

The background of the cover is a photograph of a man in a blue and white checkered shirt sitting at a desk, smiling and holding a pen. A woman's hands are visible in the foreground, gesturing as if in conversation. The scene is set in a bright office with windows in the background. A large green rectangular area on the left side of the image contains the title text. Several smaller green squares of varying sizes are scattered across the middle of the image.

**EMPLOYEE
BENEFITS
GUIDE**

JANUARY 1, 2026 - DECEMBER 31, 2026



WELCOME

We are pleased to provide you with a wide range of competitive benefits that are a vital part of your total compensation. You have the flexibility to select from a full range of benefits to keep you and your family healthy, provide financial protection in the event of unforeseen circumstances and help you build long-term security for retirement. This brochure was designed to answer some of the basic questions you may have about your benefits. Please take the time to review this brochure to make sure you understand the benefits that are available to you and your family and be sure to take action before the enrollment deadline.

IMPORTANT INFORMATION

This brochure highlights the main features of the employee benefits program. It does not include all plan rules, details, limitations, and exclusions. The terms of your benefit plans are governed by legal documents, including insurance contracts. Should there be an inconsistency between this brochure and the legal plan documents, the plan documents are the final authority. The Company reserves the right to change or discontinue its employee benefits plans at any time. Links to Benefits Summaries are available when reviewing plan options online.

ELIGIBILITY

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- Your legal spouse or a qualified domestic partner.
- Children under the age of 26, regardless of student, dependency or marital status. This includes children of a qualified domestic partner.
- Children who are past the age of 26 and are fully dependent on you for support due to a mental or physical disability, and who are indicated as such on your federal tax return.

CHOOSE CAREFULLY

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a Qualifying Event during the year. Following are examples of the most common Qualifying Events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, Registered Domestic Partner (RDP), or child
- Change in child custody
- Change in coverage election made by your spouse/RDP during his/her employer's Open Enrollment period
- You lose coverage under your spouse's/RDP's plan



To make changes to your benefit elections, you **MUST** contact Valerie Abbott - vabbott@engagepeo.com 30 days of the Qualifying Event (including newborns).

To learn more about Qualifying Events [click here](#)

BEFORE ENROLLING

Collect Important Information

Prior to enrolling, you will need to collect all dependent and beneficiary information required for enrollment. Be sure to gather date of birth and social security number information for any dependents you want to cover. Certain benefit plans may require a beneficiary (i.e., life insurance), so be sure to have name, contact information, date of birth and social security number ready when you enroll.

HOW TO ENROLL

You will receive an email with instructions on how to access your enrollment online. Be sure to access your enrollment as soon as it is available so you can have time to review all benefit options and make your elections. You may also access your enrollment directly through your Zamp HR Employee Portal. You will receive an email notification on **Wednesday, 10/22/25 notifying that Open Enrollment begins and will close on 10/30/2025**. All benefit elections must be completed within this time frame. For New Hires – you will receive a notification that you can complete your online elections and with the timeframe stated that you must complete your elections. For questions on how to enroll online, please connect with Valerie Abbott vabbott@engagepeo.com.

Online Enrollment – Access Details



How to Access the Benefit Enrollment System - Screenshot example on Page 5

1. Go to our website: www.engagepeo.com/zamphr
Select: Your employee portal
Click – Employee Login
2. Enter your Username & Password then click 'Log In'.
(First time users click on 'Register' to create a username & password.)
3. Once logged in, click on "Benefits" from menu on the left. (If you are returned to the login screen, then you have a pop-up blocker preventing you from opening the window, turn off this setting and try again.)
3. If you have any dependents or beneficiaries, please add/correct/view your dependent and beneficiary information BEFORE going through your enrollment, by clicking on "Dependents/Beneficiaries".
3. When you're ready to enroll, click on "Benefit Enrollment"
4. Follow the prompts & instruction on each screen to complete your elections.
5. To Finalize your elections, you must do the following:
 - Check the box next to: "I agree to and accept the terms and conditions of my group insurance contracts."
 - Electronically Sign for your enrollment by typing in your name exactly as it appears at the top of the page.
 - Click "Complete Enrollment."
8. Please Review & Print your "Benefit Confirmation Statement" for your records.

Please contact us if you need assistance
vabbott@engagepeo.com or call 801.377.1190

BENEFIT PREMIUMS:

At all times you will be able to see a running total of your per payroll deduction in the upper right-hand corner of the screen, this will update automatically as you select a benefit.

BENEFIT PLAN DETAILS:

You can click on the "SBC" icon on any plan to see the benefit details. You can also click "View" next to any plan to see a short summary of the benefit as well as any Supporting Documents (ie CoPay Schedules). In addition, you can compare up to 3 plans side-by-side.

