



2025
Employee
BENEFITS GUIDE



Welcome!

We are glad you are part of the team. At Clarity Credit Union, we're committed to providing you with a comprehensive and competitive benefits program.

Inside this guide you can check out the plans that are available to you for the 2025 plan year. When you make your choices, take into account any upcoming changes to your health care needs. This will help you choose the right plans for you and your family.

Whether you're just joining the Clarity team or have been with us for a while, we sincerely encourage you to use the benefit plans available to you to improve your overall health and well-being. Get started by using this guide to help you make informed choices during your enrollment.

Whenever you'd like more details, visit our HR/Benefits website — it's available to you 24 hours a day, 7 days a week. You can also get in touch with HR/Benefits by phone or email during normal business hours.

We hope you take advantage of all your benefits for a healthy and happy 2025!



HR/Benefits Website
teamcreativa.com/claritycreditunion



HR/Benefits Phone
Cindy Hodges: 208.318.0445



HR/Benefits Email
HR@ClarityCU.com



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2025 HIGHLIGHTS

Employee Contributions

Dependent Medical Premiums
Good news! Clarity will now cover 50% of your dependent medical premium.

- 100%** employee medical premium
- 50%** dependent medical premium

Dental premiums for dependent coverage are increasing slightly. Clarity will continue to cover 100% of your employee dental premium.

Vision, life, accident and disability premiums remain the same as 2024. Clarity will continue to cover 100% of your employee vision premium.

Health Savings Account

New Contribution Limit

- \$4,300/year** individual coverage
\$150 more than in 2024
- \$8,550/year** family coverage
\$250 more than in 2024

HSA Company Contribution

- \$3,200/year**
Eligibility restrictions apply

Medical Plan

No Change to Deductible and Out-Of-Pocket Maximum

- \$3,700/year** individual coverage
Same as 2024
- \$7,400/year** family coverage
Same as 2024

401(k)

New Contribution Limit

- \$23,500/year**
\$500 more than in 2024

Plan Administration & Recordkeeping

- Voya Mutual Group**
Plan # 664F9R

YOUR OPTIONS AT A GLANCE

You are eligible to participate in the health and welfare employee benefit plans if you are regularly scheduled to work 30 or more hours per week. Below is a quick summary of the benefits that you can enroll in.



MEDICAL PLAN

- HDHP HSA Plan



CALM PREMIUM SUBSCRIPTION



HEALTH SAVINGS ACCOUNT¹



LIFE AND ACCIDENT PLANS

- Basic Life
- Basic AD&D
- Optional Life (Employee, Spouse/DP and Children)
- Optional AD&D (Employee, Spouse/DP and Children)



DENTAL PLAN

- Dental PPO



401(k) PLAN³



VISION PLAN

- Vision Plan



VOLUNTARY PLANS (AFLAC)⁴

- Accident Indemnity Advantage
- Cancer Indemnity
- Critical Illness
- Hospital Indemnity Advantage
- Specified Disease Event Protection
- STD Insurance



DISABILITY PLANS

- Extended Sick Leave ²
- Short Term Disability
- Long Term Disability



DISCOUNT PROGRAM

- TicketsatWork



VOLUNTARY PET INSURANCE⁴



EMPLOYEE ASSISTANCE PROGRAM (EAP)

¹ If you enroll in the HDHP HSA Plan, you may also be eligible to enroll in and make pretax contributions to a health savings account. Refer to pages 10-11.

² The eligibility rules for our Extended Sick Leave Plan are different than the eligibility rules applicable to the other health and welfare plans. Refer to page 21 for more information.

³ The eligibility rules for our 401(k) Plan are different than the rules applicable to the health and welfare plans. Refer to page 32 for more information.

⁴ This program is completely voluntary and not sponsored or endorsed by Clarity Credit Union. Employees pay 100% of the premiums. Please review the insurance materials carefully before enrolling.

ELIGIBILITY AND ENROLLMENT

Clarity Credit Union offers an array of health and welfare benefits, including:

- Medical Insurance
- Health Savings Account
- Dental Insurance
- Vision Insurance
- Disability Insurance
- Life and Accident Insurance
- Employee Assistance Program

Some benefits are paid entirely by Clarity Credit Union. Other benefits require that you share in the cost for your coverage. In addition to the traditional health and welfare plans, Clarity Credit Union also provides you with a 401(k) plan, several voluntary plans, paid time off and holidays.

Refer to the applicable sections of this guide for more details about each plan. If you have questions or require additional information, contact HR/Benefits or refer to the section titled “Important Phone Numbers and Websites” on page 35.



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teamcreativa.com/claritycreditunion



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BENEFIT PLAN ELIGIBILITY

You are eligible to participate in the health and welfare employee benefit plans if you are regularly scheduled to work 30 or more hours per week.

You are not eligible for the employee benefit plans if you are:

- An employee who is not regularly scheduled to work 30 or more hours per week
- An individual who has signed an agreement, or has otherwise agreed, to provide services to Clarity Credit Union as an independent contractor, regardless of the tax or other legal consequences of such an arrangement
- A leased employee compensated through a leasing entity, whether or not you fall within the definition of leased employee as defined in Section 414(n) of the Internal Revenue Code (IRC)
- An employee who is classified as temporary or casual

Certain plans also permit you to cover your eligible dependents, which include your:

- Legal spouse (unless legally separated) or same/opposite sex domestic partner (DP)
- Your child who is less than age 26, including:
 - Biological child
 - Stepchild
 - Legally adopted child
 - A child who has been placed with you in anticipation of adoption

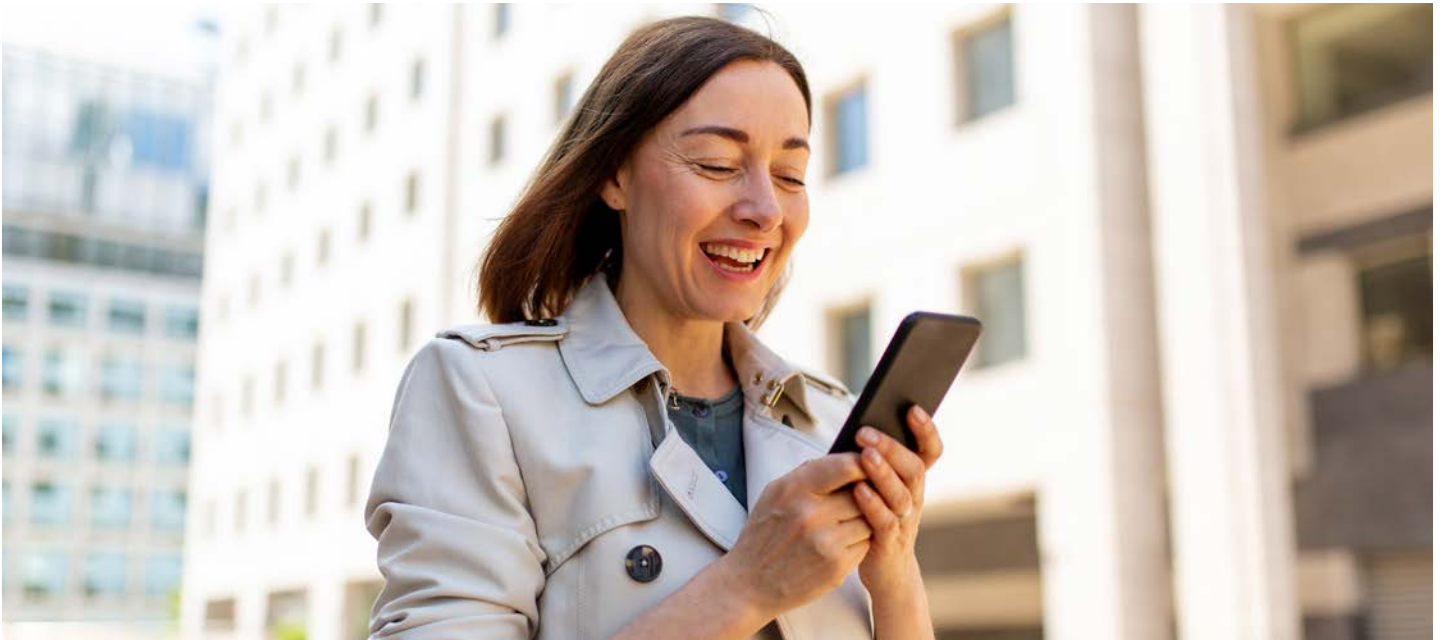
In addition, you can also cover the following dependents if they are claimed as your dependent for federal income tax purposes:

- Your domestic partner's child¹
- A child for whom you are the legal guardian/legal custodian

¹ Special guidelines apply when covering a domestic partner or the child of a domestic partner. Refer to the Domestic Partner Qualifications and Guidelines on the HR/Benefits website for additional information.

Your dependent children who are age 26 or over and physically or mentally incapable of self-support may continue coverage under medical, dental and vision plans beyond age 26 if they remain totally incapacitated and dependent on you for support. Contact HR/Benefits for additional information.

ELIGIBILITY AND ENROLLMENT



INITIAL ELIGIBILITY PERIOD

You have 30 days to enroll yourself and your eligible dependents for coverage. This 30-day initial eligibility period begins on your employment date and ends 29 days after that date. If your enrollment is not completed on or before the end of your initial eligibility period:

- You will have to wait until the next Open Enrollment period to change your benefit elections, except as summarized in the section titled *“Making Changes During the Year.”*
- You will be automatically enrolled in the benefit plans that are paid in full by Clarity Credit Union (Basic Life, Basic AD&D, LTD, EAP)

Special enrollment rules apply if you terminate employment and are then rehired. Contact HR/Benefits for additional information.

For example: If you are hired on April 2, 2025, your initial eligibility period begins on April 2, 2025 and ends on May 1, 2025. Your benefit plan elections made during this period will be generally effective May 1, 2025, subject to you providing proper documents as required under the plans.

HOW TO ENROLL

Enrolling into the benefit programs is easy! Shortly after you are hired, you will receive a benefits package. This benefits package will provide you with all the information you need to enroll for benefits.

Keep in mind that if you are enrolling any dependents, you will need their full name, Social Security number, date of birth and any other documentation required by our various insurance carriers.

