



**Tule River Indian
Housing Authority**



2026 EMPLOYEE BENEFITS GUIDE

**THE
MAHONEY
GROUP®**

**YOUR RESOURCES FOR
A BETTER TOMORROW.**

Plan Year: 10/1/26 to 9/30/27

TABLE OF CONTENTS

ELIGIBILITY.....	3
BENEFITS ENROLLMENT.....	4
CHANGING YOUR BENEFITS DURING THE YEAR.....	4
MEDICAL INSURANCE.....	5-6
HOW TO FIND A PROVIDER.....	7
MY BENEFITS THROUGH BRMS.....	8
TELADOC HEALTH.....	9-13
TARGETED DISEASE MANAGEMENT.....	14
DIATHRIVE DIABETES PROGRAM.....	15-16
GHM INTERNATIONAL PHARMACY.....	17-19
EXPRESS SCRIPTS PHARMACY.....	20-22
FLEXIBLE SPENDING ACCOUNT.....	23-24
DENTAL INSURANCE	25-26
VISION INSURANCE.....	27
HEARING AID BENEFIT.....	28
VOLUNTARY BENEFITS.....	29-38
LIFE AND AD&D INSURANCE.....	39-48
EMPLOYEE ASSISTANCE PROGRAM.....	49-50
DISABILITY INSURANCE.....	51
401(K) RETIREMENT SAVINGS PLAN.....	52
MEDICAL, DENTAL AND VISION PREMIUM RATES.....	53
PAID TIME AWAY FROM WORK	54
ADDITIONAL INFORMATION	55

Tule River Indian Housing Authority BENEFITS

At Tule River Indian Housing Authority, we know our dedicated employees—YOU—are key to our overall success as an organization. We recognize that offering a quality, comprehensive benefit program is an important way to show you how valuable you are to the organization. We understand that navigating the world of employee benefits is challenging and no two employees are alike, which is why we offer this benefits guide to explain the multiple benefit options to improve your physical, financial and mental well-being.



ELIGIBILITY

ADDING A FAMILY MEMBER

Prior to electing benefits, employees should verify that Human Resources has proof of dependent status for any dependents who are being added. This is not required if your dependents have previously been covered through the Tule River Indian Housing Authority insurance plan. The following can be used as proof:

- Marriage license for spouse
- Birth certificate, adoption, or placement documents for children
- Signed domestic partner affidavit

COVERING YOUR FAMILY MEMBERS

Many of the plans offer coverage for your eligible family members, including:

- Legally married spouse or Domestic Partner (certification must be provided)
- Natural, adopted or stepchildren up to age 26
- Children over age 26 who are disabled and depend on you for support
- Temporary Custodial Agreement (TCA)

FULL-TIME EMPLOYEES	COVERAGE STARTS	COVERAGE ENDS
If you are a full-time employee, you are eligible to enroll in the Tule River Indian Housing Authority benefits if you work at least 30 or more hours per week. Your benefits are effective on your 1 st of the month following 60 days	If you enroll in benefits within 30 days of your date of hire, your coverage is effective the 1 st of the month following 60 Days. If you enroll during open enrollment, your coverage is effective October 1 st .	If your employment with Tule River Indian Housing Authority terminates (voluntarily or otherwise), your benefits will end on the last day of the month you terminate in.

BENEFITS ENROLLMENT

NEW EMPLOYEES

As a new employee, you must enroll in benefits within **30 days** of your date of hire. If you do not enroll within **30 days**, you will automatically be enrolled for Employee only coverage at \$60 per month. Please note: You may only make changes to your coverage during open enrollment or if you have a Change of Life Event.

CURRENT EMPLOYEES

Open enrollment is the only time during the year that you can change your benefits unless you experience a qualifying life event. During the open enrollment period, you have the opportunity to newly enroll in coverage and/or make changes to your current coverage.

If you wish to contribute pre-tax dollars to a flexible spending account in 2025, you must make a new election during open enrollment. FSA elections do not carry over from year to year.

Any changes you make during open enrollment become effective **October 1**.

CHANGING YOUR BENEFITS DURING THE YEAR

As stated here, you cannot change your benefits during the year unless you experience a qualifying life event. The most common qualifying life events are:

- Change in legal marital status
- Change in number of dependents or dependent eligibility status
- Change in employment status that affects eligibility for you, your spouse, or dependent child(ren)
- Change in your health coverage or your spouse's coverage due to your spouse's employment
- Change in an individual's eligibility for Medicare or Medicaid
- Court order requiring coverage for your child
- "Special enrollment event" under the Health Insurance Portability and Accountability Act (HIPAA), including a new dependent by marriage, birth or adoption, or loss of coverage under another health insurance plan
- Event allowed under the Children's Health Insurance Program (CHIP) Reauthorization Act (you have 60 days to request enrollment due to events allowed under CHIP)

Please contact Human Resources/visit Tule River Indian Housing Authority portal for a complete list of qualifying life events.

If you experience a qualifying life event and wish to change your benefits, you go to HR within **30 days** of the life event. You may be required to provide proof of your life event, such as a birth certificate or marriage license. You can only change benefits that were impacted by the life event (e.g., if you get married, you can add your new spouse to the medical plan, but you cannot change medical plans).

ONLINE ENROLLMENT

In order to complete your enrollment, you need:

- Dates of birth and social security numbers for yourself as well as any family members you are enrolling.
- Proof of eligibility for your spouse and dependent children (e.g., marriage license, birth certificate).

NEED TO KNOW UPDATES AND INFO

- We will be offering a new benefit: Symetra Health.
- Online Enrollment dates:
 - **8/25-9/5**
 - * **NEW ID CARDS to start using effective 10/1/26**
- **If you do not act your benefit elections will remain the same except FSA/DFSA. With the exception of 401k which can be changed anytime throughout the year.**



MEDICAL INSURANCE

Tule River Indian Housing Authority offers medical insurance plan options through **Anthem Blue Cross**. Please take the time to understand the features and differences of each plan so that you choose the coverage that is best for you and your family.

Medical plan includes in- and out-of-network benefits, which means you can choose any provider that you would like. However, you will pay less out of your pocket when you choose an Anthem Blue Cross network provider. Locate an Anthem Blue Cross network provider at www.anthem.com/ca.

The table below summarizes the key features of the medical plans. The coinsurance amounts listed reflect the amount you pay for services. Please refer to the official plan documents for additional information on coverage and exclusions.

	In-Network	Out-of-Network
Medicare Part D Creditable Coverage	Yes	Yes
Deductible (individual/family)	\$250 / \$500	\$500 / \$1,000
Out-of-pocket maximum (individual/ family)	\$3,500 / \$7,000	\$6,000 / \$12,000
Preventive care	No Charge	40% after deductible
Physician Office visits	\$25 copay	40% after deductible
Emergency Room	20% after deductible + \$150 copay	40% after deductible
Urgent Care	\$35 copay	40% after deductible
Lab/x-ray	\$25 copay	40% after deductible
Inpatient hospital	20% after \$250 copay	40% after deductible
Outpatient hospital	20% after deductible	40% after deductible
Complex Imaging (authorization required)	20% after deductible	40% after deductible



MEDICAL INSURANCE

PRESCRIPTION DRUGS		
	In-Network	Out-of-Network
Retail (30-day supply)		
Generic	\$0 copay	Not Covered
Preferred Brand	\$45 copay	Not Covered
Non-Preferred Brand	\$70 copay	Not Covered
Mail Order (90-day supply)		
Generic	\$0 copay	Not Covered
Brand	\$50 copay	Not Covered
Non-Preferred Brand	\$100 copay	Not Covered

Find a Provider

1. Login to www.anthem.com/ca
2. Click Find Care on the top right corner
3. Basic search as a guest
4. Plan Type – Medical
5. State where plan is offered – California
6. How you get health insurance – Medical (Employer-Sponsored)
7. Plan or network – Prudent Buyer PPO

Some facilities may appear as in-network; however, if services are billed under the physician's name rather than the facility, the physician must also be in-network for coverage to apply. Best practice is to ask the facility if the physician you are seeing is also in-network.

HOW TO FIND A PROVIDER

Medical: Prudent Buyer PPO/EPO How to Find a Provider

Visit <https://www.anthem.com/ca/find-care/> and select one of the 3 options to search for providers.

- **Log in to Find Care** to access your personalized portal and elected plan;
- Use **Member ID for Basic Search** if you know your 3 digit prefix. (first 3 values of your ID Number on your ID Card)
- Click **Basic search as a guest** to enter your plan.

Searching as a Guest? Follow the steps below.

STEP 1

Complete the fields with the following selections:

- What type of care are you searching for? Use drop down to select: **Medical Plan or Network**
- Your plan is offered in California. Use drop down to select: **California**
- How do you get health insurance? Use drop down to select: **Medical (Employer-Sponsored)**
- Select a plan or network. Use drop down to select **Prudent Buyer PPO/EPO**
- Click **Continue**

STEP 2

Enter the Zip Code in the far-left box for the location you are searching for a provider. You then have two ways to narrow your search:

- Option 1: Enter in the **Physician's Name, Specialty, NPI or license number** in the Search Box. The results will appear below and you can select the provider name or click **View All**.
- Option 2: Scroll down and click one of the Search by Care Provider boxes. The results will appear on a new screen, click the physician's name to obtain additional details.

STEP 3

View your search results.

- Click the  printer icon to print the results of your search.
- Click on a provider name to see more details.



Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

The screenshot shows two main options for searching for providers. On the left, 'Log in for Personalized Search' allows users to find doctors, hospitals, and more in their plan's network, with a 'Log in to Find Care' button. On the right, 'Use Member ID for Basic Search' allows users to find providers, hospitals, and more near them, with a 'Continue' button. Below these, there is a 'Basic search as a guest' option with a 'Continue' button.

The screenshot shows the 'Basic search as a guest' form. It includes fields for 'Select the type of plan or network' (Medical Plan or Network), 'Select the state where the plan or network is offered' (California), 'Select how you get health insurance' (Medical (Employer-Sponsored)), and 'Select a plan or network' (Prudent Buyer PPO/EPO). There are 'Cancel' and 'Continue' buttons at the bottom.

The screenshot shows the search results page. It includes a search bar with 'City, County, or ZIP' and 'Search by doctor (name or specialty), hospital, procedure, and more'. Below the search bar, there are five boxes for 'Search by Care Provider': Primary Care, Behavioral health, Lab (blood work), Imaging (X-ray or CT scan), and Hospital.

Looking to estimate your cost?

View estimated member liability by registering and logging into [anthem.com](https://www.anthem.com) or on the Sydney Health mobile app. From [Anthem.com](https://www.anthem.com), select **Find Care & Cost**. From the Sydney Health app, select the **Care** icon and then select **Find Care & Cost**. Search for the procedure you would like to estimate your cost for.

MY BENEFITS THROUGH BRMS



My Benefits *through BRMS*

Welcome to Benefit & Risk Management Services (BRMS). We are a Third-Party Administrator (TPA) who your employer has selected to assist in managing your benefits plan. We provide comprehensive claims administration and customer support for your Medical plan.

With over 30 years of industry experience, BRMS is committed to providing our members superior service and support. Building trusted and valued relationships is our top priority, and we look forward to helping you navigate your benefits and become a wise healthcare consumer.

