

# EMPLOYEE BENEFITS

# 2026



## Here is where to find...

Who is Eligible? .....	3
How to Enroll .....	3
Making Changes.....	3
Enrollment Deadlines .....	3
Monthly Employee Rates .....	5
Medical (Anthem BCBS).....	6
Tips for Optimizing Benefits .....	8
Health Savings Account (HSA) .....	9
Flexible Spending Account (FSA) ..	10
Wellness .....	11
Supplemental Health Benefits .....	14
Dental (Lincoln Financial Group) ..	15
Vision (Lincoln Financial Group) ....	16
Life and Disability Insurance .....	17
Additional Benefits .....	18
Glossary of Terms.....	19
Benefits Overview Videos.....	20
Contacts .....	21

## 2026 EMPLOYEE BENEFITS GUIDE



Please read this guide carefully. It summarizes your plan options and provides helpful tips for optimizing your benefits. If you have questions about benefits and the annual enrollment process, contact Prepare Benefits at [allegiancetrucks.benefitsinfo.com](http://allegiancetrucks.benefitsinfo.com) or call the Rightway concierge at 888.665.1678.

Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD).

## WHO IS ELIGIBLE?

Benefits are available to all full-time Employees (minimum 30 hours per week) and their dependents. If you enroll during Open Enrollment, your benefits will become effective on January 1st, 2026. If you are newly hired, your benefits will become effective on the first of the month following 30 days of employment.

Eligible dependents include:

	*Spouse or Domestic Partner
	Your children from birth to age 26

*(Includes your natural, legally adopted, stepchildren and/or your unmarried dependent children of any age who are mentally and physically disabled or are dependent on you for support).*

**\*If your Spouse or Domestic Partner is eligible for coverage through their employer, they will not be eligible to enroll as a dependent on the Allegiance Truck Centers plan.**

## HOW TO ENROLL

To sign up for benefits, visit  
<https://www.dayforcehcm.com/mydayforce/login.aspx>  
 before the end of your enrollment period.

## MAKING CHANGES\*

You may only change your elections during Open Enrollment each year or when you experience a qualifying life event. Qualifying life events include, but are not limited to:

- Birth, legal adoption, or placement for adoption.
- Marital status.
- Dependent child reaches age 26.
- Spouse gains or loses employment or eligibility with current employer.
- Death of a covered dependent.
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or SCHIP.
- Change in residence that changes eligibility for coverage.
- Court-ordered change.

Changes to your coverage due to a qualifying life event must be made within 30 days of that life event. Proof of the qualifying life event is required (marriage certificate, divorce decree, birth certificate, or loss of coverage letter).

*Note: Any change you make to your coverage must be consistent with the change in status.*

## ENROLLMENT DEADLINES

Current Employee	New Hire	Qualified Life Event
<b>ENROLLMENT OPPORTUNITY</b> Annually during the enrollment period.	<b>ENROLLMENT OPPORTUNITY</b> Must enroll within 30 days of hire.	<b>ENROLLMENT OPPORTUNITY</b> Changes must be made within 30 days of life event.
<b>Coverage Effective Date</b> Start of plan year	<b>Coverage Effective Date</b> First of the month following 30 days of employment	<b>Coverage Effective Date</b> Date of life event

\* See page 20 for **Qualifying Life Event** video.



# 2026 Benefits Open Enrollment

## October 13 - October 24



**Visit** the Benefits Homepage by using the QR Code or link provided below

1

**Schedule** your personalized appointment with a Benefits Counselor to learn more about your benefit options (**Multi-language support available**)

2

**Review** the Benefits Guide and other educational tools to learn more about your benefit offerings

3

**Enroll** in Benefits! Be sure to have new dependent and beneficiary SS# and DOB available to complete your enrollment

**SCAN ME**



**SCAN THE QR CODE OR USE THE LINK TO VISIT THE BENEFITS HOMEPAGE**



**ALLEGIANCE**  
TRUCK CENTERS

**<https://allegiancetrucks.benefitsinfo.com>**

# MONTHLY EMPLOYEE RATES

## Medical

	\$3,400 HDHP with HSA	\$2,000 PPO
Employee	\$130.07	\$286.58
Employee + Spouse	\$468.96	\$804.90
Employee + Child(ren)	\$372.04	\$669.87
Family	\$871.22	\$1,544.54

Note: Tobacco users will have a \$40 charge added to their monthly medical deduction.

