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EMPLOYEE BENEFITS GUIDE 2025



PEOPLEASE is pleased to offer an extensive benefits package that allows employees and their families to better prepare for planned and unplanned life events. PEOPLEASE offers comprehensive benefit options to all eligible employees. Please review this guide to help you understand the benefit options available to you and your family.

ARE YOU ELIGIBLE FOR BENEFITS?

All full time eligible employees working 30+ hours per week as of their date of hire are considered benefit eligible after a waiting period. Eligible dependents may include:

- Your legal IRS spouse
- Your children (dependent age limit to 26*)
- Natural and legally adopted children
- Mentally or physically handicapped children dependent on you for support regardless of age

*Certain limitations apply.

Please contact your PEOPLEASE representative for additional information.

WHEN CAN I ENROLL?

Open enrollment is the period each year when changes to your benefit elections are allowed for medical, dental, and vision. You may change plans as well as add or drop coverage for you or your eligible dependents. Any changes made during open enrollment must remain until the following open enrollment period, unless you experience a qualifying life event.

Newly hired employees will receive an email notifying your eligibility and deadline to enroll. Elected benefits will begin on the first of the month following employee new hire waiting period from date of hire.

WHEN CAN I MAKE CHANGES?

If you have a qualifying event. Life events may include:



LOSS OF COVERAGE



HAD A BABY



RECENTLY MOVED TO A NEW STATE



GOT MARRIED



TURNED 26

You have 31 days from the date of the life event to submit an enrollment change form and documentation of the event to PEOPLEASE Benefits Department. Otherwise, you must wait until the next annual enrollment period to make a change to your elections.

This plan overview is meant only as a brief description of the benefits for which employees may be eligible. Please refer to the full plan documents or contact your Benefits Administrator for more complete descriptions and information.

Things to Consider

KNOW YOUR BENEFITS

Benefits are a big part of your total compensation, so it's important that you get the maximum value from your benefit plans. Be sure to review all benefits carefully and make the elections that fit your personal or family's needs.

CHOOSE YOUR BENEFITS CAREFULLY

Your elections will remain in effect until the next open enrollment period, unless you experience a qualifying status change event.

SOCIAL SECURITY NUMBERS

Health insurers are required to report certain information about health plan members and their insurance coverage to the IRS each year, including member Social Security numbers. Be sure you have the Social Security number for each dependent you are enrolling in coverage.

How to Enroll



ENROLLMENT IS EASY!

[CLICK HERE](#)

or use the QR code

2025 Employee Benefits At A Glance

MEDICAL INSURANCE

Medical Insurance MAY be available subject to per-worksites participation requirements. Health Savings Accounts/H.S.A. may be available, subject to qualifying medical plan participation.

GAP INSURANCE

CHUBB

Fills the gaps of health insurance by reimbursing out of pocket expenses such as deductibles and coinsurance

DENTAL INSURANCE

Guardian

- 3 plans available.
- \$1,000 to \$3,000 annual maximum.
- All plans have 2 free cleanings and exams.
- Orthodontic coverage available for both children & adults.
- Rates starting at \$21.55/month (single) & \$65.53/month (family).

VISION INSURANCE

Guardian

- Take care of your vision health with an annual eye exam for only a \$10 copay!
- Annual benefit allowances & discounts on frames, lenses & contacts.
- Rates: \$6.11/month (single), \$20.86/month (family).

SHORT AND LONG-TERM DISABILITY

Guardian

- Income replacement up to 60%.
- Short Term: benefit starts on 15th day & continues for 13 or 26 weeks.
- Long Term: benefit begins after 90 days & continues until normal social security retirement age.
- Choose from Short Term (STD) & or Long Term (LTD) to suit your income protection needs.

VOLUNTARY LIFE/AD&D - 3 TYPES AVAILABLE

Group Term:

Guardian

- Guaranteed Issue up to \$200,000 for new hires!
- Spouse and children coverage available.

Level Term Life Insurance - 2 Types:

CHUBB

- 10-Year Plan: Rates change every 10 years.
- LifeTime Plan: Rates remain the same for life.
- Both guaranteed issue to \$100,000!
- LifeTime Plan includes a benefit for Long-Term Care.
- Spouse & child coverage available.

FLEX PLAN: TAX SAVINGS (FSA)



- You can increase your take-home pay with tax savings on your out-of-pocket healthcare & dependent care expenses you would otherwise pay with after-tax dollars.
- Elect up to \$3,300 healthcare and/or \$5,000 daycare each calendar year.
- Annual election required.

ACCIDENT INSURANCE

CHUBB

- Accidents happen, get up to 24-hour coverage.
- Cash benefits paid directly to you.
- Benefits do not coordinate with any other health insurance or workers compensation.
- \$100 Wellness benefit available.
- Rates as low as \$7.43/month (single), \$19.14/month (family).

CRITICAL ILLNESS INSURANCE

CHUBB

- Lump sum CASH benefits, if diagnosed with a covered condition such as Heart Attack, Stroke, Cancer, Coma, Alzheimer's Disease and many more.
- Recurrence benefit.
- Guaranteed issue up to \$30,000!
- Rates start at \$8.00/month

HOSPITAL INDEMNITY INSURANCE

CHUBB

- CASH benefits are paid directly to YOU, in the event of a hospital stay.
- Admission & daily confinement benefits.
- Rates start at \$16.75/month (single), \$36.50/month (family).

LEGAL & IDENTITY THEFT PLANS



Several options starting at \$12.95/month for identity protection & attorney fees for certain legal matters.