Online Enrollment – Access Details



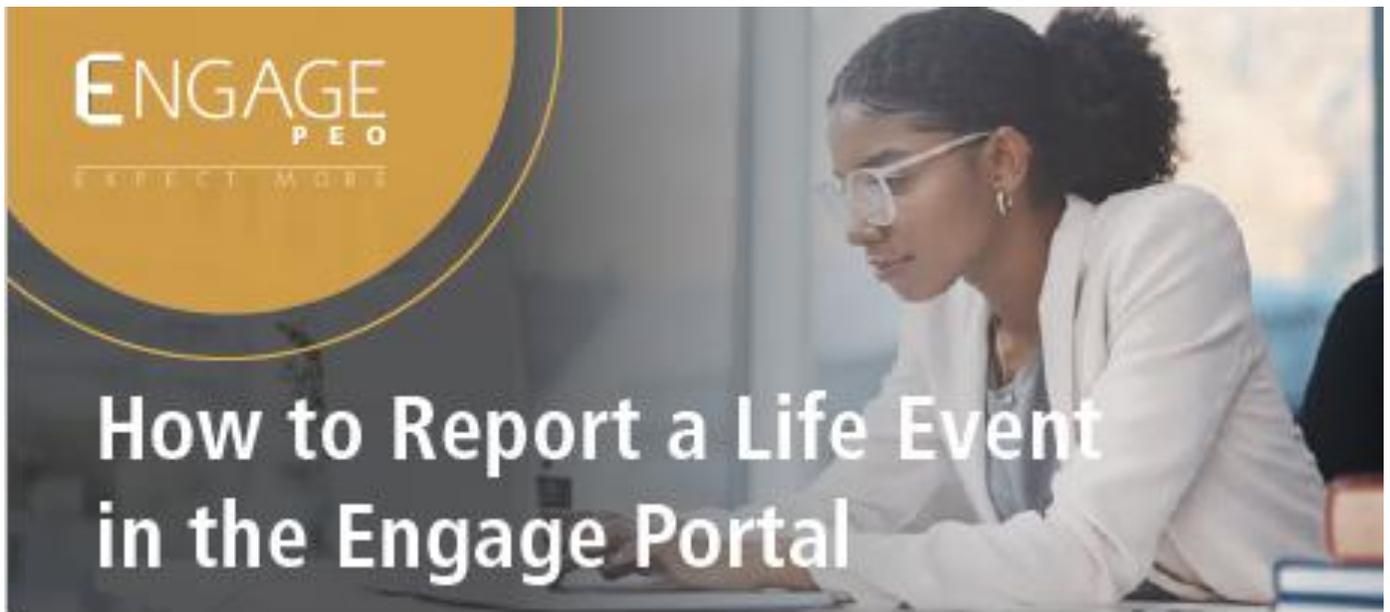
How to Access the Benefit Enrollment System - Screenshot example on Page 5

1. Go to our website: www.engagepeo.com/zamphr
Select: Your employee portal
Click – Employee Login

The screenshot shows the Engage PEO website homepage. At the top, the Engage PEO logo is displayed, along with navigation links: "Our Services", "About Us", "For Brokers", "Blog & Newsroom", "Contact Us", and "Careers". Below the logo, it states "Zamp HR is now ENGAGE PEO" and "A wealth of HR and PEO expertise under one roof!". The main content area features two large buttons: "YOUR MANAGER PORTAL" and "YOUR EMPLOYEE PORTAL". The "YOUR EMPLOYEE PORTAL" button is circled in yellow. Below these buttons, there is a section for "ADDITIONAL RESOURCES" with links for "Employee Login Instructions (English)" and "Employee Login Instructions (Spanish)".

Please contact us if you need assistance
vabbott@engagepeo.com or call 801.377.1190

Qualified Life Events (QLE)



How to Report a Life Event in the Engage Portal

If you're enrolled in Engage Benefits and experience a Qualifying Life Event (QLE), you may be eligible to make changes to your benefit elections outside of the annual Open Enrollment period.

What is a Qualifying Life Event?

Common QLEs include:

- Marriage or divorce
- Birth or adoption of a child
- Loss or gain of other health coverage

To make changes, you must submit your life event through your Engage Employee Portal within 30 days of the event and upload the required supporting documentation. If this deadline is missed, you will need to wait until the next Open Enrollment period.



How to Report a Life Event

1. Log in to your Engage Employee Portal
2. Click the Life Events module/widget on the homepage
3. Select the applicable life event from the dropdown menu
4. Enter the date of the event
5. Follow the instructions to complete and submit your request

Qualified Life Events (QLE)

What Happens Next

After you submit your life event, you will receive up to three email notifications, depending on when you started the process:

- 15-Day Reminder – A reminder of your deadline and required documentation
- Final Reminder – Sent 1 day before the deadline, including required documentation details
- Submission Confirmation – Confirms your request was received and is pending review by a Benefits Specialist



An Engage Benefits Specialist will follow up with you to confirm next steps, clarify documentation requirements, and review the timing for any approved changes.

How to Upload Supporting Documents

To upload your supporting documentation, go to the Benefit Summary page on your portal homepage (you will see a module/widget) and follow these steps.

1. Click the Upload button
2. Select the file
3. Click Upload
4. Look for the message: "Document uploaded to server successfully"

Note: You may submit your request without uploading documentation, but your changes will not be approved until the required documentation is submitted.

If you need help, please contact Benefits@EngagePEO.com.

If you need additional assistance, you may connect with Valerie Abbott directly at vabbott@engagepeo.com who is our assigned Benefit Specialist.

MEDICAL



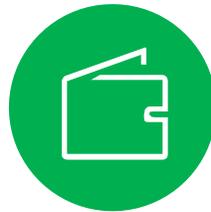
HOW A HEALTH PLAN WORKS

Preventive care – like physical exams, flu shots and screenings – **is always covered 100% when you use in-network providers.** The key difference between the plans is the amount of money you'll pay each pay period and when you need care. The plans have different:



ANNUAL DEDUCTIBLE AMOUNTS

The amount you pay each year for eligible in-network and out-of-network charges before the plan begins to pay.



OUT-OF-POCKET MAXIMUMS

The most you will pay each year for eligible network services including prescriptions. After you reach your out-of-pocket maximum, the plan picks up the full cost of covered medical care for the remainder of the year.



COPAYS

The fixed amount you pay for a health care service. Copays do not count toward your deductible but do count toward your annual out-of-pocket maximum.



COINSURANCE

Once you've met your deductible, you and the plan share the cost of care, called coinsurance. For example, you pay 20% for services and the plan will pay 80% of the cost until you have reached your out-of-pocket maximum.



