RIPPLING

Welcome packet for MyPlanAdvocate



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Welcome

Dear **MyPlanAdvocate** Employee,

This Health Benefits Guide summarizes the health and other plan options provided to you by your employer. Rippling is proud to be your employer's benefit platform, and we are here to make the enrollment process simple. Please review the guide carefully, so you can choose the plans and benefits that best fit your needs or those of your family.

For employees going through Open Enrollment, you have the option to log into Rippling to view the plans you're eligible for, your specific cost breakdowns, and make your selections for the coming plan year.

If you are a new employee or just became eligible for your benefit options, you can log into Rippling to choose your initial selections. Please note that your elections must be finalized in Rippling within 30 days of your new hire date or the date of your eligibility on coverage. This includes Qualifying Life Events such as a new child, marriage, or termination of coverage elsewhere.

The plans in this Benefits Guide are available from **1/1/2026**.

For any other questions, feel free to reach out to your company's administrator or HR lead.

Sincerely,
MyPlanAdvocate

Cigna

Medical

	Consumer Core [1]		Consumer Enhanced [2]		Copay Core [3]	
	In-network	Out-network	In-network	Out-network	In-network	Out-network
	Plan summary		Plan summary		Plan summary	
Deductible Single	3,500	N/A	2,500	N/A	3,000	N/A
Out Of Pocket Max Single	7,000	N/A	4,000	N/A	8,500	N/A
Deductible Family	7,000	N/A	5,000	N/A	6,000	N/A
Out Of Pocket Max Family	14,000	N/A	8,000	N/A	17,000	N/A
PCP Copay	20% After Deductible	N/A	20% After Deductible	N/A	$30	N/A
Specialist Copay	20% After Deductible	N/A	20% After Deductible	N/A	$60	N/A
Mental Health Inpatient	N/A	N/A	N/A	N/A	N/A	N/A
Mental Health Outpatient	N/A	N/A	N/A	N/A	N/A	N/A
Coinsurance	20% After Deductible	20% After Deductible	20% After Deductible	20% After Deductible	20%	20%
Emergency Room	20% After Deductible	N/A	20% After Deductible	N/A	20% After Deductible	N/A
Urgent Care	20% After Deductible	N/A	20% After Deductible	N/A	$100	N/A
Hospital Inpatient	20% After Deductible	N/A	20% After Deductible	N/A	20% After Deductible	N/A
Hospital Outpatient	20% After Deductible	N/A	20% After Deductible	N/A	20% After Deductible	N/A
Rx - Deductible	Integrated with Medical	N/A	Integrated with Medical	N/A	$0	N/A
Generic	20% After Deductible	N/A	20% After Deductible	N/A	$10	N/A
Brand - Preferred	20% After Deductible	N/A	20% After Deductible	N/A	$70	N/A
Brand - Non-Preferred	N/A	N/A	N/A	N/A	N/A	N/A
Specialty-Preferred	Contact PBM for Details	N/A	Contact PBM for Details	N/A	Contact PBM for Details	N/A

IMPORTANT

1. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.
2. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.
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Cigna

Medical

	Copay Enhanced [1]	
	In-network	Out-network
	Plan summary	
Deductible Single	1,000	N/A
Out Of Pocket Max Single	3,000	N/A
Deductible Family	2,000	N/A
Out Of Pocket Max Family	6,000	N/A
PCP Copay	$20	N/A
Specialist Copay	$40	N/A
Mental Health Inpatient	N/A	N/A
Mental Health Outpatient	N/A	N/A
Coinsurance	20%	20%
Emergency Room	$300	N/A
Urgent Care	75	N/A
Hospital Inpatient	20% After Deductible	N/A
Hospital Outpatient	20% After Deductible	N/A
Rx - Deductible	$0	N/A
Generic	5	N/A
Brand - Preferred	60	N/A
Brand - Non-Preferred	N/A	N/A
Specialty-Preferred	Contact PBM for Details	N/A

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Cigna

Medical

	Consumer Core	Consumer Enhanced	Copay Core
Employee only	$668.2	$790.3	$732.64
Employee and spouse	$1,603.68	$1,896.72	$1,758.33
Employee and children	$1,269.58	$1,501.57	$1,392.01
Employee, spouse and children	$2,138.24	$2,528.96	$2,344.44

