

# EMPLOYEE BENEFITS GUIDE

2025-2026





## Welcome!

One of the great advantages of working at Capital Waste Services is the outstanding benefits package provided by the company. These benefits are designed to help you with your short-term as well as your long-term goals. Please take a few minutes to read this information and share it with your covered dependents.

## Eligibility

Benefits are available to all employees working a minimum of 30 hours per week.

Also eligible for coverage are:

- Your legal spouse or domestic partner
- Your children up to age 26
- **Your disabled children:** For Medical, Dental, and Vision, unmarried children age 26 or older who are mentally or physically disabled and depend on you for support and care. Includes biological, adopted, stepchildren and children you are required to support under the terms of a Qualified Medical Child Support Order.

### Notes:

- Extended family members, such as grandchildren, are not eligible for coverage unless you are their legal guardian, have adopted them, or claim them as a tax dependent.
- For more specific eligibility requirements, see the Dependent Eligibility section of the Summary Plan Document (SPD) for each specific benefit.

### Enrolling dependents? Items to have ready

When you add dependents to your coverage, you may be required to provide the following information:

- Legal name
- Date of birth
- Social Security number

## Waiting Period

All full-time employees will be eligible for benefits after they have satisfied the new hire waiting period. The waiting period is 1st of the month following 60 days.

## Qualifying Events

Any elections made are considered final and cannot be changed unless a qualifying event occurs. Qualifying events include, but are not limited to:

- Marriage, divorce, or legal separation
- Death of spouse or other dependent
- Birth or adoption of a child
- A spouse's employment begins or ends
- A dependent's eligibility status changes due to age, student status, marital status, or employment
- You or your spouse experience a change in work hours that affect benefit eligibility
- Relocation into or outside of your plan's service

*\*You must provide written notice to Human Resources within 30 days of a qualifying event, failure to do so may hinder your ability to make a change.*



## Medical Benefits

Capital Waste Services offers you the opportunity to enroll in a health insurance plan through Allied Benefit Systems. The benefits are outlined below.

Allied Benefit Systems	\$5,000 HDHP	\$3,000 Plan	\$1,500 Plan
<b>Deductible</b>			
<input type="checkbox"/> Individual	\$5,000	\$3,000	\$1,500
<input type="checkbox"/> Family	\$10,000	\$6,000	\$3,000
Coinsurance (you pay)	0%	30%	30%
<b>Out-of-Pocket Maximum</b>			
<input type="checkbox"/> Individual	\$5,000	\$8,550	\$7,900
<input type="checkbox"/> Family	\$10,000	\$17,100	\$15,800
Inpatient Hospitalization	0% after deductible	30% after deductible	30% after deductible
Outpatient Services	0% after deductible	30% after deductible	30% after deductible
Emergency Room	0% after deductible	30% after deductible	30% after deductible
Urgent Care	0% after deductible	\$75 copay	\$75 copay
<b>Office Visit</b>			
<input type="checkbox"/> Preventive Care	Covered 100%	Covered 100%	Covered 100%
<input type="checkbox"/> Primary Care Physician (PCP)	0% after deductible	\$40 copay	\$35 copay
<input type="checkbox"/> Specialist	0% after deductible	\$60 copay	\$50 copay
<b>Prescription Drugs</b>			
<input type="checkbox"/> Deductible	Medical Deductible Applies	N/A	N/A
<input type="checkbox"/> Retail	0% after deductible	\$20 / \$65 / \$100	\$20 / \$65 / \$100
<input type="checkbox"/> Mail Order	2-3 x retail	2 x retail	2 x retail
Lifetime Maximum	Unlimited	Unlimited	Unlimited



# welcome to your new health benefit plan



You're one step closer to making the most out of your new plan. It's important for you to take an active role in your health care choices to maximize your benefits and savings. This kit provides you with the resources to do just that and understand your plan.

## What you'll find in your kit:

### **How Your Plan Works** –

This guide walks you through how your plan works after you see a provider. If you have any questions about your plan or bills, the team through your Member Advocacy Program is ready to help.

**Find a Provider** – With your plan you can see any provider. As a bonus, you also have access to network discounts for physicians through the PHCS Practitioner and Ancillary network.

### **myCigna Pharmacy Benefit**

**Manager** – myCigna gives you all the information you need about your pharmacy coverage. You'll have access to resources such as drug price quoting tools, pharmacy searches, and much more with your myCigna account.

### **How to Read Your Explanation of Benefits (EOB)** –

An EOB is a summary of your health care claims during a period of time. This guide explains each section of an EOB so you know exactly what your plan covered and what you need to pay.

**Allied Member Portal** – Take advantage of the web portal. Log in from a mobile device or desktop to access your ID card, view your personal health record, view claims, and find answers to your claims questions.

**Cancer Coach by Osara** – Cancer Coach is an education, support and behavior change program to help take control of cancer care and achieve better outcomes. This program is available to members at no cost through the Allstate Benefits Self-Funded Program.

**CompassConnect** – Helps you to find medical providers in your area who accept your healthcare benefits plan and specialize in a particular type of care.

**Family care** – Flexible family care assists you with caring for aging or ill loved ones, children or yourself. Our curated national network of caregivers lighten the second (or third) shift load, and help you stay happy, healthy and productive. With Allstate Benefits, you have access to 10 hours annually of help.

### **Recuro Health (telemedicine)**

– Virtual services that provide convenience, easy access and cost savings. Virtual urgent care for minor illnesses like pink eye, asthma and colds as well as virtual behavioral therapy for adults and children as young as 10 years old are available through the Recuro Health platform.

