

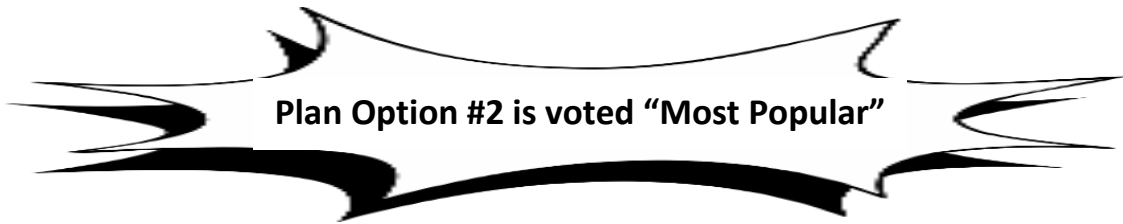


General Overview of All Coverage Options

January. 1, 2024 through December 31, 2024

Medical Insurance

Full-time employees have a choice between four medical benefit plans from either Assured Benefits Administrators or The Health Benefit Alliance. Below is a chart of the plan highlights, and a detailed plan description is available on Patriot Security company website.



Biweekly Premium Cost	Option 1: MEC Plus Plan	Option 2: Optimal Plan	Option 3: Bronze Plan	Option 4: Silver Plan
Employee Only Enrollment	\$33.00	\$60.00	Call for payroll cost	\$282.62
Employee & Spouse Enrollment	\$57.09	\$84.00	Premium for employee-only	\$469.06
Employee & Child(ren) Enrollment	\$90.09	\$96.60	coverage will not exceed	\$417.46
Employee, Spouse & Child(ren) Enrollment	\$119.79	\$114.60	8.39% of wages	\$617.61
Care from Network Provider	Option 1: MEC Plus Plan	Option 2: Optimal Plan	Option 3: Bronze Plan	Option 4: Silver Plan
Routine Physical & Preventive Care	You pay \$0	You pay \$0	You pay \$0	You pay \$0
Flu Shots, Immunizations, COVID Test	You pay \$0	You pay \$0	You pay \$0	You pay \$0
Video or Phone Doctor Visit available 24 hrs. every day	You pay \$0	You pay \$0	You pay \$0	You pay \$0
In-Office Doctor Office Visit	You pay \$10 copay (limited to 4 visits per year)	You pay \$20 copay per visit (unlimited number of visits)	You pay \$25 copay per visit (8 visits per year, maternity excluded)	You pay \$15 copay per visit (10 visits per year)
Hospitalization	You pay full cost	Plan pays \$500 per day (up to \$10,000)	You pay \$350 copay per day (5 day max per year)	You pay \$350 copay per day (7 day max per year)
Retail Prescription Drugs	Up to 50% discount	You pay \$10 or \$40 copay (up to maximum drug benefit)	You pay 20% (Specialty drugs excluded)	You pay 20% (Specialty drugs excluded)
Directory of Network Doctors and Facilities	www.multiplan.com choose Limited Benefit Plan		https://search.primehealthservices.com/Search	
Phone Number for Member Services	(800) 247-7114	(800) 247-7114	(833) 723-2261	(833) 723-2261

This charts is only a few of the benefits. For a full plan description of benefits and exclusions see the Detailed Plan Descriptions.

Vision Insurance

Full-time employees may enroll in Vision Insurance from Mutual Of Omaha. The list below outlines the core benefits provided with an EyeMed optical provider is used. A detailed plan description is available on Patriot Security company website.

- Yearly routine eye claim with dilation is covered 100% after \$10 copay
- Yearly glasses lenses are covered 100% after \$25 copay.
- Every other year purchase of glasses frames is covered 100% for the first \$130
- Yearly, contacts are covered (in the place of glasses) at 100% for the first \$130
- EyeMed network includes Vision Mann, Lenscrafters, Eye Place, America's Best, TSO, Target, Pearle, JCPenney, EyeMart Express, Today's Vision, Sears, Today's Vision and many other providers.

Dental Insurance

Full-time employees may enroll in Dental Insurance from Mutual Of Omaha. The chart below highlights the major provisions of the plan, and a detailed plan description is available on Patriot Security company website.

Maximum Annual Benefit	\$1,500 per person
Annual Deductible	\$50 per person
Type A Services Exams/Cleaning Bitewing X-rays Fluoride	You pay \$0 (no deductible)
Type B Services Full Mouth X-rays Fillings Simple Extracts	After 6 months of coverage and \$50 annual deductible, you pay 20%.
Type C Services Surgery Bridgework/Dentures Crowns & Inlays Endo and Periodontics	After 12 months of coverage and \$50 annual deductible, you pay 50%.
Child Orthodontia	After 12 months of coverage, the plan pays 50% up to \$1,000 per child
Phone Number Member Services	877-999-2330

Short Term Disability Insurance

Full-time employees may enroll in Short Term Disability Insurance from Mutual Of Omaha. If you become disabled (unable to work) for two weeks, then the plan pays you a weekly benefit equal to 60% of your pre-tax wages (maximum of \$500 per week) until you are able to return to work (maximum of eleven weeks). Your premium for this coverage is waived while you are receiving benefits. Complete plan details are available on the Patriot Security company website.

Life and AD&D Insurance

Full-time employees may enroll in Term Life and Accidental Death and Dismemberment insurance from Mutual Of Omaha. Coverage may be purchased on the life of the employee, spouses and children.

- Coverage amounts for employees: \$10,000, \$25,000, \$50,000, \$75,000 or \$100,000
- Coverage amounts for spouse of employee: \$10,000 or \$25,000 (but not greater than employee coverage).
- Coverage amounts for children: \$10,000 per child (and employee must have coverage).

Detailed plan description is available on Patriot Security company website

Key Contacts (when you need answers):

- Vision Member Services: Call (833) 279-4358 with questions about dental benefits, network or claims
- EyeMed Vision Network Providers: www.mutualofomaha.com/vision
- Dental Member Services: Call (877) 999-2330 with questions about dental benefits, network or claims
- Your Insurance Broker: Alan McCormick 832-877-5109 or alan@mccormick-benefits.com.