



# Employee Benefits

## Marco Region Enterprises



*"An Extraordinary Advantage"*



# Health Plans

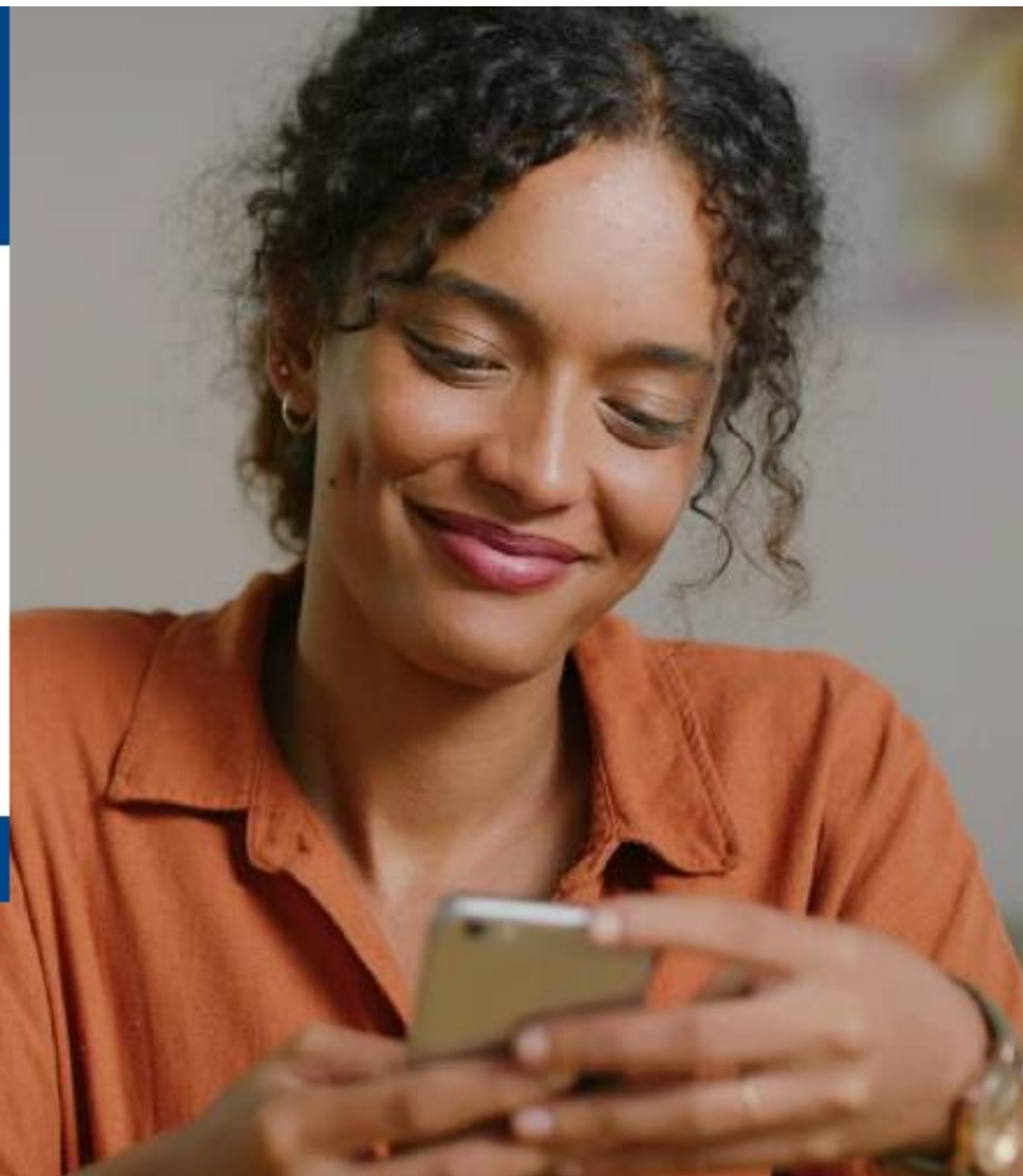


# 24/7 Nurse Chat

Not feeling well? Our Nurse Chat feature is just a few clicks away.

- Chat with a registered nurse from the safety of your home
- Can help with health concerns related to urgent care (cough, pink eye, fever, sore throat, etc)
- Secure and confidential
- Available 24/7
- FREE with your plan

Visit [horizonblue.com/group](https://horizonblue.com/group) or download the Horizon Blue App\*



# Horizon CareOnline<sup>SM</sup>

Horizon CareOnline gives you 24/7/365 access to U.S. board- certified doctors via video and phone from the comfort of your home. No appointment needed.