When you need help, Contact BRMS

BRMS can assist you by answering questions pertaining to some of your benefits, including:

- How to find a provider
- ID Cards
- Claim status
- Plan Documents such as SBCs, SPDs, etc
- And much more

Who can I contact regarding my claim status and information?

You can access your claims information by visiting www.myhealthbenefits.com.

- First time users will be directed through a simple registration process.
- Keep your User ID and password for future use.
- Call BRMS customer support if you need assistance in completing your registration.

Who can my doctor/providers contact for information about my plan or to check my eligibility?

Your doctor/providers can contact BRMS for any benefit and plan-related questions through one of two methods:

- Visit brmsprovidergateway.com
- Contact Provider Services through the Number listed on your ID card



How do I contact BRMS

888-259-6316

What are BRMS' hours

7:00 am–6:00 p.m. PST

How do I find a provider

Visit
<https://www.anthem.com/ca/find-care/>
or call BRMS

How do I find a pharmacy

Visit www.express-scripts.com
or call BRMS

Who do I call with pharmacy questions

877-852-7511

Where do I go to access my claims, EOBs, and ID cards?

Visit www.myhealthbenefits.com



TELADOC HEALTH

When you need a
doctor, access one
anytime,
anywhere



Teladoc
HEALTH

Skip the trip to the waiting room. With Teladoc Health you can talk with a doctor within an hour by phone or app from wherever you are.

Know your care options:



General Medical

For non-emergency conditions like the flu, allergies, infections, and much more. Our doctors can also prescribe medicine if necessary.



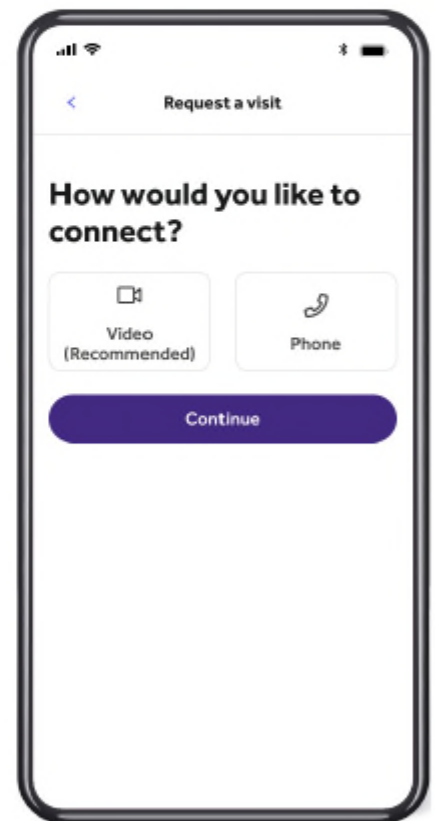
Family doctor

For annual exams and ongoing medical conditions needing regular monitoring.



Urgent care/ER

For severe conditions like chest pain, sprains, cuts, burns, or broken bones.



Feel better when you need to

Visit [TeladocHealth.com](https://www.TeladocHealth.com)
Call 1-800-835-2362 | Download the app  

TELADOC HEALTH DERMATOLOGY

Have your skin concerns evaluated by a licensed dermatologist



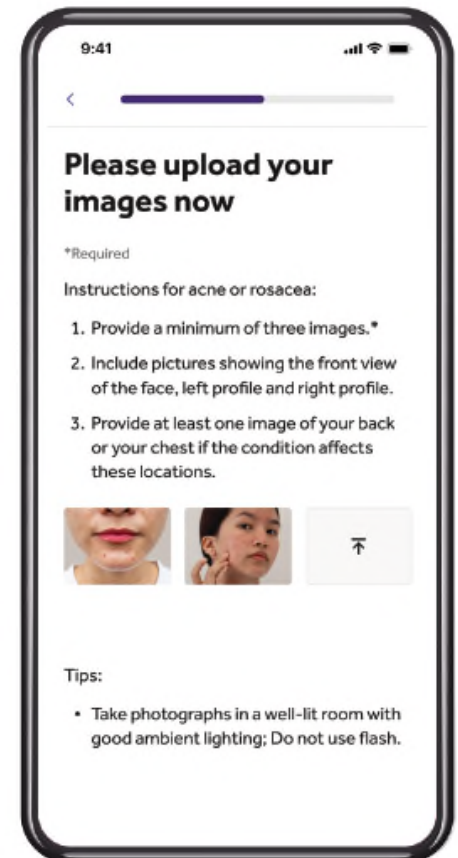
Clear, healthy skin is the goal, but sometimes you need help with:

- Acne
- Rosacea
- Rashes
- And more
- Eczema

Teladoc Health Dermatology is available to you in a snap. Upload images of your skin issue online or on the app. You'll receive a custom treatment plan within 24 hours.

How it works:

- 1 Download the app or go online to register or log in
- 2 Complete or update a brief medical history
- 3 Upload images of your skin issue online or on the app. You'll receive a treatment plan within 24 hours. You may ask questions for up to 7 days after you receive your plan.



Learn more today

Visit TeladocHealth.com

Call 1-800-835-2362 | Download the app  

TELADOC HEALTH NUTRITION

Connect with a
registered dietitian
and receive a
personalized plan

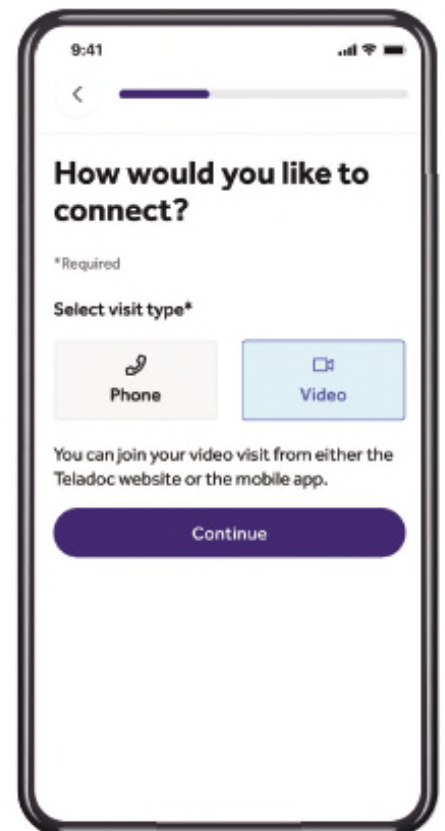


Talk to a registered dietitian by phone or video when it's most convenient for you. This service can help with:

- Weight management
- Diabetes
- High blood pressure
- Prenatal nutrition
- Other health conditions

How it works:

- 1 Download the app, go online or call Teladoc Health to get started
- 2 Complete or update a brief medical history
- 3 Request an appointment with a dietitian for a time that's convenient for you



Learn more

Visit [TeladocHealth.com](https://www.teladochealth.com)

Call 1-800-835-2362 | Download the app  

TELADOC HEALTH TOBACCO CESSATION



Healthcare from the break room, living room or anywhere else

Start using your Teladoc Health benefits.



General Medical (24/7 Care)

Need care for non-urgent and common conditions? Get same-day appointments with a certified provider from wherever you are. Teladoc Health providers diagnose, treat and even prescribe medicine if needed.

- Allergies
- Bronchitis
- Flu
- COVID-19
- Pink eye
- Rashes
- Sinus infections
- Sore throats
- And more

Tobacco Cessation

Quitting tobacco can be tough. Start a program to help quit tobacco for good. Get the help you need with medications (if necessary) and ongoing virtual support from registered nurses.

- Personalized coaching
- FDA-approved medications (if necessary)

Schedule a visit today and get peace of mind

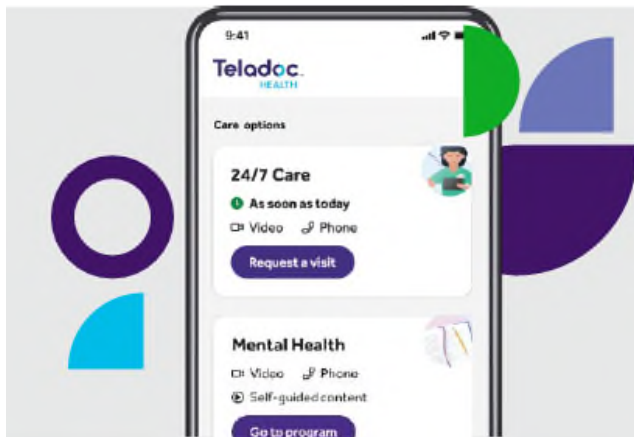
Visit [TeladocHealth.com](https://www.TeladocHealth.com)

Call 1-800-835-2362 | Download the app |

TELADOC HEALTH MENTAL HEALTH



Mental Health: What to know about this benefit



Did you know 1 in 5 adults battle with Mental Health challenges each year?¹

This means it's likely you or someone you know may need to find mental health help at some point. Our Teladoc Health plan might offer additional services like meeting with mental health professionals by phone or video. This care is always private because you choose when and where to meet with the therapist or psychiatrist (like at home, in your vehicle). These experts help with stress, anxiety, sleep and more so you can care for yourself emotionally. Your mental health deserves as much attention as your physical health. So join the 75% of people using the Teladoc Mental Health benefit who say this service has helped them feel better in just 3 appointments.

- **What Mental Health services does Teladoc Health provide?** Teladoc Health licensed therapists and psychiatrists are here for you no matter what you are facing, whether it's big or small. They can help you improve your mood with things like:
 - Learning to stay calm in stressful moments
 - Managing and understanding depression
 - How to handle relationship and family problems
 - Controlling anxiety caused by work or personal issues
 - Working through past trauma
 - Overcoming burnout which could be causing mental or physical exhaustion and irritation
- **How much does Teladoc Health cost?** Your out of pocket cost varies based on your plan. If you do have to pay, you will see your cost before you finish requesting your visit. You can pay with a credit card, prepaid debit card, HSA (health savings account), or by PayPal.
- **How do I sign up?** To sign up for Teladoc Health, scan the QR code below to download the app, call 1-800-835-2362, or visit the website. After you set up your account, you will fill out a short medical history. You can choose the provider who you like and best fits what you are looking for. Then you will schedule a private visit at a time - and place - that works for you.

Call 1-800-835-2362

Visit TeladocHealth.com | Download the app



TARGETED DISEASE MANAGEMENT



Targeted Disease Management *With BRMS and American Health Holdings*

BRMS has partnered with American Health Holdings to provide a robust disease management program that targets nine prevalent conditions for which evidence-based guidelines are established to impact health and measure improvements. Members with chronic conditions are identified through an advanced predictive modeling system and work one-on-one with a dedicated nurse health coach.

Disease Management nurse health coaches are registered nurses who have been trained in motivational interviewing techniques. Nurse health coaches identify participants' confidence and ability to self-manage their condition using the Patient Activation Measure assessment, developed by Insignia Health. They then help participants set individual goals using Insignia's Coaching for Activation behavioral change model.

Population Health—Managing Member Risk

Plan members will receive a welcome letter once the program is available. Additionally, members identified through claims data and predictive modeling systems that may benefit from the program will be sent an invitation letter. If the member agrees to participate, AHH engages through assessments, education, 1:1 coaching and more.

