donation deducted from your paycheck as a lump sum or in smaller increments throughout the year from each paycheck
- The campaign runs on an annual basis

## Attractions Club (ACLUB)

- A nationwide network of businesses offering discounts on travel, entertainment and attractions, including theme parks, movies, Las Vegas and Broadway show tickets, hotels, rental cars, and more
- Sign up at <http://aclub.deals/aclub-member-registration> with the access code: NATLLIFE

## Near-site Daycare

- A child care center is located near the Vermont campus providing a close and safe place for your children ages six weeks to Pre-K. Space availability is not guaranteed

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\* Not available at all locations

# National Life Product Employee Discounts

## National Life Insurance Products

Employees can purchase individual National Life Insurance Company insurance products with a 50% discount on first year premiums for the employee. Must be purchased with an agent licensed in VT and be on VT paper. Does not apply to LSW products. Voting member for the board must hold NLIC products.

## National Life Group Annuities

Employees can purchase annuity policies issued by either of National Life's insurance companies and receive the commission credited to the issued policy as a bonus. If you choose to work with an agent instead of purchasing directly, 50% of commission will be applied to you and 50% to the agent.

## Employee Only Annuity

SecurePlus Optimizer is a fixed indexed annuity available only to employees with special rates and convenient contributions via payroll deduction (made on a post tax basis).

Optional bonus Guaranteed Lifetime Income Rider available. Employees will receive a 10% bonus in the income calculation base on all contributions.

Enrollment is easy. Employees can print the application kit with instructions for state of residence directly from the employee portal. Completed applications are sent to Chris Newbern in the Addison office.

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SecurePlus Optimizer indexed annuity, form series 20082(0112), and Guaranteed Lifetime Income Rider, form series 20135, 20136 are issued by Life Insurance Company of the Southwest. Please refer to contract for product features, restrictions and limitations.

# Required Enrollment Notices

This section provides important information about your enrollment rights and protections.

## Notice of Special Enrollment Rights

Federal law allows special enrollment rights to allow you to elect health coverage or add dependents in the case of certain events:

### AFTER DECLINING HEALTH COVERAGE

If you decline enrollment for yourself or your dependents because you have other health insurance coverage, you may be able to enroll yourself and/or your dependents in company-sponsored coverage in the future provided you request enrollment within 31 days after your other coverage ends.

### NEW DEPENDENTS

If you acquire a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your new dependents provided that you request enrollment within 31 days after the marriage, birth, adoption or placement for adoption.

### LOSS OF COVERAGE FOR MEDICAID OR A STATE CHILDREN'S HEALTH INSURANCE PROGRAM

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children's health insurance program (CHIP) is in effect, you may be able to enroll yourself and your dependents if you or your dependents lose eligibility for that other coverage, provided you request enrollment within 60 days after your or your dependents' coverage ends under Medicaid or CHIP.

### ELIGIBILITY FOR MEDICAID OR A STATE CHILDREN'S HEALTH INSURANCE PROGRAM

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program (CHIP) with respect to coverage under the company's plans, you may be able to terminate your National Life coverage for yourself and your dependents, provided you request enrollment in the other plan within 60 days after your or your dependents' determination of eligibility for such assistance.

## Women's Health and Cancer Rights Act

The Women's Health and Cancer Rights Act requires group health plans that provide coverage for mastectomies to also cover reconstructive surgery and prostheses following mastectomies. This law mandates that a plan participant receiving benefits for a medically necessary mastectomy who elects breast reconstruction after the mastectomy, will also receive coverage for:

- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses
- Treatment of physical complications of all stages of mastectomy, including lymphedemas

Coverage will be provided in consultation with the attending physician and the patient, and will be subject to the same annual deductibles and coinsurance provisions that apply for the mastectomy.

## Your Privacy Rights

The Health Insurance Portability and Accountability Act (HIPAA) requires the federal government to issue national standards to protect the privacy of personal health information for purposes of treatment, payment, and healthcare operations.

The National Life health plans maintain a Notice of Privacy Practices that provides information to individuals whose protected health information (PHI) will be used or maintained by the plan. If you would like a copy of the Notice of Privacy Practice, contact the National Life Benefit Service Center at ext. 3066 / 802-229-3066.

## Genetic Information Nondiscrimination Act

The Genetic Information Nondiscrimination Act (GINA) was effective January 1, 2010. National Life is in compliance with GINA. GINA prohibits using genetic information to discriminate with respect to health benefits. Employer-sponsored group health plans and insurers are prohibited from:

- Restricting enrollment or adjusting premiums based on genetic information; and
- Requiring or requesting genetic information or genetic testing prior to, or in connection with, enrollment.

## Newborns' And Mothers' Health Protection Act (NMHPA)

Under federal law, group health plans and health insurance issuers offering group health insurance generally may not restrict benefits for any hospital length of stay in connection with childbirth for the mother or the newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, the plan or issuer may pay for a shorter stay if the attending physician (e.g., your physician, nurse, midwife, or a physician assistant), after consultation with the mother, discharges the mother or newborn earlier.