If you need assistance enrolling for benefits, contact HR/Benefits via phone during normal business hours and via email anytime to assist you with your HR and benefits questions.

WHEN COVERAGE BEGINS

The table on the next page shows the dates your coverage will be effective under the various benefit plans for:

- Newly hired employees
- Employees who experience a qualifying event
- Changes made during the Open Enrollment period

For more details on when coverage begins for a specific employee benefit plan, refer to the applicable section of this guide.

ELIGIBILITY AND ENROLLMENT

Effective Date of Coverage for Selected Events			
Plans	New Hire Enrollment	Qualifying Event (Reported within 30 days)	Open Enrollment
Medical, Dental, Vision and Health Savings Account	First day of the month following date of hire (enrollment required)	First day of the month following qualifying event (birth or adoption is date of qualifying event)	January 1 following Open Enrollment period
Short Term Disability	First day of the month following date of hire (enrollment required)	Not applicable	January 1 following Open Enrollment period; subject to insurance company EOI approval
Long Term Disability	First day of the month following date of hire (automatic enrollment)	Not applicable	Not applicable
Basic Life and AD&D	First day of the month following date of hire (automatic enrollment)	Not applicable	Not applicable
Optional Life and AD&D – Employee	If coverage elected is \$50,000 or less, first day of the month following date of hire (enrollment required) If coverage elected is more than \$50,000, coverage in excess of \$50,000 is effective on the date approved by the insurance company (enrollment required)	First day of the month following qualifying event, subject to insurance company EOI approval	January 1 following Open Enrollment period, subject to insurance company EOI approval
Dependent Life and AD&D – Spouse/DP	If coverage elected is \$25,000 or less, first day of the month following 30 days of employment (enrollment required) If coverage elected is more than \$25,000, coverage in excess of \$25,000 is effective on the date approved by the insurance company (enrollment required)	First day of the month following qualifying event, subject to insurance company EOI approval	January 1 following Open Enrollment period, subject to insurance company EOI approval
Dependent Life and AD&D – Child(ren)	First day of the month following date of hire (enrollment required)	First day of the month following qualifying event	January 1 following Open Enrollment period
Employee Assistance Program (EAP)	First day of the month following date of hire (automatic enrollment)	Not applicable	Not applicable
Voluntary Benefits	Varies based on date of enrollment (contact Aflac for more information)	Varies based on date of enrollment (contact Aflac for more information)	January 1 following Open Enrollment period
401(k)	On January 1, April 1, July 1, or October 1 immediately following 12 months of service and having worked 1,000 hours	Not applicable	Not applicable

The effective dates shown in this table assume enrollment has been completed timely and any required paperwork or documentation has been provided. If you complete your enrollment after your effective date of coverage, retroactive payroll deductions will be calculated and withheld from your first paycheck after elections are made. It is for this reason you should enroll early to avoid retroactive payroll deductions. If any enrollments require evidence of insurability (EOI), the effective date of coverage will be the date the insurance company approves insurability. The effective date of coverage may also be delayed due to the actively at work or confinement for care provisions of the plans.

ELIGIBILITY AND ENROLLMENT

MAKING CHANGES DURING THE YEAR

Generally, after you have made your benefit plan elections, you may change those elections only during the next Open Enrollment period.

However, if you experience a qualifying event or other allowable event during the year, you may change certain benefit plan elections before the next Open Enrollment period. You must properly advise HR/Benefits (along with providing the required supporting documentation) and make the change using the change request form within 30 days of the event (date of event plus 29 days) in order for your mid-year change to be approved.

Your new election must be directly related to the event and must correspond with a gain or loss of coverage. A qualifying event is defined as an event that results in the gain or loss of eligibility by you or your dependents. For example:

- A change in legal marital status
- A change in number of dependents
- A change in employment status
- Your dependent satisfies or ceases to satisfy the requirements for dependents, including a domestic partner or domestic partner's child
- A change in residence or worksite by you or your dependent that causes a loss or gain of coverage

The rules regarding changes after your new hire enrollment and the Open Enrollment period are very specific; therefore, you should refer to the information provided on the HR/Benefits website or contact HR/Benefits if you require assistance.



Special Enrollment Rules

If you originally declined medical, dental or vision coverage because you had other health coverage, you may be eligible to change your elections under the following circumstances:

- If the other coverage was COBRA and it is now exhausted; or
- The other coverage was not COBRA and either the coverage terminated due to loss of eligibility or employer contributions toward such coverage terminated; loss of eligibility includes legal separation, divorce, termination of domestic partner status, death or termination of employment
- The other coverage was Medicaid or state Child Health Insurance Program (CHIP) and coverage terminated due to loss of eligibility
- You or your dependent becomes eligible for state premium assistance under a Medicaid or CHIP plan (This is an optional state program under Medicaid or CHIP that pays the employee's share of the premium for group health plan coverage)

If your dependents also had other health coverage and lost that coverage in the above situations, they may be added to your coverage. However, you will not be able to add yourself or your dependents to this coverage if the other coverage was terminated for cause (including failure to timely pay the required premiums).

In addition to the changes described above, you may enroll yourself and your spouse/DP (with or without the new dependent) in medical, dental, vision, life and accident coverage following marriage or the adoption, placement for adoption or birth of a child. You must be enrolled in order to cover your dependents.

ELIGIBILITY AND ENROLLMENT

Special Enrollment Procedure

You must enroll for coverage within 30 days of the special enrollment event (60 days for CHIP) by requesting a change request form and making the appropriate change. Supporting documentation must be sent to HR/Benefits.

If you enroll and provide any required documentation within this period, the effective date of coverage will be on the first day of the month following the date of the qualifying event (for birth or adoption, the effective date is the date of the birth or adoption). Your employee contributions will be deducted retroactive to the date of the special enrollment event.

If you do not enroll and provide supporting documentation within 30 days of the special enrollment event (60 days for CHIP), you may not enroll until the next Open Enrollment period.

For more information on how your benefits are affected by these life changes, contact HR/Benefits.



WHEN COVERAGE ENDS

The following table shows the dates your coverage ends under the various employee benefit plans:

Benefit Plans	Last Day of Coverage
Medical	The last day of the month in which your employment or benefits eligibility ends
Dental	
Vision	
Employee Assistance Program	
Short Term Disability	The last day of employment or benefits eligibility ends
Long Term Disability	
Life and Accident	
401(k)	
Voluntary Plans	

Coverage for your dependents will end on the date your dependent no longer meets the definition of an eligible dependent or when your coverage ends, whichever occurs first. Premiums for the last month of coverage are not prorated even if coverage ends prior to the end of a month.

Under certain circumstances, you may be able to continue certain benefit coverage (medical, dental, vision and EAP) for yourself and your dependents through COBRA. You may also be able to convert or port the life, accident and voluntary plans, as permitted by the insurance companies. COBRA HSA participants are not eligible to receive Company funding.

MEDICAL

The medical plan is designed to help protect you and your covered dependents against financial loss by paying for a substantial portion of eligible expenses incurred for medically necessary care and treatment.

The HDHP medical plan is insured by Blue Cross of Idaho (BCI).

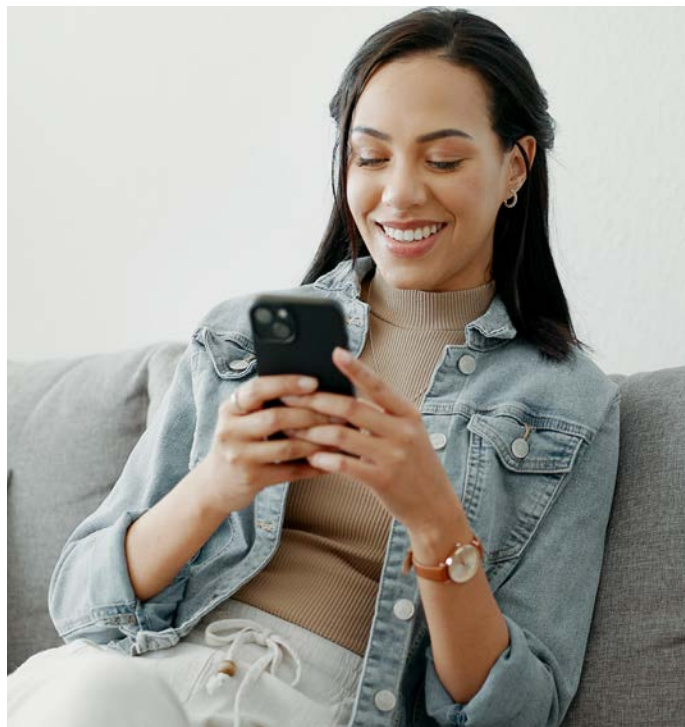
- If you enroll for coverage within your initial eligibility period, your coverage will be effective on the first day of the month following your date of hire
- If you do not enroll for coverage within your initial eligibility period, you may enroll for coverage during the next Open Enrollment period or in accordance with the section titled *“Making Changes During the Year”*

Your Cost

Clarity Credit Union and you share the cost of medical coverage. Your cost is generally deducted from your pay on a pretax basis. (Contributions for domestic partners are generally deducted on an after-tax basis, unless otherwise permitted by state or federal law.) Refer to the section titled *“Employee Contributions”* for the applicable cost.

Summary of Benefits and Coverage

The Patient Protection and Affordable Care Act (also known as Health Care Reform) requires that plans provide a Summary of Benefits and Coverage (SBC). The SBC is designed to help you understand and evaluate your health plan choices. You can download the SBC from the HR/Benefits website or contact HR/Benefits and request a copy be sent to you.



HDHP

A high deductible health plan (HDHP) is a high deductible PPO plan that meets IRS requirements with regard to minimum deductibles and maximum out-of-pocket amounts.



HSA

A health savings account is a personal account that you can use to pay for eligible medical, prescription drug, vision and dental expenses with pretax dollars — now or in the future. The HSA is only available if you enroll in the HDHP plan. Account dollars used for eligible expenses count toward your plan deductible. You can also use your HSA as a long-term investment tool, similar to a 401(k).