Not all plan types are available in all markets. The Benefits Enrollment Portal will display specific plans and plan types available to you based on your home zip code.

Dependents who are turning 26 can remain on the plan until the end of their birthday month.



Visit the website to find valuable programs available such as virtual healthcare, pharmacy options, provider search and how to access to your medical ID card through the Health App:

www.regence.com

PLAN TYPES

Traditional Copay Plans

These plans have in/out of network coverage.

High Deductible Health Plans

The plan deductible must be met by the member (EE only coverage) or the family deductible (1 or more enrolled) must be met first before the plan will cover expenses. You will continue to receive a discount for services when using network providers, you are not responsible for the full cost of care when using a network provider.

PLAN FEATURES	Traditional Copay Plans		HDHP w/HSA
Network	Focal Point (FP) or Preferred Blue Option (PBO)		Focal Point (FP) or Preferred Blue Option (PBO)
Deductible – Calendar Year	\$500/person \$1,000/family	\$1,500/person \$3,000family	\$1,700/person \$3,400 /family
Embedded/Non-Embedded	Embedded	Embedded	Non-Embedded –family deductible must be met first before Regence BCBS begins to pay claims at 80%.
Calendar Year Out-of-Pocket Maximum	\$3,000/person \$6,000/family	\$4,000/person \$8,000/family	\$3,400/person \$6,800/family
Lifetime Maximum	Unlimited		Unlimited
Preventive Care	No Charge		No Charge
Office Visits Primary/Specialist Doc on Demand	\$25/\$45 \$10		20% AD \$67 applied towards deductible
Urgent Care Primary/Specialist	\$25/\$45		20% AD
Inpatient Hospital Services	20% AD		20% AD
Outpatient Hospital Services	20% AD		20% AD
Diagnostic Test (non preventive) Imaging –MRI, CT Scan, PETS (non preventive)	20% AD		20% AD
Emergency Room	Deductible then \$150 copay 20%		20% AD
Pharmacy Pharmacy/Specialty RX (30-day supply)	\$5 copay (Generic) \$25 copay (Preferred Brand) \$50 copay (Name Brand) \$5 copay (Specialty Generic) \$25 copay (Preferred Brand) \$50 copay (Specialty Name Brand)		20% AD

****AD – After Deductible**

MEDICAL Premium



Monthly Cost:	Monthly Premium	Civica's Monthly ER Contribution	Employee Monthly Cost
Focal Point (FP)–Traditional \$500 Deductible			
Employee	\$801.80	\$641.44	160.36
Employee + Spouse	\$1760.30	\$1408.24	\$352.03
Employee + Child(ren)	\$1681.20	\$1344.96	\$336.24
Employee + Family	\$2485.50	\$1988.40	\$497.10
Preferred Blue Option (PBO) Traditional \$500 Deductible			
Employee	\$894.80	\$715.84	\$178.96
Employee + Spouse	\$1964.30	\$151.44	\$392.86
Employee + Child(ren)	\$1876.00	\$1500.80	\$375.20
Employee + Family	\$2773.50	\$2218.80	\$554.70
Focal Point (FP) Traditional \$1500 Deductible			
Employee	\$761.70	\$609.36	\$152.34
Employee + Spouse	\$1672.10	\$1337.68	\$334.42
Employee + Child(ren)	\$1597.00	\$1277.60	\$319.40
Employee + Family	\$2361.00	\$1888.80	\$472.20
Preferred Blue Option (PBO) \$1500 Deductible			
Employee	\$849.90	\$679.92	\$169.98
Employee + Spouse	\$1865.80	\$1492.64	\$373.16
Employee + Child(ren)	\$1782.00	\$1425.60	\$356.40
Employee + Family	\$2634.50	\$2107.60	\$526.90
Focal Point (FP) \$1700 Deductible HSA			
Employee	\$692.30	\$692.30	\$0.00
Employee + Spouse	\$1519.80	\$1354.30	\$165.50
Employee + Child(ren)	\$1451.60	\$1299.74	\$151.86
Employee + Family	\$2146.00	\$1855.26	\$290.74
Preferred Blue Option (PBO) Deductible HSA			
Employee	\$772.50	\$772.50	\$0.00
Employee + Spouse	\$1695.90	\$1511.22	\$184.68
Employee + Child(ren)	\$1619.70	\$1450.26	\$169.44
Employee + Family	\$2394.60	\$2070.18	\$324.42

****Civica contributes 80% of the premium for all tiers on both traditional plans.****

****Civica contributes 100% of the EE premium and 80% of the dependent premium for those electing the \$1700/\$3400 deductible plan.****

Network coverage 2026: Preferred BlueOption & FocalPoint



Includes more than 2 million providers nationwide. Search for providers at regence.com or bcbs.com.

All networks include most free-standing surgical and imaging centers, urgent care locations, providers and clinics, including Total Care/Total Cost of Care (TCC) providers.

TCC providers include: Revere Health, Granger Medical Clinic, Foothill Family Clinic, Tanner Clinic, MountainStar-HCA, Aledade and the Ogden Clinic.

Preferred BlueOption (PBO) and National BlueCard® PPO Network: Includes 38 hospitals with 14,000+ providers. Also includes all Intermountain Healthcare hospitals, facilities and providers throughout Utah, as well as all Independent Utah physicians statewide.

FocalPoint (FP) and National BlueCard® PPO network: Includes 30 hospitals across Utah with 11,000+ providers. Anchored by the University of Utah Hospital and Clinics, HCA MountainStar Healthcare and Medical Groups, and the five largest multispecialty groups, which participate in the Total Care/Total Cost of Care (TCC) quality program.