## Dental

	Dental PPO
Employee	\$38.06
Employee + 1	\$77.52
Family	\$126.96

## Vision

	Vision
Employee	\$5.71
Employee + 1	\$10.41
Family	\$17.12

Note: Additional rate information can be found in your enrollment portal.

# MEDICAL

## ANTHEM BLUE CROSS BLUE SHIELD

www.anthem.com

833.952.2074

Your medical benefits are provided by Anthem Blue Cross Blue Shield and include coverage for both in-network and out-of-network providers. You will always have higher benefit coverage when visiting in-network providers.

Medical	\$3,400 HDHP with HSA		\$2,000 PPO	
	In-network	Out-of-network	In-network	Out-of-network
Annual deductible (Individual/Family)	\$3,400 / \$5,600	\$10,000 / \$20,000	\$2,000 / \$4,000	\$4,000 / \$8,000
Out-of-pocket maximum (Individual/Family)*	\$5,600 / \$11,200	\$40,000 / \$80,000	\$7,000 / \$14,000	\$14,000 / \$28,000
Preventive care	Covered at 100%	50% after Ded.	Covered at 100%	50% after Ded.
Primary physician office visit	20% after Ded.	50% after Ded.	\$25 copay	50% after Ded.
Specialist office visit	20% after Ded.	50% after Ded.	\$60 copay	50% after Ded.
Telehealth	Covered at 100%	50% after Ded.	Covered at 100%	50% after Ded.
Inpatient hospital services	20% after Ded.	50% after Ded.	20% after Ded.	50% after Ded.
Outpatient hospital services (lab, x-ray, diagnostic)	20% after Ded.	50% after Ded.	20%	50% after Ded.
Advanced diagnostics	20% after Ded.	50% after Ded.	20% after Ded.	50% after Ded.
Urgent care	20% after Ded.	50% after Ded.	\$60 copay	50% after Ded.
Emergency room care	20% after Ded.	20% after Ded.	20% after Ded.	20% after Ded.
<b>Prescription drugs *</b>				
Retail (30-day supply)				
Generic	20% after Ded.	50% after Ded.	\$15 copay	50% coinsurance
Brand preferred	20% after Ded.	50% after Ded.	\$45 copay	50% coinsurance
Brand non-preferred	20% after Ded.	50% after Ded.	\$75 copay	50% coinsurance
Mail order (90-day supply)				
Generic	20% after Ded.	Not Covered	\$30 copay	Not Covered
Brand preferred	20% after Ded.	Not Covered	\$90 copay	Not Covered
Brand non-preferred	20% after Ded.	Not Covered	\$150 copay	Not Covered

This is a summary of coverage, please refer to your summary plan description for the full scope of coverage. In-network services are based on negotiated charges. Out-of-network services are based on a percentage of Medicare charges.

\*Includes Deductible and Copayments

**For a list of insurance terms and definitions,  
please refer to the glossary on page 19 of this guide.**

\* See page 20 for **Prescription Drugs: Benefits Overview** video.

## BEYOND MEDICAL BENEFITS

### RIGHTWAY + ANTHEM

Together, Rightway and Anthem will work to ensure you receive the care and support you need.



**Rightway®**

[www.rightwayhealthcare.com](http://www.rightwayhealthcare.com)

**Provides answers** and information for your benefit-related questions

**Can help you find** a provider in your network

**Helps you manage** any chronic health conditions

**Provides your prescription benefits** and connects you with a pharmacist to get the most appropriate prescription medication at the best price.



**Anthem**

[www.anthem.com](http://www.anthem.com)

**Processes** your health care claims and manages your provider network



**Rightway®**



**One number to call with any questions**



**One app for self-service help**



**One team of experts dedicated to helping you**

### RIGHTWAY ADVOCACY

Think of Rightway as your central resource - your dedicated team of nurses, claims specialists and benefits experts ready to save you time and support you.

#### Exploring the Rightway App

- 1. Connect with Your Health Guide**  
Tap the Compose New Message button or the phone icon.
- 2. View Insurance Coverage**  
View a breakdown of your benefits, including your co-pays. If you have questions about your coverage or about the price of a service, your health guide can answer them.