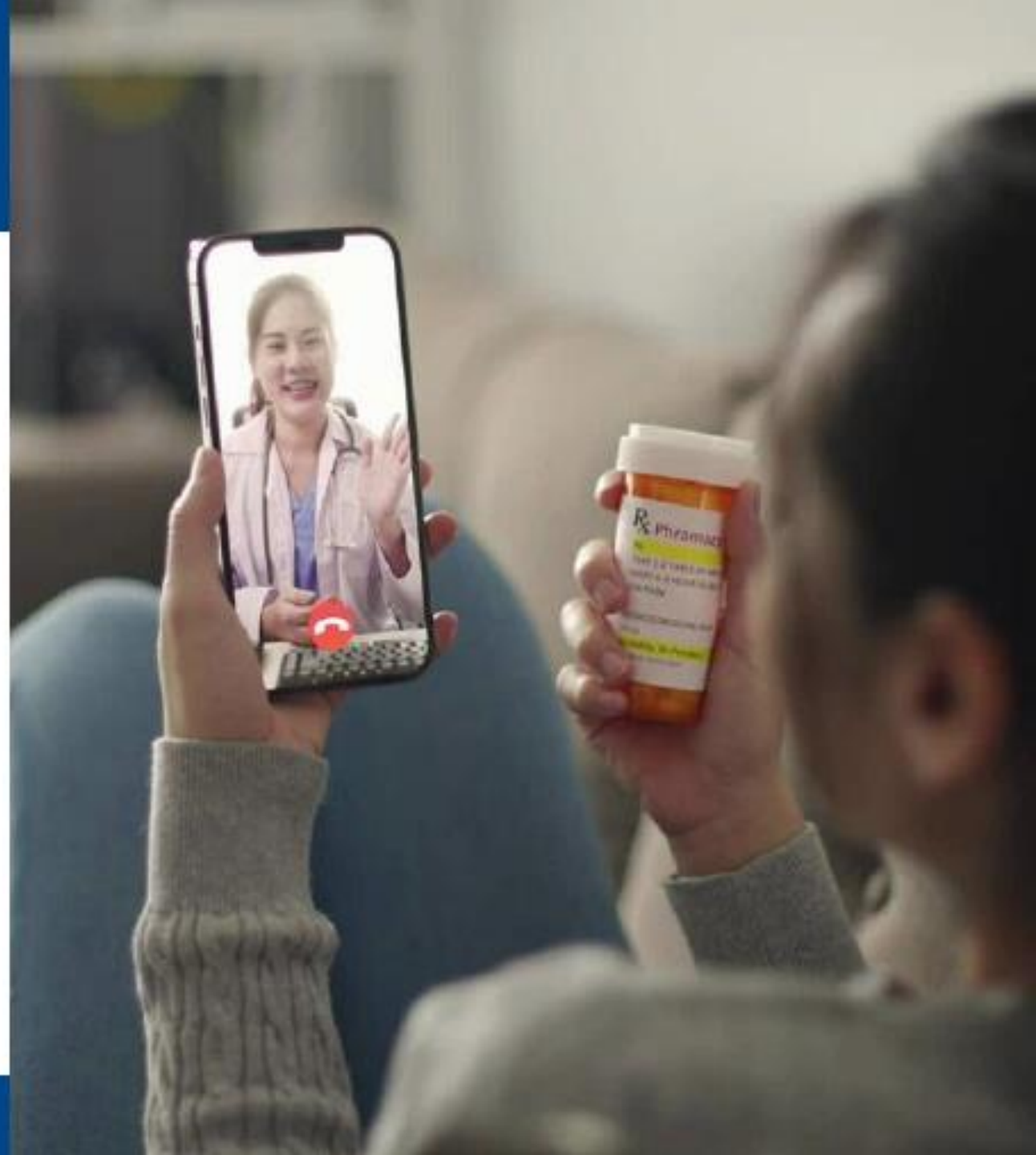
Get treated for common health conditions, including:

- Colds and flu
- Abdominal pain
- Fever
- Sinusitis
- Skin irritations

You can also see behavioral health specialists by appointment from 7 AM to 11 PM, for conditions such as:

- Anxiety
- Bipolar disorder
- Attention deficit hyperactivity disorder (ADHD)
- Depression

Visit [horizonblue.com/group](https://horizonblue.com/group) or download the Horizon Blue App\*





A man with short brown hair, wearing a blue short-sleeved shirt and black shorts, is running on a treadmill in a gym. He is wearing yellow earbuds and has a blue towel draped over his left shoulder. The background shows other gym equipment and a red wall.

