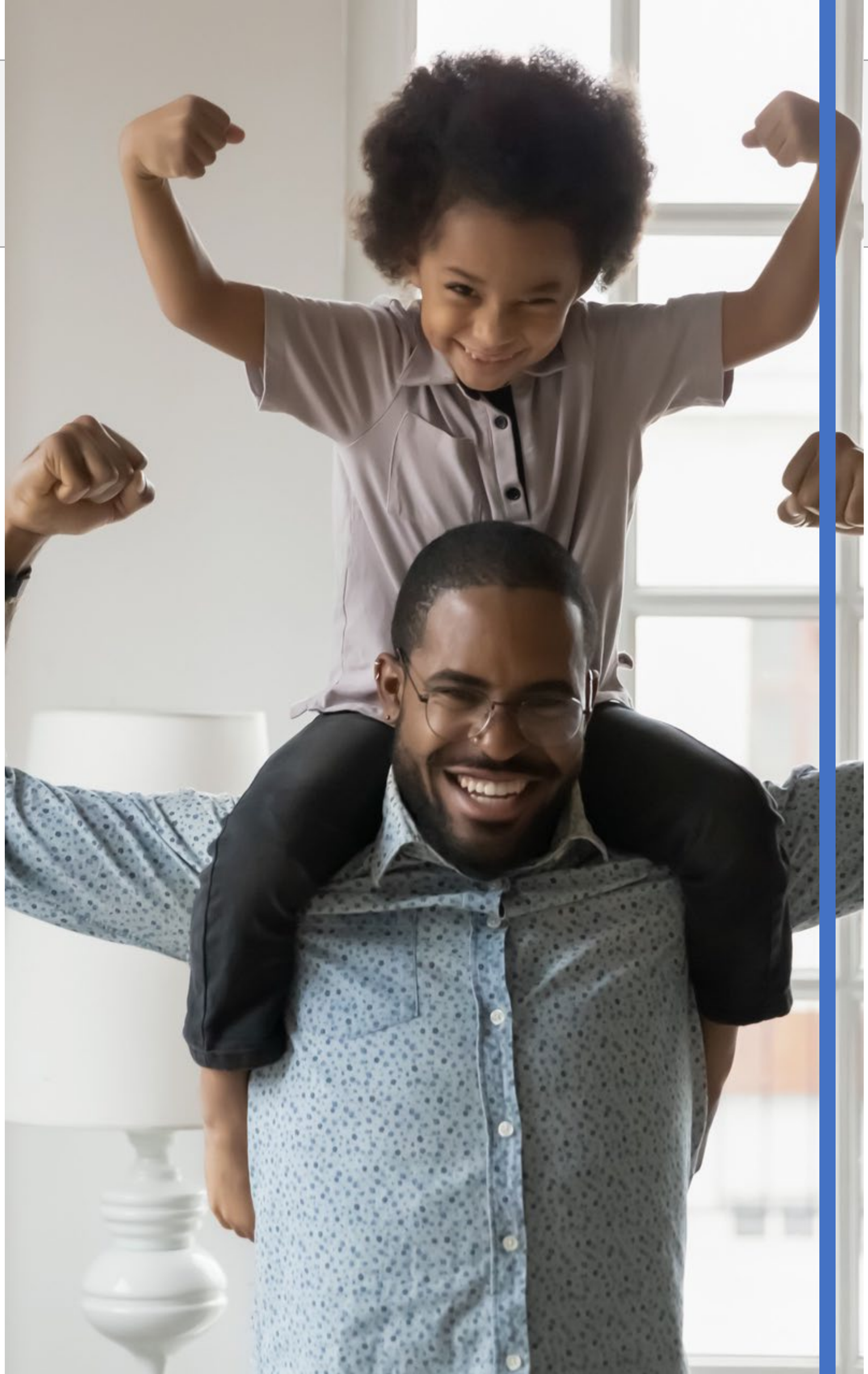
2025 Employee Benefits

Benefit Basics



Types of Enrollment:

Your benefits are in effect for one full plan year – **October 1 – September 30.** During this time, changes to benefit elections cannot be made without a qualified status change.