MEDICAL

Summary of Medical Plan Provisions

The following table summarizes the key features of the medical plan available to you and your dependents. To receive the highest level of benefits, you should use in-network providers and fully understand what is expected of you.

Website Access

The medical plan provides substantial benefit levels to protect you from catastrophic loss in the event of illness or injury. The plan also offers additional value-added benefits as described on the Blue Cross of Idaho website.

Medical Plan (Blue Cross of Idaho)		
Key Features	HDHP HSA Plan ¹	
	In-Network	Out-of-Network ³
	You Pay	You Pay
Calendar Year Deductible (ded.)²		
Individual	\$3,700	\$7,400
Family	\$7,400	\$14,800
Calendar Year Out-of-Pocket Maximum²		
Individual	\$3,700	\$7,400
Family	\$7,400	\$14,800
Physician Services		
MDLIVE (Virtual Visits)	0% after ded.	0% after ded.
Pediatrician office visits	0% after ded.	0% after ded.
Office visits	0% after ded.	0% after ded.
Specialist visits	0% after ded.	0% after ded.
Urgent care	0% after ded.	0% after ded.
Preventive Care		
Routine physical exams	No copay	0% after ded.
Immunizations	No copay	0% after ded.
Well-woman exams	No copay	0% after ded.
Hospital		
Inpatient hospital services	0% after ded.	0% after ded.
Emergency		
Hospital emergency room	0% after ded.	0% after in-network ded.
Other Medical Services		
Laboratory and x-ray services	0% after ded.	0% after ded.
Imaging (MRI, CAT, PET scans)	0% after ded.	0% after ded.
Prescription Drugs (Retail) – Up to a 31-day Supply		
Covered preventive	No copay	No copay
Tier 1	0% after ded.	0% after in-network ded.
Tier 2	0% after ded.	0% after in-network ded.
Tier 3	0% after ded.	0% after in-network ded.
Tier 4	0% after ded.	0% after in-network ded.
Tier 5	0% after ded.	0% after in-network ded.
Tier 6	0% after ded.	0% after in-network ded.
Prescription Drugs (Mail Order) – Up to a 90-day Supply		
Covered preventive	No copay	No copay
Tier 1	0% after ded.	0% after in-network ded.
Tier 2	0% after ded.	0% after in-network ded.
Tier 3	0% after ded.	0% after in-network ded.
Tier 4	0% after ded.	0% after in-network ded.
Tier 5	0% after ded.	0% after in-network ded.
Tier 6	0% after ded.	0% after in-network ded.

¹ The HDHP HSA Plan comes with a Company funded HSA of \$3,200 per year if you meet eligibility requirements.

² The HDHP HSA has embedded deductibles and out-of-pocket maximums. This means a single member of a family doesn't have to meet the full family deductible before plan benefits are payable and doesn't have to meet the full family out-of-pocket maximum before the plan pays 100% of the eligible charges.

³ Your actual costs for services provided by an Out-of-Network Provider may exceed this Policy's Out-of-Pocket limit for Out-of-Network services. Except as provided by the No Surprises Act, Out-of-Network Providers can bill you for the difference between the amount charged by the Provider and the amount allowed by Blue Cross of Idaho, and that amount is not counted toward the Out-of-Network Out-of-Pocket limit.

This summary is provided for general information only. Since exclusions, dollar/frequency limitations and prior authorization may apply, you should refer to the specific plan documents for detailed information.

High Deductible Health Plans (HDHPs) and Health Savings Accounts (HSAs)

If you enroll in the HDHP HSA Plan, you will be given the opportunity to establish an HSA.

In accordance with IRS regulations, if you are enrolled in any other health insurance such as Medicare Part A and/ or Part B, you are not eligible to contribute pretax dollars or receive Company contributions toward an HSA.

An HSA is a powerful healthcare account and Clarity will continue to make a contribution in 2025 in the amount of \$3,200. You can use these funds for eligible healthcare expenses, save them for expenses in the future or invest them. If any amount is unused, it is yours to keep/rollover for next year.

Whether you have a lot of healthcare expenses and need to use the full \$3,200 Clarity HSA contribution or you have low healthcare expenses and can save your funds, the HSA is a great tool.



HSA HIGHLIGHTS

Eligible Expenses



Medical care

Doctor visits and copays
Hospital services
Prescriptions



Vision

Eye exams
Prescription glasses/contacts
Lasik surgery



Dental

Teeth cleaning
Dental reconstruction
Orthodontia



Personal health

OTC pain relievers
Feminine care products
Personal protective equipment ¹



Alternative care

Chiropractic care
Acupuncture
Massage¹



Ownership

It is yours to keep whether you switch medical plans (e.g., enroll as a dependent under your spouse's medical coverage), leave Clarity or retire. You can spend, save or invest the money in your account for as long as you have the account.



Pretax Contributions

You'll get a \$3,200 contribution to your account from Clarity. Once the money is put in your account, it is yours to keep and use. You can also contribute your own pretax dollars into your HSA. For 2025, you can contribute an additional \$1,100 if you have individual medical coverage, or \$5,350 if you have one or more dependents.



Tax Advantages and Savings

An HSA is a powerful account that has many tax advantages because contributions and withdrawals for eligible expenses are tax-free. ²

For a more in-depth look at the HSA, go to learn2.healthequity.com/hsalearn/hsa.

¹ May require letter or medical necessity.

² The money you and Clarity set aside in your health savings account is exempt from federal taxes, unless you use it for ineligible expenses. Some states subject contributions, interest, dividends and capital gains to state income tax. Check with your tax advisor to see how your account is affected.

If you establish an HSA, the Company will contribute toward the HSA on your behalf in the amount of:

- \$3,200 per year, regardless of your enrollment status (Employee Only, Employee + Spouse/DP, Employee + Child(ren) or Employee + Family)
- For employees hired mid-year, Company HSA contributions are prorated based on your effective date of coverage

Example HSA Contributions



Jacob enrolls in Employee Only coverage.

The Company will contribute \$3,200 into Jacob's HSA. He can contribute up to \$1,100 pretax dollars for the calendar year (\$91 per month).



Susan enrolls in Employee + Spouse/DP coverage.

The Company will contribute \$3,200 into Susan's HSA. She can contribute up to \$5,350 pretax dollars for the calendar year (\$445 per month).

The Company contributes the first half amount at the beginning of the year (or on your effective date, for employees who are hired mid-year) and the second half amount on July 1. In addition to the Company contributions, you can contribute to the HSA. The total amount contributed to the HSA (Company and employee contributions combined) cannot exceed the IRS allowable amount for the 2025 calendar year of:

- \$4,300 for individual coverage; or
- \$8,550 for family coverage



An HSA is an account that allows you to contribute and set aside pretax dollars to pay for eligible health care expenses either in the current year or at a later date, such as during retirement.

If you are age 55 or older you can also make catch-up contributions of \$1,000 per year, in accordance with federal regulations. In deciding your HSA contribution amount, be sure to keep in mind your medical plan's premium, deductible and out-of-pocket maximum. You can start, stop or change your HSA contribution amount at any time. Changes are applied to your remaining pay periods in the current year.

Once you have enrolled in the HDHP HSA plan, you should open your account by visiting **HealthEquity.com**. After your account is open, HealthEquity will mail you a welcome packet and your debit card. You can then use your new card to access your HSA funds. You will be permitted to use your account dollars now or in retirement to pay for eligible medical, prescription drug, dental and vision expenses, including those not normally covered by your medical plan.

HSAs are fully portable. This means that if you terminate employment, the money is yours and stays in your account until you use it or close the account. You can continue to contribute up to the maximum amount each year, as long as you remain eligible and enrolled in a qualified HDHP.

In subsequent years, if you decide not to enroll in a qualified HDHP, you can continue to use your HSA for qualified medical expenses, but you will no longer be able to contribute to the HSA.



To learn more about HSAs visit learn2.healthequity.com/hsalearn/hsa.



HealthEquity Mobile App

The HealthEquity mobile app provides easy, on-the-go access to your health savings account. The app provides comprehensive tools to help you manage your claims and maximize your health savings.



Blue Cross of Idaho bcidaho.com

First time visitors: You will need to establish a user ID and password. Then, information is available 24/7.

MDLIVE (Virtual Visits)

Have you ever been so sick you couldn't get out of bed, let alone drive yourself to go see a doctor? Or have you unexpectedly become sick while out on vacation or on a business trip? We have a great solution to get you the treatment you need.

MDLIVE, allows you to receive treatment from your home, office or any location where you have phone or internet in the United States.

With Virtual Visits, you have access 24 hours, 7 days a week to doctors who are U.S. board-certified and licensed to practice medicine in your state. They can diagnose, treat and prescribe medication if medically necessary for conditions such as:

- Allergies
- Bronchitis
- Cold and flu symptoms
- Fever
- Migraine/Headache
- Pink Eye
- Rash
- Respiratory infections
- Sinus problems
- Sore throat
- Upset stomach
- Urinary tract infection
- Other minor health issues



How to register:

1. Activate your account: Sign up online or download our app mdlive.com/bcidaho.
2. Choose a doctor: Choose from a large network of board-certified doctors and licensed therapists.
3. Resolve your issue: Receive care when you need it.



To learn more, go to mdlive.com/bcidaho.



MDLIVE Exclusions

Services not available outside of the United States. For a psychiatric or medical emergency, dial 911.

SHARECARE

What is Sharecare? Sharecare is a digital health and wellness tool offered to Blue Cross of Idaho members to help you live a happier, healthier and more productive life. This is an added benefit to the medical plan that provides information and tools to help you take control of your health. As a BCI member, you'll have access to the Sharecare app at no cost to you as Clarity Credit Union pays the full cost of the program.

With Sharecare, you'll learn how you can live healthier with simple tips and habit-forming activities. From eating better to fitness tips to stress relief, you'll get recommendations for things you can do every day to improve your health. Along the way, you'll build new habits that will help you live a healthy life.

Take the RealAge® Test

When you create your Sharecare account, you'll take the RealAge Test, which is the foundation of your Sharecare experience. Your RealAge is based on questions you answer about your lifestyle and habits. Your RealAge may be younger or older than your calendar age, depending on your answers. After you take the RealAge test, you'll get personalized content designed to help you improve or maintain your RealAge and live a happier, healthier life.