# Blue365® Healthy Discounts

Get free access to exclusive health and wellness discounts from top national and local retailers.

With Blue365, you can save on:

- Cookbooks, meal plans and nutrition programs
- Fitness clothing and equipment
- Child safety products
- Health magazines
- Glasses and contacts
- And much more!



# Identity Protection Services

As a Horizon member, you have access to identity protection services from Experian to help keep your information safe.

- Experian IdentityWorks
- Experian credit report at sign-up
- Credit monitoring
- Internet surveillance
- Up to \$1 million identity theft insurance

## **Experian Identity Restoration**

If you become a victim of identity theft, a dedicated investigator from Experian will act as your guide and advocate from start to finish

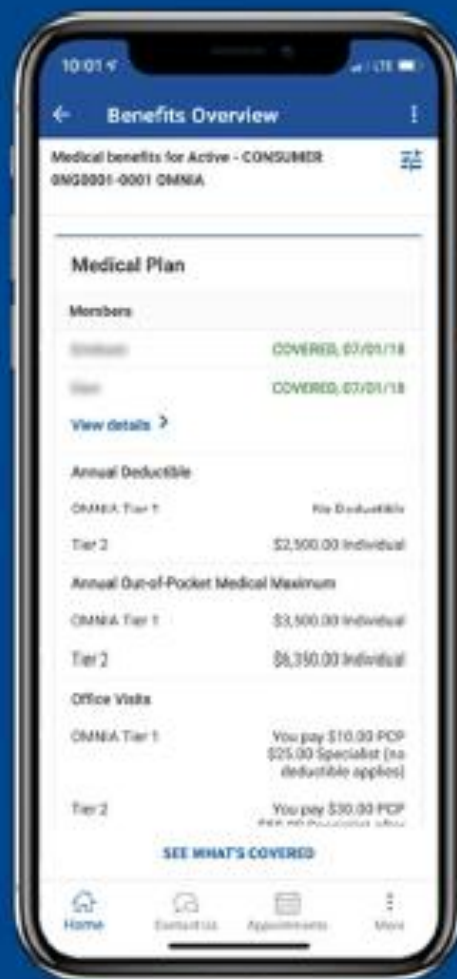


# Horizon Blue App

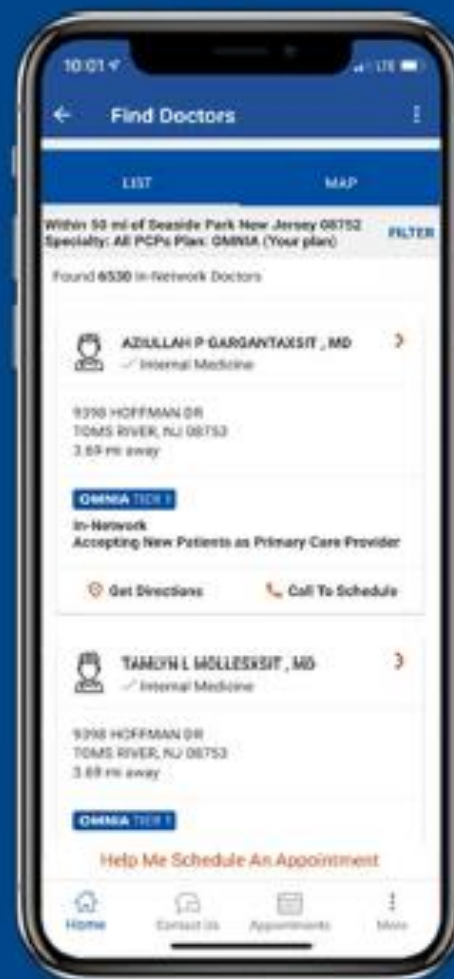
## Digital ID Cards



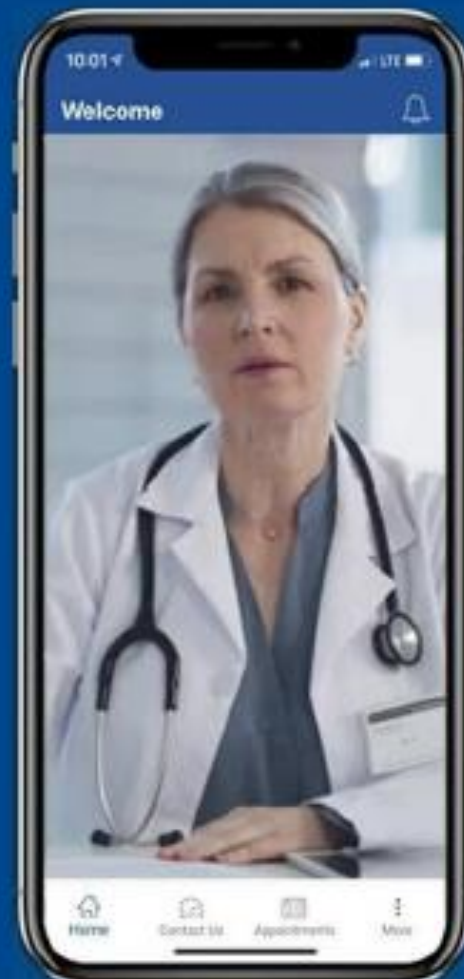
## Benefits, Claims, and more



## Doctor Finder with GPS Directions



## Telemedicine





## Your Benefits



# Horizon EPO EE \$1,500 Plan

BENEFIT CATEGORY	IN-NETWORK
Deductible (Ind/Fam)	<b>\$1,500 / \$3,000</b>
Coinsurance	<b>70%</b>
Out-of-Pocket Limit (Ind/Fam)	<b>None</b>
Total Maximum Out-of-Pocket (TMOOP)	<b>\$4,000 / \$8,000</b>
Primary Care Office Visit	<b>\$20 Copay</b>
Specialist Office Visit	<b>\$40 Copay</b>
Virtual Visit	<b>\$15 Copay</b>
Preventive Care	<b>100% Covered</b>
Urgent Care	<b>\$40 Copay</b>
Emergency Room Services	<b>You pay 30% after \$100 Copay</b>