### **Vori Health (virtual musculoskeletal care)**

– You have access to a personalized virtual clinical care team through Vori Health to diagnose, treat and manage musculoskeletal conditions. Initial evaluations and treatment plans for many joint issues have \$0 copays\* for all members.

**Vitality®** – Allstate Benefits offers access to the Vitality Wellness Program. With this unique program, along with your self-funded plan—you can stay healthier.

\* Charges on HSA eligible plans will be subject to member cost sharing if federal law is not extended to allow first dollar coverage for virtual service.

The Allstate Benefits Self-Funded Program provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop loss insurance is underwritten by these insurance companies in the noted states.

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*We encourage you to take advantage of all the benefits your plan offers and we look forward to fulfilling your health insurance needs.*

**Allstate**  
BENEFITS

# get to know your Core Value Plan



## How it works!

Your plan pays providers based on a multiple of the Medicare reimbursement rate<sup>1</sup> for each service you receive. There is no network<sup>2</sup>, so you can go to any provider you want. Here's how it works:

### 1. Seek Care

You can go to any doctor or hospital<sup>2</sup>; simply show your Medical ID card to the provider.

If they have any questions, they can call the Customer Service number on the back of your card.

### 2. Receive Your EOB

You will receive an Explanation of Benefits (EOB) showing your Patient Responsibility. This includes copays, coinsurance, charges for non-covered services, and deductible amounts.

### 3. Review Your Bill

Your provider will send you a bill for any amounts due to them. This bill should not exceed the Patient Responsibility as shown on your EOB.

### 4. When to Call

If your bill shows an amount that exceeds the Patient Responsibility on your EOB, call the MAP Team immediately.

**888-306-0905**

### 5. The Team Gets to Work

MAP will work with your provider to resolve any inconsistencies on your bill. Afterward, you'll receive a letter explaining the resolution.

### The Member Advocacy Program<sup>3</sup> (MAP) is here to:

- Answer questions about billing.
- Clarify your EOB.
- Find providers.
- Help you understand your benefits and how to use your plan.

**Call at 888-306-0905**

<sup>1</sup> Or a derived equivalent of the Medicare reimbursement rate. | <sup>2</sup> Pharmacy benefits and transplants still rely on the use of network providers.

<sup>3</sup> Non-covered services and certain other charges are not eligible for the program.

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# the search is over

Find a provider that's right for  
you and your health plan.



Your Core Value plan allows you to see any provider you choose for most services, and your customized provider search through the Allied Member app makes it easier to get estimates for your out-of-pocket costs and find the ones who:

- Are likely to accept your plan.
- Are located near you.
- Provide the specialized care you need.
- Have high ratings from the Centers for Medicare and Medicaid Services.



**Get started today**

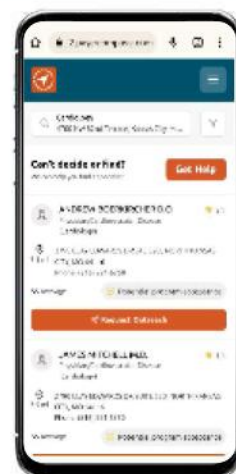
Log in to your My Allied portal app: [member.alliedbenefit.com/login](https://member.alliedbenefit.com/login).

Providers will appear in your search as green (go), yellow (use caution) or red (avoid).

**Green:** Providers that have accepted plans like yours and are not likely to bill more than your plan's reimbursement rate. Choose these providers for a better experience and greater savings.

**Yellow:** Providers that will likely accept your plan but may bill over your plan reimbursement. When you receive a bill from your provider, confirm the amount you owe matches the Patient Responsibility on your EOB in the My Allied portal app. If there is a discrepancy, contact the number on the back of your ID card so your Member Advocate can resolve.

**Red:** Providers that are not likely to accept your plan or will bill you for more than your plan reimburses. We suggest finding a green or yellow provider for the best experience and savings.



**If you or your provider have any questions about your plan and reimbursement rates, call the number on the back of your ID card and your member advocate will help.**

Core Value plans allow members to choose any provider for most services. Some providers may choose not to accept the plan. CompassConnect aims to help members find providers that are likely to accept. If a provider turns a member away, they should call the number on the back of their ID card immediately for assistance.

The Self-Funded Program through Allstate Benefits provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop-loss insurance is underwritten by these insurance companies in the noted states.

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# YOUR PHARMACY BENEFITS



## Five ways to get the most out of your pharmacy benefit plan

### 1. Use myCigna.com

Use the website or app for quick access to:

- › See your pharmacy claim history
- › Read your benefit details
- › See medication prices based on your plan
- › Ask a pharmacist a question
- › Manage your Cigna Home Delivery Pharmacy<sup>SM</sup> orders and request refills<sup>1</sup>

### 2. Learn what medications are covered

Save money by checking out the list of medications covered under your plan on **myCigna.com**. The amount you pay depends on whether your medication is listed as a generic, preferred brand, non-preferred brand or specialty medication.

### 3. Use the Drug Cost tool<sup>2</sup>

View medication costs based on your pharmacy plan, see if there are lower cost alternatives and compare prices between retail pharmacies and Cigna Home Delivery Pharmacy.<sup>1</sup> When discussing medicines with your doctor, use the tool on the myCigna<sup>®</sup> app.