- 3. Get a Care Plan**  
Your health guide can put together a plan with options for high-quality, in-network doctors. Select one and your health guide will schedule an appointment at a convenient time.
- 4. Review or Dispute a Bill**  
Take a picture of your bill and send it to your health guide. They will answer your billing questions and explain your charges. If something looks wrong, they will dispute it on your behalf.
- 5. Get Help Button**  
Your fast track to the help you need.

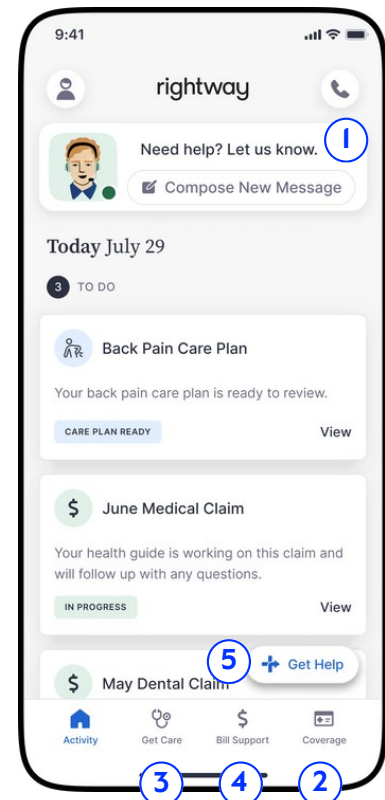
#### Getting Started is Easy

Download the Rightway app on the App Store, Google Play, or scan the QR code with your smartphone.



Download on the  
**App Store**

GET IT ON  
**Google Play**



## TIPS FOR OPTIMIZING BENEFITS

### Pharmacy with Rightway\*

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- Find an in-network pharmacy or use the drug cost estimator tool by visiting [joinrightway.com](https://joinrightway.com).
- Discount sites like GoodRx and WellRx provide instant savings. (Please note: Prescriptions acquired under these plans do not go through your insurance).
- Ask your provider or pharmacist if a generic/mail order is available.

Generic contraceptives and diaphragms are covered in full. Contact the drug manufacturer to inquire about Patient Assistance Programs (PAPs), which may provide financial assistance.

### Concierge Line

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Rightway: (888) 665.1678

- Choose appropriate medical care.
- Find a doctor or hospital.
- Understand treatment options.
- Achieve a healthier lifestyle.
- Get answers to medical questions.

### Cost Estimator Tool

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Doctors and hospitals may charge different amounts for the same service. You can use the Find Care tool on the Sydney Health app or [www.anthem.com](https://www.anthem.com) to help you compare costs between different doctors and facilities.

### Sydney Health Mobile App

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Use the Sydney Health mobile app to easily access your healthcare information and tools to help estimate costs, manage claims, see what's covered and check claims, view and use digital ID cards and find providers — anytime and anywhere.



### 24/7 NurseLine

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Phone Number: (800) 711.5947

Anthem provides a 24/7 NurseLine, giving you and your family access to a registered nurse anytime - day or night. You can call a trained, registered nurse to decide what to do about a fever, give you allergy relief tips, or advise you where to go for care.

### Telemedicine

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Anthem provides access to telemedicine through the Sydney Health app.

The program lets you get the care you need — including most prescriptions — for a wide range of minor acute conditions. Now, you can access board-certified doctors via secure video call, text, or chat without leaving your home or office. No appointment required.



\* See page 20 for **Prescription Drugs: Tips to Manage Cost** video.



# HEALTH SAVINGS ACCOUNT (HSA)\*

## OPTUM BANK

AVAILABLE TO PARTICIPANTS IN THE \$3,400 HDHP WITH HSA PLAN.

[www.optumbank.com/health-accounts/hsa](http://www.optumbank.com/health-accounts/hsa)

866.234.8913

A health savings account (HSA) is a tax-advantaged savings account that can be used for qualified healthcare expenses. You own your HSA and can contribute to the account with pre-tax payroll deductions.

Did you know an HSA provides triple tax benefits?

- The money you contribute is pre-tax.
- Interest accumulates in the account tax-free.
- Money withdrawn from an HSA isn't taxed, provided you use it for qualified healthcare expenses.

**To help you get started, Allegiance Truck Centers makes a per pay period contribution to your HSA, up to the annual amounts shown below:**

Employee	\$600 per year
Employee + Spouse	\$1,000 per year
Employee + Family	\$1,250 per year

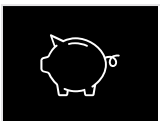
## HSA Advantages



You can use the account to pay for qualified healthcare expenses.