OTHER GREAT BENEFITS

- Pet Discount Program via payroll deduction - great savings the same quality products your pets are used to.
- Pet Insurance with coverage options to fit your budget.
- DocTegrity standalone Telehealth/therapy.
- EAP (Employee Assistance Plan) - FREE!
- MemberDeals Discount Program - FREE!
- 401(k) may be available, varies per worksite.



WHO IS IT FOR?

Everyone should have access to great dental coverage, which is why we offer comprehensive plans that are available through employers as part of your benefit offerings.

WHAT DOES IT COVER?

Dental insurance helps to protect your overall oral care. That includes services like preventative cleanings, x-rays, restorative services like fillings and other more serious forms of oral surgery if you ever need them.

WHY SHOULD I CONSIDER IT?

Poor oral health isn't just aesthetic. It's also been linked to conditions including diabetes, heart disease, and strokes. So, while brushing and flossing every day can help keep your teeth clean, nothing should replace regular visits to the dentist.

IN-NETWORK BENEFITS SHOWN	VALUE	STANDARD	ENHANCED
Lifetime Deductible (Waived for Preventive)	\$50 individual 3x family	\$100 individual 3x family	\$100 individual 3x family
Annual Maximum – plus maximum rollover* (Applied to Preventive, Basic and Major services)	\$1,000	\$1,500	\$3,000
Preventive Services Oral Exams (once/6 mo); Cleanings (once/6 mo); Bitewing X-rays (1x/12 mo); Full mouth series (1x/60 mo); Fluoride Treatment (to age 19, once/6 mo); Space Maintainers/Harmful Habit Appliance; Sealants (to age 16, once/36 mo)	100%	100%	100%
Basic Services Fillings; Periodontal Services (eg Scaling and Root Planing); Periodontal Surgery; Simple Extractions; Endodontic Services (eg Root Canal); General Anesthesia	70%	90%	80%
Major Services Bridges & Dentures; Single Crowns; Complex Extractions; Repair & Maintenance of Crowns, Bridges & Dentures; Inlays, Onlays & Veneers; Implants	40%	60%	50%
Orthodontia (Lifetime Maximum)	N/A	\$1,200	\$1,200*
In-Network Claim Payment Basis	Negotiated Fee Schedule	Negotiated Fee Schedule	Negotiated Fee Schedule
Out-of-Network	Fee Schedule	Fee Schedule	UCR 90th

Dependent Age Limit: 26; end of month

To find an In-Network provider, go to GuardianAnytime.com

*For children or adults



DENTAL MAXIMUM ROLLOVER

With Maximum Rollover, Guardian will roll over a portion of each DentalGuard member's unused annual maximum into their personal Maximum Rollover Account (MRA). The MRA can be used in future years if a member reaches the plan's annual maximum.

MONTHLY PREMIUMS

	VALUE	STANDARD	ENHANCED
Employee	\$21.55	\$26.18	\$37.26
Employee + Spouse	\$39.90	\$48.94	\$69.66
Employee + Child(ren)	\$47.70	\$56.51	\$80.44
Family	\$65.40	\$67.90	\$96.65



Vision Benefits



Vision insurance helps protect the health of your eyes by providing benefits that often are not covered by medical insurance.

	IN-NETWORK (COPAY)	OUT-OF-NETWORK (BEFORE COPAY)	FREQUENCY PERIOD
Exam Copay	\$10	\$39 - 50	12 months
Materials Copay	\$25	\$0	12 months
Eyeglass Lenses Allowances*			
Single Vision	\$0	\$23	12 months
Bifocal	\$0	\$37	12 months
Trifocal	\$0	\$49	12 months
Lenticular	\$0	\$64	12 months
Contact Lenses Allowance**			
Elective	\$200 max (copay waived)	\$100	12 months
Medically Necessary	\$0	\$210	12 months
Elective Fitting and Evaluation	Member pays up to \$50	Included in allowance	
Frame Retail Allowance			
(one per frequency period)	Up to \$200 + 20% off balance	\$46	12 months

*Fees for additional lens options (scratch-resistant, UV coating, progressives) vary by provider and service.

**One pair or single purchase per frequency period in lieu of a complete set of glasses.

To find an In-Network provider, go to GuardianAnytime.com

COVERAGE	MONTHLY PREMIUM
Employee	\$6.11
Employee + Spouse	\$12.20
Employee + Child(ren)	\$13.07
Family	\$20.86





Flexible Spending Account (FSA)



PLAN AHEAD FOR HEALTH EXPENSES

Save money by reducing your taxable income – then spend your FSA funds tax-free on the eligible health expenses you incur throughout the year. Use it on copays and other out-of-pocket medical, dental or vision expenses you would normally have to spend after-tax dollars on. Save up to 30% depending on tax bracket.

The IRS has a “use it or lose it” rule for FSAs, which means funds must be spent by the end of the plan year. Our plan offers an additional “run-out period” through March 30th following the end of the plan year for active employees to submit expenses incurred during the plan year.

FLEXIBILITY

You can use your funds for eligible expenses incurred by you, your spouse or your eligible dependents. Thousands of products and services are FSA eligible. (Eligible expenses are determined by the IRS.)

FUNDS ON DAY 1 + DEBIT CARD + ONLINE ACCESS

All of your FSA dollars are available on the very first day of the plan year. Use your benefits debit card at the point of purchase. You’ll also have online access to pay providers, upload receipts, and more.

CAN I ENROLL?

Yes, you can enroll in **regular FSA** as long as you or your spouse aren’t actively enrolled and contributing to a Health Savings Account (HSA).

Limited FSA option also available for HSA holders.