Managing 9 Prevalent Conditions

- Asthma
- Chronic Kidney Disease
- Chronic Pain (osteoarthritis, rheumatoid arthritis or low back pain)
- Coronary artery disease (CAD)
- Congestive heart failure (CHF)
- Chronic obstructive pulmonary disease (COPD)
- Diabetes
- Hyperlipidemia
- Hypertension

Program Highlights

Advanced predictive modeling identifies individuals with chronic conditions

A coordinated effort between BRMS Care Management and American Health Holdings nurse health coaches to ensure members have a seamless transition into the program

Nurse health coaches use motivational interviewing techniques to empower individuals to self-manage their conditions

Transitional Disease Management is available for groups who do not have access to historical claims data.

\$5,364 annual average medical cost savings per managed member



Unlimited Supplies Meter & App Sync Clinical Support

Diathrive Health's diabetes management solution is **FREE** to you through your employer-sponsored health plan.

This benefit includes:

- Diathrive+ Glucose Meter
- Unlimited test strips
- Lancets and a lancing device
- Insulin Pen Needles
- Unlimited clinical support from our **Health Advisors**
- CGM sensors and insulin pump supplies



Scan to get started



Questions? Contact Us

866-878-7477

support@diathrive.com

Health Advisor

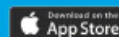
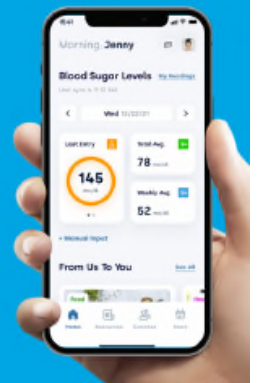
Unlimited clinical support and personalized diabetes care.

Our Health Advisors are Registered Nurses and Certified Diabetes Care and Education Specialists, ready to help.

Diathrive Health App

Diabetes management made simple.

- Sync your meter
- Diabetes education
- Reorder supplies
- Connect with your **Health Advisor**





CGM Sensors and Pump Supplies, NO COST to You.



Get your CGM sensors and insulin pump supplies, now FREE to you through your employer-sponsored health plan.

Get **Dexcom, FreeStyle Libre, OmniPod, Tandem, and more.**

You also get access to unlimited **clinical support from our Health Advisors** to help you make the best use of your diabetes tools.

Our Health Advisors are Registered Nurses and Certified Diabetes Care and Education Specialists (CDCES), ready to help.

Scan to get started



Questions? Contact Us

866-878-7477

support@diathrive.com



©2025 Diathrive Health



Global Health management CANADA

01 SAVING YOU MONEY ON CO-PAYS



Your employer sets a zero (no co-pay) to low co-pay plan saving you money in your family budget.

Zero co-pay means you get your prescriptions for FREE, if you order from our program. We do not have tiers or out of network charges.

02 HELP YOUR EMPLOYER SAVE MONEY



A survey of US business owners indicates 60% are very worried about rising health care costs

Using our service helps your employer save 30% to 80% compared to US suppliers

This savings could be the difference from being in business, or out of business in today's challenging environment

03 FAMILY AND FRIENDS EXTENSION



We offer the same pricing for your family and friends as we do to your employer. So, if you're the only one covered by your company, you still get the same pricing for your family members, extended family, and friends.

Our retail prices are often far less than anyone ever hitting their high deductible cost.

04 WE ARE MAIL ORDER HOME DELIVERY



We deliver to your home. Keep out of the long lines at the local pharmacy where people are lined up and likely to pass on their germs to you. Our program is the ultimate family safety program

How To Use Our Services

- Contact our Client Services Manager Becki Stabblar toll free to enroll over the phone: 1-888-303-5255.
- Fill out our health history questionnaire over the phone or ask for our form from your HR representative and they can help you fax it to us
- Fax, Scan, or send a Picture of your medical prescription to to our client services team.
- We will coordinate delivery to your door

START SAVING MONEY TODAY!

GET YOUR FREE MEDS TODAY



START A SIX MONTH TRIAL

WORST THAT CAN HAPPEN IS YOU SAVE MONEY!

Call Becki at 1-888-303-5255

TRIHA CANADIAN PRESCRIPTION PROGRAM

Every Patient is
Important to Us



GHM Canada
78 Haven Hurst Cres Sw
Calgary, AB T2V 3C5 Canada

OUR SPECIAL OFFERS

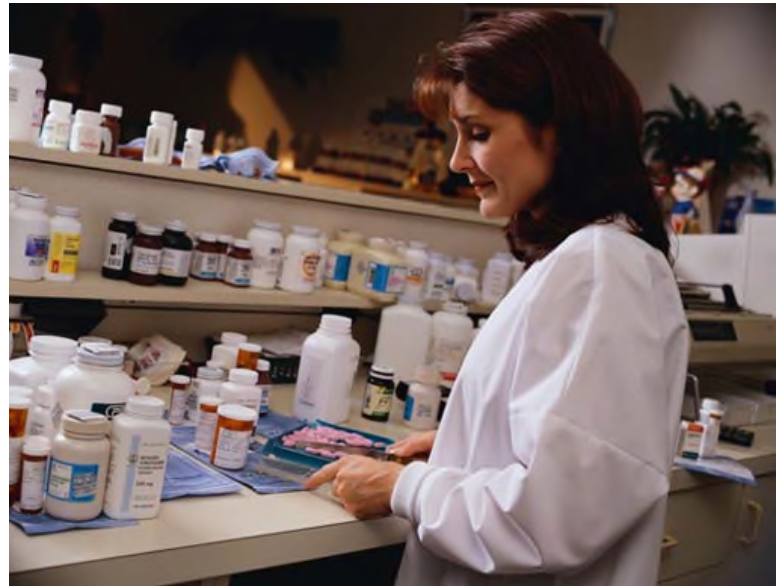
- **\$0 Co-Pay**
- **No Membership fees.**
- **Speak to a live person**
- **Safe and affordable**

We invite you to use our Canadian pharmacy partner to fill your 90-day supply of maintenance medications!

- Our Guarantee: Fulfillment from Government Registered Pharmacies, Owned and operated by Government Licensed Pharmacists, providing Government inspected prescriptions.

How it works:

1. Contact our Client Services Manager Becki Stabbler toll free to enroll over the phone: 1-888-303-5255
2. Or Fill out the patient health profile
3. Have your doctor fax in your prescription to our toll-free prescription line (We can also contact your doctor for your prescription)
4. Once we receive your prescription our Pharmacist and medical staff will review
5. We will then process and ship a 90-day supply of your maintenance medication directly to your home or office



IMPORTANT CONTACT INFORMATION

Client Services Manager: Becki Stabbler

Toll free Phone: 1-888-303-5255

Toll Free Fax: 1-877-334-6737

Email: becki.stabbler@ghmcanada.com

– ***Our Pharmacists are available for direct consultation with our clients, at no charge**

HEALTH HISTORY QUESTIONNAIRE

For questions please call: 1-888-303-5255 or Cellular: 1-905-716-9008

A Form of ID is required

Fax: 1-877-334-6737

Email: becki.stabblar@ghmcanada.com

Mailing address: 78 Havenhurst Crescent SW, Calgary, AB T2V 3C5

All questions contained in this questionnaire are strictly confidential and will become part of your medical record. Please fill out all requested information.

Name (Last, First, M.I.):	☐ M ☐ F	DOB:	
Address:			
Day Phone:		Evening Phone:	
Height:		EMAIL	
Weight		AUTOMATIC REFILLS (Y/N)	
Accept Medication from our Overseas Pharmacies? (Y/N)		Accept Generic Medications (Y/N)	
Date of last physical exam:		Pregnant (Y/N) / Due Date / Nursing (Y/N)	

PERSONAL HEALTH HISTORY

List any medical problems that have been diagnosed

List your prescribed drugs and over-the-counter drugs, such as vitamins and inhalers

Name the Drug	Strength	Frequency Taken
----------------------	-----------------	------------------------

Allergies to medications

Name the Drug	Reaction You Had
----------------------	-------------------------

DOCTOR INFORMATION

PRIMARY PHYSICIANS

NAME: _____

PHONE: _____

FAX#: _____

ADDITIONAL PHYSICIANS

NAME: _____

PHONE: _____

FAX#: _____

ADDITIONAL INFORMATION

TAKE THE OPPORTUNITY TO TAKE CONTROL OF YOUR PRESCRIPTION PLAN

My  RxBenefits®

Online Access to Your Pharmacy Benefits



By registering for My RxBenefits, you'll gain access to robust information related to your pharmacy benefits.

Access your information when it's convenient for you, **24 hours a day, 7 days a week.**



My RxBenefits will allow you to:

- Chat with a live agent, Monday–Friday, 9 a.m. to 6 p.m. Central
- View 18 months of pharmacy claims (including claims for eligible dependents)
- View, download, and email copies of ID cards
- Access your account across multiple devices, including computers, tablets, and phones
- Manage your communication preferences
- View pharmacy benefits coverage information



Sign up for the portal at:
<https://member.rxbenefits.com>



Copyright © 2025 RxBenefits, Inc. All Rights Reserved.

TAKE THE OPPORTUNITY TO TAKE CONTROL OF YOUR PRESCRIPTION PLAN

EXPRESS SCRIPTS
PHARMACY BENEFIT SERVICES

Go digital

For fast, simple and secure access to your prescription benefits

Express Scripts® Pharmacy Benefit Services manages the pharmacy portion of your health plan coverage to help make medication safer and more affordable. Just like your health plan covers your doctor visit, your pharmacy benefits or prescription plan covers the medication your doctor prescribes. Through your pharmacy benefits, you have access to a network of covered pharmacies and medications.

Our pharmacy benefit capabilities



Save on medications

Check the price of a medication before and during a doctor's visit.



Find a pharmacy

Locate the most convenient network pharmacy for your needs.



Coverage review

Before a doctor prescribes a medication, check to see if it needs a coverage review.



Set reminders

Set reminders to take your medication and sign up for text alerts.



TAKE THE OPPORTUNITY TO TAKE CONTROL OF YOUR PRESCRIPTION PLAN

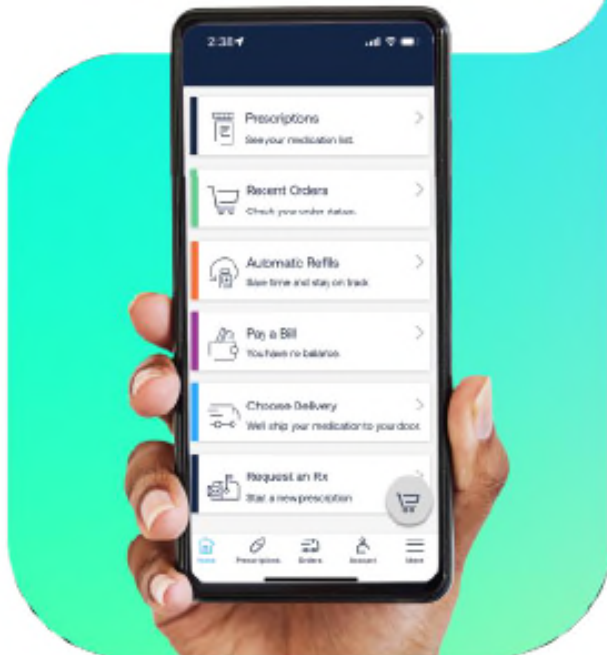
Get started now

Visit **express-scripts.com** to learn more about our pharmacy benefit services, so you can stress less and save more.