Unspent dollars roll over each year and are yours to keep, even if you retire or leave the company.



You can invest your HSA funds, so your available healthcare dollars can grow over time.

## You are eligible if:

- You are enrolled in the HDHP.
- You are not covered by a spouse's plan.
- No one else can claim you as a dependent.
- You are not enrolled in Medicare, TRICARE, or TRICARE for Life.
- You have not received VA benefits in the past 3 months.

## How Do I Manage My HSA?

Access and manage your HSA at [www.optumbank.com/health-accounts/hsa](http://www.optumbank.com/health-accounts/hsa). You'll set up your payroll contributions during your enrollment period. You can change the contribution amount at any time (although it may take up to two payroll periods to process).

## How Much Can I Deposit into an HSA in 2026?

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- Up to \$4,400 for individual.
- Up to \$8,750 for family.

55+\*

The maximum contribution increases by \$1,000.

\*Not enrolled in Medicare

\* See page 20 for **Health Savings Account (HSA)** and **How to Optimize Your HSA** videos.

# FLEXIBLE SPENDING ACCOUNT (FSA)\*

LIVELY

[www.livelyme.com](http://www.livelyme.com)

888.576.4837

## What is a Flexible Spending Account?

A flexible spending account (FSA) is a tax-advantaged account that can reimburse you for qualified healthcare or dependent care expenses. You can fund qualified expenses with pre-tax dollars deducted from your paycheck.

When electing an FSA, you will set an annual contribution amount. FSAs do not roll over year to year, so you will have until December 31st, 2026 to use the funds. The goal is to choose an amount that will adequately cover medical or dependent care expenses, not an excessive amount that will cause you to forfeit money at the end of the year.

You can choose to participate in either the Healthcare FSA, the Dependent Care FSA or both, and it's unnecessary to "sign up" specific family members for these accounts.



### Healthcare FSA

A healthcare FSA reimburses Employee for eligible medical expenses, up to the amount contributed for the plan year. Eligible healthcare expenses include many out-of-pocket costs you pay to maintain your health and well-being. Visit [irs.gov](https://www.irs.gov) for a full list of eligible expenses.

You may contribute up to \$3,300 annually (funds will be available as of the election effective date).



### Limited Purpose FSA

You may set aside up to \$3,300 in 2026 into a Limited Purpose FSA on a tax-free basis. You can use this money to pay for eligible out-of-pocket dental and vision expenses. Please note this account cannot be used for medical expenses.



### Dependent Care FSA

You may use pre-tax dollars from your Dependent Care FSA to pay expenses for the care of a dependent child, spouse, or elderly parent inside your home (from a qualified provider), and expenses outside your home, such as babysitters, nursery schools, or daycare centers.

You may contribute up to \$7,500 annually (or \$3,750 if you are married and file a separate tax return). You can only be reimbursed up to the amount that you have contributed.

\* See page 20 for **Flexible Spending Account (FSA)**, **How to Optimize Your FSA** and **Dependent Care FSA** videos



# The Allegiance Trucks Wellness Program is Coming Soon!

**Your New Wellness Program Starts  
January 1, 2026**

## Make This Your Healthiest Year Yet

Feeling overwhelmed keeping your health and wellness in line? The Allegiance Trucks North America wellness program is partnering with Marquee Health to help you manage your overall well-being with confidence. Our new custom website and mobile app equipped with convenient and accessible resources will allow you to take wellness with you on-the-go.

From **January 1st, 2026 – December 31st, 2026**, employees can earn up to \$25 per month in gym membership reimbursement. Each month that you have your membership or subscription, you must upload documentation to earn credit.

### Resources at your fingertips to balance both work and wellness!

- **Wellness Portal & Mobile App:** Technology at your fingertips
- **Unlimited Access to Health Coaches:** Experts answering your questions & helping you reach your goals
- **Wellbeing Place Blog:** Weekly posts focused on trending health and wellness topics
- **On-Demand Wellness Videos:** Learn to cook, meditate, or workout when it's convenient for you
- **Personal Health Assessments:** Questionnaires to help identify health risk areas
- **Wellness Challenges:** Opportunities to compete against your coworkers with wellness-focused goals
- **Monthly Webinars:** Educate yourself on how to make the best decisions for your well-being
- **Gym Membership Discounts:** Access to discounts at gyms nationwide



**ALLEGIANCE**  
TRUCK CENTERS



# MARQUEE WELLNESS CHALLENGES

[www.mymarqueehealth.com](http://www.mymarqueehealth.com)

## MARQUEE

In an effort to promote a healthier lifestyle in 2026, Allegiance Truck Centers has partnered with Marquee to offer a list of creative wellness challenges with incentive for completion.