Earn green days

Green days are what Sharecare uses to measure your progress. When you earn green days, you can lower your RealAge. You earn green days when eight of the 13 health factors are green on any given day. In this way, you can focus on different trackers as they fit into your day. You'll also get reminders from the app to keep you on track with your health goals.

Your exclusive Blue Cross of Idaho-Sharecare experience also includes:

- RealAge programs (self-guided digital coaching)
- Green Days healthy activity tracking
- Wellbeing coaching from registered dietitians and certified coaches
- Peer-to-peer challenges (create and/or participate)
- Sharecare symptom checker
- Educational videos, articles and meditation
- Benefit Hub access to Blue Cross of Idaho clinical solutions for more health support



How to get access to Sharecare for Blue Cross of Idaho members

The only way to access the Blue Cross of Idaho-Sharecare experience is to visit bcidaho.sharecare.com and download the app directly from the sign-up link (do not use the links provided on the App Store or Google Play).



Sharecare Website

<https://bcidaho.sharecare.com>



Sharecare Phone Number

866.577.8199

First time visitors need to create an account and include your Blue Cross of Idaho member number as it appears on your medical ID card. Then information is available 24/7.



Note: You must register for Sharecare at bcidaho.sharecare.com before downloading the app in order to unlock the benefits available to members.

STRETCH YOUR HEALTHCARE DOLLARS FURTHER

Did you know healthcare costs vary between providers? The same diagnostic scan could cost \$1,000 at one facility and \$500 at another. That's why it's important to shop around and compare prices. Blue Cross of Idaho offers two cost-saving tools to help you find the most effective care at the lowest price.

SmartShopper Program

The SmartShopper program gives you the power to shop around for healthcare services and earn a cash reward for making the low-cost choice.

When your doctor recommends a healthcare procedure, you can call a SmartShopper Personal Assistant Team member at **866.507.3528**. They can help you search for care, schedule an appointment and answer questions you may have.

You can also log on to members.bcidaho.com and select **Find a Doctor**. After you select the name of the person on your plan who needs care, you can **Browse by Category** or enter a procedure name in the search bar. Once entered, you'll be taken to a page that lets you know if the procedure is eligible for SmartShopper. You'll get:

- Facility name, location and contact information
- Facility reviews
- Your estimated cost of care¹
- Your SmartShopper cash reward amount if eligible



After you decide on an option, you can contact the clinic, hospital, or provider directly to schedule an appointment, or you can contact a SmartShopper Personal Assistant to schedule it for you. If you use a provider with a cash reward, you can expect your money in the mail four to six weeks after your procedure is complete.

Find a Medical Provider

Visit bcid.sapphirecareseselect.com to find a Medical Provider in your area and follow the steps below:

1. Login to your Blue Cross of Idaho portal.
2. Choose Network: **PPO (Preferred Provider Organization)**.
3. Browse by Category: Choose type of service needed or Search for **Doctor, Specialty or Location and Treatments or Care by Condition**.

Instructions are also provided on the HR/Benefits website.

¹ Estimated costs include fees that usually come with a procedure, such as lab work, hospital stays, anesthesia and follow-up visits.



DENTAL

The dental plan is designed to assist you and your covered dependents by paying a portion of eligible expenses incurred for a wide range of dental services. The dental plan is insured by MetLife.

- If you enroll within your initial eligibility period, your coverage will be effective on the first day of the month following your date of hire
- If you do not enroll for coverage within your initial eligibility period, you may enroll for coverage during the next Open Enrollment period or in accordance with the section titled *“Making Changes During the Year”*

Website Access

The plan also offers additional value-added benefits as described on the MetLife website. After registering online with MetLife, you will be provided with the online tools to:

- Find a network dentist and receive driving directions
- Verify eligibility and view benefit information
- Print an ID card and download claim forms
- Find the average cost of a dental procedure in your area
- Access dental tips and other oral health information
- Contact customer service and subscribe to online services
- Get answers to frequently asked questions
- View specifics related to any of your claims



MetLife
metlife.com

First time visitors: You will need to establish a user ID and password. Then, information is available 24/7.

Your Cost

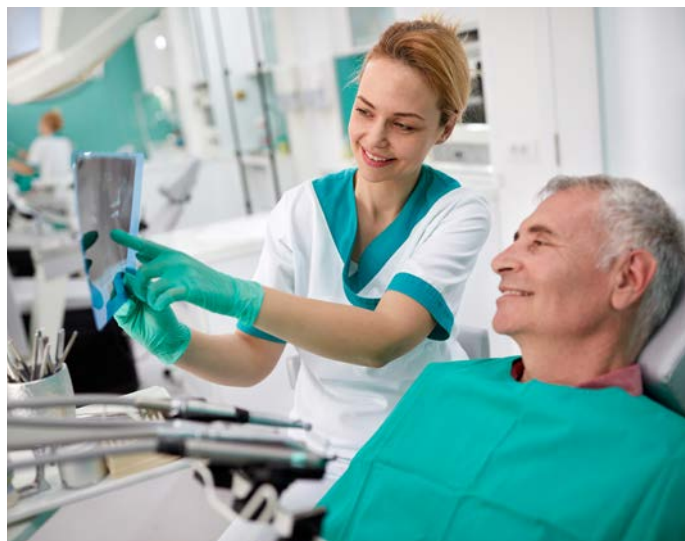
Clarity Credit Union and you share the cost of dental coverage. Your cost is generally deducted from your pay on a pretax basis. (Contributions for domestic partners are generally deducted on an after-tax basis, unless otherwise permitted by state or federal law.) Refer to the section titled *“Employee Contributions”* for the applicable cost.



DENTAL

Summary of Dental Plan Provisions

The following table summarizes the key features of the dental plan available to you and your dependents. To receive the highest level of benefits, you should use in-network providers and fully understand what is expected of you.



Finding an In-Network Dentist

Visit providers.online.metlife.com/findDentist to find a Dental Provider in your area and follow the two steps below:

1. Your Network: **PDP Plus**
2. Enter your Location: **Zip code**

Instructions are also provided on the HR/Benefits website.

Dental Plan (MetLife)		
Key Features	Dental PPO	
	In-Network	Out-of-Network ²
	You Pay	
Calendar Year Deductible (ded.)		
Individual		\$50
Family		\$150
	Plan Pays	
Calendar Year Maximum Benefits (per person, excluding orthodontia)		\$5,000
Lifetime Orthodontia Maximum		\$1,000
Diagnostic and Preventive Oral exams (once/6 mos); Cleanings (once/6 mos); Fluoride treatments (once/12 mos, dependent children up to age 19); Bitewing X-rays (once/12 mos), Full Mouth X-rays (once/5 yrs); Space Maintainers (dependent children up to age 18); Sealants (1st and 2nd permanent molars) (1 tooth/3 yrs of dependent child up to age 19)	100% ¹	100% ¹
Basic Services Periodontal Maintenance (once/6 mos), Emergency Palliative Treatment, Periodontal Root Planing & Scaling (1 per quadrant in any 24 months period); Periodontal Surgery (once/36 mos); Amalgam and Composite Fillings; Simple Extractions; Root Canal (one tooth/lifetime); Surgical Extractions	80% after ded.	60% after ded.
Major Restorative Services Crowns (once/84 mos); Dentures (once/84 mos); Bridges (once/84 mos); Repairs (crowns) once/12 mos); Implants (once/84 mos)	50% after ded.	10% after ded.
Orthodontia	50% ¹ (adults and children)	50% ¹ (adults and children)

¹ Deductible waived.

² Out-of-Network claims are reimbursed at the Reasonable and Customary charge as determined by MetLife. Using out-of-network providers may result in you being balance-billed by the provider.

This summary is provided for general information only. Since exclusions, dollar/frequency limitations and prior authorization may apply, you should refer to the specific plan documents for detailed information.

VISION

The vision plan provides preventive care through regular eye exams and early corrective treatment. The vision plan is insured by MetLife.

- If you enroll for coverage within your initial eligibility period, your coverage will be effective on the first day of the month following your date of hire
- If you do not enroll for coverage within your initial eligibility period, you may enroll for coverage during the next Open Enrollment period or in accordance with the section titled “Making Changes During the Year”

Summary of Vision Plan Provisions

The following table summarizes the key features of the vision plan available to you and your dependents. To receive the highest level of benefits, utilize in-network providers and fully understand what is expected of you.

Your Cost

Clarity Credit Union and you share the cost of vision coverage. Your cost is generally deducted from your pay on a pretax basis. (Contributions for domestic partners are generally deducted on an after-tax basis, unless otherwise permitted by state or federal law.) Refer to the section titled “Employee Contributions” for the applicable cost.



Practice good vision health. Obtain an eye exam every year and help stop vision loss before it starts.



Vision Plan (MetLife)		
Key Features	MetLife Vision	
	In-Network	Out-of-Network
Frequency		
Exam		Every 12 months
Lenses		Every 12 months
Frames		Every 12 months
Exam	\$10 copay	Up to \$45
Frame Benefit (Allowance & Copay)	Up to \$150 after \$25 copay (Up to \$85 at Costco, Walmart and Sam's Club)	Up to \$70
Lenses		
Single	\$25 copay	Up to \$30
Lined bifocal	\$25 copay	Up to \$50
Lined trifocal	\$25 copay	Up to \$65
Lenticular	\$25 copay	Up to \$100
Progressive	Varies	Up to \$50
Contact Lenses Fitting & Evaluation	Up to \$60	Incl in \$105 below
Medically Necessary Contacts	\$60 copay	Up to \$210
Elective Contacts (Allowance)	Up to \$150	Up to \$105

This summary is provided for general information only. Since exclusions, dollar/frequency limitations and prior authorization may apply, you should refer to the specific plan documents for detailed information.



Finding an In-Network Vision Provider

Visit mymetlifevision.com/find-provider-location-internal.html to find a Vision Provider in your area and follow the steps below:

1. Find a Vision Provider: Choose your search criteria from the drop down options
2. Click Search when you are finished completing the Search Criteria information

Whether you use an in-network or out-of-network provider, benefit authorization is highly recommended before you receive services.