HOSPITAL	PBO	FP
Alta View Hospital - Intermountain	X	
American Fork Hospital - Intermountain	X	
Ashley Regional Medical Center	X	X
Bear River Valley Hospital - Intermountain	X	
Beaver Valley Hospital	X	X
Blue Mountain Hospital	X	X
Brigham City Community Hospital - MountainStar		X
Cache Valley Hospital - MountainStar		X
Castevew Hospital	X	X
Cedar City Hospital - Intermountain	X	
Central Valley Medical Center	X	X
CommonSpirit Holy Cross Hospital - Davis	X	
Delta Community Hospital - Intermountain	X	
Fillmore Community Hospital - Intermountain	X	
Garfield Memorial Hospital - Intermountain	X	
Gunnison Memorial Hospital	X	X
Heber Valley Hospital - Intermountain	X	
Huntsman Cancer Institute - U of U		X
Huntsman Mental Health Institute - U of U		X
Intermountain Medical Center - Intermountain	X	
Kane County Hospital	X	X
Lakeview Hospital - MountainStar		X
Layton Hospital - Intermountain	X	
LDS Hospital - Intermountain	X	
Logan Regional Hospital - Intermountain	X	
Lone Peak Hospital - MountainStar		X

HOSPITAL	PBO	FP
McKay-Dee Hospital - Intermountain	X	
Milford Memorial Hospital	X	X
Moab Regional Hospital	X	X
Moran Eye Center		X
Mountain View Hospital - MountainStar		X
Mountain West Medical Center	X	X
Ogden Regional Medical Center - MountainStar		X
Orem Community Hospital - Intermountain	X	
Park City Hospital - Intermountain	X	
Primary Children's Hospital	X	X
Primary Children's Hospital - Lehi	X	X
Riverton Children's Unit	X	X
Riverton Hospital - Intermountain	X	
San Juan County Hospital	X	X
Sanpete Valley Hospital - Intermountain	X	
Sevier Valley Hospital - Intermountain	X	
Shriners Hospital	X	X
Spanish Fork Hospital - Intermountain	X	
St. George Regional Hospital - Intermountain	X	
St. Mark's Hospital - MountainStar		X
Timpanogos Regional Hospital - MountainStar		X
Utah Basin Medical Center	X	X
University of Utah Hospital		X
University of Utah Neuropsychiatric		X
University of Utah Ortho Center		X
Utah Valley Hospital - Intermountain	X	



Regence BlueCross BlueShield of Utah
Is an Independent Licensee of the Blue Cross and Blue Shield Association

Regence BlueCross BlueShield of Utah
2890 E Cottonwood Parkway | Salt Lake City, UT 84121

REG-UT-1391377-24/08-PBO-FP
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This information is designed to help you choose a medical facility. Those listed could be subject to change.

Regence BCBS – Find a Doctor

Find doctors and understand your costs

Get the most out of your coverage with the Find a Doctor and Cost Estimator tools



Find providers and get cost estimates at [regence.com](https://www.regence.com) and on our [mobile app](#).

How to search for an in-network provider

Knowing your network can save you money, and we want you to get the most value out of your coverage. That's why we've made it easy to search for in-network doctors, specialists, clinics and pharmacies with our **Find a Doctor** tool. Here's how to use it:

Step 1: Sign in to [regence.com](https://www.regence.com).



Step 2: Click **Find a Doctor**, then select the type of care you're looking for.



Step 3: Choose a search category (such as *Doctors by name*, *Doctors by specialty*, *Places by name*, etc.). Type in your search term, then hit *Enter* or click the magnifying glass.



Step 4: Choose a filter to narrow the results, including distance, gender, languages spoken and more.



Step 5: Select a provider or location name to review comments from other patients and see more details about the provider.



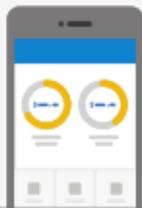
Regence BCBS – Mobile App

Effective January 1, 2026 – Regence BCBS is no longer going to provide id cards or release new id cards at open enrollment. If a member needs an id card, the employee and any dependent over age 13 will need to register to their online member account at www.regence.com and download the smart phone app once the registration has been completed so the member and any dependent over age 13 will always have their id card on their cell phone. Members can also print id cards online through their online member account. If a member needs a printed id card, you can call Regence BCBS directly and request a printed id card to be mailed to you. Majority of all national carriers, are moving to this process to reduce cost, and to be more environmentally friendly.

Get on-the-go access with the Regence app

The Regence mobile app gives you easy and secure access to all your health information. It's iPhone and Android ready, and waiting for you to download.

Just sign in with your existing Regence account or create a new one from the app—then use biometric security to sign in. That means you won't need a password after setup!



Personalized dashboard

See your deductibles and out-of-pocket max.
Find in-network doctors, hospitals and urgent care.
Use Live Chat to send secure messages to Customer Service or tap to call.



Member ID card

View your card on the app and it's stored for anytime access—even without an internet connection.
Show your digital member ID card at the doctor's office for easy check-in.



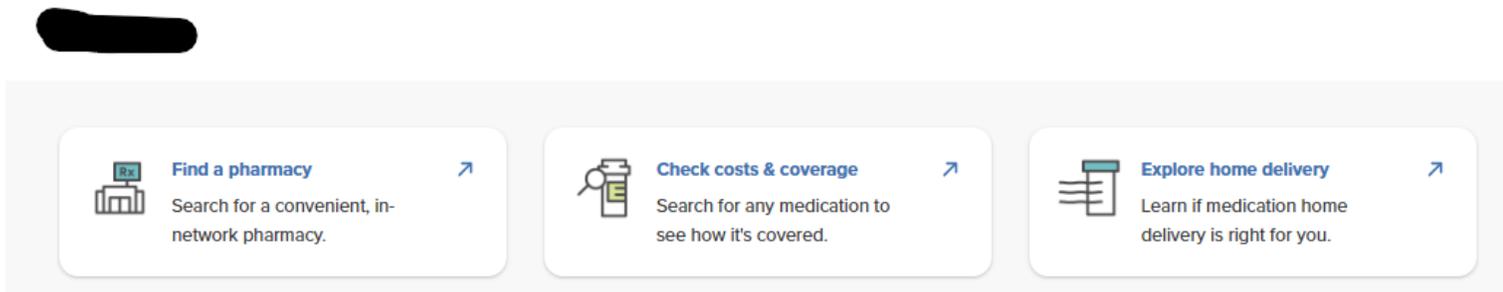
Claims and benefits

View your claims and detailed EOB statements.
See your copay, deductible and coinsurance amounts.
Download your benefits booklet.