### Rethink Your Drink - A Hydration Challenge

In the Rethink Your Drink Challenge, participants will be motivated to increase water intake in an effort to reach the recommended 64 ounces of water daily over the course of four weeks. Hydrate your way to better health and track your progress at least five days a week.

### Counting Sheep - A Sleep Challenge

The Counting Sheep Challenge is designed to inspire participants to strive for quality sleep in order to be more productive during working hours and still feel energized for recreational activities. Participants will log their hours of sleep with the goal of achieving at least seven optimal hours of sleep per night.

### Walk This Way - A Steps Challenge

The Walk This Way Challenge encourages more movement and less sedentary positions by increasing daily steps. Participants will log daily steps in an effort to walk it out all the way to the goal of 50,000 steps per week!

### Step Up to the Plate - A Fruit and Vegetable Challenge

Aim to add a rainbow of color to your plate with at least five servings of fruits and vegetables daily. By making produce a priority, you can increase your energy levels and decrease the risk of obesity, heart disease, some cancers, diabetes, and hypertension. Track your fruit and veggie intake and feel the benefits of consuming a variety of key nutrients.

For the full list of challenges or any questions, you can visit  
[www.mymarqueehealth.com](http://www.mymarqueehealth.com) or contact [info@mywellportal.com](mailto:info@mywellportal.com).





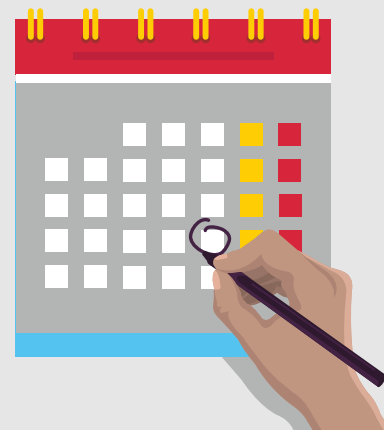
# Allegiance Trucks Tobacco Cessation Program

## Enroll Starting January 1<sup>st</sup>, 2026!

Medically enrolled employees who are tobacco users but wish to have their surcharge waived are invited to complete the UBreathe Tobacco Cessation program, provided confidentially by Marquee Health. In order to earn the \$40 monthly surcharge removal for the entirety of the year, employees have the opportunity to enroll in the UBreathe program at any point in the benefit year. The UBreathe program consists of **6 weekly coaching sessions** with your dedicated Health Coach.

### What Will I Learn Through UBreathe?

- The benefits of quitting
- Setting a 'Quit Date' & creating a 'Quit Plan'
- Planning for triggers, cravings & withdrawals
- Creating a stress management plan
- Providing ongoing support to stay quit
- Education about Nicotine Replacement Therapies & Medications





# SUPPLEMENTAL HEALTH BENEFITS

## LINCOLN FINANCIAL GROUP

Our medical plans offer excellent coverage for healthcare needs. However, everyone's needs differ, and that's where supplemental health options come into play. These benefits are designed to protect your family's finances in case of an unforeseen injury or illness. These benefits are offered to you through Lincoln Financial Group. Please visit [www.lincolnfinancialgroup.com](http://www.lincolnfinancialgroup.com) for additional details.

### Accident Insurance\*

After a covered accident, accident plans pay cash benefits directly to you to cover some of the remaining costs your health insurance plan may not cover.

### Critical Illness Insurance\*

Critical illness insurance helps protect your income and personal assets when out-of-pocket expenses increase due to a specified illness. This plan covers conditions such as heart attack, stroke, end-stage renal failure, and invasive cancer.

### Hospital Indemnity Insurance\*

Hospital stays can be expensive, even with insurance. Hospital Indemnity plans are designed to provide financial protection by paying you a direct benefit to cover out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to you based on the facility type and number of confinement days.