Download our new mobile app

Use the QR code or search Express Scripts® in your app store.

Download the app for free, then tap Register Now to get started.



991177 © 2025 Evernorth Health Services. All rights reserved.
All trademarks are the property of their respective owners. CRP1509602
All pictures are used for illustrative purposes only.



EVERNORTH
HEALTH SERVICES

FLEXIBLE SPENDING ACCOUNT

Tule River Indian Housing Authority offers flexible spending account (FSA) options through **Navia Benefits**. The money that you put into an FSA is collected from your paycheck before taxes are withheld, which means you don't pay taxes on those dollars. Basically, it is like using a 25% off coupon for your health care and dependent care expenses! Please read this page carefully before you make your FSA elections.

HEALTH CARE FSA

- You don't have to enroll in one of our medical plans to participate in the healthcare FSA.

FIND OUT MORE

- [Naviabenefits.com](https://naviabenefits.com)
- [Eligible and Ineligible Expenses](#) – now include more over-the-counter items!
- [FSA Card](#) – Where can I use the Navia Benefits Card?

ESTIMATE CAREFULLY!

- If you don't spend all the money in your account, you can rollover up to \$680 to use the next year.

FSA SAVINGS EXAMPLE

	Without FSA	With FSA
Annual Pay	\$60,000	\$60,000
Pre-Tax FSA Contributions for Healthcare Expenses	\$0	(\$2,000)
Taxable Income	\$60,000	\$58,000
Federal Taxes	(\$10,852)	(\$10,259)
After-Tax Healthcare Expenses	(\$2,000)	\$0
NET INCOME	\$47,148	\$47,741

How the Navia Flexible Spending Account works

- You estimate what you and your family's out-of-pocket costs will be for the coming year. Think about what out-of-pocket costs you expect to have for eligible expenses such as office visits, surgery, dental and vision expenses, prescriptions, even eligible drugstore items.
- You can contribute up to \$3,400, the annual limit set by the IRS. Contributions are deducted from your pay pretax, meaning no federal or state tax on that amount.
- During the year, you can use your FSA debit card to pay for services and products. Withdrawals are tax-free as long as they're for eligible healthcare expenses.
- Your election is to be used within the 10/1/2026-9/30/2027 plan year.

Your savings will depend on your income, tax bracket, and FSA contribution amount

FLEXIBLE SPENDING ACCOUNT

The biggest deduction from your paycheck is likely federal income tax. Why not take a bite out of taxes while paying for necessary expenses with tax-free dollars?

Dependent Care FSA—up to \$7,500 per year tax-free

A dependent care Flexible Spending Account (FSA) can help families save potentially hundreds of dollars per year on day care. This program is administered by Navia.

FIND OUT MORE

- [Naviabenefits.com](https://naviabenefits.com)
- [Day Care FSA – Where can I use the Navia Benefits Card?](#)

Here's how the Dependent Care FSA works

You set aside money from your paycheck, before taxes, to pay for work-related day care expenses. Eligible expenses include not only childcare, but also before and after school care programs, preschool, and summer day camp for children under age 13. The account can also be used for day care for a spouse or other adult dependent who lives with you and is physically or mentally incapable of self-care.

You can set aside up to \$5,000* per household per year. You can pay your dependent care provider directly from your FSA account, or you can submit claims to get reimbursed for eligible dependent care expenses you pay out of pocket.

*((\$3,750 if married and filing separately)

Estimate carefully!

You can't change your FSA election amount mid-year unless you experience a qualifying event. Money contributed to a dependent care FSA must be used for expenses incurred during the same plan year. Unspent funds will be forfeited.



DENTAL INSURANCE

Ameritas: Dental PPO Plan.

Your dental plans include in- and out-of-network benefits, which means you can choose any dentist that you would like. However, you will pay less out of your pocket when you choose a **Ameritas** network dentist. Locate a **Ameritas** network dentist at www.ameritas.com.

The table below summarizes the key features of the dental plans. The coinsurance amounts listed reflect the amount you pay for services. Please refer to the official plan documents for additional information on coverage and exclusions.



DO I NEED TO SEE A DENTIST?

A visit to the dentist is about more than just a teeth cleaning. By looking in your mouth, your dentist can tell a lot about your overall health. In fact, he or she may be able to identify early signs of disease, such as diabetes, heart disease, kidney disease, and even some forms of cancer, before you even notice symptoms.

	In-Network	Out-of-Network
Deductible (individual/family)	\$50 / \$150	\$100 / \$300
Annual Benefit Maximum	\$1,500 per person per calendar year	\$750 per person per calendar year
Diagnostic/preventive Services	100% (deductible waived)	100%
Basic Services	80%	80%
Major Services	60%	50%
Orthodontic Services	50%	50%
Orthodontic Maximum	\$2,000 lifetime maximum per person	\$2,000 lifetime maximum per person

DENTAL REWARDS

Dental Rewards

A member earns dental rewards by submitting at least one claim for dental expenses incurred during the benefit year, while staying at or under the threshold amount for benefits received for that year. For additional information refer to Plan Document.

Benefit Threshold	\$250	Dental benefits received for the year cannot exceed this amount
Annual Carryover Amount	\$125	Dental rewards amount is added to the following year's maximum
Annual PPO Bonus	\$50	Additional bonus is earned if the member sees a network provider
Maximum Carryover	\$500	Maximum possible accumulation for Dental Rewards and PPO Bonus combined

Please note: Late entrant restrictions may apply.

FUSION:

FUSION combines dental and eye care benefits into one easy-to-administer plan. This plan combines the annual maximum between the dental and vision plans.

For the maximum:

- The member can use up to \$750 Non PPO - \$1,500 PPO toward any covered dental expense.
- The member can use up to \$300 toward any covered eye care expense.
- Total benefits paid between the two coverages will not exceed \$1,500.

VISION INSURANCE

Tule River Indian Housing Authority offers two vision insurance plans through Ameritas. This plan allows you to choose any eye care provider. However, you will maximize the plan benefits when you choose a network provider. Locate a VSP provider at: www.vsp.com; Choice Network. Locate an EyeMed provider at www.eyemedvisioncare.com

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

	VSP Choice Network	EyeMed Insight Network
Frequency of Glasses/Lenses/Frames	12 / 12 / 12	12 / 12 / 12
Exams	\$10 copay	\$10 copay
Lenses Single Vision Bifocal Trifocal Lenticular	\$10 copay \$10 copay \$10 copay \$10 copay	\$10 copay \$10 copay \$10 copay 20% discount
Frames	\$130 allowance + 20% discount	\$130 allowance + 20% discount
Contacts Contact lens exam (fitting and evaluation)	\$130 allowance Up to \$60	\$130 allowance Up to \$40



DO I NEED AN ANNUAL EYE EXAM IF I HAVE PERFECT VISION?

Your eyes are your windows to the world. They are also your eye doctor's windows into your body. Just by looking in your eyes, a doctor can find warning signs of serious diseases and conditions like high blood pressure, high cholesterol, thyroid diseases, and certain types of cancer. In fact, eye doctors are frequently the first to detect signs of abnormal health conditions.

Save on Hearing Aids

Start with a free consultation



With your Ameritas benefits, you get a value-add, non-insurance hearing savings program through Tuned.

Benefits include:

- Up to 50% off retail pricing on top hearing technology
- Free 45-day trial on hearing aids with a full refund if not satisfied*
- 3-year loss and damage warranty*
- Ability to share savings with up to 3 immediate family members

This savings arrangement is not intended as a replacement for insurance. It is available to you at no additional cost.

How is your hearing?

Find out by scheduling a complimentary hearing consultation through Tuned. Take a hearing test with a hearing care provider of your choice (including an ENT specialist). Or take a clinical hearing test from home with Tuned. Call 855-496-2766 or visit tunedcare.com/ameritas for more information.

Your Ameritas hearing savings cards are below.
Thank you for choosing Ameritas!

Ameritas Hearing Savings Card



Member Name: _____

Schedule a complimentary hearing consultation by calling 855-496-2766. Visit tunedcare.com/ameritas to learn more.

GR 8216 8-25

Ameritas Hearing Savings Card



Member Name: _____

Schedule a complimentary hearing consultation by calling 855-496-2766. Visit tunedcare.com/ameritas to learn more.

GR 8216 8-25

*May include a restocking fee for returns or deductible for lost/stolen/damaged devices.

This is not insurance. This piece is not for use in New Mexico. Discounts are not administered by Ameritas Life Insurance Corp. or an affiliated company. Discounts are not administered by Ameritas Life Insurance Corp., Ameritas Life Insurance Corp. of New York, or an affiliated company. Ameritas and the bison design are service marks or registered service marks of Ameritas Life, affiliate Ameritas Holding Company or Ameritas Mutual Holding Company.

© 2025 Ameritas Mutual Holding Company.



Ameritas Life Insurance Corp.
Ameritas Life Insurance Corp. of New York

VOLUNTARY BENEFITS

Tule River Indian Housing Authority provides you the option to purchase **accident insurance and critical illness insurance and hospital insurance** through Symetra. The amount you pay for these plans is deducted from your paycheck on a post-tax basis. This ensures that any payments you receive are not taxed. Learn more about the accident, critical illness and hospital plans at www.Symetra.com/MyGo

ACCIDENT INSURANCE

Accident insurance is a policy that can help you pay expenses that may follow an accident, including out-of-pocket health care costs. This plan pays benefits if you are injured in an accident.

KEY FEATURES OF THE CRITICAL ILLNESS INSURANCE PLAN:

YOU MUST ENROLL EACH YEAR TO PARTICIPATE.

- You can use the money for whatever you would like
- It does not matter what medical plan you have

Health screening benefit: \$50 cash for completing an annual wellness exam or other preventive screenings

KEY FEATURES OF THE ACCIDENT INSURANCE PLAN:

- The amount you receive is based on your injuries, services provided, and treatment
- You can use the money for whatever you would like
- Benefits are not taxed
- It does not matter what medical plan you have
- **50 Wellness Screening Incentive**

CRITICAL ILLNESS INSURANCE

Critical illness insurance is a policy that provides a lump-sum, cash benefit if you are diagnosed with a covered illness (e.g., heart attack, stroke, cancer). These diagnoses can cause significant financial burden, especially if you are unable to work while receiving treatment. You can use the money you receive however you would like, including to help you pay your mortgage, pay your deductible, seek experimental treatment, or for any other expenses. The benefit amount you receive is based on the level of coverage you purchase. You may also purchase coverage for your spouse and/or dependent children. **\$50 Wellness Screening Incentive**

Coverage Options:

- Employee: \$10,000, \$20,000, or \$30,000; guarantee issue: Up to \$10,000, \$20,000, or \$30,000
- Spouse: 50% of employee's election
- Dependent children to age 26: 50% of employee's election

HOSPITAL INSURANCE

Hospital insurance helps you and your family members cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness or childbirth. Also includes a **\$50 Wellness Screening Incentive**.