There are three basic types of benefit enrollment:

1) **Open Enrollment:** Occurs once a year and is your opportunity to change your benefit elections or add/ change dependents.
2) **New Hire/Newly-Eligible Enrollment:** For new employees, coverage begins on the first of the month following 30 days of employment. You have 30 days from your date of eligibility (or change in eligibility status) to elect your benefits.
3) **Qualified Status Change:** You can only make changes to your benefits elections if you experience a qualified status change, as mandated by the IRS. More details to the right.

Eligibility:

You are eligible to enroll in your company's group benefits plans if you are **a full-time employee working a minimum of 30 hours per week.** Benefits end on your termination date of employment, or loss of eligibility.

You may enroll your:

- Spouse or legal domestic partner.
- Natural, step or legally adopted child(ren)* up to the age of 26. Qualifying dependents may be covered on medical until age 30.
- Disabled (mentally impaired, physically handicapped or totally disabled) child(ren) age 30 and older. You must periodically provide medical documentation of such disability.

Coverage terminates the end of the year in which your child(ren) turns 30 years old. The spouse and/or child(ren) of your dependent child(ren) are not eligible for coverage.

Types of Qualified Status Changes:

Unless you experience a life-changing *qualifying event*, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in residence
- Change in employment status or a change in coverage under another employer-sponsored plan

How to Enroll

How to Register Employee Navigator

Website: **https://upswing.employeenavigator.com**

Company Identifier: **Arc Dialysis**

Are you ready to enroll?

The first step is to review your current benefits and the benefits being offered at open enrollment. Did your benefits meet your needs last year? What changes might you make this year based on your current or future needs? Did you move recently or get married?

Once you have assessed your needs, Collect all your personal information for yourself and your covered dependents including addresses, date of birth and social security number.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

Medical Plan FloridaBlue

Coverage	BlueCare 71 *You pay In-Network*	BlueOptions 05908 *You pay In-Network*	BlueCare 48 *You pay In-Network*	BlueOptions 05772 *You pay In-Network*
Annual Deductible (Individual/Family)	$5,000 / $10,000	$5,000 / $10,000	$2,000 / $6,000	$2,000 / $6,000
Coinsurance	80%	80%	80%	80%
Out-of-Pocket Maximum (Individual/Family)	$7,900 / $15,800	$8,200 / $16,400	$5,800 / $11,600	$5,500 / $11,000
Preventive Care	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Office Visit (Primary/Specialist) • Primary • Specialist	$10 $100	$30 (first 3 visits $0) $60	$35 $65	$35 $65
Hospitalization	20% after deductible	20% after deductible	$100 per visit; 20% after deductible	$100 per visit; 20% after deductible
Urgent Care	$75	$100	$70	$70
Emergency Room	$250 per visit; 20% after deductible	$350	$300	$300
Surgery	20% after deductible	20% after deductible	Hospital: 20% after deductible Surgery Center: $250	Hospital: 20% after deductible Surgery Center: $250
Imaging	20% after deductible	20% after deductible	$300	$300
Prescriptions • Retail (30 day supply) • Mail Order (90 day supply)	$10 / $20% 2.5x retail copay	$10 / $20% 2.5x retail copay	$10 / $50 / $80 / $250 2x retail copay	$10 / $50 / $80 / $250 2x retail copay
Monthly Cost				
Employee	$124.77	$155.13	$195.77	$230.39
Employee + Spouse	$657.12	$817.03	$1,031.04	$1,213.38
Employee + Child(ren)	$540.67	$672.24	$848.33	$998.35
Employee + Family	$1,039.76	$1,292.77	$1,631.40	$1,919.91

Provider Search
FloridaBlue

Phone: 800-352-2583

Website: www.FloridaBlue.com

How to find a provider:

1. Go to www.floridablue.com
2. At the top of the page, select "Find A Doctor"
3. Click "Find a Doctor or Dentist"
4. Enter your search location
5. Select your plan:
    - For BlueCare select the BlueCare Network
    - For BlueOptions select the BlueOptions Network
6. *Search by Provider Name, Facility or Condition*
7. Continue to refine your criteria as needed

Dental Plan FloridaBlue

Coverage	Blue Dental Care DHMO	Blue Dental Choice DPPO		Blue Dental Choice Plus DPPO	
	In-Network	In-Network	Out-of-Network*	In-Network	Out-of-Network*
Annual Deductible (Individual/Family)	*N/A*	$50 / $150	$50 / $150	$50 / $150	$50 / $150
Annual Benefit Maximum per Member	*None*	$1,500		Unlimited	
Diagnostic & Preventive Care • Exams • X-rays • Fluoride Treatments • Cleaning/Prophylaxis	See Schedule of Benefits for copay schedule	100%	100%	100%	100%
Basic Restorative Care • Fillings • Extractions		80%	80%	90%	90%
Major Restorative Care • Crowns • Dentures • Bridges • Inlays / Onlays / Veneers • Implant Services		50%	50%	60%	60%
Orthodontia • Adults & Children		50% up to $1,000 lifetime max*		50% up to $2,000 lifetime max*	
Monthly Cost					
Employee	$3.87	$8.45		$17.56	
Employee + Spouse	$16.76	$36.65		$76.07	
Employee + Child(ren)	$19.98	$57.34		$120.62	
Employee + Family	$37.64	$86.95		$182.41	

* Out-of-network provider fees over the Plan's reasonable and customary limits are your responsibility.

Provider Search
FloridaBlue

Phone: 800-352-2583

Website: www.FloridaBlue.com

How to find a provider:

1. Go to www.floridabluedental.com/members/find-a-dentist
2. Select your plan:
   - DHMO = BlueDental Care
   - DPPO = BlueDental Choice
3. Enter your search location, distance and dentist name and search
4. Adjust your search by looking for a specific provider or a distance from your home or work location.

Vision Plan FloridaBlue

Summary	IN-NETWORK MEMBER COST	OUT-OF-NETWORK REIMBURSEMENT
Annual Exam (Every 12 months)	$10	Up to $40
Plastic Lenses (Every 12 months) • Single Vision, Bifocal,Trifocal, Lenticular • Standard Progressive • Premium Progressive	$10 $0 Beginning at $40	Up to $40-100 Up to $40 Up to $40
Frames (Every 12 months)	$150 allowance plus 20% off balance over allowance	Up to $50
Contact Lenses* (Every 12 months) • Allowance • Medically Necessary • Standard Fit and Follow-up • Premium Fit and Follow-up	$150 allowance plus 15% off balance over allowance Paid in full Included $60 allowance plus 15% off balance over allowance	Up to $105 allowance Up to $225 allowance N/A N/A
*Contact lenses are in lieu of eyeglass frames and lenses.		
Monthly Cost		
Employee	$0	
Employee + Spouse	$7.69	
Employee + Child(ren)	$8.66	
Employee + Family	$19.22	

Provider Search
FloridaBlue

Phone: 800-352-2583

Website: www.FloridaBlue.com

How to find a provider:

1. Go to https://providersearch.floridablue.com/
2. Scroll down to Additional Searches and click "Vision Nationally"
3. Enter your search location
4. Adjust your search by looking for a specific provider or a distance from your home or work location.

Life Insurance AD&D Mutual of Omaha

Basic Life: Your company pays the cost of Basic Life and AD&D Insurance for all active**, full-time employees working 30 hours per week.** Basic Life Insurance provides a benefit to your beneficiary in the event of your death. If death results from an accident, the AD&D portion of the insurance pays an additional benefit and in some cases, it may provide a benefit if you are injured as the result of an accident.