\* See page 20 for **Accident Insurance**, **Critical Illness Insurance** and **Hospital Indemnity Insurance** videos.

# DENTAL\*

## LINCOLN FINANCIAL GROUP

[www.lincolnfinancial.com](http://www.lincolnfinancial.com)

800.423.2765

Dental plans cover diagnostic and preventive care, plus basic and major services. Although you can choose any dental provider, you will generally pay less when you visit an in-network dentist. If you choose an out-of-network provider, you may be billed the difference between what Lincoln Financial Group pays, and what your out-of-network provider charges for the services. To locate an in-network provider, please visit [www.lincolnfinancial.com/findadentist](http://www.lincolnfinancial.com/findadentist).

Dental	Dental PPO	
	In-network	Out-of-network
Annual deductible (Individual/Family)	\$50 / \$150	\$50 / \$150
Annual maximum (per person)	\$1,750	\$1,750
Diagnostic and preventive care (includes cleanings, fluoride treatments, sealants, and x-rays)	Covered at 100%	Covered at 100%
Basic services (includes fillings, periodontics, scaling, and root planing, and oral surgery)	Covered at 80%	Covered at 80%
Major services (includes crowns, bridges, full and partial dentures and implants)	Covered at 50%	Covered at 50%
Orthodontia	Covered at 50%	Covered at 50%
Lifetime maximum	\$1,000	\$1,000

Employees can elect dental and/or vision regardless their medical enrollment status.

\* See page 20 for **Dental Insurance** video.

# VISION\*

## LINCOLN FINANCIAL GROUP

[www.lvc.lfg.com](http://www.lvc.lfg.com)

800.440.8453

Our vision care benefits include coverage for eye exams, lenses and frames, contact lenses, and discounts for laser surgery. The vision plan is built around the Lincoln Financial network providers who offer you higher benefits at a lower cost. Consider using an in-network provider for the most bang for your buck when you need services! For out-of-network providers, you will be reimbursed for services according to the grid below. To locate an in-network provider, visit [www.lvc.lfg.com](http://www.lvc.lfg.com).



Vision	Vision PPO	
	In-network	Out-of-network
Examination (every 12 months)	\$10	Up to \$40 allowance
Material	\$25	See schedule below
<b>Lenses (every 12 months)</b>		
Single	Covered at 100%	Up to \$40 allowance
Bifocal	Covered at 100%	Up to \$60 allowance
Trifocal	Covered at 100%	Up to \$80 allowance
Lenticular	Covered at 100%	Up to \$125 allowance
<b>Frames (every 12 months)</b>		
New frames	Up to \$130 allowance	Up to \$45 allowance
<b>Contact lenses (every 12 months)</b>		
Elective	Up to \$125 allowance	Up to \$125 allowance
Medically necessary	Covered at 100%	Up to \$210 allowance

Employees can elect dental and/or vision regardless their medical enrollment status.

\* See page 20 for **Vision Insurance** video.



# LIFE AND DISABILITY INSURANCE

## LINCOLN FINANCIAL GROUP

[www.lincolnfinancial.com](http://www.lincolnfinancial.com)

800.423.2765

### Life Insurance\*

Allegiance Truck Centers provides Basic Life and Accidental Death & Dismemberment (AD&D) insurance at no cost to you!

Insurance Coverage	Benefit
Basic Life and AD&D	1x annual earnings up to a maximum of \$150,000, rounded to the next higher \$1,000

If you would like additional coverage, Voluntary Life and AD&D insurance are available to you, your spouse, and your dependent children. You must enroll in coverage for yourself to cover your spouse or children. If you don't enroll in Voluntary Life when it's first available or elect an amount over the Guaranteed Issue, you may be required to complete an Evidence of Insurability (EOI) form.

Insurance Coverage	Benefit
Voluntary Employee Life	Increments of \$10,000 up to the lesser of 4x annual salary or \$500,000. Guaranteed issue of \$300,000.
Voluntary Spouse Life	Increments of \$5,000 up to \$250,000, not to exceed 2.5x employee annual salary or 50% of employee amount. Guaranteed issue of \$30,000.
Voluntary Child Life	Birth to 14 days: \$1,000 14 days to 26 years: Increments of \$1,000 up to \$10,000 Guaranteed issue of \$10,000.

### Disability\*

These plans give you income protection in the event you are ill, suffer a non-work-related injury, and can't work. If you don't enroll in Disability coverage when it's first available, you may be required to complete an Evidence of Insurability (EOI) form.