Hospital Services Inpatient and Outpatient	<b>You pay 30% after deductible</b>

# Horizon Omnia 11 Plan

BENEFIT CATEGORY	Level 1	Level 2
Deductible (Ind/Fam)	\$,1500 / \$3,000	
Coinsurance	700%	
Out-of-Pocket Limit (Ind/Fam)	None	
Total Maximum Out-of-Pocket (TMOOP)	\$4,000 / \$8,000	
Primary Care Office Visit	\$20 Copay	
Specialist Office Visit	\$40 Copay	
Virtual Visit	You pay \$0 after deductible	
Preventive Care	100% Covered	
Urgent Care	\$40 Copay	
Emergency Room Services	You pay 30% after \$100 Copay	
Hospital Services Inpatient and Outpatient	You pay 30% after deductible	



# Horizon EPO GE \$2,500 Plan

BENEFIT CATEGORY	IN-NETWORK
Deductible (Ind/Fam)	<b>\$2,500 / \$5,000</b>
Coinsurance	<b>50%</b>
Out-of-Pocket Limit (Ind/Fam)	<b>None</b>
Total Maximum Out-of-Pocket (TMOOP)	<b>\$9,100 / \$18,200</b>
Primary Care Office Visit	<b>\$50 Copay</b>
Specialist Office Visit	<b>\$75 Copay</b>
Virtual Visit	<b>\$15 Copay</b>
Preventive Care	<b>100% Covered</b>
Urgent Care	<b>\$75 Copay</b>
Emergency Room Services	<b>You pay 50% after \$100 Copay</b>
Hospital Services Inpatient and Outpatient	<b>You pay 50% after deductible</b>

# Rx Benefits: Two ways to get your prescriptions



## Retail (31-day supply)

- \$15 generic copay
- \$50 formulary brand copay
- \$75 non-formulary brand copay



## Mail order (90-day supply)

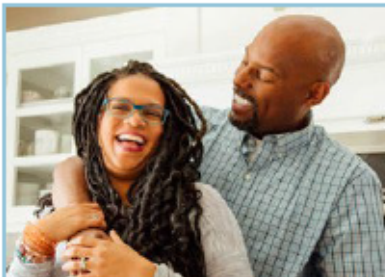
- \$35 generic copay
- \$125 formulary brand copay
- \$200 non-formulary brand copay



# Dental and Vision



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# Horizon Dental Option Plan (DOP)