Regence BCBS – How to Cost Estimate Pharmacy

- Under your PHARMACY tab in your online member portal with Regence BCBS please click the link: **Check Costs and Coverage** as shown below:

Pharmacy



- You can also use the Cost Estimator tool in your online member account to compare which pharmacy would be the cheapest.
- These tools were once provided under MedSavvy and Regence moved these tools to the Cost Estimator tool for both medical and pharmacy services
- If you need further assistance with pharmacy questions, please connect with Regence BCBS directly. Regence BCBS carrier contact info is included in this guide.

Regence BCBS – Telehealth – Doc on Demand



Telehealth for medical and behavioral health care Doctor On Demand provides convenient care when you need it

Visit a doctor or therapist via video chat

We all have times when we need to see a doctor, but it's inconvenient—there's no time, the office is closed, or we're on the road. You know that feeling: "I wish I could get care without leaving the house!" Now you can.

Your health plan includes telehealth powered by Doctor On Demand, a national leader in quality care. You can talk to any of Doctor On Demand's board-certified physicians, licensed counselors and psychiatrists by video chat using your computer or the app—7 days a week, 365 days a year.

Regence BCBS – Telehealth – Doc on Demand

Telehealth for medical and behavioral health care

Care you can count on

You'll connect with board-certified doctors and therapists who can diagnose and treat non-emergency medical conditions, mental and behavioral health needs, prescribe medications, and send prescriptions to your pharmacy. With specialties including primary care, pediatrics, family medicine and behavioral health, Doctor On Demand makes it easy to get quality care for every member of your family.

Common ailments treated via telehealth include:

Medical

Allergy
Cold and flu
Constipation
Ear problems
Headache
Infections
Nausea

Pink eye
Rashes
Sinus infection
Sore throat
Sunburn
UTI

Behavioral health

Addictions
Anxiety
Depression
Relationship issues
Grief and loss
Trauma and PTSD
Stress management

What you need to know

Doctor On Demand is simple to use. Here are some basic things to know:

- Doctor On Demand is a great option when your child isn't feeling well outside business hours, but dependents will need a parent present during the visit.
- The average wait time to connect with a physician is less than 10 minutes.
- You can use Doctor On Demand as often as you need to.
- Doctor On Demand helps you manage costs, with virtual medical visits generally less expensive than in-person visits. Your visit cost is provided up front before you book your appointment. Costs for behavioral health visits vary depending on the type of care.
- This is more than a nurse advice line. With Doctor On Demand, a doctor can diagnose, treat and prescribe medications, as necessary.
- You'll work with a Doctor On Demand physician or therapist, not your regular doctor.
- With your permission, the Doctor On Demand physician will share your treatment information with your regular doctor.

Visit doctorondemand.com/regence-ut to register today. You'll want to create your online account in advance so when you need care, you'll already be set up.

Doctor On Demand is a separate company that provides telehealth services for Regence members.



Copay Traditional plan - \$10 copay
HDHP/HSA - \$67 copay applies toward deductible

Empower - Wellness Programs included with your Regence BCBS Medical Plan



Regence
UTAH

Regence Empower

REGENCE EMPOWER CORE ROADMAP—FULLY INSURED LARGE GROUP

Your well-being journey starts here

Meet Regence Empower®, your personalized well-being experience. Guided step by step, you'll always know what to do next to reach your goals. Complete activities that help you feel your best and earn rewards along the way. To start your well-being journey, sign in at [regence.com](https://www.regence.com) and select **Regence Empower**.



Earn rewards for healthy activities

Get started by completing your Health Assessment. You'll earn \$15 and receive a personalized report with recommendations just for you. Throughout the year, you'll have more opportunities to earn rewards while building positive habits for your health. Stay active, keep up with your preventive care and learn about things like stress, mindfulness and nutrition. **You can earn up to \$100 per year in gift cards.**

EARN UP TO

\$100

IN GIFT CARDS

IMPORTANT INFORMATION

GOODRX COMPARISON TOOL

Stop paying too much for your prescriptions! With the GoodRx Comparison Tool, you can compare drug prices at over 70,000 pharmacies, and discover free coupons and savings tips.

Isn't health insurance all I need? Your health insurance provides valuable prescription and other health benefits, but a smart consumer can save much more, especially for drugs that are not covered by health insurance (weight-loss medications, some antihistamines, etc.), drugs that have limited quantities, drugs that can be found for less than your copay, or drugs with a lower priced generic.

How can I find these savings? The GoodRx Comparison Tool provides you with instant access to current prices on more than 6,000 drugs at virtually every pharmacy in America.

1. On the web: <https://www.goodrx.com/> Instantly look up current drug prices at CVS, Walgreens, Walmart, Costco, and other local pharmacies.

2. On your phone: Available in the App Store or Google Play. Or, simply visit m.goodrx.com from your phone.

Please Note:

- Prescription drug pricing displayed on the GoodRx Comparison Tool may be more or less than your insurance drug card.
- Please be sure to compare all discount pricing options before you purchase.
- Check your insurance carrier's pharmacy benefit before purchasing a 90 day supply.