Using an In-Network vs. an Out-of-Network Provider

		In-Network	Out-of-Network
<p>The plan gives you a choice when it comes to receiving eye care. You may receive services from either in-network or out-of-network providers. Although you are not required to use in-network providers, your out-of-pocket costs will be lower when in-network providers are used. This table compares some of the key differences between receiving care from an in-network versus an out-of-network provider.</p>	Provider	Must use an in-network provider	Use any licensed eye care provider outside the network
	Benefit Authorization	Your network provider obtains authorization from your vision plan when you make your appointment and identify yourself as an enrolled member	Not applicable
	Benefits	The plan pays a higher benefit level, which means less out-of-pocket cost for you	The plan pays a lower benefit level, which means more out-of-pocket cost for you
	Claims	Your provider files claims on your behalf	You must file your own claims with your vision provider
	Additional Discounts and Savings	Available, which means your share of the cost for additional purchases will be less (e.g., Lasik surgery, etc.)	Not available

DISABILITY

DISABILITY

The disability plans are designed to replace a portion of your income if you are unable to work due to an accident or illness. These plans cover you continuously with both short term and long term benefits for qualifying disabilities. These coverages also provide the vital support, services and assistance you need to get back to work and to an independent lifestyle.

Extended Sick Leave is administered by Clarity Credit Union. STD and LTD is insured by Lincoln Financial Group.

The following table summarizes the key features of the plan.



Disability Plans (Extended Sick Leave, STD and LTD)				
Plan	Benefit Percentage	Benefit Begins	Maximum Benefit	Paid By
Extended Sick Leave	100% of pay	After using 5 days of PTO (or combination of PTO and unpaid 5 days)	Up to 240 hours	Clarity
Short Term Disability	60% of pay	1st day of accident and 8th day of sickness	\$1,500 per week (up to 13 weeks)	Employee
Long Term Disability	60% of pay	91st day of disability	\$10,000 per month	Clarity

This summary is provided for general information only. It does not provide coverage details, exclusions or limitations. You should refer to specific plan documents for detailed information.



Annual Pay

For purposes of the disability plans, “pay” or “annual pay” is defined as current base pay excluding any forms of extra compensation.

Extended Sick Leave

Sick leave is intended to provide income protection in the event you are unable to work due to your (or a member of your immediate family) disabling illness or injury. You are automatically enrolled in Extended Sick Leave on the first day of the month following your date of hire.

Extended sick leave accrues at a rate of 1/2 day (4 hours) per month (1.85 hours each pay period) for an employee working 40 hours per week. This amount is prorated if you work less than 40 hours per week as follows:

Average Hourly Schedule	Rate of Accrual
20 hours per week	50%
30 hours per week	75%
40 hours per week	100%

Accrued hours are posted to your account each pay period until your bank reaches a maximum of 240 hours (30 days). Once your bank reaches the maximum, your accruals stop until time is used.

When your employment terminates, Extended Sick Leave benefits are forfeited and will not be paid to you.

DISABILITY

Short Term Disability (STD)

STD benefits generally begin the first day of an accidental injury and eighth consecutive day of disability due to sickness if you are unable to perform all of the material and substantial duties of your own occupation and as long as you are not engaged in any occupation for wage or profit, as determined by the insurance company.

- If you enroll for coverage within your initial eligibility period, your coverage will be effective on the first day of the month following your date of hire
- If you do not enroll for coverage within your initial eligibility period, you may enroll for coverage during the next Open Enrollment period; you should keep in mind that you will be required to provide evidence of insurability satisfactory to the insurance company before the coverage becomes effective

STD benefits pay up to:

- 60% of pay (maximum \$1,500 per week)

STD benefits continue for up to 13 weeks as long as you remain disabled as determined by the insurance company.



Long Term Disability (LTD)

You are automatically enrolled for LTD insurance on the first day of the month following your date of hire. LTD benefits begin after you have been disabled for 90 days, as determined by the insurance company. LTD benefits pay up to:

- 60% of your pay to a maximum of \$10,000 per month

LTD benefits generally continue as long as you remain totally disabled, up to age 65 (benefit period could be longer if your disability begins at age 60 or later). LTD benefits will be reduced by any other benefits you may be eligible to receive such as state disability benefits, workers' compensation or Social Security disability benefits.

There are several other additional special benefit provisions available under the LTD plan as follows:

- Social Security assistance
- Rehabilitation during disability
- Return to work incentive benefits
- Survivor benefits

Your Cost

Clarity Credit Union pays the full cost of Extended Sick Leave and LTD and you pay the full cost of the STD plan.

Refer to the section titled "*Employee Contributions*" for the applicable cost.

LIFE AND ACCIDENT

LIFE AND ACCIDENT

The life and accident insurance plans provide you with basic life and accidental death and dismemberment (AD&D) insurance paid for by Clarity Credit Union. In addition, optional life, dependent life and AD&D insurance coverage is available at group rates. The life and accident plans are insured by Lincoln Financial Group (LFG).

The following table summarizes the key features of the plans available to you and your dependents.



Life and Accident Plans (LFG)					
Plan	Coverage Available			Enrollment Required	Paid By
	Employee	Spouse/DP	Each Child ¹		
Basic Life and AD&D	1x annual base pay (maximum \$100,000)	–	–	No	Clarity
Optional Employee Life and AD&D	\$10,000 - \$500,000 (increments of \$10,000)	–	–	Yes	Employee
Dependent Life and AD&D	–	\$5,000 - \$100,000 (increments of \$5,000)	\$1,000; \$2,000; \$4,000; \$5,000; or \$10,000	Yes	Employee

¹ Benefits payable for a child from 15 days to 6 months is limited to \$500.

This summary is provided for general information only. Certain maximums apply to each level of coverage and evidence of insurability may be required. In addition, life and accident coverages are reduced according to an age reduction schedule beginning at age 65. You should refer to specific plan documents for detailed information.



Protect Your Family

Most people agree that protecting their loved ones' lifestyle in the event of death is very important. So why do many Americans insure their possessions more carefully than their family's future? Consider what would happen to your dependents if they no longer had your income to rely on. Could they maintain their lifestyle? Life insurance can help secure the plans for your child's future such as college funding and medical expenses. Proceeds from a group term life insurance policy can also help supplement retirement income for a surviving spouse.

What is the Right Amount of Life Insurance?

How much is enough life insurance? To begin to determine how much you need, consider both your family's immediate and long-term financial needs, such as:

- Mortgage expenses
- Credit card debt
- Charitable giving goals
- Final expenses for a simple funeral, which can cost \$10,000 or more
- Day care and everyday expenses
- College costs
- Financial goals

BASIC LIFE AND BASIC AD&D

You are automatically enrolled in basic life and basic AD&D insurance coverage on the first day of the month following your date of hire.

Your basic life insurance coverage is equal to one times your annual base pay rounded to the next higher multiple of \$1,000. The maximum amount of basic life insurance is \$100,000.

Your basic AD&D insurance coverage amount is equal to 100% of your basic life coverage.

Your basic life and basic AD&D insurance coverages reduce automatically to the amounts shown in the following table immediately following the attainment of the specified age.

Age	Percentage of Pre-65 Amount
65	65%
70	50%

For example, if you are age 64 and have \$50,000 of basic life and basic AD&D coverage, your benefit payable would be the full \$50,000. Upon turning age 65, your benefit payable would be \$32,500 for basic life and basic AD&D (calculated as $\$50,000 \times 0.65 = \$32,500$).

If your annual base pay changes (either increases or decreases), your basic life and basic AD&D insurance will automatically change to the new coverage amount on the first of the following month.

Things to Consider About Life Insurance

Most people don't like to think about needing life insurance. But when an unexpected death happens to a wage earner, we realize how important life insurance can be. You can minimize the impact of an unexpected death by selecting the right amount of life insurance.

EMPLOYEE OPTIONAL LIFE AND OPTIONAL AD&D

Optional life insurance is available in the amounts of \$10,000 - \$500,000 (increments of \$10,000).

- If you enroll for coverage and your enrollment is received within your initial eligibility period, your coverage amount for optional life insurance of up to \$50,000 will be effective on the first day of the month following your date of hire
- If your enrollment in optional life insurance results in over \$50,000 of coverage, you will be required to provide evidence of insurability satisfactory to the insurance company before coverage in excess of \$50,000 will become effective

- If you do not enroll for optional life during your initial eligibility period you may only enroll during the next Open Enrollment period or within 30 days of a qualifying event

Your optional life and optional AD&D insurance coverages reduce automatically to the amounts shown in the following table immediately following the attainment of the specified age.

Age	Percentage of Pre-65 Amount
65	65%
70	50%

For example, if you are age 64 and have \$50,000 of optional life and optional AD&D coverage, your benefit payable would be the full \$50,000. Upon turning age 65, your benefit payable would be \$32,500 for optional life and optional AD&D (calculated as $\$50,000 \times 0.65 = \$32,500$). This reduction in coverage on your birthday will result in a change in your premium effective the first of the month following your birthday.

If you enroll for optional life insurance, you will automatically be enrolled for the same amount of optional AD&D insurance.

You should also keep in mind that if you enroll or increase coverage after your initial eligibility period (including during the Open Enrollment period), you will be required to provide evidence of insurability (EOI) satisfactory to the insurance company before the new or increased coverage will become effective. See the box below for submitting EOI.

How to Submit Evidence of Insurability (EOI)

If you are required to submit EOI for optional life insurance, you must submit it electronically within 30 days of your enrollment period's start. Here's how:

1. Log in to **MyLincolnPortal.com**. New users: click **Register for an account**, enter **1096768** as the company code and follow the prompts to register and log in.
2. Click **Complete Evidence of Insurability**, answer the questions, review your responses, sign electronically and submit your application.
3. Save a copy of your confirmation report.

If you are not automatically approved for coverage, Lincoln Financial Group will let you know if more information is required and the outcome of your application.

DEPENDENT SPOUSE/DP LIFE AND AD&D

If you enroll for optional life insurance, you are eligible to enroll for dependent spouse/DP life insurance in amounts of \$5,000 - \$100,000 (increments of \$5,000). However, dependent spouse/DP coverage may not exceed 50% of your optional life insurance coverage.