Voluntary Life and AD&D: If you are an active, **full-time employee working 30 hours per week**, you have the option to purchase additional Life and AD&D Insurance coverage for yourself, or to cover your spouse and/or child(ren). You must enroll for voluntary employee coverage in order to enroll your dependent(s).

When you are first eligible, take advantage of the Guaranteed Issue benefit available. If you have previously declined this coverage, or are electing above the Guaranteed Issue benefit amount, you will need to complete EOI to be considered for coverage.

Voluntary Term Life Insurance	Employee benefit	Spouse Benefit	Child benefit
Increments of	$10,000	$5,000	$10,000
Max benefit	$500,000 (5x salary maximum)	$250,000	$10,000
Guaranteed Issue	$100,000	$30,000	$10,000

*Voluntary Spousal Life and Voluntary Child(ren) life coverage may not exceed 100% of the Voluntary Employee Life election.

Disability Mutual of Omaha

Voluntary Short-Term Disability and Employer Paid Long-Term Disability
Disability coverage helps replace lost income due to an illness or injury. Employees can elect Voluntary Short-Term Disability. For benefit eligible employees working a minimum of 30 hours each week, your company provides Long-Term Disability coverage at no cost to you.

Voluntary Short-Term Disability	Schedule Amount
Weekly Benefit Amount	Up To 60% Of Weekly Covered Earnings
Weekly Benefit Maximum	Up to $2,500
Benefits Begin	8th Day for Incident/Illness
Benefits Duration	26 weeks

Basic Long-Term Disability	Schedule Amount
Monthly Benefit Amount	Up To 60% Of Monthly Covered Earnings
Monthly Benefit Maximum	Up to $5,000 per month
Benefits Begin	181st Day for Incident/Illness
Benefits Duration	SSNRA

Supplemental Insurance

Supplemental benefits allow you to truly customize your benefits package. Arc Dialysis provides a variety of supplemental benefits to meet your needs and the needs of your family.

Supplemental Insurance| Mutual of Omaha: You can customize your benefits package by choosing the plans that best fit your needs. These benefits are available for purchase on an after-tax basis. Your company will continue to offer:

- **Accident Insurance** pays a cash benefit for injuries sustained and treatment received as a result of an accident.
    - Coverage available for Employee, Spouse and Child(ren).

- **Critical Illness** pays a cash benefit for specified conditions to help with the costs associated with diagnosis and other expenses.
    - You can select between a $10,000 or $20,000 benefit for yourself and your spouse.
    - No additional cost for Child(ren) coverage but you must enroll them to be covered.

What to do next

Are you ready to enroll?

The first step is to review your current benefits and the benefits being offered at open enrollment. Did your benefits meet your needs last year? What changes might you make this year based on your current or future needs? Did you move recently or get married?

Once you have assessed your needs, Collect all your personal information for yourself and your covered dependents including addresses, date of birth and social security number.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

There are many ways to enroll: online, mobile or via phone with a benefit counselor.

Online & Mobile Self-Enrollment

- Enrolling online is fast and easy. Go to https://employeenavigator.com and login to access your member profile.
- Forgot your User Name? Or need to reset your Password? Simply follow the links on the login page to retrieve or reset.

Telephonic Assisted Enrollment

- Visit your dedicated employee benefits page to learn more about your benefits, self-enroll and schedule an appointment with a benefits counselor.

Open Enrollment Election Period:
Begins: **September 3rd**
Closes: **September 10th**

ARC DIALYSIS

2025-2026 Benefits

About This Summary

This summary describes the benefits available to you as a benefit eligible employee of Arc Dialysis. This guide is meant as a summary and does not contain all the details of each plan or policy, notably limitations and exclusions. If there is ever a question about one of these plans or policies, or if there is a conflict between information in this summary and the official plan or policy documents, the formal wordings in those documents will govern. These benefits may be changed at any time and do not represent a contractual obligation on the part of Arc Dialysis.

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