DEPENDENT CARE FSA

Dependent Care FSA is a separate enrollment for similar tax-free payment of **daycare expenses** (daycare for dependent children to age 13 while you’re at work). If you’re interested or have questions about this benefit, please talk to a Benefits Specialist (see last page).

WHAT DOES IT COVER?

There are [thousands of eligible items](#), including:

Regular FSA

- Over-the-counter medications (first aid, allergy, asthma, cold/flu, heartburn, etc.)
- Medical copays and coinsurance
- Doctor visits and surgeries
- Prescription drugs

Both Regular & Limited FSA

- Dental, Vision & Preventative health copays/coinsurance
- Laser eye surgery
- Basic dental, crowns & orthodontia
- Eyeglasses, contacts & solutions, prescription sunglasses, etc.

A flexible spending account (FSA) lets you save money by setting aside pre-tax dollars to pay for eligible medical, dental, vision and Dependent Care expenses incurred by you, your spouse or your eligible dependents.

CONTRIBUTION LIMITS & IRS REGULATIONS

The IRS sets the maximum dollar amount you can elect to contribute to a medical FSA. **The annual contribution limit for 2025 is \$3,300 for Healthcare and \$5,000 for Dependent Care.**



DEBIT CARD

The **Omega Benefits debit card** is the fastest and most convenient way to access your funds and pay for eligible expenses. Just one debit card is all you need for your card-eligible benefits with us including Regular FSA and Limited FSA (and HSA for some worksites).

For more information, see [IRS Publication 502](#)



Voluntary Group Term Life Insurance



WHO IS IT FOR?

Everyone's life insurance needs are different, depending on their family situation. That's why group life insurance through an employer is an easier and more affordable option than individual life insurance.

WHAT DOES IT COVER?

Life insurance protects your loved ones by providing a benefit (which is usually tax-exempt) if you pass away.

WHY SHOULD I CONSIDER IT?

Life insurance is about more than just covering expenses. Depending on your circumstances, it could take your family years to recover from the loss of your income.

With a life insurance benefit, your family will have extra money to cover mortgage and rent payments, legal or medical fees, childcare, tuition, and any outstanding debts. Most families will need 6-10 times their income in coverage to maintain their current lifestyle.

If something happens to you, life insurance can help your family reduce financial stress.

VOLUNTARY TERM LIFE	
Employee Benefit	\$10,000 increments to a maximum of \$500,000 We guarantee issue coverage up to: Employee \$200,000
Accidental Death and Dismemberment	Maximum 1 times life amount included
Spouse Benefit	\$5,000 increments to a maximum of \$100,000 (not to exceed 50% of employee amount). We guarantee issue coverage up to: Spouse \$25,000
Child Benefit	Guaranteed issue up to \$10,000
Premiums	Increase on plan anniversary after you enter next five-year age group.
Portability	There are restrictions, including evidence of insurability. Allows you to take coverage with you if you terminate employment.

SAMPLE MONTHLY PREMIUMS

Based on \$50,000 employee benefit

AGE	RATE
35-39	\$8.25
45-49	\$15.80
55-59	\$35.70



You need 6-10 times your annual income to maintain your family's current lifestyle.



10 Year Level Term Life Insurance

CHUBB®

Life insurance is a great way to protect your most important assets and help provide the peace of mind your family deserves. This plan pays cash directly to you or your beneficiary to use however you choose.

EMPLOYEE COVERAGE

- You can elect up to \$100,000 in coverage on a guarantee issue basis.
- Portability allows you to keep this coverage if you change employers or if benefits are no longer available to you.
- Rates do not increase for 10 years
- At the end of 10 years, policy automatically renews at your then current age, regardless of health.

CHILD(REN) COVERAGE:

- Up to \$10,000
- You can elect to cover your child(ren) if you have employee coverage

SPOUSE COVERAGE:

- Up to \$10,000
- You can elect to cover your spouse if you have employee coverage. Spouse coverage cannot exceed your (the employee) coverage amount.

SAMPLE RATE

Based on \$50,000 benefit

AGE	RATE
35	\$11.60/month
45	\$24.10/month
55	\$55.60/month





LIFETIME BENEFIT TERM PROVIDES YOU WITH THE PROTECTION YOUR FAMILY NEEDS

LifeTime Benefit Term helps protect you and your family if you were no longer able to provide for them. Your family can receive cash benefits paid directly to them upon your death that they can use to help cover expenses like mortgage payments, credit card debt, childcare, college tuition, and other household expenses as well as long term care.

YOU DECIDE HOW YOU WANT TO USE LIFETIME BENEFIT TERM BENEFITS

When you make the promise to protect your family with LifeTime Benefit Term, there are several ways it can work.

AS LIFE INSURANCE

LifeTime Benefit Term protects your family with money that can be used any way they choose. It is most often used to pay for mortgage or rent, education for children and grandchildren, retirement, family debt, and final expenses.

FOR QUALIFIED LONG-TERM CARE

If you become chronically ill, LifeTime Benefit Term will pay you 4% of your death benefit each month you receive LongTerm Care. You can use this money any way you choose, and your life insurance premiums will be waived.

Your death benefit will reduce proportionately each month as you receive benefit payments for Long Term care. After 25 months of receiving Long Term Care Benefits, your death benefit will reduce to zero.

RESTORATION OF YOUR DEATH BENEFIT

Ordinarily, accelerating your life coverage for Long Term Care benefits can reduce your death benefit to \$0. While in force, this rider restores your life coverage to not less than 25% of the death benefit on which your LTC benefits were based. This rider assures there will be a death benefit available to your beneficiary until you reach age 121.

BENEFIT FEATURES

GUARANTEED ISSUE

Up to \$100,000

GUARANTEED PREMIUMS

Life insurance premiums will never increase and are guaranteed to age 100.