**Questions? Call the toll-free number on the back of your ID card.**

### 4. Fill your medications in a 90-day supply

**Cigna 90 Now<sup>SM</sup> makes it easier to fill the medications you take every day.**

- › Choose where you want to fill your 90-day prescriptions – at a 90-day retail pharmacy in your plan's network, or through Cigna Home Delivery Pharmacy<sup>1</sup>
- › Make life easier by taking fewer trips to the pharmacy to refill, and help stay healthy – with a 90-day supply on hand, you're less likely to miss a dose<sup>3</sup>
- › Go to **Cigna.com/Rx90network** to learn more about the benefits of a 90-day supply and the pharmacies in your plan's network.

### 5. Get help with specialty medications

We can help you understand, manage and treat your condition. Our therapy management teams, made up of health advocates with nursing backgrounds and pharmacists, are specially trained to help deliver the best experience possible. We offer:

- › Personalized, 24/7 support
- › Condition-specific education on medication therapy and side effects
- › Help with medication approval process
- › Financial assistance programs if needed

**Together, all the way.<sup>®</sup>**



1. Plans vary, so some plans may not include Cigna Home Delivery Pharmacy or 90-day retail pharmacy. Please check your plan materials for more information on what pharmacies are covered under your plan.  
2. Prices are not guaranteed, nor is the display of a price a guarantee of coverage. Your costs and coverage may vary at the time you fill your prescription at the pharmacy, and pricing at individual pharmacies may vary. Coverage and pricing terms are subject to change. Your pharmacy may offer a special sale price on a specific medication which may be less than the price displayed here. Please consult your pharmacy.  
3. Internal Cigna analysis performed March 2016, utilizing 2015 Cigna national book of business average medication adherence (customer adherent > 80% PDC), 90-day supply vs. those who received a 30-day supply taking antidiabetics, RAS antagonist and statins.

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# how to read your EOB

An Explanation of Benefits (EOB) is a summary of your health care claims during a period of time noted as "Dates of Service." Your EOB includes details on how claims were processed. This will help you understand what the plan pays and what you owe your provider(s). Remember your EOB is NOT a bill.



Allied Benefit Systems LLC  
200 W Adams St Ste 500  
Chicago IL 60606-5215

20181228004  
JCSA  
1014 4960

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## Explanation of Benefits

**RETAIN FOR TAX PURPOSES**  
**THIS IS NOT A BILL**

### Forwarding Service Requested



### Customer Service

For questions, please visit us at  
**www.Alliedbenefit.com**  
or contact us at  
(888) 292-0272  
*Electronic Claim Submission*  
Please refer to the member's ID card

Enrollee Information

**Dates of Service:** 09/17/2018 thru 10/24/2018

Dear ,

The information below is a summary of the healthcare claims you incurred for the period 09/17/2018 through 10/24/2018. This information is commonly referred to as an "Explanation of Benefits" (EOB). **This is not a bill.** It is a summary, followed by the claim details, of how your recent claims were processed. It includes any co-pay, deductible, coinsurance (%) or non-covered amounts that you may owe to the provider(s) of service. Use this EOB to verify the accuracy of any bill you may receive from the provider(s) listed below. If you did not receive service from the provider(s) listed below or suspect fraudulent charges, please contact the customer service department at the number listed above.

Amount your  
provider(s)  
charged

Amount your  
plan paid

This doesn't include  
any deductibles,  
coinsurance, and  
copays paid by you.

The amount  
YOU owe

Includes copays,  
deductibles,  
coinsurance and  
other amounts not  
covered by the  
plan.

### Total Amount Billed

\$2,524.06

This is the total amount billed for the dates of service of thru .

### Total Amount Paid By Plan

\$1,639.32

This is the amount the plan paid in total for services rendered from thru . Please see the "Claim Detail" section of this document for more information.

### Your Financial Responsibility

\$433.92

This is the amount the provider(s) of service *may* bill you after your health plan benefits were paid. Typically a plan participant may be billed by the provider of service because they may have a deductible, co-pay, coinsurance (%), or the service is not covered by the health plan. Amounts shown here do not reflect any payments made at the point of service. A breakdown of your total financial responsibility is shown in the claim detail for each member.

Amounts not covered by the plan

### Claim Summary

Claim Number	Patient Name	Total Charge	Ineligible Amount	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Patient Responsibility	Payment Amount
		\$791.86	\$0.00	\$0.00	\$791.86	\$0.00	\$0.00	\$0.00	\$791.86
		\$787.49	\$0.00	\$0.00	\$787.49	\$0.00	\$0.00	\$0.00	\$787.49
		\$294.00	\$294.00	\$0.00	\$0.00	\$0.00	\$0.00	\$294.00	\$0.00
		\$472.46	\$23.82	\$326.07	\$122.57	\$92.02	\$0.00	\$115.84	\$30.55
		\$80.00	\$0.00	\$30.58	\$29.42	\$0.00	\$0.00	\$0.00	\$29.42
123456789	Ann Member	\$118.25	\$0.00	\$94.17	\$24.08	\$24.08	\$0.00	\$24.08	\$0.00
Totals		\$2,524.06	\$317.82	\$450.82	\$1,755.42	\$116.10	\$0.00	\$433.92	\$1,639.32

Plan discount  
amounts

Amounts covered  
by plan

Amounts you  
owe

See an example of how the last claim was processed on the reverse side.



# how to read your EOB



Allied Benefit Systems LLC  
200 W Adams St Ste 500  
Chicago IL 60606-5215

20181228B04  
JCBA  
1014 4960

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## Reference Info



Amount not covered  
by the plan

Service and  
Reason Codes

You can find a description of each  
of the codes used in your summary in the  
descriptions boxes below.