Short-term Disability Benefits		Long-term Disability Benefits	
Elimination period	7 days	Elimination period	90 days
Weekly benefit	60% of weekly earnings	Monthly benefit	60% of monthly earnings
Maximum weekly benefit	\$1,500	Maximum monthly benefit	\$7,500
Maximum benefit period	13 weeks	Maximum benefit period SSNRA (Social Security Normal Retirement Age)	If disabled prior to 60, up to the greater of SSNRA or a maximum of 5 years. See plan document for details.
Pre-Existing Condition Limitation	3/12	Pre-Existing Condition Limitation	3/12

\* See page 20 for **Life and AD&D Insurance** and **Disability Insurance** videos.

## ADDITIONAL BENEFITS

### Employee Assistance Program\*

Description	<ul style="list-style-type: none"> <li>● EAPs provide voluntary, confidential support to employees who need help managing personal and work-related problems. Unlimited access to Master's-level counselors by phone 24/7.</li> <li>● Up to 5 face-to-face visits with a counselor at no cost.</li> <li>● Unlimited access to helpful tools and resources online.</li> <li>● Referrals available.</li> </ul>	
Contact information	Lincoln Financial Group 888.628.4824	<a href="http://www.guidanceresources.com">www.guidanceresources.com</a> User ID: LFGSupport Password: LFGSupport1
Who pays?	Employer	

### Voluntary Medicare Education

Description	Voluntary Medicare education and plan selection assistance for any Medicare eligible employees that are enrolled in an Allegiance Truck Centers Medical Plan. Licensed Medicare agents can provide one-on-one education and consultation about Medicare and its plan options.	
Contact information	<a href="http://AllsupMedicare.com">AllsupMedicare.com</a> 888.271.1173	
Who pays?	Employee: Discounted rates are available.	

### 401(k) Plan

Description	<p>Our 401(k) plan provides a convenient and tax-advantaged way to save so you can achieve your retirement goals. The earlier you start, the more you'll save! If you have 401(k) funds from other qualified plans, you can also roll them over into your Allegiance Truck Centers 401(k).</p> <p>Allegiance Truck Centers will match 50% up to 4% with a max employer match of 2%.</p>	
Contact information	T. Rowe Price <a href="http://www.troweprice.com">www.troweprice.com</a> 800.922.9945	
Who pays?	Employee: Discounted rates are available.	

\* See page 20 for **Employee Assistance Program** video.

## GLOSSARY OF TERMS\*

**COPAYMENT:** A copayment (copay) is the fixed dollar amount you pay for certain in-network services on a PPO-type plan. In some cases, you may be responsible for coinsurance after a copay is made.

**COINSURANCE:** Your share of the costs of a healthcare service, usually figured as a percentage of the amount charged for services. You start paying coinsurance after you've met the deductible. Your plan pays a certain percentage of the total bill, and you pay the remaining percentage.

**DEDUCTIBLE:** A deductible is the amount of money you must meet before your plan begins paying for services covered by coinsurance. Some services, such as office visits that require copays, do not apply to the deductible. For example, if your plan's deductible is \$1,000, you'll pay 100 percent of eligible healthcare expenses until you have met the \$1,000 deductible. After that, you share the cost with your plan by paying coinsurance.

**FORMULARY:** A list of prescription drugs covered by the plan. Also called a drug list.

**HIGH DEDUCTIBLE HEALTH PLAN (HDHP):\*** This type of medical plan requires that members reach a deductible prior to having services covered by coinsurance. All expenses paid by a member count toward the deductible and out-of-pocket maximum.

**IN-NETWORK:** A group of doctors, clinics, hospitals, and other healthcare providers that have an agreement with your medical plan provider. You pay a negotiated rate for services when you use in-network providers.

**OUT-OF-NETWORK:** Care received from a doctor, hospital, or other provider not part of the plan agreement. You'll pay more when you use out-of-network providers since they don't have a negotiated rate with your plan provider. You may also be billed the difference between what the out-of-network provider charges for services and what the plan provider pays.

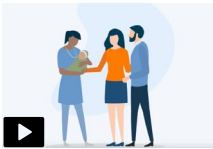
**OUT-OF-POCKET MAXIMUM:** This is the most you must pay for covered services in a plan year. After you spend this amount on deductibles and coinsurance, your health plan pays 100 percent of the costs of covered benefits. However, you must pay for certain out-of-network charges above reasonable and customary amounts.