- If you enroll for dependent life insurance for your spouse/DP and your enrollment is received within your initial eligibility period, your coverage amount for dependent life insurance of up to \$25,000 will be effective on the first day of the month following your date of hire
- If your enrollment in dependent life insurance for your spouse/DP results in over \$25,000 of coverage, your spouse/DP will be required to provide evidence of insurability satisfactory to the insurance company before coverage in excess of \$25,000 will become effective
- If you do not enroll for dependent life during your initial eligibility period, you may only enroll during the next Open Enrollment period or within 30 days of a qualifying event

Your spouse/DP dependent life and AD&D insurance coverages reduce automatically to the amounts shown in the following table immediately following the attainment of the specified age.

Age	Percentage of Pre-65 Amount
65	65%
70	50%

For example, if your spouse/DP is age 64 and has \$50,000 of spouse/DP dependent life and AD&D coverage, the benefit payable would be the full \$50,000. Upon turning age 65, the benefit payable would be \$32,500 for spouse/DP dependent life and AD&D (calculated as \$50,000 x 0.65 = \$32,500). This reduction in coverage on your spouse's/DP's birthday will result in a change in the premium effective the first of the month following your spouse's/DP's birthday.

If you enroll your spouse/DP for dependent life insurance, they will automatically be enrolled for the same amount of dependent AD&D insurance.

You should also keep in mind that if you enroll or increase coverage after your initial eligibility period (including during the Open Enrollment period), your spouse/DP will be required to provide evidence of insurability satisfactory to the insurance company before the new or increased coverage will become effective.

How to Submit Evidence of Insurability (EOI)

If you are required to submit EOI for dependent life insurance for your spouse/DP, you must submit it electronically within 30 days of your enrollment period's start. Here's how:

1. Log in to **MyLincolnPortal.com**. New users: click **Register for an account**, enter **1096768** as the company code and follow the prompts to register and log in.
2. Click **Complete Evidence of Insurability**, answer the questions, review your responses, sign electronically and submit your application.
3. Save a copy of your confirmation report.

If you are not automatically approved for coverage, Lincoln Financial Group will let you know if more information is required and the outcome of your application.

DEPENDENT CHILDREN¹ LIFE AND AD&D

If you enroll for optional life insurance, you are eligible to enroll your child(ren) up to age 26 for dependent child life insurance in amounts of \$1,000; \$2,000; \$4,000; \$5,000 or \$10,000. If you enroll one child, all eligible children are covered.

¹ Benefits payable for a child from 15 days to 6 months is limited to \$500.

- If you enroll for dependent life insurance for your children and your enrollment is received within your initial eligibility period, your coverage amount for insurance of up to \$10,000 will be effective on the first day of the month following your date of hire
- If you do not enroll for dependent life insurance for your children during your initial eligibility period, you may enroll for coverage during the next Open Enrollment period or within 30 days of a qualifying event (Evidence of insurability is not required for dependent children)

If you enroll your dependent child(ren) for dependent life insurance, they will automatically be enrolled for the same amount of dependent AD&D insurance.

AD&D BENEFIT SCHEDULE

The following table shows losses that are covered under the basic, optional and dependent AD&D insurance and the corresponding benefit amounts as a percentage of the principal amount. These benefit amounts will be paid only if:

- Death occurs within 365 days from the date of the covered accident; or
- Injury results in one or more covered losses listed below within 365 days from the date of the covered accident

Loss Schedule	Basic AD&D Coverage ¹ Employee	Optional AD&D Coverage Employee, Spouse/DP, Child(ren)
Loss of Life	Principal Sum	Principal Sum
Loss of one member (Hand, foot or eye)	50% of Principal Sum	50% of Principal Sum
Loss of two or more members	Principal Sum	Principal Sum
Loss of thumb and index finger	N/A	25% of Principal Sum
Loss of both speech and hearing in both ears	N/A	Principal Sum
Loss of either speech or hearing in both ears	N/A	50% of Principal Sum
Loss of hearing in one ear	N/A	25% of Principal Sum
Quadriplegia (Paralysis of both arms and both legs)	Principal Sum	Principal Sum
Paraplegia (Paralysis of both legs)	50% of Principal Sum	50% of Principal Sum
Hemiplegia (Paralysis of arm and leg on same side)	50% of Principal Sum	50% of Principal Sum
Disappearance (Insured's body not found within one year of forced landing, stranding, sinking or wrecking of a conveyance occupied)	N/A	Principal Sum
Exposure (Insured unavoidably exposed causing a loss included in this schedule)	N/A	Applicable loss as shown in this schedule

This summary is provided for general information. Since exclusions and limitations may apply, you should refer to the specific plan documents for detailed information.

¹ In the event a covered loss occurs on a Common Carrier, certain benefits shown for Basic AD&D Coverage are doubled. Refer to the Policy and Certificate for complete details.

Injury means bodily impairment resulting directly from an accident and independent of all other causes.

Loss of limb means severance of hand or foot at or above the wrist or ankle joint.

Loss of sight, speech or hearing must be total and irrecoverable.

Loss of thumb and index finger means severance through or above the metacarpophalangeal joints.

Quadriplegia means the total and permanent paralysis of both upper and lower limbs.

Paraplegia means the total and permanent paralysis of both lower limbs.

Hemiplegia means the total and permanent paralysis of the upper and lower limbs on one side of the body.



LIFE AND ACCIDENT

AD&D SPECIAL BENEFITS

The following table provides more details regarding the AD&D special benefits.

AD&D Special Benefits	Basic AD&D Coverage (Employee) Additional Benefit Provisions (when AD&D benefits paid)	Optional AD&D Coverage (Employee, Spouse, Child) Additional Benefit Provisions (when AD&D benefits paid)
Felonious Assault Benefit <ul style="list-style-type: none"> Payable if employee suffers injury or death at workplace during robbery, holdup, kidnapping or felonious assault 	N/A	<ul style="list-style-type: none"> 25% of employee's Principal Sum
Repatriation Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered accident Pays for preparation and transportation expenses of employee's remains for accidents occurring at least 150 miles from principal residence 	<ul style="list-style-type: none"> Up to \$5,000 	N/A
Education Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered accident Pays for dependent child's college, university or vocational school expenses (beyond 12th grade) 	<ul style="list-style-type: none"> Up to 5% of employee's Principal Sum Maximum \$5,000 per child, per year Up to 4 years or until age 25 	<ul style="list-style-type: none"> Payable only if child(ren) enrolled for coverage Up to 2% of employee's Principal Sum Maximum \$2K per child, per year Up to 4 years or until age 25
Spouse Training Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered accident Pays spouse/DP schooling expenses to retrain or refresh skills needed for employment 	<ul style="list-style-type: none"> Up to 5% of employee's Principal Sum Maximum \$5,000 	<ul style="list-style-type: none"> Payable only if spouse/DP enrolled for coverage Up to 5% of employee's Principal Sum Maximum \$5,000
Common Disaster Benefit <ul style="list-style-type: none"> Payable when employee and spouse/DP both die as a direct result of the same covered accident, or separate covered accidents that occur within the same 24-hour period 	N/A	<ul style="list-style-type: none"> Payable only if employee and spouse/DP enrolled for coverage Increases spouse/DP benefit to equal employee's benefit Maximum \$500,000 for both employee and spouse/DP combined
Child Care Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered accident Pays for licensed child care center expenses for dependents under age 13 	<ul style="list-style-type: none"> Up to 5% of employee's Principal Sum Maximum \$5,000 per child, per year Up to 4 years or until age 13 	<ul style="list-style-type: none"> Payable only if child(ren) enrolled for coverage Up to 2% of employee's Principal Sum Maximum \$2,000 per child/year Up to 4 years or until age 13
Coma Benefit <ul style="list-style-type: none"> Payable when insured is comatose for at least 31 consecutive days as a direct result of a covered accident 	<ul style="list-style-type: none"> 5% of employee's Principal Sum Maximum \$5,000 	<ul style="list-style-type: none"> Payable for all enrolled for coverage Monthly benefit of 1% of the difference between the insureds Principal Sum and any other benefits paid or payable Maximum 36 months
Seat Belt Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered auto accident when wearing seat belt 	<ul style="list-style-type: none"> Up to 10 % of employee's Principal Sum Maximum \$10,000 	<ul style="list-style-type: none"> Payable only if employee dies Up to 10% of employee's Principal Sum Maximum \$10,000
Air Bag Benefit <ul style="list-style-type: none"> Payable when employee dies as a direct result of a covered auto accident when presence of an air bag is confirmed 	<ul style="list-style-type: none"> Up to 10% of employee's Principal Sum Maximum \$10,000 	<ul style="list-style-type: none"> Payable only if employee dies Up to 10% of employee's Principal Sum Maximum \$10,000
Common Carrier Benefit <ul style="list-style-type: none"> Payable when insured is injured or dies as a direct result of a common carrier accident 	Refer to Loss Schedule for this benefit	<ul style="list-style-type: none"> Payable for all enrolled for coverage Doubles the benefits otherwise payable under the plan for each person Overall maximum payable is \$1 million total for all enrolled for coverage

This summary is provided for general information. Since exclusions and limitations may apply, you should refer to the specific plan documents for detailed information.



Your Cost

Clarity Credit Union pays the full cost of basic life and basic AD&D insurance. You pay the full cost of any optional life and AD&D insurance and dependent life and AD&D insurance. Your cost is deducted from your pay on an after-tax basis. Refer to the section titled “*Employee Contributions*” for the applicable cost.

LifeKeys

You have access to a wide range of services to help you and your loved ones through life’s most important matters. LifeKeys® offers your beneficiaries:

- Grief counseling
- Financial services
- Legal support
- Help with everyday life

LifeKeys can also help you save money on shopping and entertainment, identity theft protection and online will preparation. Go to **GuidanceResources.com**, download the GuidanceNow mobile app or call **855.891.3684** to learn more.

Lincoln FuneralPrep

With many details to manage and decisions to make, the funeral planning process can be overwhelming. Lincoln FuneralPrep is available 24 hours a day to help with at-need or pre-planning funeral services. You can get help finding funeral homes, compare options and get personalized service. To learn more about Lincoln FuneralPrep, visit **lincolnfunealprep.com/gplife**.