GUARANTEED BENEFITS DURING WORKING YEARS

Death Benefit is guaranteed 100% when it is needed most-during your working years when your family is relying on your income.

GUARANTEED BENEFITS AFTER AGE 70

Even after age 70, the full death benefit is designed to last through age 99.

PAID-UP BENEFITS

After 10 years, paid-up benefits begin to accrue. At any point thereafter, if you stop paying the premium, a reduced paid-up benefit is issued and can never lapse.

LONG TERM CARE (LTC)

If you need LTC, you can access your death benefit while you are living for home health care, assisted living, adult day care and nursing home care. You get 4% of your death benefit per month while you are living for up to 25 months to help pay for LTC.

TERMINAL ILLNESS

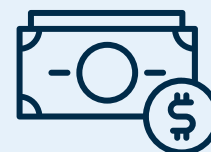
After your coverage has been in force for two years, you can receive 50% of your death benefit, up to \$100,000, if you are diagnosed as terminally ill.

FULLY PORTABLE AND GUARANTEED RENEWABLE FOR LIFE

Your coverage cannot be cancelled as long as premiums are paid as due

SPOUSE COVERAGE & CHILDREN

Coverage is available for your family. Guaranteed issue up to \$100,000



\$93,075

Average annual costs
for nursing home care
in 2020



Nearly **70%**
of people age 65 will
need long term care



Short Term Disability Insurance



WHO IS IT FOR?

If you rely on your income to pay for everyday expenses, then you should probably consider disability insurance. It helps ensure that you'll receive a partial income if you're injured or too sick to work.

WHAT DOES IT COVER?

Many disability insurance plans pay out a portion or percentage of your income if you're diagnosed with a serious illness or experience an injury that prevents you from doing your job.

WHY SHOULD I CONSIDER IT?

Accidents happen, and you can't always anticipate if or when you'll become sick or injured. That's why it's important to have a disability policy that helps you pay your bills in the event of being unable to collect your normal paycheck.

Disability insurance covers a part of your income, so you can pay your bills if you're injured or sick and can't work. Disability may be more common than you might realize, and people can be unable to work for all sorts of different reasons. There are times when many disabilities can be caused by illness, including common conditions like heart disease and arthritis. However, many disabilities aren't covered by workers' compensation.

	OPTION 1	OPTION 2
Coverage Amount Up to 60% of salary to maximum \$1,500/week		
Maximum payment period Maximum length of time you can receive disability benefits.	13 weeks	26 weeks
Accident and Illness benefits begin: The length of time you must be disabled before benefits begin	Day 15	Day 15
Premium waived if disabled Premium will not need to be paid when you are receiving benefits.	Yes	Yes

EARNINGS DEFINITION: Your covered salary is based on your previous year's W-2 statement

	AGE	OPTION 1	OPTION 2
SAMPLE RATE Based on \$40,000 salary	35	\$27.09/month	\$62.07/month
	45	\$25.38/month	\$41.35/month
	55	\$42.27/month	\$60.32/month

COORDINATION OF BENEFITS:

Insureds that reside in CA, CT, MA, NJ, NY, RI, and WA.

The maximum monthly benefit is limited to a specific percentage of the insured's salary if the insured resides in CA (30%), CT (60%), MA (60%), NJ (40%), NY (50%), RI (30%), or WA (60%). This is due to existing state disability plans. Rates may vary if you reside in the following states: CA, CT, MA, NJ, NY, RI, and WA.

This is a brief summary of short-term disability income insurance. Insurance may not be available in all jurisdictions. Limitations and exclusions apply. Refer to the policy, certificate and riders for complete details.





Long Term Disability Insurance



WHO IS IT FOR?

If you rely on your income to pay for everyday expenses, then you should probably consider disability insurance. It helps ensure that you'll receive a partial income if you're injured or too sick to work.

WHAT DOES IT COVER?

Many disability insurance plans pay out a portion or percentage of your income if you're diagnosed with a serious illness or experience an injury that prevents you from doing your job.

SHOULD I CONSIDER PURCHASING SHORT TERM DISABILITY TO PAIR WITH THIS BENEFIT?

Yes, if suddenly not having your income for 3 months would be a hardship for you, you should consider enrolling in the 13-week STD benefit (Option 1) on the previous page. After 3 months, if you still can't return to work, you'll have the income replacement benefit of this employer-paid Long Term Disability policy. Guardian administers both STD & LTD, and provides seamless transition for employees.

LONG TERM DISABILITY	
Coverage Amount	60% of salary to maximum \$6,000/month
Maximum payment period Maximum length of time you can receive disability benefits.	Social Security Normal Retirement Age
Accident and Illness benefits begin The length of time you must be disabled before benefits begin	Day 91
Conversion Allows you to continue disability coverage after your group plan has terminated.	
Premium waived if disabled Premium will not need to be paid when you are receiving benefits.	
Survivor benefit Additional benefit payable to your family if you die while disabled.	3 months

EARNINGS DEFINITION

Your covered salary is based on your previous year's W2 statement.

SPECIAL LIMITATIONS

Provides a 24-month benefit limit for specific conditions, including mental health and substance abuse. Conditions such as chronic fatigue are also included in this limitation. Refer to contract for details.

SAMPLE RATE

Based on \$40,000 salary

AGE	RATE
35	\$15.00
45	\$28.66
55	\$57.66





Accident Insurance

CHUBB®

No one plans on getting injured, but just in case, we've got you covered.

You do everything you can to stay active and healthy, but accidents happen every day, including sports-related accidents. An injury that hurts an arm or a leg can hurt your finances too. That's where Accident Insurance can help.