\* See next page for **Benefits Key Terms Explained** and **Medical Plans: HDHP** videos.

# BENEFITS OVERVIEW VIDEOS

Scan the QR codes or click anywhere to watch.

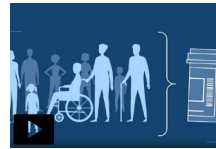
## Qualifying Life Events



## Prescription Drugs: Benefits Overview



## Prescription Drugs: Tips to Manage Costs



## Health Savings Account (HSA)



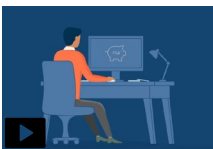
## How to Optimize Your HSA



## Flexible Spending Account (FSA)



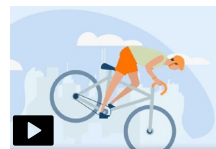
## How to Optimize Your FSA



## Dependent Care FSA



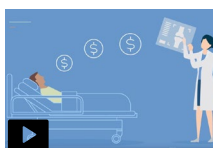
## Accident Insurance



## Critical Illness Insurance



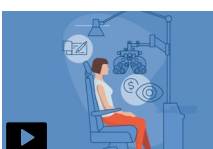
## Hospital Indemnity Coverage



## Dental Insurance



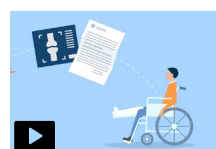
## Vision Insurance



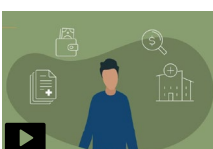
## Life and AD&D Insurance



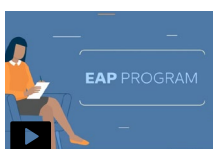
## Disability Insurance



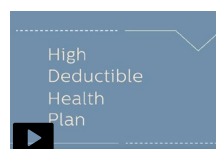
## Benefits Key Terms Explained



## Employee Assistance Program



## Medical Plans: HDHP





STATION

## CONTACTS

### **Medical Plan: Anthem Blue Cross Blue Shield**

Member Services 833.952.2074

[www.anthem.com](http://www.anthem.com)

Policy Number L15256

### **Prescription Services: Rightway**

Member Services 305.851.7310

[www.joinrightway.com](http://www.joinrightway.com)

Policy Number 50054

### **Dental Plan: Lincoln Financial Group**

Member Services [www.lincolnfinancial.com](http://www.lincolnfinancial.com)

800.423.2765

Policy Number 00001D041886

### **Vision Plan: Lincoln Financial Group**

Member Services 800.440.8453

[www.lvc.lfg.com](http://www.lvc.lfg.com)

Policy Number 000400270519

### **Health Savings Account (HSA): Optum Bank**

Member Services 866.234.8913

[www.optumbank.com/  
health-accounts/hsa](http://www.optumbank.com/health-accounts/hsa)

### **Flexible Spending Account (FSA): Lively**

Member Services 888.576.4837

[www.livelyme.com](http://www.livelyme.com)

### **Support Line**

Rightway Member Services:

888.665.1678

[www.joinrightway.com](http://www.joinrightway.com)

Prepare Benefits Enrollment Navigation:

[allegiancetrucks.benefitsinfo.com](http://allegiancetrucks.benefitsinfo.com)

### **Life & Disability: Lincoln Financial Group**

Member Services 800.423.2765

[www.lincolnfinancial.com](http://www.lincolnfinancial.com)

Life Policy

Number: 000010270516

Voluntary Life: 000400001000-27257

LTD Policy

Number: 000010270517

STD Policy

Number: 000010270518

### **Wellness: Marquee**

Member Services [www.mymarqueehealth.com](http://www.mymarqueehealth.com)

### **Supplemental Health Benefits (Accident, Critical Illness, Hospital Indemnity): Lincoln Financial Group**

Member Services 800.423.2765

[www.lincolnfinancial.com](http://www.lincolnfinancial.com)

Accident:

ACC-0001448062

Hospital

Indemnity:

HI-0001447062

Critical Illness:


CI-0001447063

Annual notices are available here:

<https://online.flippingbook.com/view/670839871/>



# ZOTHE



The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.