EMPLOYEE ASSISTANCE PROGRAM AND CALM

EMPLOYEE ASSISTANCE PROGRAM (EAP)

The EAP is designed to help you and your household members identify and find resources to solve personal problems — such as family, alcohol, drug, emotional, stress, legal or financial issues, which if not resolved, could adversely affect the quality of your life. The EAP is administered by EmployeeConnect. EmployeeConnect services are provided by ComPsych.

You are automatically enrolled in the EAP on the first day of the month following your date of hire.

Your use of the program is on a confidential basis. Through the EAP, you and your family members have up to five free sessions per person, per issue, per year. These sessions will be face-to-face with licensed counselors close to your work or home. In addition, you have unlimited, telephonic legal and financial information available. If you require legal representation, a referral to a qualified attorney in your area will be provided, along with a free 30 minute consultation per legal issue. Discount on Attorney Services - following initial Attorney Consultation, discount off standard legal fees as offered by ComPsych's network of attorneys.

Your EAP also provides access to a variety of work/life resources. These resources include referrals to local resources and assistance in areas like parenting, elder care, education, adoption and consumer and community needs.

You can also visit the EAP website or mobile app to access articles and tutorials, videos, and interactive tools to support your emotional and financial wellbeing.

The EAP line is always open — 24 hours a day, 365 days a year and can be accessed via the toll-free number that provides immediate support in times of crisis and access to all EAP services.

Your Cost

Clarity Credit Union pays the full cost of the EAP.



EmployeeConnect Website GuidanceResources.com

Username: LFGSupport
Password: LFGSupport1



EmployeeConnect Phone Number 888.628.4824



EmployeeConnect Mobile App Search for "GuidanceNow" on the Apple or Android App Stores

Travel Assistance

Make travel less stressful with TravelConnect. TravelConnect is a comprehensive program that can bring help, comfort, and reassurance if you face a medical emergency while traveling 100 or more miles from home. Whether traveling for business or leisure, you and your loved ones can count on TravelConnect for responsive and caring support — 24 hours a day, 7 days a week.

TravelConnect will assist you with:

- Emergency pet boarding and/or return.
- Return of traveling companion.
- ID recovery assistance.
- Vehicle return.
- Emergency travel arrangements.
- Lost or stolen travel documents.
- Language translation services.
- Medical and dental referrals.
- Corrective lens and medical device replacement.
- Medication and vaccine delivery.
- Evacuation coordination for an emergency security or political event, or natural disaster.
- Destination information.

For a complete list of TravelConnectSM services, call **866.525.1955**.

CALM PREMIUM SUBSCRIPTION

Your Clarity Credit Union benefits include a premium subscription to Calm. The Calm app puts tranquility at your fingertips with tools to help you reduce stress and anxiety, get better sleep and live a happier, healthier life.

Use Calm to access:

- Relaxing sleep stories
- Guided meditations
- Mindful movements
- Focus music
- Tailored content for children
- Masterclasses

Get Started

1. Visit teamcreativa.com/claritycreditunion/calm
2. Sign up with your personal email address or log in to an existing Calm account
3. Validate your work email address
4. Once complete, you can download the Calm app from the App Store or Google Play and log in to your new account

Your Cost

Clarity Credit Union pays the full cost of your Calm Premium subscription.

DISCOUNT PROGRAMS

SAVE ON THE THINGS YOU LOVE

TicketsatWork - Discount Program










Everyone loves a good deal. That's why we've partnered with TicketsatWork to offer exclusive discounts and money-saving specials on everything from travel and entertainment to home goods and food delivery services. Use the Discount Program to save on brands such as Disney, Nike, Samsung, T-Mobile, Microsoft, Sam's Club, True Car and much more. It's free to enroll and signing up is easy.

Get In on the Savings!

1. Go to: ticketsatwork.com
2. Click **Become A Member**
3. Sign Up With Your Company Code:
CLARITYCUPERKS

After you sign up, you'll begin receiving monthly emails highlighting new deals and discounts.

Enjoy incredible savings on everything you need:

- | | |
|---|--|
|  Home essentials |  Health and wellness |
|  Apparel |  Streaming services |
|  Automotive |  Educational programs |
|  Electronics |  Event tickets |
|  Food Delivery | |

METLIFE VOLUNTARY PET INSURANCE

Pets are more than animals. They are family. That's why we offer insurance to give them protection and help cover the costs of unexpected accidents or illnesses like you would any other family member.

MetLife pet insurance helps cover unexpected vet costs and routine care including preventive care, virtual vet concierge, and loss or theft coverage.

Key Features

- **Manage pet insurance:** View policy, edit your pet profile, submit and track claims
- **Manage your pet's health records:** Upload and keep your health records and documents all in one location; receive reminders on vaccinations due and other notifications
- **Find nearby pet services:** Locate pet service providers near you
- **Access live 24/7 Telehealth Concierge Services:** Get answers and tips by licensed vets from home
- **Access personalized articles:** Search a variety of articles on multiple topics recommended for you

How MetLife Pet Insurance Works

1. Go to: metlife.com/getpetquote
2. Select and enroll in the coverage that's best for you and your pet
3. Download our mobile app
4. Take your pet to the vet
5. Pay the bill within 90 days and send it with your claim documents to us via our mobile app, online portal, email, fax or mail
6. Receive reimbursement by check or direct deposit if the claim expense is covered under the policy



MetLife Pet Insurance Phone Number

800.438.6388



MetLife Pet Insurance Mobile App

metlife.com/getpetquote

With the MetLife Pet mobile app, you can manage your pet's health and wellness all in one convenient location. The easy-to-use app provides personalized access to information and resources in a highly intuitive and engaging user experience.

Your Cost

You pay the full cost for pet insurance. Your cost is directly billed and not deducted from your paycheck.

VOLUNTARY BENEFITS

AFLAC VOLUNTARY PRODUCTS

Aflac voluntary plans are employee-paid individual policies designed to supplement the Clarity Credit Union benefits plans. Administration and claims services are provided by Aflac.

Accident Indemnity Advantage Plan

The Aflac accident indemnity advantage plan is designed to provide you with cash benefits throughout the different stages of care, regardless of the severity of the injury. Benefits include: initial accident hospitalization, accident emergency treatment, intensive care unit confinement, physical therapy and more.

Cancer Indemnity Insurance

Aflac Cancer Protection Assurance pays cash benefits directly to you, unless assigned, when you need them most. If you're ever diagnosed with a covered cancer, these benefits are more important than ever. Why? Because cancer treatment is expensive—today, cancer costs patients and families more than any other chronic illness. Major medical may not cover the cost of things like deductibles, copays, lost work time, or even travel. Aflac Cancer Protection Assurance can help with cancer-associated costs like these. It helps support you through the physical, emotional, and financial costs of cancer—and stays with you for life.

Hospital Confinement Indemnity Insurance

Hospital Advantage/Hospital Confinement Indemnity Insurance pays cash benefits for hospital confinement, rehabilitation facilities, hospital emergency rooms, hospital short-stay, physician visits, ambulance services, invasive diagnostic exams, hospital intensive care unit confinement, and more.

Short-Term Disability (STD) Insurance

Subject to your benefit period and elimination period, as well as your financial needs and income, Aflac will pay you a cash benefit for each day you are disabled. This policy is guaranteed issue, meaning no medical questionnaire is required. Aflac does not coordinate benefits, so regardless of any other disability insurance benefits you may have, including Social Security, Aflac will pay you directly. Aflac provides benefits for both total and partial disability. Even if you're able to work, partial disability benefits may be available to help compensate for lost income. In addition, premiums may be waived when you have a prolonged disability.




Specified Disease Event Protection

A serious medical condition (such as a heart attack or stroke) is not only a life-altering physical event, but a devastating financial one as well. Specified disease event protection insurance may make all the difference by providing cash benefits as you concentrate on your recovery. This policy pays a first-occurrence benefit, as well as hospital confinement and continuing care benefits. Primary specified disease events covered by this policy include: coma, paralysis, end-stage renal failure, persistent vegetative state and more.

Your Cost

Your cost will vary based on coverage elected and type of policy purchased. All policies (except STD insurance) permit pretax deductions.

For more information regarding the Aflac voluntary plans, contact Gerri Schoonderwoerd:

 208.290.3914

 gerri_schoonderwoerd@us.aflac.com

Clarity Credit Union is not the plan sponsor or the plan fiduciary of the Aflac plans and these plans are not covered by the Employee Retirement Income Security Act of 1974, as amended (ERISA). Administration is performed by Aflac.

401(k) PLAN

401(k) PLAN

The 401(k) plan provides a means for you to build savings for the future by giving you the opportunity to:

- Reduce your taxable income
- Contribute through payroll deductions
- Receive Safe Harbor basic matching contributions
- Receive Company discretionary contributions of 3% in 2025
- Build a tax deferred accumulation of dividends, interest and other earnings

You are eligible to participate in the plan on January 1, April 1, July 1 or October 1 immediately following 12 months of service and having worked 1,000 hours. You will receive an information packet with instructions on how to enroll and set up your 401(k) when you become eligible to participate in the plan. You can save up to 100% of your eligible pay on a pretax basis, up to the IRS annual dollar limits. You can also make after-tax contributions into a Roth 401(k) account, in accordance with plan provisions.

In addition to the annual pretax contribution limits imposed by the IRS (\$23,500 in 2025), you will be able to make “catch-up” contributions in the amount of \$7,500 per year starting in the year you attain age 50.

Automatic Enrollment

If you take no action when you receive your 401(k) plan information packet, you will be automatically enrolled for 3% salary deferrals from each of your paychecks. These deferrals will automatically increase 1% each year to a maximum of 6%.

Safe Harbor Matching Contributions

Clarity Credit Union will contribute a matching contribution to your Safe Harbor Matching Contribution Account in an amount:

- Equal to 100% (\$1.00 per \$1.00) of the Matched Employee Contributions up to 1% of your eligible pay, plus
- 50% (\$0.50 per \$1.00) of the amount of the Matched Employee Contributions of the next 5% of your eligible pay

Non-Elective Company Contributions

Clarity Credit Union may, in its sole discretion, make Company discretionary contributions.