HEALTH CARE REFORM AND YOU

For the most up-to-date information regarding the ACA, please visit www.healthcare.gov.

Summary of Benefits and Coverage (SBC) and Uniform Glossary

In addition to the plan information in this Benefits Guide, you can also review a Summary of Benefits and Coverage for each medical plan. This requirement of the ACA standardizes health plan information so that you can better understand and compare plan features. We will automatically provide you a copy of the SBC and Uniform Glossary annually during open enrollment. Please contact HR should you need an additional copy. Your SBC will be made available at the time of your electronic enrollment through your online member portal.

HEALTH SAVINGS ACCOUNT

Inspira



A Health Savings Account (HSA) paired with our qualified high deductible health plan helps you and your family plan, save and pay for qualified health care expenses. An HSA empowers you to build savings for health care expenses in a tax advantaged account.

ABOUT HEALTH SAVINGS ACCOUNTS

A Health Savings Account (HSA) is a tax advantaged savings account that you own and control. HSAs are similar to retirement accounts in that they rollover year-to-year, they are portable when you move jobs or retire, the balance can be invested in mutual funds, and there are survivor benefits.

WHO IS ELIGIBLE?

You must be enrolled in our qualified high deductible health plan and meet the following requirements:

- Have no other health insurance coverage except what's permitted by the IRS
- Not be enrolled in Medicare
- Not be claimed as a dependent on someone else's tax return

WHAT IS A QUALIFIED HEALTH CARE EXPENSE?

You can use money in your HSA to pay for any qualified health care expenses for you, your spouse and your tax dependents, even if they are not covered on your plan. Examples of qualified health care expenses include: your insurance plan deductibles, copayments, and coinsurance; doctor's office visits; prescriptions; dental treatments and x-rays; and eyeglasses and vision exams.

HOW MUCH CAN I CONTRIBUTE TO A HSA?

Each year the IRS establishes the maximum contribution limit. The chart below represents the limits for 2024. These limits are for the total funds contributed, including company contributions, your contributions and any other contributions. Please keep in mind you can change your HSA allocation at any time during the plan year.

EMPLOYER HSA CONTRIBUTIONS

	Annual Employer Contribution	IRS HSA Contribution Limits for 2024
Employee Only	\$1,000	\$4,400
Employee + One	\$2,000	\$8,750
Family	\$2,000	\$8,750

At age 55, an additional \$1,000 contribution is allowed annually

Funds are deposited each pay period for the annual amount that Civica contributes towards the EE's HSA. EE's are not required to contribute to receive the funds into the EE's HSA account.

FLEXIBLE SPENDING ACCOUNT

Inspira



A Flexible Spending Account (FSA) provides you the opportunity to pay for health care and dependent care expenses on a pre-tax basis. By anticipating your family's health care and dependent care costs for the next plan year, you can lower your taxable income.

HOW IT WORKS

Each plan year you designate an annual election to be deposited into your health care and/or dependent care accounts. Your annual election will be divided by the number of pay periods in the plan year and deducted equally from each paycheck on a pre-tax basis. For health care expenses, you have immediate access to the total amount you elected to contribute for the plan year. With the dependent care, you have access to the amount of the current contributions in your account at the time you request reimbursement.

THINGS TO CONSIDER

- Be conservative when estimating your annual election amount. The IRS has a strict "use it or lose it" rule. You will forfeit any funds left in your account after the end of the plan year.
- Your contributions must be used for expenses you incur January 1, 2024-March 30, 2025.
- The health care and dependent care FSA's are two separate accounts and funds cannot be transferred between accounts.
- If you have an HSA, the IRS will allow you to open a Limited FSA (LFSA) that can be used for dental and vision expenses only. An LFSA is a pre-tax benefit.
- You cannot stop or change your FSA contribution amount during the year unless you have a qualified change in family status.
- Expenses reimbursed through an FSA cannot be used as a deduction or credit on your federal income taxes.

FSA REIMBURSEMENT OPTIONS

To receive reimbursement from your FSA, you can submit a claim online, complete a paper claim form or use your FSA debit card. It is important to save your receipts. Discovery Wex (WEX) may ask you to provide a copy to substantiate a claim.

FSA ACCOUNT OPTIONS		
	Health Care FSA	Examples of Eligible Expenses
Maximum Plan Year Contribution Amount	Up to \$ 3,300	Medical, Rx, Dental, & Vision Deductibles, Coinsurance, and Copays
Limited Purpose FSA	Up to \$ 3,300	Dental and Vision expenses only –HSA – medical and pharmacy only if an EE chooses to have an LPFSA account.
Dependent Care FSA	Up to \$7,500 (\$ 3,750 if married and filing separate income tax returns)	Cost of childcare for children under age 13 so you and your spouse can go to work or look for work

DENTAL

Principal

PLAN FEATURES

IN-NETWORK

Calendar Year Deductible (waived for Preventive Services and Orthodontics)

\$50 per person (maximum 3 per family)

Calendar Year Out-of-Pocket Maximum

\$1,000 per person (for all Preventive, Basic and Major)

Preventive Services
(e.g. x-rays, cleanings, exams)

100%

Basic Services
(e.g. fillings, extractions, root canals)

80% AD (after deductible)

Major Services
(e.g. dentures, crowns, bridges)

50% AD

Balance Billing for Out of Network services is removed effective 1/1/24

Child Orthodontics

50%

Orthodontic Lifetime Maximum

\$1,000 per person

DENTAL PREMIUMS

	Employer Contrib. Per Month	Employee Cost Per Month
Employee Only	\$36.28	\$9.07
Employee & Spouse	\$69.36	\$17.34
Employee & Child(ren)	\$82.24	\$20.56
Family	\$120.82	\$30.21