Cigna

Medical

	Copay Enhanced
Employee only	$936.13
Employee and spouse	$2,246.7
Employee and children	$1,778.64
Employee, spouse and children	$2,995.6

Delta Dental

Dental

	Core [1]		Enhanced [2]	
	In-network	Out-network	In-network	Out-network
	Plan summary		Plan summary	
Deductible Single	50	50	50	50
Annual Maximum	$1,000	$1,000	$2,500	$2,500
Preventive Coinsurance	100	N/A	100	N/A
Basic Coinsurance	80	N/A	90	N/A
Major Coinsurance	50	N/A	60	N/A
Ortho Amount	N/A	N/A	N/A	N/A
Endo Perio Level	N/A	N/A	N/A	N/A

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Delta Dental

Dental

	Core	Enhanced
Employee only	$35.45	$44.82
Employee and spouse	$68.11	$86.31
Employee and children	$94.88	$139.41
Employee, spouse and children	$128.69	$182.33

VSP

Vision

	Core [1]	
	Copay	Frequency
	Plan summary	
Exams	$10	12 Months mos
Materials	$25	12 Months mos
Frames	$150	12 Months mos
Contacts	$150	12 Months mos

IMPORTANT

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VSP

Vision

	Core
Employee only	$9.06
Employee and spouse	$15.27
Employee and children	$15.58
Employee, spouse and children	$25.13

Unum

Life

Life and AD&D Coverage [1]

Plan summary

- In case of your death, your beneficiary is entitled to receive a 1 times of the salary with a $150,000 maximum benefit
- Please refer to the Plan Summary in Rippling for complete plan details and any additional benefits this plan may offer

IMPORTANT

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Unum

Life

	Life and AD&D Coverage
Employee cost per $1000	$0.102
Spouse cost per $1000	N/A
Child cost per $1000	N/A

Unum

Voluntary Life

Supplemental Life and AD&D Benefit [1]

Plan summary

- In addition to the life insurance, you are also able to purchase Voluntary Life and AD&D Insurance for yourself and your dependents.
- Employees may elect up to $500,000 of Voluntary (Supplemental) life, in increments of $10,000. Elections above $250,000 will require a Statement of Health to be provided (this document is available in Rippling).
- If you are electing Voluntary (Supplemental) life for yourself, you can also cover your spouse with up to $500,000 of coverage, and children with up to $10,000 of coverage. A Statement of Health will be required for spousal elections in excess of $25,000.

IMPORTANT

1. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.

Unum

Voluntary Life

	Supplemental Life and AD&D Benefit
Employee cost per $1000	The premium of this plan is calculated by age of enrolled members (employees and dependents). For complete cost details, please refer to the Insurance app in Rippling.
Spouse cost per $1000	
Child cost per $1000	

Unum

Short Term Disability

Short Term Disability Benefit [1]

Plan summary

- This benefit plan is considered "basic coverage" meaning your employer is paying 100% of the monthly premium.
- If you become disabled as the result of an off-the-job accident, sickness, or condition, and remain disabled for over 26 weeks, you become eligible to receive short-term disability benefits.
- This benefit pays you 60% of your weekly earnings up to a maximum of $1,500 per week.

IMPORTANT

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Unum

Short Term Disability

	Short Term Disability Benefit
Employee Cost Per $10	$0.315
Buy up cost per $10	N/A

Unum

Long Term Disability

Unum Voluntary Long Term Disability Plan [1]

Plan summary

- This benefit plan is considered "voluntary coverage" meaning you, as the employee, are responsible for paying 100% of the monthly premium.
- If you remain disabled after N/A on short-term disability, you become eligible to receive long-term disability benefits
- This benefit pays you 60% of your pre-disability monthly earnings, up to a maximum of $15,000 per month if you are unable to perform your normal job functions after N/A.
- These payments can potentially last until your Social Security Normal Retirement Age, If you are unable to return to work

IMPORTANT

1. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.