Claim#: 123456789  
Patient: Ann Member

Dates of Service	Service Code	Total Charge	Ineligible Amount	Reason Code	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Balance Amount	Paid At	Payment Amount
10/24-10/24/2018	78	\$118.25	\$0.00	V+	\$94.17	\$24.08	\$24.08	\$0.00	\$0.00	100%	\$0.00
Column Totals		\$118.25	\$0.00		\$94.17	\$24.08	\$24.08	\$0.00	\$0.00		\$0.00
Patient's Responsibility:		\$24.08									
									Other Credits or Adjustments		\$0.00
									Total Net Payment		\$0.00

The amount  
YOU owe

Includes copays, deductibles, coinsurance, and other amounts not covered by the plan. Your provider should not bill you anything over this amount. If they do, call the Member Advocacy Program team immediately.

Plan discount  
amounts

Amounts covered  
by plan

### Service Code Description

61 INELIGIBLE EXPENSE  
37 LABORATORY  
B2 HOSPITAL OUTPAT XRAY/LAB  
S5 HOSPITAL OUTPAT SURGERY  
66 EXCEPTION CLAIM  
78 BRAND NAME DRUGS

### Reason Code Description

FD Complete accident details needed to process.  
V+ Discount field reflects excess of plan allowable  
28 YOUR PLAN DOES NOT COVER THIS TYPE OF SERVICE.  
ST This claim was processed by Allied Benefit Systems

If you have questions about your  
EOB, don't hesitate to call the  
Member Advocacy Program team.

**888-306-0905**



The Allstate Benefits Self-Funded Program provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop loss insurance is underwritten by these insurance companies in the noted states.



Use your secure member account to manage your benefits and take control of your healthcare. Log in to your account to experience these features and more.

## ACCESS YOUR ID CARD

**Allstate Benefits**  
**Group Number:**  
JOHN SAMPLE  
**Subscriber ID:** SMPL0001  
**Coverage:** Family  
**Medical plan:**  
**Deductible/Out-of-Pocket:**

**ALLIED**  
  
**Pharmacy benefit:** "S" Cigna  
**RXBIN:** 017010  
**RXPCN:** 0519PAYR  
**RXGRP:** 0721419  
  
 **Member and Pharmacist Helpline:**  
**800.325.1404**  
  
[www.anycigna.com](http://www.anycigna.com)

For virtual access to licensed medical providers and therapists, go to <https://neml.me/allstatebenefits> or call 855.636.3699

Maximum Allowable Amounts for plan benefits is:  
100% of Medicare for inpatient  
100% of Medicare for outpatient  
100% of Medicare for dialysis

## VIEW YOUR PERSONAL HEALTH RECORD



## VIEW YOUR CLAIMS

### Claim History

**SELECT DISPLAY OPTIONS**

**Select Benefit**  
Medical

**View Claims for**  
Stephanie (Subscriber)

**Reporting Period Options**  
2018

**Sort Options**  
Sort by date of service

**APPLY**

## GET ANSWERS TO YOUR BENEFITS QUESTIONS



**GENERAL CLAIM QUESTION**

## HOW TO ACCESS PORTAL

### NEW MEMBERS

1. Click **"REGISTER"** on top right corner of AlliedBenefit.com
2. Enter information in **"WEBSITE ACCOUNT REQUEST"**
3. Click **"SUBMIT"**

### EXISTING MEMBERS

1. Click **"LOGIN"** on top right corner of AlliedBenefit.com
2. Enter account number and password
3. Click **"LOGIN"**

Stop-loss products are underwritten by: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in all other states where offered.

**AlliedBenefit.com**

# Cancer Coach

by OSARA HEAL+H

## When the unexpected happens

Allstate Benefits has partnered with Osara Health to empower those impacted by cancer to thrive using expertise, empathy and technology.



### The Osara experience



#### Additional Support

One on one sessions with a dedicated health coach to talk things through with.



#### Better conversations with medical professionals

Resources to support you and help make positive behavior change.



#### Purposeful and manageable goal setting

Evidence based cancer care management strategies such as symptom tracking, sleep, diet and general wellbeing advice on mindfulness and exercise.



#### Strengthen habits

Access to the Osara Health app to track your symptoms and join a community where you learn from others experiences.



#### Take back control

If and when applicable, further support on employment planning and resetting your relationship with work.

### 3 Easy Steps to Get Started

#### Enroll

Visit our Allstate Benefits Osara Health Landing page accessible via <https://osarahealth.com/en-US/allstatebenefits/>

#### We'll get in touch

Your coach will get in touch directly to discuss your program. You can learn more about the program, and decide how you would like to proceed.

#### Program Begins

Your health coach will create your tailored program. You'll get personalized modules sent to you and you can begin scheduling calls with your health coach whenever it suits you.



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Allstate Benefits is a marketing name for: Integon National Insurance Company in TX and IN; and National Health Insurance company in MO and FL. Group health insurance plans offered by Allstate Benefits are offered by Integon National Insurance Company in TX and IN; and National Health Insurance company in MO and FL.



papa

# We're here to help.

We all need a pal sometimes. That's why your employer is partnering with Papa to offer you an extra set of hands—when, where, and how you need it most. Papa provides flexible family care for you and your loved ones—children, aging parents, and pets.



## Caring for Loved Ones

We can't always be there in person for the ones we love. Papa Pals are available as companion caregivers nationwide and virtually to provide a little extra help to aging or ill family members.



## Companionship

Papa Pals love a good card game, stroll down memory lane, or a new recipe. If it's good company you need, they've got it in spades.