VOLUNTARY BENEFITS



Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200 | Bellevue, WA 98004-5135
www.symetra.com

Symetra Health: Supplemental Health Insurance

Prepared especially for the employees of:
Tule River Indian Tribe of California

What is Symetra Health?
Symetra Health is a supplemental health insurance plan that pays a lump-sum benefit if you are diagnosed with any of 13,000+ covered conditions. It pays cash benefits to help with health care expenses not covered by your major medical insurance—or anything else you need on your road to recovery. This is an overview of the insurance offered by Symetra. A Symetra Health plan certificate will be available after you enroll to explain your coverage in detail.

When is coverage effective?
The initial effective date of this coverage is October 1, 2025, subject to any eligibility waiting period established by your employer.

Who is eligible?
You are eligible for coverage if you are all full-time employees actively at work with comprehensive health insurance who work at least 20 hours per week on a regularly scheduled basis. Spouses and dependent children are also eligible for coverage. Dependent children must be unmarried and under age 26. Children over 26 are eligible for coverage as long as they are incapable of self-sustaining employment due to a physical or mental disability and are chiefly dependent on you for support and maintenance.

How does Symetra Health work?
Injuries and illnesses come in different shapes and sizes. Some conditions are less serious than others, while some are dangerous or life-threatening. That's why Symetra Health was designed as a single plan with three benefit categories that cover a broad spectrum. Covered conditions fall into one of these categories. Each category has a set payout, and all three categories are included in your plan.

Moderate Condition Benefit	Injuries or illnesses that likely require a short visit to the ER or urgent care.	Examples: Simple fractures, lacerations, dehydration, kidney stones
Severe Condition Benefit	Serious conditions that require more intensive medical treatment and attention.	Examples: Compound fractures, appendicitis, pulmonary embolism, torn ACL
Catastrophic Condition Benefit	Life-threatening conditions that require immediate medical intervention.	Examples: Malignant lung cancer, heart attack, stroke, major organ failure

What are my coverage options?
You may choose one of the pre-configured packages listed below. If you or an insured dependent is diagnosed with a covered condition, the payout will equal the amount you elected for the benefit category in which the covered condition falls. For example, if you select the Classic Plan, any covered condition in the Severe category will pay a \$500 benefit.

Classic Plan	
Moderate Conditions	\$200
Severe Conditions	\$500
Catastrophic Conditions	\$2,000

VOLUNTARY BENEFITS

Symetra Health: Supplemental Health Insurance

Am I guaranteed coverage?

Yes. You can enroll in this insurance plan without having to provide information about your health. This is called guaranteed-issue coverage. Dependent coverage, if elected, is also guaranteed. If you do not enroll during your open enrollment period, you may enroll later, but your coverage will be subject to a 60-day benefit waiting period. No benefits are payable during the benefit waiting period.

I already have insurance. Why do I need this too?

Costs associated with unexpected health issues can pile up, even with health insurance. Once treatment for an injury or illness begins, health insurance cost-sharing (such as deductibles, copays and/or coinsurance) may quickly lead to high out-of-pocket costs. Symetra Health is designed to help cover these costs or any other expenses during your recovery. There are no restrictions on how you use your Symetra Health benefits.

Can I still enroll in Symetra Health if I'm not covered by my company's major medical plan?

Yes! Symetra Health coverage is available for you (and your eligible dependents) even if you haven't enrolled in your employer's major medical plan. Please note that Symetra Health is not a substitute for a major medical plan.

How many times will the policy pay?

Symetra Health will pay a benefit if you or any insured dependent is diagnosed with a covered condition. You may receive a benefit more than once as noted below, subject to a defined separation period.

MODERATE CONDITION BENEFIT: A Moderate Condition Benefit is only payable once per insured person in a 14-day period. If the same insured person is diagnosed with another Moderate Condition within a 14-day period, it will not be covered. There is no limit to the number of times an insured person may receive a Moderate Condition Benefit.

SEVERE CONDITION BENEFIT: A Severe Condition Benefit is only payable once per insured person in a 30-day period. If the same insured person is diagnosed with another Severe Condition within a 30-day period, it will not be covered. There is no limit to the number of times an insured person may receive a Severe Condition Benefit.

CATASTROPHIC CONDITION BENEFIT: A Catastrophic Condition Benefit is only payable once per insured person in a 90-day period. If the same insured person is diagnosed with another Catastrophic Condition within a 90-day period, it will not be covered. An insured person may only receive this benefit up to three times for the same or related condition during the insured person's lifetime.

Will my coverage ever be reduced?

The benefit amounts in each category will be reduced by 50% for all insureds on your plan once you attain age 70.

Can I keep this insurance if I leave my employer?

Yes. If you leave your employer, you may continue coverage for yourself and your dependents.

How much does Symetra Health cost?

Your monthly premium costs are illustrated below.

		AGE		
Classic Plan		18-49	50-59	60+
Moderate: \$200	Select One only	\$18.03	\$52.51	\$86.26
Severe: \$500	Select One + spouse	\$36.05	\$105.01	\$172.51
Catastrophic: \$2,000	Select One + children	\$32.45	\$94.51	\$155.26
	Select One + family	\$54.08	\$157.52	\$258.77

VOLUNTARY BENEFITS

Symetra Life Insurance Company



Get the most out of your benefits
with the Symetra Health mobile app

Symetra Health

A supplemental health insurance plan

Log in anytime to:



Check your
benefit amounts.



File a claim
within minutes.



Review covered
conditions.



Upload claim documents
from your phone.



Message
Member Services.



Select your preferred
e-payment for benefits.



Getting started

- 1 Scan the QR code or [click here](#) to register for an online account and create your password.
- 2 Download the Symetra Health mobile app through the Apple App Store or Google Play for Android. Once you've registered for an account, you can log in.
- 3 Choose an e-payment method like Venmo, PayPal or direct deposit for faster benefit payments.

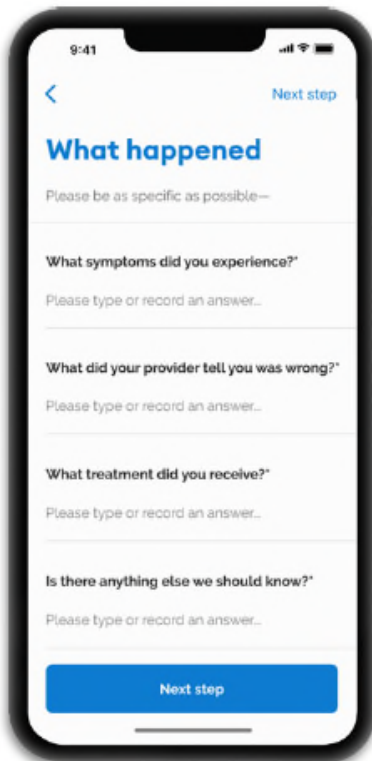
VOLUNTARY BENEFITS

Symetra Life Insurance Company



How to file a claim

Symetra Health, a supplemental health insurance plan



Contact us:

symetrahealthsupport@joinansel.com

Call 1-888-384-3479

Monday through Friday

7:30 a.m. to 6 p.m. ET

Fax: 1-856-329-0449

Mailing address:

Ansel Services—Attn: CLAIMS

2093 Philadelphia Pike #8776

Claymont, DE 19703

Option 1 (recommended)

Use the Symetra Health mobile app

Initiate a claim within minutes directly from your mobile device.

- 1 Download the Symetra Health mobile app through the Apple App Store or Google Play.
- 2 Log in to your account. If you have not yet created a Symetra Health account, [click here](#) or scan the QR code to register for one online.
- 3 Tell us what happened.
- 4 Upload photos and/or documents.
- 5 Select your payment preference (Venmo, PayPal or a bank account).



Option 2

Use the Symetra Health member portal

[Click here](#) or scan the QR code to register for an account.

- 1 Log in to your Symetra Health account.
- 2 Tell us what happened.
- 3 Upload photos and/or documents.
- 4 Select your payment preference (Venmo, PayPal or a bank account).

Option 3

Mail or fax a claim submission

- 1 Print and fill out a claim submission form, which can be found in your [online account](#).
- 2 Attach four supporting documents that confirm your claim.
- 3 Mail or fax this paperwork using the contact information on the left.

VOLUNTARY BENEFITS

Frequently asked questions

Where can I find a full list of covered conditions?

Once you log in to the Symetra Health mobile app, you can use the conditions lookup tool to search for 13,000+ covered conditions.

How long do I have to submit my claim?

Your claim can be submitted within one year of the date of diagnosis. Please refer to your certificate for complete details.

When will I know the decision on my claim?

We typically make claim decisions and send benefit payments within 72 hours. If the claim submission or benefit payment is being mailed, the review period and payout will take longer than 72 hours. Additionally, if there's an issue with your claim, we'll reach out and get it resolved as soon as possible.

Can you help me gather any remaining information from my medical provider?

Yes. Additional information such as doctor notes, may be requested, and we're happy to help you gather the remaining details after you or a provider initiate a claim. We'll just need you to sign a Release of Information Form so we can contact the provider on your behalf.

Which types of medical documentation should I provide to support my claim?

Here are some examples of the types of supporting documentation you can provide:

- Hospital discharge paperwork
- Summary of care
- Statement of benefits
- Ambulance call report
- Image of hospital wristband
- Image of a prescription for medication
- Image of a prescription medication bottle
- A doctor's bill
- A medical facility bill
- A lab bill
- Lab reports
- Test results
- Imaging results

We ask that you send four types of documents when submitting a claim, but if you don't have four, please submit at least two.



VOLUNTARY BENEFITS

Symetra Life Insurance Company



Critical Illness Insurance

Understanding your health screening benefit



Contact us:

Call 1-800-497-3699

Monday–Friday
7:30 a.m. to 6 p.m. ET

sbclaims@symetra.com
symetra.com/MyGO

Mailing address:
P.O. Box 440
Ashland, WI 54806
Fax: 715-682-5919

Your health screening benefit amount:

\$50

\$50 for spouse

\$50 for dependent child

Policy #: 12678000

Policyholder:
Tule River Indian Tribe of CA

You can also submit claims through
My Group Online (MyGO). Simply
use the policy information above to
self-register and create an account.

Health screenings are essential when it comes to early detection of serious conditions. Fortunately, through your critical illness policy, you can receive a financial benefit for being proactive about your health and your family's.

After completing a health screening, just give us a call or send us an email and let us know (1) the name of the insured, (2) the type of screening, and (3) the date the screening was completed.

Eligible health screenings

- Biopsy
- Blood test for triglycerides
- Bone marrow testing
- Breast ultrasound
- CA 125 (blood test for ovarian cancer)
- CA 15-3 (blood test for breast cancer)
- CEA (blood test for colon cancer)
- Chest X-ray
- Colonoscopy
- COVID-19 (PCR, rapid, antibody)
- Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemocult stool specimen
- Mammogram
- Pap test
- Prostate-specific antigen (PSA) test
- Serum cholesterol test to determine HDL/LDL level
- Serum protein electrophoresis (blood test for myeloma)
- Stress test on a bicycle or treadmill
- Thermography

Additional health screenings may be eligible for a benefit. Please refer to your certificate for complete details.

[Continued >](#)

SBM-6396

2/23

VOLUNTARY BENEFITS

Frequently asked questions

How do I let Symetra know I had a health screening?

It's easy. Give us a call or send us an email and let us know three things: the name of the insured, the type of screening, and the date the screening was completed.