Unum

Long Term Disability

	Unum Voluntary Long Term Disability Plan
Employee Cost Per $100	N/A
Buy up cost per $100	${'0': '0', '1': '0', '2': '0', '3': '0', '4': '0', '5': '0', '6': '0', '7': '0', '8': '0', '9': '0', '10': '0', '11': '0', '12': '0', '13': '0', '14': '0', '15': '0.07', '16': '0.07', '17': '0.07', '18': '0.07', '19': '0.07', '20': '0.07', '21': '0.07', '22': '0.07', '23': '0.07', '24': '0.07', '25': '0.09', '26': '0.09', '27': '0.09', '28': '0.09', '29': '0.09', '30': '0.15', '31': '0.15', '32': '0.15', '33': '0.15', '34': '0.15', '35': '0.23', '36': '0.23', '37': '0.23', '38': '0.23', '39': '0.23', '40': '0.33', '41': '0.33', '42': '0.33', '43': '0.33', '44': '0.33', '45': '0.48', '46': '0.48', '47': '0.48', '48': '0.48', '49': '0.48', '50': '0.62', '51': '0.62', '52': '0.62', '53': '0.62', '54': '0.62', '55': '0.92', '56': '0.92', '57': '0.92', '58': '0.92', '59': '0.92', '60': '1.37', '61': '1.37', '62': '1.37', '63': '1.37', '64': '1.37', '65': '1.52', '66': '1.52', '67': '1.52', '68': '1.52', '69': '1.52', '70': '0.7', '71': '0.7', '72': '0.7', '73': '0.7', '74': '0.7', '75': '0.7', '76': '0.7', '77': '0.7', '78': '0.7', '79': '0.7', '80': '0.7', '81': '0.7', '82': '0.7', '83': '0.7', '84': '0.7', '85': '0.7', '86': '0.7', '87': '0.7', '88': '0.7', '89': '0.7', '90': '0.7', '91': '0.7', '92': '0.7', '93': '0.7', '94': '0.7', '95': '0.7', '96': '0.7', '97': '0.7', '98': '0.7', '99': '0.7'}

Unum

Hospital Insurance

Unum Hospital Coverage [1]

Plan summary

Daily Hospital Confinement	N	/	A
Initial Hospital Confinement	N	/	A
Surgery	N	/	A

IMPORTANT

1. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.

Unum

Hospital Insurance

	Unum Hospital Coverage
Employee only	$12.25
Employee and spouse	$24.92
Employee and children	$18.45
Employee, spouse and children	$31.12

Unum

Critical Illness

	Unum Critical Illness Protection [1]		
	Plan summary		
Initial Occurrence	N	/	A
Preventative Screening Benefit	N	/	A
Recurrence	N	/	A

IMPORTANT

1. This plan is not available to employees in all regions. Please check with your company contact regarding its availability.

Unum

Critical Illness

	Unum Critical Illness Protection
Employee cost per $1000	The premium of this plan is calculated by age of enrolled members (employees and dependents). For complete cost details, please refer to the Insurance app in Rippling.
Spouse cost per $1000	
Child cost per $1000	

Unum

Accident Insurance

Unum Accident Protection [1]

Plan summary

Follow Up Treatment	N	/	A
Hospitalization	N	/	A
Initial Treatment	N	/	A
Injury Specific Benefit	N	/	A
Preventative Screening Benefit	N	/	A
Surgery	N	/	A

IMPORTANT

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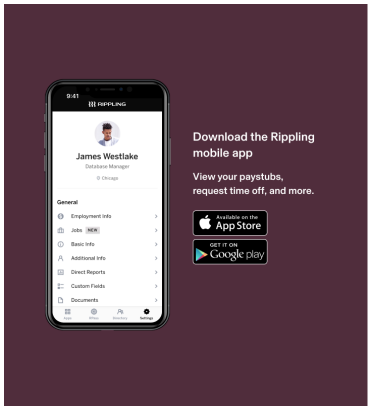
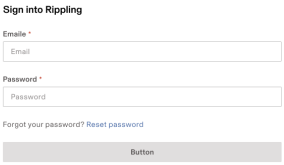
Unum

Accident Insurance

	Unum Accident Protection
Employee only	$10.47
Employee and spouse	$18.84
Employee and children	$22.29
Employee, spouse and children	$30.66