## Child Care

We offer companion caregiving to members of all ages and their little ones. Parents can rely on Papa Pals for homework supervision, after-school snacks, and playtime.



## Transportation

Need a ride to a doctor's appointment, help running errands, or picking up groceries? They'll safely get you where you need to go.



## Everyday Tasks

Keeping up with the house can be overwhelming. Papa Pals offer light cleaning and yard work, meal prep, organizing, pet help, and more.



## Technology Assistance

Our Papa Pals help you set up and learn how to use devices and applications to stay in touch with loved ones, enjoy games, and so much more.

## Scheduling your visit is easy!

1

Enroll online at [papa.com/care/signup-info](https://papa.com/care/signup-info)

2

Download the Papa Care app in the Apple or Google Play store to request your live or virtual visits.

Brought to you through



# Frequently Asked Questions



## What is Papa and who are Papa Pals?

Papa provides flexible family care to you and your family members, right to the front door. Papa is powered by our Papa Pals, a national network of adults who provide friendly human support, when, where, and how it's need.

## What can Papa help me with?

Papa Pals are ready to help you and your loved ones—including spouses, parents, children, and pets—both in-person and virtually. They can assist with companionship, transportation, light household tasks and errands, entertaining children or pets, and more! Papa Pals do a lot, but they don't do it all. They can't provide assistance with specialized medical care, such as bathing (including changing diapers), medication administration, dressing, feeding, ambulating, and tending to personal hygiene.

## How does it work?

Our Papa Care app makes it simple for you to schedule and manage at-home or virtual visits, and specify personal, child, or elder care needs. Once you request a Papa Pal, we use a powerful algorithm to determine the best match for you, and the visit is scheduled.

## How many hours of time do I get with my Papa Pal and is there a cost?

Your coverage comes with a set number of Papa Pal service hours. You are eligible for 10 allocated hours of Papa Pal services at no cost to you.

## I love my Papa Pal. Can I request the same one for all my visits?

Absolutely! You (or your loved ones) have the ability to select and request "preferred" Papa Pals for every visit. As long as they're available at your requested time, they'll be there!

## How do you qualify Papa Pals, and do they follow COVID-19 protocols?

You can trust our Papa Pals. In addition to following COVID-19 safety protocols, they undergo criminal background checks (federal and state), a motor vehicle record check, and participate in ongoing training and education.

## My employer-sponsored plan includes child care, what are the details?

Our Papa Pals are here to support you with caring for children ages 3 and above, provided that the parent or guardian is present. Transportation is available if the parent or guardian is present and able to install the child's car seat, if applicable.

For more information call 1.844.299.4126 (TTY:711)  
Monday-Friday, 8 a.m. to 8 p.m. EST.

[papa.com](https://papa.com)

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# welcome to Recuro Health

Proactive virtual care that prioritizes you.



## Your Recuro Health virtual care services include:

### Urgent care

24/7 access to board-certified doctors for treatment of common medical concerns with ongoing communication with your doctor.

### Behavioral health (ages 10+)

Comprehensive behavioral health care is provided by licensed counselors, social workers and therapists with sessions available in as few as 48 hours<sup>1</sup>.

## Frequently asked questions:

**What's virtual care?** A service that helps you to reach a medical provider or therapist for a virtual visit by phone or online.

**What's a visit fee?** This is what you pay for each visit. Your fee for each urgent care or behavioral health visit will cost between \$0 to \$45, depending on your plan design.

**Who can use the service?** Virtual care is available to you and other members of your plan, including children up to the age of 26, and your spouse/domestic partner.

**Who will I see?** Medical care is provided by our licensed and board-certified physicians, physician assistants and nurse practitioners. Virtual counseling is provided by licensed therapists.

**When should I use virtual care?** When you need medical attention for a minor health concern or when you are facing an emotional or mental setback, Recuro provides a convenient and discreet way to get help on your schedule. You can access care anytime and anywhere – day or night, at home or when traveling. Medical care is available 24/7, and therapy visits can be scheduled in as few as 48 hours.



### Your provider can help with:

- Allergies
- Cold, flu, cough
- Ear problems
- Anxiety, stress
- Depression
- And more

## Get started with Recuro Health

- Go to [member.alliedbenefit.com/login](https://member.alliedbenefit.com/login) to register.
- Once you are registered, you can request a visit. With urgent care services, you can also have prescriptions sent to a local pharmacy for pickup.

**If you have questions, call Recuro at 855-6RECURO (855-673-2876).**

<sup>1</sup> Subject to provider availability.

The Self-Funded Program through Allstate Benefits provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop loss insurance is underwritten by these insurance companies in the noted states. | Allstate Benefits is a marketing name for: Integon National Insurance Company in TX and IN; and National Health Insurance Company in MO and FL. Group health insurance plans offered by Allstate Benefits are offered by Integon National Insurance Company in TX and IN; and National Health Insurance Company in MO and FL.

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[www.allstate.com](http://www.allstate.com) or [www.allstatebenefits.com](http://www.allstatebenefits.com)

**Allstate**  
BENEFITS





Brought to you through



# We feel your pain. And help fix it.

*Pain. Whether it strikes suddenly or it's been there forever, it's hard to know where to turn.*

Vori Health is here to make you feel a whole lot better. We're the only nationwide specialty medical practice offering personalized care and proven relief for back, neck, and joint pain.

## Get started: 3 easy steps



Call **866-719-9611**  
or visit [www.vorihealth.com/allstate](http://www.vorihealth.com/allstate)



Meet with your care team



Your personal care plan is delivered right to your dashboard!