Accident insurance pays cash benefits directly to you, regardless of other coverage you have.

FIRST ACCIDENT PACKAGE

- Pays you \$100 quickly when you report your first claim for covered benefits

SPORTS PACKAGE

- Your benefits increase 25%, up to \$1,000 per person, for injuries resulting from participating in organized sports.

WELLNESS BENEFIT

- To promote good health, this pays a \$100 benefit for each covered person once per year when they have a defined annual health screening or test, following a 30 day waiting period. Only applies to Plan 2 (24 hour plan).
- You can elect to cover your spouse if you have employee coverage. Spouse coverage cannot exceed your (the employee) coverage amount.

BENEFIT FEATURES

- Guaranteed Issue with no health questions
- Guaranteed renewable for life
- No exclusions or pre-existing conditions
- Employee, spouse and child coverage available
- Portability allows you to keep this coverage if you change employers or if benefits are no longer available to you

For example, if your child gets injured at soccer practice and breaks her leg, here's how benefits may stack up.

BENEFITS

First Accident	\$100
Ambulance	\$400
ER Visit	\$200
X-Ray	\$125
Fracture	\$1,800
Crutches	\$250
Physical Therapy	\$750 (\$75 x 10 visits)
Follow-up Visits	\$400 (\$100 x 4 visits)
Subtotal	\$4,025

PLUS Sports Package

*Increases the total benefit payment by 25%
Max \$1,000*

TOTAL PAYMENT	\$5,025
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MONTHLY PREMIUMS

	PLAN 1 (OFF JOB)	PLAN 2 (24 HOUR)
Employee	\$7.43	\$17.23
Employee + Spouse	\$12.14	\$24.46
Employee + Child(ren)	\$14.44	\$21.81
Family	\$19.14	\$29.70





Critical Illness Insurance

CHUBB®

INSURANCE PROTECTION WHEN YOU NEED IT MOST.

Heart attacks, cancer and strokes happen every day and often unexpectedly. They don't give you time to prepare and can take a serious toll on both your physical and financial well-being.

WE PAY CASH BENEFITS DIRECTLY TO YOU.

The last thing you want to worry about is money. Chubb Critical Illness pays you directly to help with your bills, your mortgage, your rent, your childcare-you name it-so you can focus on recovery.



Every 40 seconds
someone has a
heart attack



\$10,000+ annual out-of-pocket
costs of 60% of patients for
cancer treatment



60% of Americans can't
cover an unexpected
\$1,000 expense

BENEFIT FEATURES

- **Guarantee Issue:** no medical history is required for coverage to be issued up to \$30,000
- **Family Coverage:** You can insure yourself, your spouse, and your kids
- **No Lifetime Maximum:** If you get sick again with the same or different condition, you're still covered. There is no total maximum benefit amount to worry about.
- **Recurrence Benefit:** Once Chubb pays a Critical Illness benefit and there is a recurrence, you can receive your Face Amount, as long as you were treatment free for at least 6 months.
- **Wellness Benefit:** Be proactive with preventative care. This benefit pays you \$50 for undergoing a covered health screening test (after coverage is in force for 30 days)
- **No Coordination of Benefits:** Payments are made in addition to any other insurance you may have
- **HSA Compatible:** You can have this coverage even if you have a Health Savings Account
- **Portability:** You can keep your coverage if you change jobs or retire while the Policy is in force.

WHY HEALTH INSURANCE MAY NOT BE ENOUGH

When a critical illness happens your health insurance plan may cover some of your medical and hospital costs, but not everything. You and your family need extra protection that close the financial gap and helps you manage expenses, such as:

- **Out-of-Pocket medical costs:** deductibles, copays, coinsurance, prescriptions, and medical travel
- **Everyday costs:** rent or mortgage payments, credit card debit, car payments, household necessities, and savings for college & retirement
- **Recovery costs:** loss of family income, rehabilitation, and childcare or parent care

NO LIFETIME MAXIMUM BENEFIT IN ACTION EXAMPLE

\$30,000 Face Amount

Stroke Diagnosis	\$30,000
Heart Attack Diagnosis (first)	\$30,000
Heart Attack Recurrence	\$30,000

Total Benefits **\$90,000**

No Maximum Benefit Amount

SAMPLE MONTHLY PREMIUMS

Age	COVERAGE	EMPLOYEE	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
35	\$15,000	\$9.60	\$15.60	\$12.60	\$18.60
45	\$15,000	\$16.80	\$25.80	\$19.80	\$29.40
55	\$15,000	\$13.20	\$49.40	\$34.20	\$50.40



Hospital Indemnity

CHUBB®

Cash benefits paid in addition to any other coverage you have.

Chubb Hospital Cash is hospital indemnity insurance that pays benefits directly to you regardless of other coverage you have, and if your medical plan has a high deductible, you may need the cash. It's not easy to afford hospitalization, but with Hospital Cash, we've got you covered.



4.6 day average
hospital stay



\$13,000 average
hospitalization cost

**If you were hospitalized,
could you pay your deductible?**

BENEFIT FEATURES

- **Guaranteed Issue for the whole family:** As long as you are an active employee age 18 or older, you and your spouse/partner age 18 or older, and your kids through age 26 are eligible for coverage. No medical history is required.
- **Renewable:** Your coverage will renew automatically as long as you are an eligible employee, premiums are paid as due, and your employer's policy is in force.
- **Portable:** You can keep your coverage even if you change jobs or retire while the policy is in force.
- **Pre-existing conditions:** There are no pre-existing condition exclusions

CHUBB HOSPITAL CASH BENEFIT FOR ACCIDENTS AND SICKNESS

HOSPITAL ADMISSION BENEFIT

This benefit is for admission to a hospital or hospital sub-acute intensive care unit.