100/80/50, \$50 Deductible, \$2,500 Annual Max, \$1,500 Ortho

Coverage Type	In Network	Out of Network
<b>Preventive</b> (cleanings, oral exams, bitewing X-rays)	100%	100%
<b>Basic</b> (fillings, extractions)	80%	80%
<b>Major</b> (bridges, dentures, crowns, implants)	50%	50%
<b>DEDUCTIBLE</b>		
<b>Basic &amp; Major Deductible</b> Does not apply to preventive/diagnostic Combined in- and out-of-network	\$50/\$150 Individual/Family	\$50/\$150 Individual/Family
<b>Annual Maximum per Calendar Year</b> Combined in- and out-of-network	\$2,500	\$2,500
<b>Orthodontia</b> Combined in- and out-of-network	50% / Up to \$1,500 lifetime maximum	50% / Up to \$1,500 lifetime maximum
<b>Benefit Waiting Period</b>	None	None



# HORIZON EXPANSE VI

(Horizon/Davis Vision View Network)



## COVERED SERVICES AND HARDWARE

Eye examination including dilation (when professionally indicated)	Once every 12 months
Contact lens evaluation, fitting and follow-up care	Once every 12 months
Spectacle Lenses	Once every 12 months
Contact lenses (in lieu of eyeglasses)	Once every 12 months
Frame	Once every 24 months

## COPAYMENTS

Eye Examination	\$10
Spectacle Lenses	\$25
Contact lens evaluation, fitting and follow-up care	\$0 <sup>1</sup>

## EYEGLASS BENEFIT — FRAME, MEMBER CHARGES

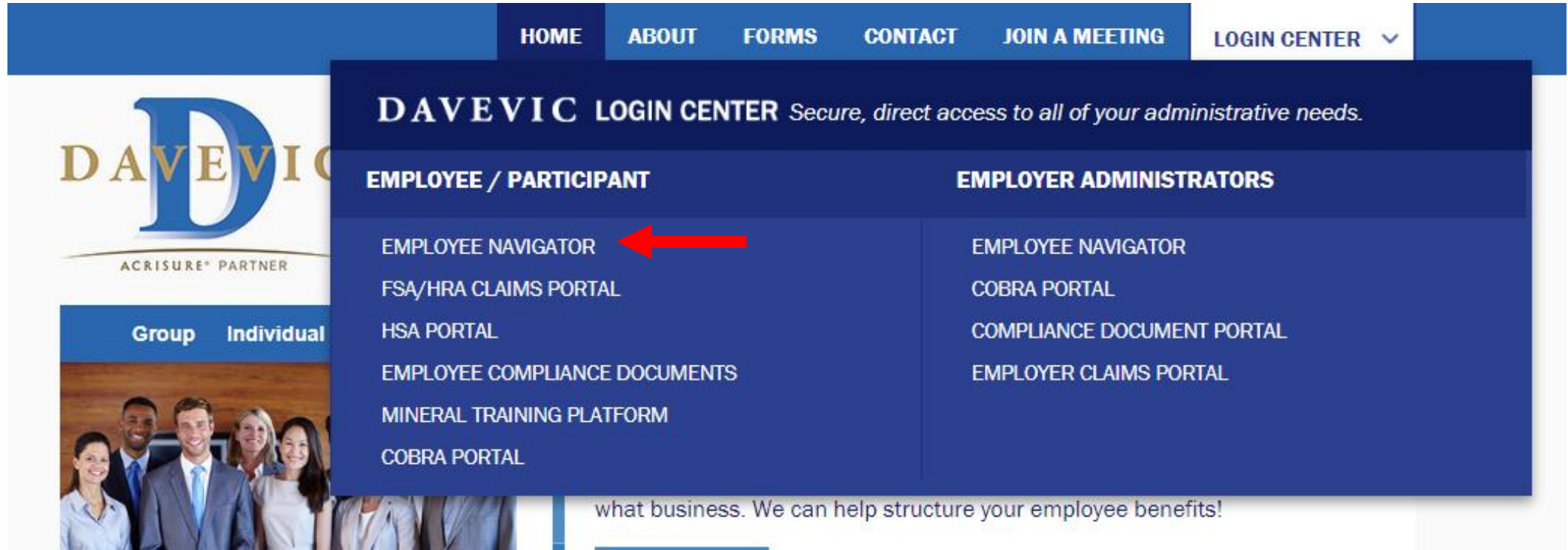
Non-collection frame allowance (retail)	Up to \$150 or \$200 <sup>2</sup> plus a 20% discount on any overage <sup>3</sup>
Davis Vision Frame Collection <sup>4</sup> (in lieu of allowance): Fashion level / Designer level / Premier level	Included

# Employee Navigator



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# How Do I Enroll?