VISION CARRIER NAME

PLAN FEATURES	IN-NETWORK	OUT-OF-NETWORK*
Deductible		Exam: \$10 copay Eyeglass lenses or frames: \$25 copay
Calendar Year Out-of-Pocket Max	You Pay	Plan Reimburses You
Exam (once every 12 months)	\$10	Up to \$45
Frames (one every 12 months)	\$25 copay -\$150 allowance for a wide selection of frames; 20% off amount over allowance	Up to \$70
Lenses (one every 12 months)		
Single Vision	\$25	Up to \$30
Bifocal	\$25	Up to \$50
Trifocal	\$25	Up to \$60
Progressive	\$0 copay 20-25% through additional savings program	Up to \$100
Contact Lenses (one every 12 months)		
Elective	\$25 copay - \$150 allowance	Up to \$105
Medically Necessary	\$25 copay	Up to \$210
Additional Savings	Savings on Lasik vision and additional pairs of prescription glasses and non-prescription sunglasses (Lasik – qualified expense for FSA and HSA)	

VISION PREMIUMS

	Employee Contrib. Per Month
Employee Only	\$6.48
Employee & Spouse	\$13.67
Employee & Child(ren)	\$13.88
Family	\$24.41



LIFE AND AD&D Principal

Life Insurance and Accidental Death & Dismemberment (AD&D) benefits provide you and your loved ones financial protection in the event of an illness, accident, or death.

BASIC LIFE INSURANCE AND ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)

Podium provides all eligible employees with a basic group life insurance and accidental death and dismemberment coverage at no cost to you.

OPTIONAL LIFE INSURANCE AND AD&D

You also have the option to purchase additional life insurance coverage for yourself, your spouse / domestic partner and your dependent children to age 26. However, you may only election coverage for your dependents if you elected additional coverage for yourself. You pay for the cost of additional coverage through payroll deductions on a post-tax basis.

BENEFICIARY DESIGNATION

We recommend you designate a beneficiary for your life insurance policy(ies). A beneficiary is the person (or people, estate, trust, etc.) to whom benefits will be paid to in the event of your death. You may change your beneficiary at any time during the plan year.

PLAN FEATURES	BASIC LIFE AND AD&D	OPTIONAL LIFE AND AD&D
Life Benefit Amount	\$50,000	<p>Employee: Select a benefit in multiples of your annual salary: 100%, 200%,300%,400%, or 500%</p> <p>EE Max: Lesser of 500% of your annual salary or \$500,000</p> <p>Spouse: Select a benefit of \$5,000 in increments of \$1,000 Spouse Max: \$100,000</p> <p>Child: \$10,000 or \$20,000 to age 26</p>
Maximum Life / AD&D Benefit	\$50,000	\$300,000
Guarantee Issue (Gi) Health Questions – Evidence of Insurability (EOI)	\$50,000	<p>EE: \$100,000</p> <p>Spouse: \$25,000 (health questions will be required when electing over the GI)</p>
Age Reductions	Reduces to 35% at age 65 15% at age 70	Reduces to 35% at age 65 15% at age 70
Accelerated Benefit	If you are terminally ill, you may be able to receive a portion of your life benefit.	

DISABILITY

Principal

Disability insurance benefits replace a portion of your income if you are unable to work for a period of time due to a qualified off-the-job injury or illness.

EMPLOYER PAID SHORT-TERM DISABILITY

Short-term disability provides a source of income should your qualified disability keep you from working for more than a week.

EMPLOYER PAID LONG-TERM DISABILITY

Long-term disability provides an ongoing source of income if your disability is prolonged.

DEFINITION OF DISABILITY

The definition of disability is used to determine an employee's eligibility for benefits. An individual's physical or mental inability to perform the major duties of his/her occupation because of illness or injury.

PLAN FEATURES	SHORT-TERM DISABILITY	LONG-TERM DISABILITY
Benefit Amount	60% of monthly salary	60% of monthly salary
Maximum Benefit	\$3,000 weekly	\$10,000 monthly
Benefit Waiting Period	8 days	90 days
Maximum Benefit Duration	11 Weeks	Social Security Normal Retirement Age

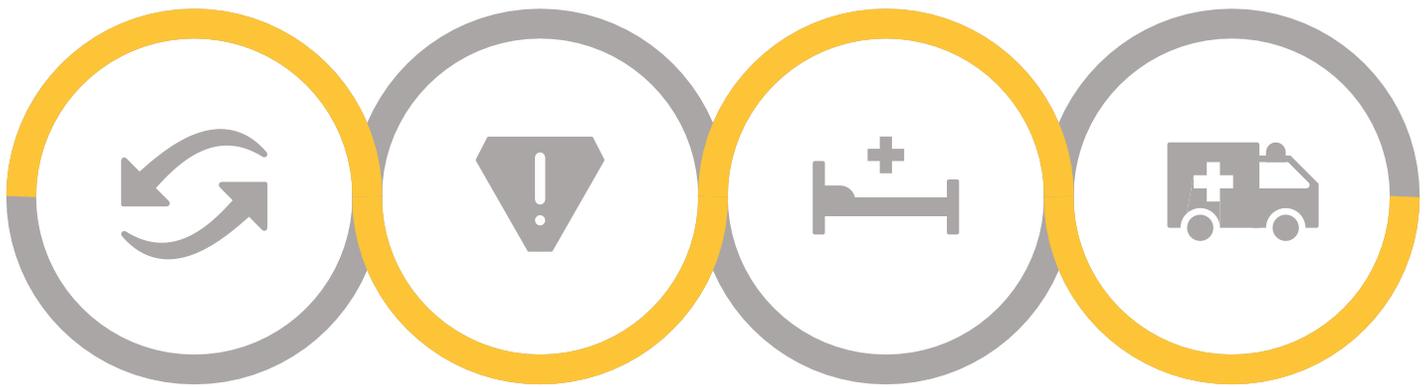
Paid Maternity & Paternity Leave



Maternity – Birth of child Civica will supplement the short-term disability payments in order to keep the employee whole for a **maximum of 8 weeks** (if STD only pays for 6 weeks, then the employee will receive 6 weeks of supplemental pay to make the employee whole. Civica will pay the EE in full during the 8-day elimination period from the date birth but not to exceed a period of 2 weeks of full pay directly from Civica).