You can also submit a claim through [MyGO](#). Once you've created an account and logged in, click **Submit my claim** and add any required information. You can also upload any relevant documentation from a desktop computer or mobile device.¹

Is there another way to file my health screening benefit claim?

Yes. You can also send claims by mail or fax. Please use the contact information on the first page and we'll be happy to assist.

Who can receive a health screening benefit?

Anyone covered under your plan is eligible for these benefits. Please review your enrollment information for more details.

How often can I receive a health screening benefit?

This benefit is payable once per covered member during a calendar year.

What if I have a screening that qualifies for benefits under more than one of my Symetra plans?

If you have multiple coverages with Symetra, we'll automatically cross-check to see if you're eligible for more than one benefit and submit the claim on your behalf.



Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

Symetra® is a registered service mark of
Symetra Life Insurance Company.

Critical illness policies, insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, are not available in all U.S. states or any U.S. territory. They provide benefits at a preselected, fixed dollar amount for covered conditions. They are not a replacement for major medical or other comprehensive coverage, and do not satisfy the minimum essential coverage requirements of the Affordable Care Act. Base certificate form number is SBC-04535 1/21.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, contact your benefits representative.

¹ If your policy was issued in CA or PA, please upload the actual bill and the Explanation of Benefits (EOB) from your health insurance carrier.

|

VOLUNTARY BENEFITS

Symetra Life Insurance Company



Hospital Indemnity Insurance

Understanding your wellness benefit



Contact us

Call 1-800-497-3699
Monday–Friday
7:30 a.m. to 6 p.m. ET
sbclaims@symetra.com
symetra.com/MyGO

Mailing address:
P.O. Box 440
Ashland, WI 54806
Fax: 715-682-5919

Your wellness benefit amount:

\$50
\$50 for spouse
\$50 for children

Policy #: 12678000

Policyholder:
Tule River Indian Tribe of CA

You can also submit claims through My Group Online (MyGO). Simply use the policy information above to self-register and create an account.

Identifying an illness before it requires emergency medical attention can help keep you out of the hospital. Fortunately, through your hospital indemnity insurance policy, you can receive a financial benefit for being proactive about your health and your family's.

After completing one of the following wellness screenings, just give us a call or send us an email and let us know (1) the name of the insured, (2) the type of screening, and (3) the date the screening was completed.

Eligible wellness screenings

- Abdominal aortic aneurysm ultrasonography
- Blood test for lipids, including total cholesterol, LDL, HDL and triglycerides
- Bone density screening
- Bone marrow testing
- Breast MRI
- Breast ultrasound
- CA 15-3 blood test for breast cancer
- CA 125 blood test for ovarian cancer
- Carotid Doppler
- CEA blood test for colon cancer
- Chest X-ray
- Child sports physicals
- Colonoscopy or virtual colonoscopy
- COVID-19 (PCR, rapid, antibody)
- CT angiography
- Electrocardiogram
- Fasting blood glucose test
- Flexible sigmoidoscopies
- Mammograms
- Pap test
- Prostate-specific antigen (PSA) test
- Serum cholesterol test to determine level of HDL and LDL
- Stress test on a bicycle or treadmill
- Testicular ultrasound
- Thermography
- ThinPrep Pap test

[Continued >](#)

VOLUNTARY BENEFITS

Frequently asked questions

How do I let Symetra know I had a wellness screening?

It's easy. Give us a call or send us an email and let us know three things: the name of the insured, the type of screening, and the date the screening was completed.

You can also submit a claim through **MyGO**. Once you've created an account and logged in, click **Submit my claim** and add any required information. You can also upload any relevant documentation from a desktop computer or mobile device.¹

Is there another way to file my wellness benefit claim?

Yes. You can also send claims by mail or fax. Please use the contact information on the first page and we'll be happy to assist.

Who can receive a wellness benefit?

Anyone covered under your plan is eligible for these benefits. Please review your enrollment information for more details.

How often can I receive a wellness screening?

This may vary. Please refer to your policy information or call Symetra at 1-800-497-3699 to confirm how often you can file a wellness screening claim.

What if I have a screening that qualifies for benefits under more than one of my Symetra plans?

If you have multiple coverages with Symetra, we'll automatically cross-check to see if you're eligible for more than one benefit and submit the claim on your behalf.



Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

Symetra® is a registered service mark of
Symetra Life Insurance Company

Fixed-payment (also known as "hospital indemnity") policies, insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, are not available in all U.S. states or any U.S. territory. They provide benefits at a preselected, fixed dollar amount. They are not a replacement for major medical or other comprehensive coverage, and do not satisfy the minimum essential coverage requirements of the Affordable Care Act. Base certificate form number is SBC-01505 6/20.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, contact your benefits representative.

¹ If your policy was issued in Pennsylvania, please upload the actual bill and the Explanation of Benefits (EOB) from your health insurance carrier.

LIFE AND AD&D INSURANCE

Life and accidental death and dismemberment (AD&D) insurance provides financial protection for those who depend on you for financial support. Upon your death, your designated beneficiary will receive the life benefit. If you die as the result of an accident, your beneficiary will receive both the life and AD&D benefits.

BASIC LIFE AND AD&D INSURANCE

Tule River Indian Housing Authority provides you with basic life and AD&D insurance at **no cost to you**.

- Employee life insurance benefit: **\$45,000**
- Employee AD&D insurance benefit: **\$45,000**



DESIGNATE A BENEFICIARY

In the event of your death, **Symetra** would pay your Life and/or AD&D policy to your beneficiaries. Designate your beneficiary for your Basic Life and AD&D insurance, as well as any Voluntary Life insurance. You may change this designation at any time. You are automatically the beneficiary on your Spouse and/or Child Life policy.

EVIDENCE OF INSURABILITY

If you purchase Life and AD&D insurance for yourself or your spouse and/or children when you are first eligible to enroll, you may purchase up to the guarantee issue amounts without completing a statement of health (evidence of insurability). If you do not enroll when first eligible, and choose to enroll during a future open enrollment period, you will be required to submit evidence of insurability for any amount of coverage. Coverage will not take effect until approved by **Symetra**.

VOLUNTARY LIFE AND AD&D INSURANCE

Depending on your personal situation, basic life and AD&D insurance might not be enough coverage for your needs. Tule River Indian Housing Authority provides you the option to purchase voluntary life and AD&D insurance at group rates through **Symetra**. You may also purchase voluntary coverage for your spouse and eligible children.



BASIC LIFE/AD&D COVERAGE

This benefit is provided at **NO COST** to you through Symetra.

Benefit Amount	
Employee	\$45,000

SUPPLEMENTAL LIFE/AD&D (EMPLOYEE-PAID)

If you determine you need more than the basic coverage, you may purchase additional coverage through Symetra for yourself and your eligible family members.

Benefit Option		Guaranteed Issue ¹
Employee	\$10,000 increments up to 5x annual salary or a maximum of \$500,000	\$200,000
Spouse/DP	\$5,000 increments up to \$250,000, not to exceed 100% of employee's benefit amount	\$25,000
Child(ren)	Live birth to 26 year(s): \$2,000 to \$45,000 in \$2,000 increments	\$45,000

1. During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

How to file a claim

Policy #: 12678000

Policyholder:

Tule River Indian Tribe of
California

When using MyGO for the first time,
please use the policy information above to
self-register before submitting a claim.

Contact us:

sbclaims@symetra.com
symetra.com/MyGO

Call 1-800-497-3699

Monday–Friday
6:30 a.m. to 5 p.m. CT
Fax: (715) 682-5919

Mailing address:
P.O. Box 440
Ashland, WI 54806

Option 1

Use your Symetra benefits ID card

- 1 Present your card at the time of service, and assign your benefits to your provider.
- 2 Your provider will file a claim with Symetra, and Symetra will pay the provider according to the policy.
- 3 Symetra will send you an Explanation of Benefits (EOB) showing how the claim was paid. You are responsible for paying any remaining balance.

Option 2

Use My Group Online (MyGO)

Initiate a claim within minutes on MyGO. This secure, user-friendly platform is available 24/7 through your computer or mobile device.

To submit your claim:

- 1 Log in to your account at symetra.com/MyGO and click “Submit my claim.”
- 2 Fill out a few simple fields and upload documents.
- 3 Hit “Submit.”

Option 3

Email, mail or fax a claim

- 1 Request an itemized bill (form UB04 or HCFA 1500) from your provider with a diagnosis code. For accident claims, you also need to write a statement explaining the date, place and cause of the accident.
- 2 Complete a claim submission form, which can be found on symetra.com/MyGO under “Forms.” We can also email, mail or fax this form to you.
- 3 Submit the above information to Symetra by email, mail or fax.

More with MyGO

With MyGO, you can also:

- Check the status of a claim.
- View an Explanation of Benefits.
- Download important forms.
- Request and/or view a benefits ID card.
- Submit scans, photos or electronic versions of claim documents.
- Set up direct deposit for benefit payments.

Continued >

HOW TO FILE A CLAIM

Frequently asked questions

Do I need a referral to see a specialist?

No. Referrals are not required, and you do not need pre-authorization to see a specialist.

How much time do I have to file a claim?

You have 90 days from the date of service to file a fixed-payment insurance claim. The first expense for an accident claim must be incurred within 60 days after the date of accident.

When will Symetra make a decision on my claim?

Symetra typically makes a decision on a claim within 10 days of receiving completed claim forms and any additional required information. Depending on the complexity of the claim, this review period may be extended up to an additional 15 days. If your claim is approved, you can expect to receive payment within 7-10 days.

Can Symetra help me gather any remaining information from my medical provider?

Yes. Additional information such as doctor notes may be requested, and we're happy to help you gather the remaining details after you or a provider initiates a claim. We'll just need you to sign a release of information form so we can contact the provider on your behalf.

Does the policy have to be effective to receive benefits?

Yes. The services received must occur while the policy is active.



Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

Symetra® is a registered service mark of
Symetra Life Insurance Company.

Fixed-payment indemnity policies, insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, are not available in all U.S. states or any U.S. territory. They are designed to provide benefits at a preselected, fixed dollar amount. They are not a replacement for major medical or other comprehensive coverage, and do not satisfy the minimum essential coverage requirements of the Affordable Care Act. Base certificate form number is SBC-01505 6/20 8/13. Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, contact your benefits representative.

IDENTITY THEFT ASSISTANCE

Symetra Life Insurance Company
First Symetra National Life Insurance Company of New York



Symetra Support

Identity Theft Assistance

Direct access to 24/7 support if your identity is stolen



Access your Identity Theft Assistance services

Just pick up the phone—
24 hours a day, seven days
a week—and call
On Call International.

U.S. and Canada:
978-651-9223

Anywhere else
(collect or direct):
833-808-0253

Via text message:
1-844-302-5131

Identity theft is a rising concern and it can happen to anyone.

Identity Theft Assistance can offer you peace of mind by providing you with step-by-step coaching and assistance to help you resolve identity theft



Fraud assistance

- **Three-bureau fraud alert placement assistance:** Upon your request, the three major credit bureaus can be contacted and informed about your lost or stolen credit cards, ensuring the incident is reported.