## Tell us where it hurts

HAVE YOU HAD A RECENT  
INJURY OR ACCIDENT?



Let's address that acute pain from sprains, strains, twists, and more.

DO YOU HAVE PAIN THAT  
KEEPS FLARING UP?



We'll get to the bottom of those periodic aches and pains that set you back.

ARE YOU LIVING IN PAIN  
MOST DAYS?



Together, we'll treat the long-term issues that keep you from doing what you love.

Activate your employer benefit  
for you and your family today!



**\$0 copay for initial evaluation**

**\$0 copay for lumbar and/or knee treatment plans**

**\$0 copay for initial evaluation**

**\$0 copay for lumbar and/or knee treatment plans**



## What makes the Vori Health approach different

### You're in expert hands

Led by doctors who specialize in back, neck, and joint pain, our care teams look at your problem from every angle to find out what's really going on and how to fix it.

### Each plan is personalized

Everyone's pain and path to recovery is different. We build a practical treatment plan around your needs and goals, designed to fit your schedule. We support you every step of the way.

### Proven to get results

Vori Health works. Many patients see improvements in as few as three visits. Join the growing community of Vori Health patients who are living pain free.

**"Vori helped me strengthen my shoulder and avoid surgery."**

Mary D., Vori Health member

**"I've never spent this much time with a doctor who really listened to me."**

Jackson D., Vori Health member

### With your employer benefit, get access to:

- ✓ Convenient video visits
- ✓ Medical evaluation & diagnosis
- ✓ Personalized treatment including physical therapy & more
- ✓ Non-opioid pain medication & imaging if needed
- ✓ Support to help you manage pain, regain strength, & enjoy life



The Allstate Benefits Self-Funded Program provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop loss insurance is underwritten by these insurance companies in the noted states.

Vori Health is a nationwide medical provider offering a better approach to back, neck, hip, knee and orthopedic care through physician-led care teams, including coaching and physical therapy. As a contracted partner, Vori Health accepts coverage for members who are enrolled in select products in the Allstate Benefits Self-Funded Employer Program.





# WELCOME TO VITALITY

Brought to you by Allstate Benefits

Register today! The Vitality Wellness Program is your resource for living your healthiest life. Vitality tools help analyze your lifestyle to tell you exactly where to focus and set achievable goals.

## Plan your Personal Pathway to better health!

**Register.** Go to [PowerofVitality.com](https://PowerofVitality.com), complete all required fields and accept terms and conditions.

You and your spouse will enter your Subscriber ID number to register which is located on your health plan ID card.

**Download the Vitality Today™ mobile app** from your app store to keep the program with you every step of the way.

**Take the Vitality Health Review™** - a short, confidential assessment about your current health status, health results, activities, habits, nutrition, and lifestyle.

**Learn your numbers** through a Vitality Check® – a confidential biometric screening. You can review your results on the Vitality website to identify where you can focus your attention to improve your health. You'll also earn a \$25 Amazon gift card!

**Discover your Vitality Age®** based on your lifestyle behaviors and clinical measures, it presents health risks as years "lost" or "gained" compared to your chronological age.

**Plan healthy activities** you want to accomplish or those recommended by Vitality with the Points Planner™ to earn Vitality Points™, raise your Vitality Status® and get the rewards you deserve.

**Register now at [PowerofVitality.com](https://PowerofVitality.com)**



The Allstate Benefits Self-Funded Program provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Allstate Benefits is a marketing name for: Integon National Insurance Company in NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in CO, WA and all other states where offered. For employers in the Allstate Benefits Self-Funded Program, stop loss insurance is underwritten by these insurance companies in the noted states.



## Medical and Pharmacy Plan Overview

You have a choice of three medical plans through Allied Benefit Systems: one High Deductible Health Plan (HDHP) paired with a Health Savings Account (HSA) and two Copay-eligible plans (\$3,000 Plan and \$1,500 Plan). These plans allow you to receive care from any physician or hospital for covered services. All medical options include coverage for prescription drugs.

**To select the plan that best suits your family, consider the key differences between the plans, the cost of coverage (including payroll deductions), and how the plan covers services throughout the year.**

### Understanding how your plan works



#### Your deductible

- You pay out-of-pocket for most medical and pharmacy expenses, except those with a copay, until you reach the deductible.
- If you are enrolled in the HDHP Plan, you can pay for these expenses from your Health Savings Account (HSA).



#### Your coverage

- Once your deductible is met, you and the plan share the cost of covered medical and pharmacy expenses.
- The plan will pay a percentage of each eligible expense, and you will pay the rest.



#### Your out-of-pocket maximum

- Your deductible, copays, and the coinsurance apply toward the out-of-pocket maximum.

### Making the most of your plan

Whether you're in the HDHP Plan or the Copay-eligible Plans, getting the most out of your plan also depends on how well you understand it. Keep these important tips in mind when you use your plan.

**Preventative care:** In-network preventative care is covered at 100% (no cost to you). Preventative care is often received during an annual physical exam and includes immunizations, lab tests, screenings, and other services intended to prevent illness or detect problems before you notice any symptoms.





## Pre-Tax Spending: HEALTH SAVINGS ACCOUNT (HSA)

If you elect the HDHP Plan, it can be paired with a Health Savings Account through Paylocity. HSAs save you money by lowering your taxable income.

- Set aside pre-tax dollars to pay for current and future qualified medical expenses.
- You determine the pre-tax amount taken out of your paycheck and placed in your account.

Any money left in your HSA rolls over from year to year, and it's yours to keep even if you change health plans, jobs or retire.