The screenshot displays the Davevic website's navigation structure. At the top, a blue header contains links for HOME, ABOUT, FORMS, CONTACT, JOIN A MEETING, and LOGIN CENTER (with a dropdown arrow). Below this, the Davevic logo is shown with the text "ACRISURE® PARTNER". To the right of the logo, a dark blue box titled "DAVEVIC LOGIN CENTER" contains the tagline "Secure, direct access to all of your administrative needs." Below this box, two columns of links are presented: "EMPLOYEE / PARTICIPANT" and "EMPLOYER ADMINISTRATORS". A red arrow points to the "EMPLOYEE NAVIGATOR" link in the "EMPLOYEE / PARTICIPANT" column. Below the links, a photo of a diverse group of people is visible, along with the text "what business. We can help structure your employee benefits!"

**DAVEVIC LOGIN CENTER** *Secure, direct access to all of your administrative needs.*

EMPLOYEE / PARTICIPANT	EMPLOYER ADMINISTRATORS
EMPLOYEE NAVIGATOR	EMPLOYEE NAVIGATOR
FSA/HRA CLAIMS PORTAL	COBRA PORTAL
HSA PORTAL	COMPLIANCE DOCUMENT PORTAL
EMPLOYEE COMPLIANCE DOCUMENTS	EMPLOYER CLAIMS PORTAL
MINERAL TRAINING PLATFORM	
COBRA PORTAL	

what business. We can help structure your employee benefits!



# Online Enrollment

## Personal Information

First Name

Adam



Middle Name

Last Name

Seger

Suffix

--Select--



Preferred Name

Seegs

Sex

☒ Male

☐ Female

Gender Identity

☐ Male

☐ Female

☐ Non-Binary

Date of Birth

January

1

1980

SSN

\*\*\*-\*\*-2222

Tobacco User

☐ Yes

☐ No

Phone Number

724-458-72585

Work Email


aseger@davevic.com

Primary Email

Personal Email

# Online Enrollment

Dependent Information

[Add dependent +](#) 

	Name	Sex	DOB	SSN	Relationship
<a href="#">Edit</a>	Test Spouse	F	01/01/1992	***-**-6666	Spouse
<a href="#">Edit</a>	Test Child	F	01/01/2021	***-**-4444	Child
<a href="#">Edit</a>	New Child	F	01/01/2021	***-**-9999	Child
<a href="#">Edit</a>	TEst Child3	F	02/27/2023	<input type="text"/>	Child

[Save & Continue](#)

# Online Enrollment

## Who am I enrolling?

- ☐ Myself
- ☐ Select All
- ☐ Test Spouse (Spouse)
- ☐ Test Child (Child)
- ☐ New Child (Child)
- ☒ TEst Child3 (Child)

## Which plan do I want?



Cost per pay  
period

Effective on 05/01/23  
Employee + Child

Compare

Details

Selected



Cost per pay  
period

Effective on 05/01/23  
Employee + Child

Compare

Details

Select

# Review

## Enrollment Summary

[Print](#)

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.



### Signature required

You've elected all your benefits, but we still require a signature before advancing.

### Please review the acknowledgment below.

As an eligible employee, I acknowledge that I understand the benefits, rights, and obligations available to me under the plan. I certify the facts contained in this summary are true and complete to the best of my knowledge. I understand that deductions can be made on a pre-tax or post-tax basis. Furthermore, I understand that elections for plans that are deducted on a pre-tax basis cannot be changed during the plan year unless I experience a Qualified Life Event.



Sign to complete enrollment

[Click to Sign](#)

## Enrollment Summary

[Print](#)

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.



### Acknowledged and Submitted

Enrollment completed on Thursday, March 23, 2023 8:40 AM



# Open Enrollment Changes Effective December 1, 2024

- **Log into Employee Navigator**
- **Enroll or terminate individual and/or dependent coverage in your insurance benefit plans now.**
- **Complete Enrollment by: November 24th**



**THANK YOU FOR YOUR ATTENTION!**

Toll-free 800-854-4099 - [www.davevic.com](http://www.davevic.com)