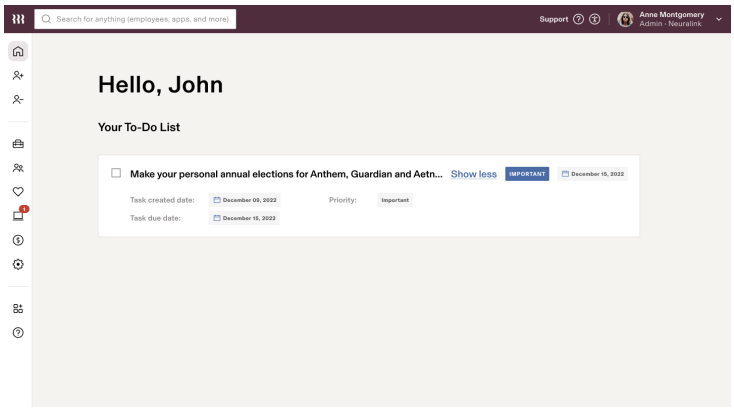
Benefits Enrollment





1

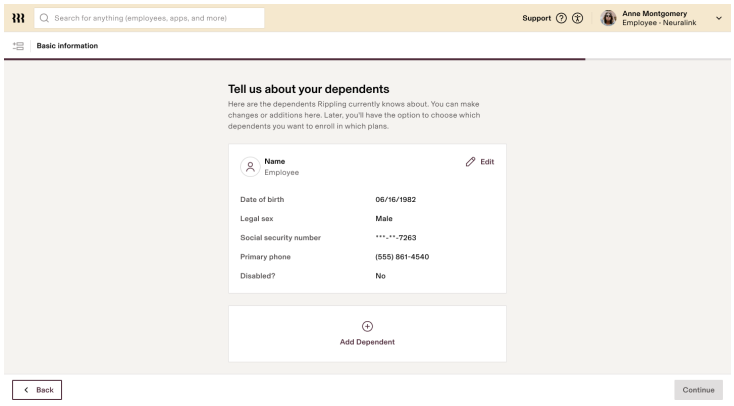
Log into Rippling to elect or waive benefits for yourself or any dependents



2

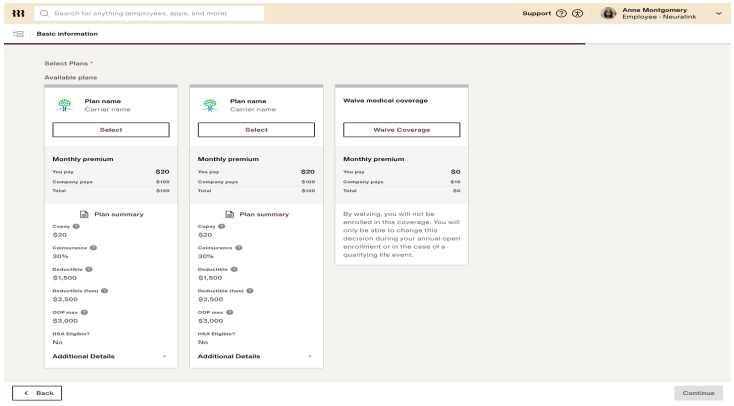
On the Home screen, find your “personal annual elections” task under “Your To-Do List’. Click on the task to start your enrollment.

Benefits Enrollment



3

Enter your dependent information

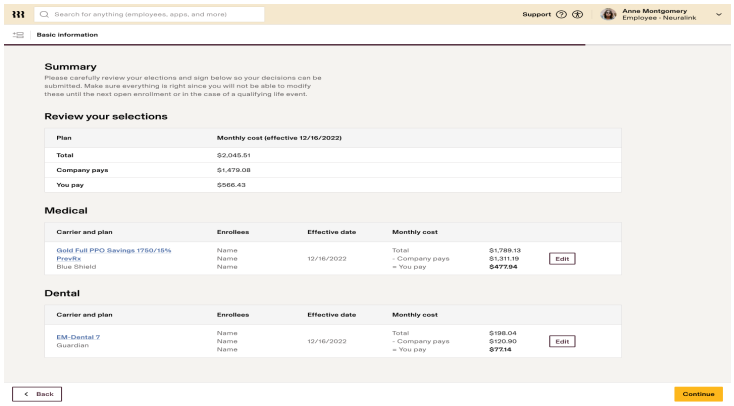


4

Your rates will be shown again when you enroll, so you know what will be deducted each paycheck.

*The examples below don't reflect the actual plan info.

Benefits Enrollment



5

Review, confirm your plan selections and sign.

Thank you!

Thank you for taking the time to review the options MyPlanAdvocate has offered you! If you have any questions or concerns, please reach out.