	HSA
Can I contribute my own savings?	✓
Is there an IRS maximum annual contribution?	Employee: \$4,300 Family: \$8,550 Those 55 and older can contribute an additional \$1,000 annually.
Will my savings roll over each year?	✓ Unlimited
Will I earn interest on my savings?	✓
Are the savings tax-free? <i>In most states</i>	✓
Do I keep the money if I leave the company?	✓

**Be sure to activate your debit card when it arrives in the mail. Then you can use it to pay for doctor visits, prescriptions, urgent care, lab tests and other qualified health care expenses. See a full list of qualified medical and dental expenses at [irs.gov/pub502](https://www.irs.gov/pub502).**

## Dental Benefits

Capital Waste Services offers you the opportunity to purchase dental insurance through Guardian. Your out-of-pocket costs are lowest when you visit a participating network provider.

Guardian	Passive PPO	
Deductible		
▫ Individual	\$50	
▫ Family	\$150	
Covered Services	In Network	Out of Network
○ Preventative Services	100%	100%
▫ Basic Services	100%	80%
▫ Major Services	60%	50%
▫ Endo/Perio	60%	50%
Out-of-Network Reimbursement	UCR 90th	
Orthodontia		
▫ Orthodontia - Child(ren) to age 26	50%	
○ Lifetime Maximum	\$1,500	



## Vision Benefits

Capital Waste Services offers you the opportunity to purchase vision insurance through Guardian, VSP network. Costs are lowest when you visit a participating network provider.

Guardian	In-Network	Out-of-Network
<b>Exam Copay</b>	\$10	up to \$39
<b>Materials Copay</b>	\$25	See Below
<b>Lenses - Single</b>	\$25 Copay	up to \$23
<b>Lenses - Bifocal</b>	\$25 Copay	up to \$37
<b>Lenses - Trifocal</b>	\$25 Copay	up to \$49
<b>Lenses - Lenticular</b>	\$25 Copay	up to \$64
<b>Frames</b>	\$130 Max + 20% off balance	up to \$46
<b>Elective Contact Lenses (in lieu of complete set of glasses)</b>	\$130 Max (Copay waived)	up to \$100
<b>Frequency for Exam / Lenses/ Frame</b>	12 / 12 / 24	



# Disability Insurance

## VOLUNTARY SHORT-TERM DISABILITY (STD)

Capital Waste Services offers the opportunity to elect STD coverage. STD provides income replacement on a weekly basis for a limited period of time in the event that you become ill or disabled in a non-work related injury.

### Mutual of Omaha

#### Elimination Period (# of Days)

➤ Injury	14 Days
➤ Sickness	14 Days
▫ Benefit Percentage	60% or 40%
▫ Maximum Weekly Benefit	\$1,000
▫ Pre-Existing Condition	3/6
▫ Benefit Duration	11 Weeks
▫ Monthly Rate per \$10 of Benefit	\$0.560

## VOLUNTARY LONG-TERM DISABILITY (LTD)

Capital Waste Services offers the opportunity to elect LTD coverage. LTD provides income replacement in the event that you are injured or sick beyond what is provided by STD.

### Mutual of Omaha

#### Monthly Rate per \$100 of Covered Monthly Payroll

<20	\$0.120
20-24	\$0.130
25-29	\$0.190
30-34	\$0.260
35-39	\$0.360
40-44	\$0.490
45-49	\$0.680
50-54	\$1.050
55-59	\$1.370
60-64	\$1.640
65-69	\$1.730
70-99	\$1.810

### Benefit Highlights

▫ Elimination Period (# of Days)	90 days
▫ Benefit Percentage	60%
▫ Maximum Monthly Benefit	\$6,000
▫ Own Occupation Period	24 months
▫ Pre-Existing Condition	12/12
▫ Benefit Duration	RBD to SSNRA (admin & managers); 2 years (all other employees)
▫ Elimination Period (# of Days)	90 days
▫ Benefit Percentage	60%
▫ Maximum Monthly Benefit	\$6,000



## Basic Life / AD&D Insurance

Capital Waste Services provides all full-time employees a flat Basic Life & AD&D benefit of \$20,000. If you wish to be enrolled in this benefit, you will need to make sure you sign up for it through PB Enroll. It is not automatically provided unless it is elected through PB Enroll.

It is important to keep your beneficiary information up to date to ensure that your life insurance benefits will be allocated to the appropriate parties.

This benefit is paid 100% by Capital Waste Services.

Basic Life & AD&D	
Basic Life Benefit	Flat \$20,000
AD&D Benefit	Flat \$20,000
Age Reduction	65% at 65; 50% at 70

## Voluntary Life / AD&D Insurance

You have the opportunity to purchase Voluntary Life & AD&D insurance for yourself and your dependents through Mutual of Omaha. Please see the grid below for plan details.

Mutual of Omaha		
Monthly Rates per \$1,000:	Employee	Spouse
< 25	0.08	
25 - 29	0.08	
30 - 34	0.09	
35 - 39	0.11	
40 - 44	0.17	
45 - 49	0.29	
50 - 54	0.48	
55 - 59	0.75	
60 - 64	1.18	
65 - 69	2.11	
70 - 74	3.78	
75 +	12.62	
Child Rate	\$0.13 per \$1,000	
Voluntary AD&D Rates		
Employee	\$0.060	
Spouse	\$0.060	
Child	\$0.040	
Schedule of Benefits		
Employee	5x salary up to \$300,000	
Spouse	100% of EE Benefit up to \$150K (\$5K increments)	
Children	\$2K - \$10K (\$1K increments)	
Guarantee Issue		
Employee	\$100,000	
Spouse	\$30,000	
Additional Benefits		
Living Benefit Rider	Included	
Waiver of Premium	Included	
Reduction Schedule	35% @ 65: 50% @ 70	

## Worksite Insurance

### ACCIDENT

Mutual of Omaha offers an Accident Plan which pays lump sum benefits towards medical treatment received due to an accident.