Document replacement and financial assistance

- **Lost wallet assistance:** If your debit/credit cards are lost or stolen, Identity Theft Assistance will contact the bank/credit card companies with you on the phone to alert them that the cards were lost or stolen and could be compromised. They'll also provide information to help you replace lost items such as your driver's license and Social Security card.
- **Lost passport replacement:** In the event your passport is lost or stolen, Identity Theft Assistance will assist you in securing an emergency passport replacement, including locating the nearest consulate or embassy if the loss occurs while you're traveling.
- **Emergency cash advance assistance:** If needed, Identity Theft Assistance will assist you in obtaining cash advances from family or friends.

[Continued >](#)

IDENTITY THEFT ASSISTANCE



Who's eligible?

You, your spouse and your dependents under age 26 (regardless of student status) are eligible for all services provided by Identity Theft Assistance. Identity thefts discovered prior to enrollment in a Symetra Group Life Insurance plan are not eligible for services.

If you think your identity has been stolen

Just pick up the phone—24 hours a day, seven days a week—and call On Call International at **(978) 651-9223** if you're in the U.S. or Canada, or **(833) 808-0253** from anywhere else in the world.

Tips to remember to protect your identity

- ✓ Carry only one or two debit or credit cards.
- ✓ Bring only the ID information that you'll actually need.
- ✓ Keep your passport safe while traveling—make copies, store it in a safe place, and if stolen or lost, report it immediately.
- ✓ Do not carry your Social Security card in your wallet.
- ✓ If your purse or wallet is stolen, immediately report it to the police.
- ✓ Notify your financial institution if your debit or credit card is lost or stolen.

For more information, contact your Symetra representative.



www.symetra.com

www.symetra.com/ny

Symetra® is a registered service mark of Symetra Life Insurance Company.



Symetra Life Insurance Company is the parent company of First Symetra National Life Insurance Company of New York (collectively, "Symetra"). Symetra Life Insurance Company does not solicit business in the state of New York and is not authorized to do so. Each company is responsible for its own financial obligations.

Group benefits are insured by (and absence management provided by) Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004. Benefits may not be available in all states and are not available in any U.S. territory. Policies may be subject to exclusions, limitations, reductions and termination of benefit provisions.

In New York, group policies are insured by First Symetra National Life Insurance Company of New York, New York, NY. Mailing address P.O. Box 34690, Seattle, WA 98124.

Identity Theft Assistance is provided by On Call International. Symetra Support may not be available in all states. On Call is not affiliated with Symetra or any of its subsidiaries.

TRAVEL ASSISTANCE

Symetra Life Insurance Company
First Symetra National Life Insurance Company of New York



Symetra Support

Travel Assistance

24/7 emergency help



Access your Travel Assistance services

Just pick up the phone—
24 hours a day, seven days
a week—and call

On Call International:

U.S. and Canada:

978-651-9223

Anywhere else

(collect or direct):

833-808-0253

Or text:

1-844-302-5131

Emergencies happen. When they happen far from home, it's comforting to know there's a team of multilingual professionals standing by to help.

Travel Assistance offers a variety of 24-hour-a-day services in more than 180 countries and territories worldwide—and each one is just a phone call or live chat away.



Medical assistance and transport services*

- **Medical, mental health, dental and pharmacy referrals:** Referrals are provided upon request in the given geographic area, where possible.
- **24-hour nurse help line:** Clinical assessment, education and general health information provided upon request.
- **Medical evacuation:** Emergency medical transportation with medical supervision from one facility to another when deemed medically necessary to receive more appropriate treatment.
- **Medical monitoring:** Provided during hospitalization to determine if care is appropriate or if evacuation is required.
- **Medically necessary repatriation:** Once you're stabilized and/or discharged and you're deemed fit to travel, Travel Assistance can arrange transportation to either your local accommodations or to your home for follow-up care or to recover.
- **Prescription replacement assistance:** Travel Assistance consults with the prescribing physician and, if possible, makes arrangements to send replacement medication or eyeglasses.
- **Coordination of benefits:** Travel Assistance requests health and travel insurance information and attempts to coordinate benefits during an active assistance case.
- **Repatriation of remains:** In the event of death while traveling, Travel Assistance will return the remains home for burial, including coordinating and arranging all necessary government authorizations and a container appropriate for transportation.
- **Vehicle return:** In the event of a death or medical transport that prevents you and your traveling companions from driving your vehicle home, Travel Assistance will procure a driving service to return your vehicle or fly someone you trust to drive it back home.
- **Emergency pet boarding/return:** If you're traveling with your pets and your medical condition leaves you hospitalized and your pet unattended, Travel Assistance

[Continued >](#)

TRAVEL ASSISTANCE

Who's eligible?

You, your spouse or domestic partner, and your dependents up to age 26 are considered eligible for all services provided by Travel Assistance.

You can receive pre-trip information at any time

All other services take effect when you're on a trip 100 miles or more from home lasting 90 days or less.

will arrange for your pet's return home or for boarding until your discharge.



Emergency Travel Assistance services*

- **Emergency travel arrangements for visit by family or friend:** If hospitalized, Travel Assistance will arrange travel and suitable hotel accommodations for a person of choice to join.
- **Return of dependent children:** If any dependents are present but left unattended as a result of a medical transportation, hospitalization or death, Travel Assistance will make arrangements to return them home, including a non-medical escort as required.
- **Return of traveling companion:** If a medical emergency or death occurs, Travel Assistance will arrange one-way economy airfare to return a companion to their original departure point.



Other key Travel Assistance services

- **Pre-trip travel information** including visa, passport, inoculation, immunization requirements, cultural information, embassy and consulate referrals, foreign exchange rates and travel advisories. Get up-to-date information regarding health risks, travel restrictions and weather conditions for destinations worldwide.
- **Emergency message relay** to and from friends, relatives and business associates.
- **24/7 assistance with emergency travel arrangements**, including a change of airline, hotel and car rental reservations, once a trip has started.
- **Help locating and replacing lost or stolen items**, like luggage, documents and personal possessions.
- **Legal services are available** if you are arrested while traveling internationally or are in need of legal services. Travel Assistance will arrange for an initial telephone consultation with an attorney without charge.
- **Translation assistance:** Interpreters are available via phone for translation needs. Travel Assistance will also provide referrals for local interpreters and written translation assistance.

*This is only an outline of the plan's features. All services must be arranged and provided by On Call International. Please review your Description of Coverage carefully to understand all the services available to you as well as any terms, conditions and limitations.

For more information, contact your Symetra representative.



www.symetra.com
www.symetra.com/ny

Symetra® is a registered service mark of Symetra Life Insurance Company.



Symetra Life Insurance Company is the parent company of First Symetra National Life Insurance Company of New York (collectively, "Symetra"). Symetra Life Insurance Company does not solicit business in the state of New York and is not authorized to do so. Each company is responsible for its own financial obligations.

Group benefits are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004. Benefits may not be available in all states and are not available in any U.S. territory. Policies may be subject to exclusions, limitations, reductions and termination of benefit provisions.

In New York, group policies are insured by First Symetra National Life Insurance Company of New York, New York, NY. Mailing address P.O. Box 34690, Seattle, WA 98124.

Travel Assistance is provided by On Call International. Symetra Support may not be available in all states. On Call is not affiliated with Symetra or any of its subsidiaries.

BENEFICIARY ASSISTANCE

Symetra Life Insurance Company
First Symetra National Life Insurance Company of New York



Symetra Support

Beneficiary Assistance

A helping hand after a loss



Access your Beneficiary Assistance services

Just pick up the phone—
24 hours a day, seven days
a week—and call

On Call International:

U.S. and Canada:

978-651-9223

Anywhere else

(collect or direct):

833-808-0253

Or text:

1-844-302-5131

Managing a loved one's final affairs can be overwhelming.

The amount of time and effort needed to process the loss and close an estate can make an already stressful time even more difficult. Beneficiary Assistance can offer some relief and provide compassionate guidance to help with paperwork, notifications and the time-consuming details of managing a loved one's final affairs.



Empathetic guidance

Dedicated coordinators are available 24/7 to provide compassionate, professional assistance to:

- **Answer questions.**
- **Offer guidance** on obtaining death certificates or, if applicable, a Consular Report of Death Abroad.
- **Provide beneficiaries with information** regarding local grief counseling services.
- **Assist beneficiaries** with researching local estate planning and/or probate resources.
- **Provide translation services**, if needed, for non-English speakers.

[Continued >](#)

BENEFICIARY ASSISTANCE



Who's eligible?

You, your spouse and your dependents up to age 26 (regardless of student status), as well as any beneficiaries named under your group life insurance policy with Symetra, are eligible for all services provided by Beneficiary Assistance.

Funeral home referrals

We understand it can be difficult to know how to handle the death of a loved one. When placed in a situation where you have to find a funeral home, you may feel overwhelmed. That's where Beneficiary Assistance can help. You can rely on the experienced beneficiary assistance coordinators to provide referrals to a local funeral home and to funeral director services, if needed.

If the loss of a loved one occurs during travel, Beneficiary Assistance can also help facilitate communication between funeral homes to help transfer your loved one home as quickly as possible.



Additional support after a loved one passes

You may also call Symetra at **1-877-377-6773** for your beneficiary checklist—a resource guide for additional support after a loved one's death.

Fraud resolution

A deceased's identity is an attractive target for criminals—and may be relatively easy to obtain. Specialists will help you take actions to protect your loved one's identity and will lend you a hand if their identity is stolen.

These services include:

- **Three-bureau fraud alert placement assistance:** Assist you in reporting the death, suppressing the deceased's credit report, and/or requesting the credit bureaus to freeze/close the account.
- **Help filing a police report,** if fraud has occurred.

For more information, contact your Symetra representative.



www.symetra.com
www.symetra.com/ny
Symetra® is a registered service mark of Symetra Life Insurance Company.

Symetra Life Insurance Company is the parent company of First Symetra National Life Insurance Company of New York (collectively, "Symetra"). Symetra Life Insurance Company does not solicit business in the state of New York and is not authorized to do so. Each company is responsible for its own financial obligations.

Group benefits are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004. Benefits may not be available in all states and are not available in any U.S. territory. Policies may be subject to exclusions, limitations, reductions and termination of benefit provisions.



In New York, group policies are insured by First Symetra National Life Insurance Company of New York, New York, NY. Mailing address P.O. Box 34690, Seattle, WA 98124.

Beneficiary Assistance is provided by On Call International. Symetra Support may not be available in all states. On Call is not affiliated with Symetra or any of its subsidiaries.

EMPLOYEE ASSISTANCE PROGRAM

Symetra Life Insurance Company



Employee Assistance Program

Helping you cope with the present and plan for the future



When life gets tough, it's helpful to have someone in your corner to listen, offer advice and point you in the right direction for additional help. That's what you get from DisabilityGuidanceSM—an Employee Assistance Program that offers confidential counseling when you need it most.

Your Employee Assistance Program

We're available 24/7 to assist you.

Call: 1-888-327-9573

TDD: 1-800-697-0353

Online: guidanceresources.com

Web ID: SYMETRA

When talking on the phone, mention Symetra as your employer sponsor.

Program Highlights

You and eligible family members can meet face-to-face with a counselor, financial planner or attorney for expert, confidential information and guidance.¹ Your household is eligible for a total of five sessions per calendar year plus another five sessions if the employee initiates a disability claim with Symetra; however, in California, this cannot exceed three counseling sessions per person per six-month period. These services are included in the overall premium, so no additional payment is required to use the program.