	Plan 1: 24-Hour Coverage	Plan 2: 24-Hour Coverage
Amount	\$1,000	\$2,000
Maximum Days Per Calendar Year	1	1

HOSPITAL CONFINEMENT BENEFIT

This benefit is for confinement in hospital or hospital sub-acute intensive care unit.

	Plan 1: 24-Hour Coverage	Plan 2: 24-Hour Coverage
Amount	\$125	\$200
Maximum Days Per Calendar Year	30	30

HOSPITAL CONFINEMENT ICU BENEFIT

This benefit is for confinement in a hospital intensive care unit.

	Plan 1: 24-Hour Coverage	Plan 2: 24-Hour Coverage
Amount	\$250	\$400
Maximum Days Per Calendar Year	30	30

MONTHLY PREMIUMS

	PLAN 1	PLAN 2
Employee	\$16.75	\$20.02
Employee + Spouse	\$28.50	\$44.72
Employee + Child(ren)	\$20.75	\$37.18
Family	\$36.50	\$61.88





Telehealth/Teletherapy



SEE A DOCTOR OR THERAPIST – ANYTIME, ANYWHERE

Doctegritty connects you with Board-Certified doctors and Mental Health therapists who provide telehealth phone and video chats with NO consultation fees. This plan is available with or without a medical plan for extra support.

No insurance needed!

We give you and your whole family access. No copays or surprise bills.

MONTHLY PREMIUM - \$9.75



eHealthcare
Video/Phone Doctors



Mental Health
Therapy



Prescription
Discount Card



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24/7/365
NATIONWIDE eHEALTHCARE

WWW.DOCTEGRITY.COM
877.342.5152

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Legal & Identity Theft Plans



US LEGAL

Several options for identity protection and coverage of attorney fees for certain legal matters (bundles available)

IDENTITY DEFENDER

\$12.95/MONTH STANDALONE OR \$9.95/MONTH RIDER

Covering employee +1 adult dependent/spouse and dependent children to age 26.

FAMILY DEFENDER

\$16.90/MONTH

Pays 100% of in-network attorney fees for covered legal matters for employee, spouse and dependent children to age 26

CDL DEFENDER

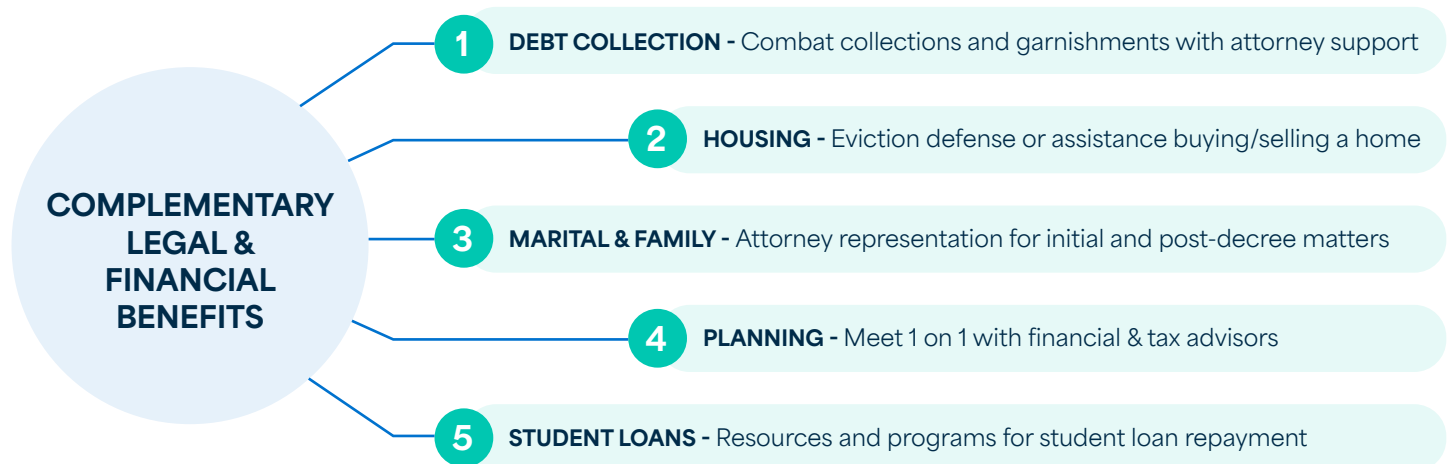
\$29.95/MONTH

Pays 100% of in-network attorney fees, through trial, for all moving, non-moving, and DOT violations, including non-cited VERs for CDL licensed commercial drivers. Covers spouse and dependent children to age 23. Also includes coverage for most personal legal matters, including free consultation and discounts on the attorney's normal, hourly rate.

CDL DEFENDER COPAY PLAN

\$12.95/MONTH

Lower premium CDL plan with copays per violation. Also includes coverage for most personal legal matters, including free consultation and discounts on the attorney's normal, hourly rate.



All U. S. Legal Services products (except Identity Defender) include our Financial Wellness Suite containing access to Best Money Moves platform for financial tools and education, Financial Crisis Advisors, as well as a network of financial and tax planning advisors for unlimited consultations throughout the year, and tax preparation and filing for \$195, all schedules and forms for the household.

CDL LEGAL



CDL DRIVERS LEGAL PLAN

\$36.50/MONTH

Pays 100% of in-network attorney fees for CDL truck drivers, with local representation in any state for moving & non-moving violations, inspection report challenges, and even accidents leading to fatality. Roadside assistance, spouse/personal vehicle coverage and discounts for the entire family are included.