Also, under federal law, plans and issuers may not set the level of benefits or out-of-pocket costs so that any later portion of the 48-hour (or 96-hour) stay is treated in a manner less favorable to the mother or newborn than any earlier portion of the stay.

In addition, a plan or issuer may not, under federal law, require that a physician or other healthcare provider obtain authorization for prescribing a length of stay of up to 48 hours (or 96 hours). However, to use certain providers or facilities, or to reduce your out-of-pocket costs, you may be required to obtain precertification. For information on precertification, contact your plan administrator.

## The Impact of Purchasing Coverage Through the Marketplace

Our health coverage meets the minimum value standard, and the cost of our coverage to you is intended to be affordable (based on wages). Although our coverage is intended to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount. If you decide to shop for coverage in the Marketplace, [healthcare.gov](https://www.healthcare.gov), in Vermont [portal.healthconnect.vermont.gov](https://portal.healthconnect.vermont.gov), or in Texas [texashealth.org](https://www.texashealth.org) will guide you through the process.

If you choose to purchase health insurance through the Marketplace instead of electing the health insurance provided by your employer:

- You may lose your employer's contribution to your health insurance
- You may also lose any tax deductions from your employer contribution — in addition to your employee contributions to employer-sponsored coverage — on your Federal and State income taxes
- Payments to the Marketplace are made on an after-tax basis

## Consolidated Omnibus Budget Reconciliation Act (COBRA)

The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives you and your dependents the right to temporarily continue healthcare coverage for a period of time if your National Life coverage ends due to a qualifying event such as termination of employment.

**You will receive an initial COBRA notice when you are first hired, as required by federal law. If you leave National Life employment or experience a COBRA qualifying event, you will receive a more detailed COBRA notice with information on how to continue coverage and the cost of continuation coverage from the National Life Benefit Service Center.**

## Summary of Benefits and Coverage Notice

You can find information on all of our plans in the format required by the Affordable Care Act (called Summary of Benefits and Coverage, or SBC), on the National Life Benefit enrollment website at [www.NationalLife.HRIntouch.com](https://www.NationalLife.HRIntouch.com) or [today.NationalLife.com/benefits](https://today.NationalLife.com/benefits). These summaries may be helpful to provide more information about National Life benefits, or to compare our plans to others, such as plans available to you through your spouse's employer.

# Important Contact Information

If you have questions regarding your eligibility or have general benefit questions, please call the National Life Benefit Service Center by phone at ext 3066 or 802-229-3066 or send an email to [yourbenefits@NationalLife.com](mailto:yourbenefits@NationalLife.com). You may also contact the carrier directly. See below for carrier contact information.

Benefit	Carrier	Telephone	Website	Group #
Medical Plans / Dental Plans	Cigna	800-244-6224	<a href="http://www.mycigna.com">www.mycigna.com</a>	3209368
Health Savings Account	HSA Bank	866-494-2111	<a href="http://www.mycigna.com">www.mycigna.com</a>	
Health Reimbursement Account	Cigna	800-244-6224	<a href="http://www.mycigna.com">www.mycigna.com</a>	
Health/Dependent Care FSA	Cigna	800-244-6224	<a href="http://www.mycigna.com">www.mycigna.com</a>	
Critical Illness	Cigna	800-754-3207	<a href="http://www.cigna.com">www.cigna.com</a>	960121
Accidental Injury Insurance	Cigna	800-754-3207	<a href="http://www.cigna.com">www.cigna.com</a>	960110
Hospital Care Insurance	Cigna	800-754-3207	<a href="http://www.mycigna.com">www.mycigna.com</a>	HC960559
Vision Plan	VSP	800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>	30017510
Life Insurance	National Life Group	802-229-3066	<a href="http://www.NationalLife.com">www.NationalLife.com</a>	
Accidental Death & Dismemberment	AIG	800.551-0824		PAI9121587
Long Term Disability Insurance	Reliance	800-351-7500	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>	122310
Legal Services and Theft Protection	LegalShield	866-288-5229	<a href="http://www.legalshield.com/info/nationallifebd">www.legalshield.com/info/nationallifebd</a>	
Employee Assistance Program	Cigna	800-244-6224	<a href="http://www.mycigna.com">www.mycigna.com</a>	nationallife
Pet Insurance	Nationwide Pet	877-738-7874	<a href="http://www.petsnationwide.com">www.petsnationwide.com</a>	
Virtual Care	MDLIVE	888-726-3171	<a href="http://www.mdliveforcigna.com">www.mdliveforcigna.com</a>	
Retirement/Deferred Comp	Prudential	877-778-2100	<a href="http://www.prudential.com/online/retirement">www.prudential.com/online/retirement</a>	

## Thank You for Being Part of Our Team!

We are very excited that you are part of our team! We look forward to working with you on your journey at National Life Group. If you need additional assistance or have further questions on your benefits, please contact

National Life  
Benefit Service Center at  
802-229-3066 or  
[YourBenefits@NationalLife.com](mailto:YourBenefits@NationalLife.com)