Confidential Counseling

Trained counselors with a master's or doctorate degree are just a phone call away—and completely confidential. They'll listen to your concerns and quickly refer you to appropriate resources and providers for:

- Stress, anxiety and depression
- Credit card or loan problems
- Difficulties with children
- Job pressures
- Grief and loss
- Substance abuse

Financial Information and Resources

Contact a certified public accountant or certified financial planner for financial information and guidance, including:

- Getting out of debt
- Credit card or loan problems
- Tax questions
- Retirement planning
- Estate planning
- Saving for college

Legal Support

Talk to an attorney about:

- Divorce and family law
- Debt and bankruptcy
- Landlord/tenant issues
- Real estate transactions
- Civil and criminal actions
- Contracts

Need Legal Representation?

A guidance consultant will refer you to a qualified attorney in your area for a free 30-minute consultation. Any customary legal fees after that are reduced by 25%.

Your DisabilityGuidanceSM Employee Assistance Program

Access Anytime

Call: 1-888-327-9573

TDD: 1-800-697-0353

Online: guidanceresources.com

Web ID: SYMETRA

When talking on the phone, mention Symetra as your employer sponsor.



Confidential support, information and resources for all of life's challenges.
Copyright © 2023 ComPsych Corporation. All rights reserved.
Symetra® is a registered service mark of Symetra Life Insurance Company.



Continued >

LDM-6220/CA 1/23

EMPLOYEE ASSISTANCE PROGRAM

Online Resources and Tools

Get trusted, professional information online about relationships, work, school, children, wellness, legal or financial issues, and more. Turn to GuidanceResources® online for:

- Timely articles, tutorials, videos and self-assessments
- “Ask the Expert” personal responses to your questions
- Searches for child or elder care, attorneys and financial planners

First-time users, follow these simple steps:

- 1 Go to www.guidanceresources.com and click on “Register.”
- 2 Provide your organization web ID: SYMETRA
- 3 Create a username and password.

Future logins

Simply enter your username and password, then click on the “Login” button.

If you have problems registering or logging in, send an email to memberservices@compsych.com or call 1-888-327-9573. Be sure to mention Symetra as your employer sponsor.

Planning for the Future

A will is one of the most important legal documents you can have. It ensures that you'll control who gets your property, who will be your children's guardian, and who manages your estate when you die.

EstateGuidance® makes it easy to create a simple, customized, legally binding will by offering:

- Convenient online access to will documentation tools
- Simple-to-follow instructions guiding you through the will generation process
- Online support from licensed attorneys, if needed
- The ability to make revisions at no cost

You can create a simple will for \$14.99; printing and mailing services are available for an additional fee. Prices may be subject to change—contact ComPsych for additional information.

To get started:

- 1 Visit www.estateguidance.com
- 2 Enter your promotional code: SYMETRA
- 3 Choose any of the options in the drop-down menu.



Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135

www.symetra.com

Symetra® is a registered service mark of
Symetra Life Insurance Company.

Group benefits are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

DisabilityGuidanceSM, GuidanceResources® and EstateGuidance® are provided by ComPsych® Corporation. Benefits may not be available in all states. ComPsych is not affiliated with Symetra Life Insurance Company or any of its affiliates. ComPsych®, GuidanceResources® and EstateGuidance® are registered trademarks of ComPsych Corporation. For more information, visit www.guidanceresources.com.

While Symetra has arranged for your access to these third-party EAP services, Symetra is not responsible for the provision of such services nor are we liable for the failure of the provision of the same. Further, we are not liable to you for the negligent provision of such goods and/or services by third-party service providers.

COMPSYCH®
GuidanceResources® Worldwide

ComPsych © 2023 ComPsych Corporation.

¹ Once you are enrolled in a group benefits policy from Symetra Life Insurance Company.

DISABILITY INSURANCE

Tule River Indian Housing Authority provides you with long-term disability insurance through **Symetra**. There is no cost to you for this benefit.



LONG-TERM DISABILITY INSURANCE

Long Term Disability Insurance can replace part of your income if a disability keeps you out of work for a long period of time.

- Elimination period: **90 days** (number of days you must be disabled to collect disability benefits) after STD benefit ends
- Benefit continues up to social security normal retirement age (SSNRA)
- Benefit amount: **60% of salary up to a maximum of \$7,500 per month**

401(K) RETIREMENT SAVINGS PLAN

To help you prepare for the future, Tule River Indian Housing Authority sponsors a 401(k) plan as part of its benefits package. Eligibility for the 401(k)-employer matching contribution is available to employees who have worked a minimum of three (3) months.

There are variations to the 401(k) due to your location/class.

Please consult with your HR Department for specifics on your division's 401(k) policy.

Maximum annual contribution limit

Up to \$24,500 per year. If you're age 50+ save an additional \$8,000 per year. IRS limits are evaluated annually and may change.

Tule River Indian Housing Authority matching contributions

Match dollar to dollar up to 5% of Employees wages on all safe harbor contributions.

WHAT ARE YOUR PLANS?

Whether your retirement plans include traveling the world, enjoying a hobby, or relaxing with family, you need a plan to get there.

Our 401(k) plan provides a convenient and tax-advantaged way to save so you can achieve your retirement goals.

The earlier you start, the more you'll save!



Important differences of a Roth 401(k)

- You pay taxes when you contribute, at your current tax rate.
- Account interest and dividends are not taxed if you meet certain criteria.
- Like a traditional 401(k), you can withdraw money without penalties when you reach age 59½, but you must have held the account for at least 5 years.
- You are not forced to take distributions at age 70½. You can keep the money in your Roth account as long as you want.

Vesting Schedule:

Your employee contributions and your Safe Harbor Match contributions from TRIHA are fully vested immediately.

MEDICAL, DENTAL, AND VISION PREMIUM RATES

MONTHLY MEDICAL COST

	Anthem Medical	
	Monthly Cost	Per Period Cost
Employee Only	\$60	\$30
Employee + Spouse	\$270	\$135
Employee + Child(ren)	\$240	\$120
Employee + Family	\$330	\$165

MONTHLY DENTAL COST

	Ameritas Dental	
	Monthly Cost	Per Period Cost
Employee Only	\$0	\$0
Employee + 1 dependent	\$22.31	\$11.15
Employee + 2 or more dependents	\$48	\$24

MONTHLY VISION COST

	Ameritas Vision	
	Monthly Cost	Per Period Cost
Employee Only	\$0	\$0
Employee + 1 dependent	\$5.33	\$2.66
Employee + 2 or more dependents	\$10.51	\$5.25

PAID TIME AWAY FROM WORK

Tule River Indian Housing Authority recognizes that employees have multiple needs for time off from work and, as such, TRIHA has established a Paid time off (PTO) policy. Employees are accountable and responsible for managing their own PTO hours for adequate reserve if there is any need to cover time off from work.

Eligibility

- a.** PTO will accrue from the date of employment for permanent employees, but NO PTO may be taken or paid until completion of the required probationary period
- b.** The Executive Director shall review all prior TRIHA, Tribe, and Tribal entity employment documentation and add the verified total prior years of service to years of TRIHA service establish PTO accrual rates.
- c.** Permanent full-time employees with one (1) to three (3) years' service will earn PTO at the rate of six (6) hours per pay period; Permanent full-time employees with more than three (3) but less than ten (10) consecutive years of service with TRIHA will earn PTO at a rate of eight (8) hours per pay period; permanent full-time employees with ten (10), but less than fifteen (15) consecutive years of service will earn PTO at the rate of nine (9) hours per pay period. Permanent full-time employees with fifteen (15) or more consecutive years of service will earn PTO at the rate of (10) hours per pay period. Employees do not accrue PTO while absent without pay.
- d.** Permanent part-time employees will receive PTO on a pro rata basis as determined by the Executive Director.

Years of Service 0 – 3 years	6 Hours	Bi-Weekly Pay Period
4–9 Years	8 Hours	Bi-Weekly Pay Period
10–14 Years	9 Hours	Bi-Weekly Pay Period
15+	10 Hours	Bi-Weekly Pay Period



Donating PTO

- a.** Full-time employees of TRIHA may participate in the Leave Bank Program by donating accrued PTO. Eligible employees who have exhausted their PTO and are in need of paid leave may apply to the Leave Bank program for donated hours to cover absences.
- b.** Employees in their sole discretion, may donate any amount of unused PTO, if they retain at least forty (40) hours for their own use.
- c.** At the request of the employee, the identity of Employees donating leave may remain anonymous; provided however, records of donations and receipt of leaves shall be reflected in the appropriate employees' personnel record.

Use and scheduling PTO

- a.** All PTO must be approved in advance by the Executive Director. The employee must submit a request in writing on the "request for leave" form at least three (3) calendar days in advance, when possible. No PTO benefits will be earned during a pay period during which leave-without-pay is taken or when the employee is on disciplinary probation or suspension. Employees who are on leave without pay will earn prorated PTO based on the actual days worked during the pay period during which the leave without pay was taken.
- b.** PTO more than two-hundred 200 hours will be subject to forfeiture.
- c.** Cash payment for PTO may be made at termination of Employment.
- d.** Upon the death of any employee, all accrued compensation and PTO shall be paid as required by law.

ADDITIONAL INFORMATION

RESOURCES AND CONTACT INFORMATION

DO YOU HAVE A QUESTION ABOUT YOUR BENEFITS?

Review the Benefits Frequently Asked Questions on the Tule River Indian Housing Authority Benefits website. Benefits eligibility, enrollment instructions, and plan information is also available on the website.

BENEFITS WEBSITE:

<https://tuleriver.benefitsplanguide.com/>

Questions about benefits or claims: contact Kara Livingston Shepard at klivingston@mahoneygroup.com

If you have a general benefits question, contact the Human Resources-Benefits Department.

- Email: Shy-la.Franco@tulerivertribe-nsn.gov (Shy-la Franco) & sabrina.jimenez@tulerivertribe-nsn.gov (Sabrina Jimenez)
- Phone: 559-784-3155 Ext. 1218.

PLAN	PHONE	WEBSITE
Network – Anthem	888-259-6316	www.anthem.com/ca
Administrator – BRMS		www.myhealthbenefits.com
Dental – Ameritas	(800) 487-5553	ameritas.com
Vision – Ameritas	(800) 487-5553	ameritas.com
Prescription Drugs – Express Scripts	(800) 334-8134	express-scripts.com
Voluntary benefits – Symetra	(800) 497-3599	Symetra.com/MyGo
Life and AD&D – Symetra	(877) 377-6773	Symetra.com/MyGo
Long-Term Disability – Symetra	(877) 377-6773	Symetra.com/MyGo
Employee Assistance Program – Symetra	(888) 327-9573	guidanceresources.com
Ability Assist		
401(K) – Andrew Gelhaus	(267) 534-2519	Andrew.Gelhaus@pcsretirement.com
Flexible Spending Accounts (FSA) – Navia	(800) 669-3539	naviabenefits.com
Benefits		

ANNUAL NOTICES

Each year, employers that offer health care benefit plans are required to provide specific state and federal notices to employees regardless of their participation in the benefit plans offered. Electronic versions of these notices may be found in HR. If you have any questions, please contact the **Benefits Department**