Total Pet Plan

Your pets are part of your family, and you'll do anything to keep them happy and healthy. But with the cost of pet care on the rise, it isn't always easy.

That's why we're offering Total Pet Plan, which makes pet care more affordable. Enroll in Total Pet and get the same high-quality products and services your pets are used to, just at a lower price! Total Pet is payroll deducted.



DISCOUNTS ON PRODUCTS & RX

- Up to 40% off on products like prescriptions, preventatives, food, toys and more
- Shipping is always free and same-day pickup is available for most human-grade prescriptions

DISCOUNTS ON VETERINARY CARE

- Instant 25% savings on all of your pet's in-house medical services at participating vets
- No exclusions due to age, health, pre-existing conditions or type of pet



24/7 PET TELEHEALTH

- Access real-time vet support, even when your vet's office is closed
- Unlimited support on your pet's health, wellness, behavior and more

LOST PET RECOVERY SERVICE

- Durable tag can be scanned from any smart phone to access your contact information, helping lost pets return home quicker than a microchip
- Easily update your information online with no need to request a new tag

[CLICK HERE](#) for more information



One Pet
\$11.75/month



Family Plan (2+ pets)
\$18.50/month

LEARN MORE & LOCATE PROVIDERS

WWW.PETBENEFITS.COM/LAND/PEOPLEASE

(800) 891-2565



Nobody wants to imagine their pet getting sick or injured—but when it comes to your pet’s health, it’s best to expect the unexpected. Wishbone Pet Insurance is accepted at any vet in the U.S., including emergency hospitals. Our simple online claims process means you get your money back fast, whether it’s for routine care or an accident. This true pet insurance is NOT payroll deducted.

Wishbone offers different plan options to fit your budget. Enroll in both for maximum coverage.

Accident & Illness Coverage

for the unexpected

- 80% reimbursement
- \$250 deductible
- \$10,000 annual limit
- Includes lost pet recovery service and 24/7 pet telehealth

Rates based on your pet’s age, breed and zip code

[CLICK HERE](#) for more information

Wellness Coverage

for regular routine visits

	PEDIGREE PLAN	BEST IN SHOW PLAN
<i>No deductible</i>		
Sample Premiums	\$14/mo	\$23/mo
Spay/neuter or teeth cleaning	\$0	\$150
Rabies	\$15	\$15
Flea-tick prevention	\$50	\$65
Heartworm prevention	\$30	\$30
Vaccination/titer	\$30	\$40
Wellness Exam	\$50	\$50
Heartworm test or FELV screen	\$25	\$30
Blood, fecal, parasite exam	\$50	\$70
Microchip	\$20	\$40
Urinalysis or ERD	\$15	\$25
Deworming	\$20	\$20
TOTAL ANNUAL BENEFITS	\$305	\$535



TO LEARN MORE OR TO ENROLL

[WISHBONEINSURANCE.COM/PEOPLEASE](https://www.wishboneinsurance.com/peoplease)

(800) 887-5708



Employee Assistance Plan (EAP)

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—The GuidanceResources Company®—

Guardian®

Life is challenging. We can help. Confidential 24/7 Support.

SOMETIMES LIFE CAN FEEL OVERWHELMING. IT DOESN'T HAVE TO.

Your ComPsych Guidance Resources program provides confidential counseling, expert guidance, and valuable resources to help you handle any of life's challenges, big or small.

Provided at no cost for full time Peoplease employees.

SERVICES

CONFIDENTIAL EMOTIONAL SUPPORT

- Anxiety, depression, stress
- Grief, loss, and life adjustments
- Marital conflicts

WORK AND LIFESTYLE SUPPORT

- Child, elder, and pet care
- Moving and relocation

LEGAL GUIDANCE

- Divorce, adoption, and family law
- Wills, trusts, and estate planning
- Free consultation and discounted local representation

FINANCIAL RESOURCES

- Retirement planning, taxes, and bankruptcy
- Mortgages and insurance

DIGITAL SUPPORT

- Connect to counseling, work-life support or other services

ONLINE WILL PREPARATION

- Quickly and easily complete a will on your computer with EstateGuidance

WELLNESS SUPPORT

- Make positive lifestyle changes with health coaching
- Improve your nutrition, exercise habits, weight loss efforts, and smoking cessation



24/7 LIFE ASSISTANCE

CALL: (855) 239-0743

TRS: DIAL 711

WWW.GUIDANCERESOURCES.COM

APP: GUIDANCENOW

WEB ID: GUARDIAN



Member Deals

As a valued employee, we are pleased to offer exciting promotions to you as a completely free perk. MemberDeals is a benefits program with exclusive offers to the world's greatest entertainment and travel brands. While working with the top suppliers and partners in the industry nationwide, MemberDeals develops attractive offers that you can share with family and friends!

WITH THIS BENEFIT, YOU CAN TAKE ADVANTAGE OF SAVINGS AT PLACES LIKE

- Walt Disney World® Resort
- Universal Orlando Resort™
- Cirque du Soleil®
- SeaWorld® Parks and Entertainment
- LEGOLAND® Parks
- Nationwide Car Rental Discounts
- Movie Theater Discounts Including: AMC, Cinemark, Marcus and More
- Many hotels, concerts, Broadway and other shows, events, and so much more - including a search by city feature

Many other worldwide offers and attractions are available all with special pricing not available to the public.

MemberDeals is accessible directly in your employee portal, and doesn't require any enrollment - simply click and save!