Accidents that occur off the job are covered. Please refer to your Mutual of Omaha plan documents for more information and details on how this plan works.

### CRITICAL ILLNESS

Mutual of Omaha offers a Critical Illness Plan which will pay cash benefits directly to you when you have a major medical diagnosis or event.

Please refer to your Mutual of Omaha plan documents for more information and details on how this plan works.

### HOSPITAL INDEMNITY INSURANCE


Bankers Fidelity offers a Hospital Indemnity plan which pays a lump sum benefit of \$1,500 directly to you if an enrolled member on your plan is admitted to the hospital. In addition, you will receive an additional \$100 for each day in which a member of the plan is confined to the hospital, for up to 30 days. Please refer to your Bankers Life plan documents for more information and details on how this plan works.






## Capital Waste Services, LLC Employee Assistance Program (EAP)


Free | Confidential | 24/7


 **Counseling Support** for stress, marital and family problems, job-related concerns, life transitions, work-life challenges, emotional issues, and other concerns.

- **TalkNow®** provides immediate access to counselors for in- the-moment support, and guidance.
- Up to 3 EAP sessions for assessment, short-term counseling, and referral.
- Telephonic, video, and in-person options available.

 **Tess Chatbot** is a supportive AI chatbot that's available 24/7, for unlimited conversations to help manage stress, increase self-awareness, build resilience, and discover helpful resources.

 **Legal** assistance for issues such as divorce, family law, wills, adoption, and more. Identity Theft Recovery and mediation services are also available. Get a free 30-minute consultation and 25% discount off the mediator or attorney fees for services rendered beyond the EAP.

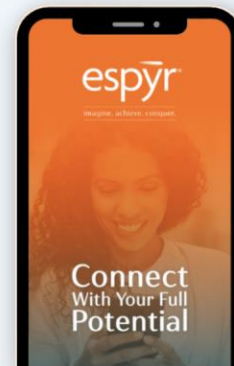
 **Financial** consultation regarding debt matters, investment options, money management, taxes, and retirement planning. Financial personnel services are discounted at 25% as are CPA tax preparation fees.

 **Work-Life** specialists provide consultation, information, resources, and verified referrals for most all personal and family needs such as:

- Childcare & Eldercare
- Adoption
- Academic
- Health & Wellness
- Relocation
- Concierge
- Pet Care
- And More

Capital Waste Services, LLC has partnered with Espyr® to provide employees and eligible family members with a comprehensive EAP to help with a variety of personal and work life matters. The EAP is a free and confidential resource available 24/7.

**App:** Download the Espyr Connect mobile app from the Apple Store or Google Play Store.



**Scan & Download Now**



Access digital resources including webinars, assessments, videos, quizzes, articles, motivational tips, and more.

**Organization ID:** capitalwasteeap

**Online:** [care.espyr.com](https://care.espyr.com)

**Call:** (800) 869-0276

**Tess:** Chat with Tess by texting "hi" to 1 (442) 245-8065 or via the Espyr Connect app.

**Chat:** Chat live with Espyr online or through the Espyr Connect mobile app to ask a question, request services, or receive immediate counseling support.



## Summary of Contributions

See below for a summary of your contributions for each of the benefits Capital Waste Services offers. These deductions are listed as **WEEKLY**.

Medical	\$5,000 HDHP	\$3,000 Plan	\$1,500 Plan
Employee Only	\$21.40	\$26.38	\$43.55
Employee + Spouse	\$106.42	\$117.17	\$157.43
Employee + Child(ren)	\$80.30	\$93.23	\$122.30
Family	\$124.32	\$147.73	\$201.25

Dental	
Employee Only	\$6.12
Employee + Spouse	\$12.42
Employee + Child(ren)	\$17.77
Family	\$25.86

Vision	
Employee Only	\$1.81
Employee + Spouse	\$3.05
Employee + Child(ren)	\$3.11
Family	\$4.92

## Contact Information:

Benefit	Carrier/Vendor	Phone Number	Website
Medical	Allied Benefit Systems	888.306.0905	<a href="http://www.alliedbenefit.com">www.alliedbenefit.com</a>
Dental	Guardian	888.600.1600	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
Vision	Guardian	888.600.1600	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
Voluntary Life & AD&D	Mutual of Omaha	800.877.5176	<a href="http://www.mutualofomaha.com">www.mutualofomaha.com</a>
Short-Term Disability/Long-Term Disability	Mutual of Omaha	800.877.5176	<a href="http://www.mutualofomaha.com">www.mutualofomaha.com</a>
Accident	Mutual of Omaha	800.877.5176	<a href="http://www.mutualofomaha.com">www.mutualofomaha.com</a>
Critical Illness	Mutual of Omaha	800.877.5176	<a href="http://www.mutualofomaha.com">www.mutualofomaha.com</a>
Voluntary Hospital Indemnity	Bankers Fidelity	866.458.7502	<a href="http://www.bankersworksite.com">www.bankersworksite.com</a>
Claims Contact	Ironwood	877.437.6854	<a href="mailto:benefitsclaims@ironwoodins.com">benefitsclaims@ironwoodins.com</a>



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