Vesting

You are immediately vested in your own contributions and related investment earnings. Safe Harbor Matching Contributions are 100% vested after two years of vesting service. Company discretionary and profit sharing contributions are vested based on completed years of service:

Completed Years of Service	Percentage
0-1	0%
2	25%
3	50%
4	75%
5	100%

You will always be 100% vested in Company profit sharing and matching contributions if you die or become disabled.

Investment Options

You can spread your investments among several options to take advantage of what each has to offer and help balance different types of risk. For more complete information about the available investments through the plan, including fees and expenses, log on to Voya at voya.com or call our plan advisor, Michael Espinosa, at **801.274.1820**.

Plan Administration

Administration and recordkeeping services are provided by Voya Mutual Group. Refer to the section titled “*Important Phone Numbers and Websites*” for your group number.



Voya Website voya.com

First time visitors: You will need to establish a user ID and password. Then, information is available 24/7



Voya Phone Number 800.584.6001

Plan Advisor

Michael Espinosa

Michael@truenorthretire.com | 801.274.1820

Carefully Determine Your 401(k) Contribution Amount

In deciding upon the contribution amount you wish to make, keep in mind that once you reach the annual contribution limit (as determined by the IRS), Clarity Credit Union match stops. For example, if you are less than age 50 and reach the IRS pretax contribution limit by September, you will receive no employer match for the rest of the year. Therefore, in order to maximize your employer’s matching amount you receive during the year, you should select a contribution amount to be deducted per pay period that results in your reaching the IRS contribution limit as close to year-end as possible.

PAID TIME OFF AND HOLIDAYS

PAID TIME OFF POLICY

Clarity Credit Union understands employees need time off for necessary rest and relaxation. You are encouraged to use your earned PTO time each year. PTO accruals are based on length of service. Employees on a leave of absence do not accrue PTO time. The table below shows the accrual rate for benefit eligible employees.

Twice a year Clarity Credit Union offers PTO cash outs. Even though date and minimum limit restrictions apply to these cash-out options, we encourage you to use and enjoy your PTO instead.

Completed Years of Service	Days per Year	Maximum Accrual
0 - 3	14	112 hours
4 - 5	18	144 hours
6 - 10	22	176 hours
11 - 14	28	224 hours
15+	32	256 hours

Once the PTO accrual maximum or cap has been reached, additional PTO will not accrue until some PTO time is used. Each employee must submit at least one five day request for the vacation calendar. This is done because each employee is required to take a five consecutive day vacation (holidays are not counted in the five required days) each year. To help us accommodate your PTO requests, please request PTO as far in advance as possible.

HOLIDAY POLICY

Clarity recognizes the same holidays as the Federal Reserve with the addition of the day after Thanksgiving.

In the event that you have an unplanned absence the day before or the day after a holiday the holiday hours are removed from your time card. In circumstances where holiday pay has been removed you would have the option of using PTO to cover the holiday.

The following holidays are recognized by Clarity Credit Union.

Holiday	Date of Observance
New Year's Day	Wednesday, January 1
Martin Luther King Jr. Day	Monday, January 20
Presidents' Day	Monday, February 17
Memorial Day	Monday, May 26
Juneteenth	Thursday, June 19
Independence Day	Friday, July 4
Labor Day	Monday, September 1
Columbus Day	Monday, October 13
Veterans Day	Tuesday, November 11
Thanksgiving Day	Thursday, November 27
Day after Thanksgiving	Friday, November 28
Christmas Day	Thursday, December 25



2025 EMPLOYEE CONTRIBUTIONS

EMPLOYEE CONTRIBUTIONS

Your cost for coverage depends on how many eligible dependents you enroll and what benefit choices you make.

- Medical, dental, vision, HSA, and 401(k) contributions are generally deducted from your pay on a pretax basis; contributions for domestic partners are generally deducted on an after-tax basis, unless otherwise permitted by state or federal law
- All other plans are deducted from your pay on an after-tax basis

Clarity Credit Union pays the full cost of basic life, basic AD&D, LTD and the EAP.



The table below shows monthly contributions/rates for the 2025 plan year. However, employee contributions are deducted from the first two paychecks of the month.

Medical (Monthly Cost)				
HDHP HSA Plan	Employee Only	Employee + Spouse/DP	Employee + Children	Employee + Family
Employee	\$0.00	\$325.00	\$292.50	\$617.50
Company	\$650.00	\$975.00	\$942.50	\$1,267.50
Total	\$650.00	\$1,300.00	\$1,235.00	\$1,885.00

Dental (Monthly Cost)				
PPO Dental Plan	Employee Only	Employee + Spouse/DP	Employee + Children	Employee + Family
Employee	\$0.00	\$40.74	\$48.72	\$98.47
Company	\$43.45	\$43.45	\$43.45	\$43.45
Total	\$43.45	\$84.19	\$92.17	\$141.92

Vision (Monthly Cost)				
Vision Plan	Employee Only	Employee + Spouse/DP	Employee + Children	Employee + Family
Employee	\$0.00	\$8.51	\$5.90	\$15.24
Company	\$8.48	\$8.48	\$8.48	\$8.48
Total	\$8.48	\$16.99	\$14.38	\$23.72

Short Term Disability (Rate per \$10 of Weekly Benefit)	
Age	60% Benefit
<30	\$0.545
30-34	\$0.553
35-39	\$0.553
40-44	\$0.570
45-49	\$0.673
50-54	\$0.843
55-59	\$1.030
60-64	\$1.081
65+	\$1.217

Optional Life and Optional AD&D				
Employee and Dependent Spouse/DP ¹				Dependent Child(ren)
Age ²	Life Rates Per \$1,000	AD&D Rates Per \$1,000	Total Rates	Life/AD&D Rate Per \$1,000
<30	\$0.060	\$0.016	\$0.076	\$0.256 Regardless of the number of children covered
30 - 34	\$0.080	\$0.016	\$0.096	
35 - 39	\$0.096	\$0.016	\$0.112	
40 - 44	\$0.120	\$0.016	\$0.136	
45 - 49	\$0.180	\$0.016	\$0.196	
50 - 54	\$0.276	\$0.016	\$0.292	
55 - 59	\$0.502	\$0.016	\$0.518	
60 - 64	\$0.710	\$0.016	\$0.726	
65 - 69	\$1.270	\$0.016	\$1.286	
70+	\$2.060	\$0.016	\$2.076	

¹ The cost for spouse/DP coverage is based on the spouse/DP age.

² Attained age as of the previous 12/31. New hire or new enrollee due to qualified event is attained age as of effective date of coverage.

IMPORTANT PHONE NUMBERS AND WEBSITES



PUT IMPORTANT PHONE NUMBERS AND WEBSITES IN THE PALM OF YOUR HAND

- From your smartphone, go to: teamcreativa.com/claritycreditunion and click **Benefits Contacts for Smartphones**
- Then simply follow the on-screen instructions to add an app to your home screen that contains our important phone numbers and websites

Plan/Program	Contact Information	Group/Policy #
Medical (Blue Cross of Idaho)	855.230.6862 bcidaho.com	10036597-S001
Health Savings Account (HealthEquity)	866.346.5800 my.healthequity.com	8305104
Dental (MetLife)	800.275.4638 metlife.com	KMO5941455
Vision (MetLife)	800.275.4638 metlife.com	KMO5941455
Short Term Disability (LFG)	800.423.2765 LincolnFinancial.com	000010272809
Long Term Disability (LFG)	800.423.2765 LincolnFinancial.com	000010272808
Life and Accident (LFG)	Cindy Hodges: 208.318.0445 HR@ClarityCU.com	Basic Life/AD&D: 000010272807 Optional Life: 000400001000-27524 Optional AD&D: 000403008263
Employee Assistance Program (EmployeeConnect)	888.628.4824 GuidanceResources.com	
Calm Premium Subscription	teamcreativa.com/claritycreditunion/calm	
Discount Program (TicketsatWork)	ticketsatwork.com	CLARITYCUPERKS
Pet Insurance (MetLife)	800.438.6388 metlife.com/getpetquote	5941455
401(k) Plan (Voya)	800.584.6001 www.voya.com Plan Advisor — Michael Espinosa 801.274.1820 Michael@truenorthretire.com	664F9R
Aflac Voluntary Plans	208.290.3914 gerri_schoonderwoerd@us.aflac.com	
HR/Benefits	Cindy Hodges: 208.318.0445 HR@ClarityCU.com	
HR/Benefits Website	teamcreativa.com/claritycreditunion	

This guide provides a brief summary of the employee benefit plans in effect during the January 1, 2025 through December 31, 2025 plan year for Clarity Credit Union. It is not a Summary Plan Description (SPD). However, this guide serves as the “Summary of Material Modification” to our benefit plans in accordance with the requirements of the Employee Retirement Income Security Act of 1974, as amended (ERISA). If there is a discrepancy between this guide and the applicable insurance contract, agreement, SPD or plan document, the applicable insurance contract, agreement, SPD, or plan document will prevail.

This guide is not intended to be interpreted as a legal promise of benefits or guarantee of future or continued employment or as stating provisions and terms of employment. Clarity Credit Union and employees recognize their mutual right to end their employment relationship at any time and acknowledge that such relationship is one of at-will employment.

Clarity Credit Union at its sole discretion, reserves the right to change (including, but not limited to, the right to amend, suspend or terminate) or make exceptions to its personnel policies, procedures and employee benefit plans, or to change employee contributions at its discretion at any time and without prior notice. The policies and employee benefit plans described in this document may vary from location to location to conform to applicable law or business unit needs. Please refer to the revision date below, and keep in mind a more current version may be available on the HR/Benefits website.

Legal Notices

You may view a copy of the Legal Notices on teamcreativa.com/claritycreditunion. The document contains the Legal Notices required for the Clarity Credit Union health and welfare plans in effect on January 1, 2025. If you would like information on the plans, refer to the summary plan descriptions, evidence of coverage, insurance certificates and policies for complete terms, provisions, limitation and exclusions. If you require a paper copy, you can order it by contacting HR/Benefits.

Important Information About Medicare Prescription Drug Coverage

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please refer to the HR/Benefits website for more details.