BE SURE TO VISIT OFTEN AS NEW OFFERS ARE CONSTANTLY BEING ADDED!





Health Insurance Marketplace Notice



WHAT IS THE HEALTH INSURANCE MARKETPLACE?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers “one-stop shopping” to find and compare private health insurance options. You may also be eligible for a tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October for coverage starting as early as January 1.

CAN I SAVE MONEY ON MY HEALTH INSURANCE PREMIUMS IN THE MARKETPLACE?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer health coverage, or offers coverage that doesn’t meet certain standards. The savings on your premium that you’re eligible for depends on your household income.

DOES EMPLOYER HEALTH COVERAGE AFFECT ELIGIBILITY FOR PREMIUM SAVINGS THROUGH THE MARKETPLACE?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for tax credit through the Marketplace. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members

of your family) is more than **8.93% of your household income** for the year (this percentage may change annually), or if the coverage your employer provides does not meet the “minimum value” standard set by the Affordable Care Act, you may be eligible for a tax credit. An employer-sponsored health plan meets the “minimum value standard” if the plan’s share of the total allowed benefit costs covered by the plan is no less than 60% of such costs.

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer offered coverage. Also, your employee contribution to employer-offered coverage is often pre-tax. Marketplace premiums are paid after-tax.

HOW CAN I GET MORE INFORMATION?

Please visit [HealthCare.gov](https://www.healthcare.gov) for more information about Marketplace coverage and its cost, your eligibility for tax credits, and an online application. You may also request more information from either The Peoplease Group or your worksite employer. If you are eligible for health insurance coverage through your worksite employer, you will receive enrollment and eligibility information separately and possibly at a different time of year. If you are eligible for health insurance coverage through the The Peoplease Group, enrollment and eligibility information is enclosed – if such information is not enclosed with this communication, contact your worksite employer for details.



Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help you pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

For more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565





Legal Notices

INITIAL NOTICE OF YOUR HIPAA SPECIAL ENROLLMENT RIGHTS

Loss of Other Coverage - If you are declining enrollment for yourself and/or your dependents (including your spouse) because of other health insurance coverage or group health plan coverage, you may be able to enroll yourself and/or your dependents in this plan if you or your dependents lose eligibility for that other coverage or if the employer stops contributing towards your or your dependent's coverage. To be eligible for this special enrollment opportunity you must request enrollment within 30 days after your other coverage ends or after the employer stops contributing towards the other coverage.

New Dependent as a Result of Marriage, Birth, Adoption or Placement for Adoption - If you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and/or your dependent(s). To be eligible for this special enrollment opportunity you must request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

Medicaid Coverage - The PEOPLEASE group health plan will allow an employee or dependent who is eligible, but not enrolled for coverage, to enroll for coverage if either of the following events occur:

Termination of Medicaid or CHIP Coverage - If the employee or dependent is covered under a Medicaid plan or under a State child health plan (SCHIP) and coverage of the employee or dependent under such a plan is terminated as a result of loss of eligibility.

Eligibility for Premium Assistance Under Medicaid or CHIP - If the employee or dependent becomes eligible for premium assistance under Medicaid or SCHIP including under any waiver or demonstration project conducted under or in relation to such a plan. This is usually a program where the state assists employed individuals with premium payment assistance for their employer's group health plan rather than direct enrollment in a state Medicaid program.

To be eligible for this special enrollment opportunity you must request coverage under the group health plan within 60 days after the date the employee or dependent becomes eligible for premium assistance under Medicaid or SCHIP or the date you or your dependent's Medicaid or state sponsored CHIP coverage ends. To request special enrollment or obtain more information, please contact Benefits Department.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are not currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 877.KIDS.NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 866.444.EBSA (3272).

For more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Things to Consider

KNOW YOUR BENEFITS

Benefits are a big part of your total compensation, so it's important that you get the maximum value from your benefit plans. Be sure to review all benefits carefully and make the elections that fit your personal or family's needs.

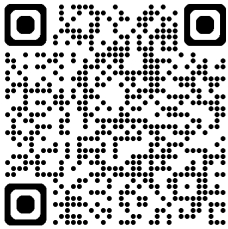
CHOOSE YOUR BENEFITS CAREFULLY

Your elections will remain in effect until the next open enrollment period, unless you experience a qualifying status change event.

SOCIAL SECURITY NUMBERS

Health insurers are required to report certain information about health plan members and their insurance coverage to the IRS each year, including member Social Security numbers. Be sure you have the Social Security number for each dependent you are enrolling in coverage.

How to Enroll? It's Easy!



SELF ENROLLMENT

[CLICK HERE](#)

or use the QR code

CALL

OR

866.914.7290

9 am - 8 pm ET to speak
to a Benefits Specialist

CONTACT INFORMATION

BENEFITS ADMINISTRATOR

PEOPLEASE EMPLOYEE SUPPORT CENTER

P: 833-879-9935

E: BENEFITS@PEOPLEASE.COM

Guardian - 888.600.1600 www.guardianlife.com

Dental, Vision, Voluntary Life and AD&D, Disability

Chubb - 866.566.1909 www.chubb.com/enrollpeoplease

Accident, Critical Illness, Hospital Indemnity, 10 Year Term, Lifetime Benefit, GAP

Doctegrity - 877.342.5152 www.doctegrity.com

Telehealth available with or without a medical plan for extra support

US Legal - 800.356.LAWS www.uslegalservices.net

Family Defender, Identity Defender, CDL Defender

CDL Legal - 913.738.4836 www.cdllegal.com/tlc

Alternate CDL drivers' legal plan

Pet Insurance - 800.891.2566 www.petbenefits.com/peoplease

Pet Insurance