Paternity – it is birth parent or adoption Civica **will pay two weeks full salary!** The total amount of leave can be taken anytime during the first 12 months after birth or adoption. For adoption, the full 8 weeks will be paid by Civica.

Enrollment eligibility is guaranteed upon hire. Late enrollees will be subject to a Statement of Health and approval from MetLife. Benefits are voluntary. Rates are available online through your online EE portal.



CROSS PRODUCT ADVANTAGES

- Guaranteed eligibility at every open enrollment* year over year – No EOI
- No Waiting Periods
- No benefit reduction due to age
- Portability
- Payments are made directly to you to spend as you choose
- Estate resolution services
- Connected Benefits Claims Experience
- Healthcare Navigation Services

CRITICAL ILLNESS

- Rates based on age at issue
- Unlimited total benefit amount with a recurrence benefit on 9 Conditions
- 37 Covered conditions including cancer, skin cancer, benign brain tumor, heart attack, sudden cardiac arrest, stroke, coma, and severe burns, 7 Childhood diseases, and 10 Infectious diseases
- 30 Day initial benefit suspension period between different covered conditions
- Pre-existing applies

ACCIDENT

- 24-hour coverage
- Up to 180 days allowed between date of occurrence and care received*
- Organized Sport Injury Rider
- 8 Types of therapy benefits
- Hospitalization due to an accident is covered on a per accident basis; ICU Benefits payable in addition to non ICU benefits
- Accidental Death and Dismemberment benefits

HOSPITAL INDEMNITY

- 24-hour coverage (accident and sickness)
- Routine Childbirth covered with no waiting periods
- Confinement Benefits payable day of admission
- ICU confinement benefits payable in addition to non ICU confinement benefits
- Additional benefits include Surgery, Anesthesia, Ambulance, Emergency Care, Nursing Care, Physicians Visits, and Transportation
- Pre-existing condition applies

Blomquist Hale –ER Paid Employee Assistance Program

- Financial or Legal Problems 
- Substance Abuse or Addictions 
- Senior Care Planning 
- Marital & Family Counseling 
- Stress, Anxiety or Depression 
- Personal & Emotional Challenges 
- Grief or Loss 

Services available for all family Members

- 24/7 Crisis Service
- 100% Confidential
- Professional, Friendly Team
- Convenient Locations
- Extended Hours
- No Co-pay Required

401(k) Enrollment Instructions

www.401k.com

Login/Register

IRS 2026 Limits on employee contributions:

Under 55 – expected to increase to **\$24,500** but has not been confirmed by IRS at this time.

Over 55 – expected to increase to **\$8,000** but has not been confirmed by IRS at this time.

Civica will match 100% of the first 3% and 50% of the next 2%. The employer match is **per pay period**.

For weekly emailed updates make sure you subscribe to Email Express. This at-a-glance email shows current balance and the change from previous weeks balance.

Fidelity representatives are available to help with questions

1-800-835-5097

You also have **brokerage services** available with Fidelity. To learn more sign into your online account or member services for additional assistance.

How to Register to your Regence Online Member Account

MEMBER PORTAL INSTRUCTIONS FOR REGENCE/BCBS:

Step 1:

To create your online member account, please visit: www.regence.com

Step 2:

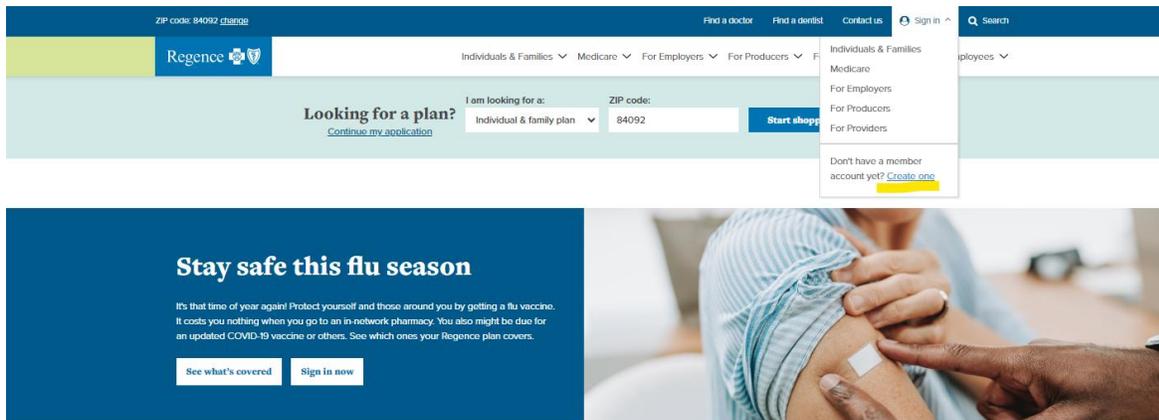
You will click login, and then click create online account.

Step 3:

I have provided instructions below with screenshots:

Step 4:

Please click on Sign In, and then click: CREATE ONE (highlighted in the below screenshot):

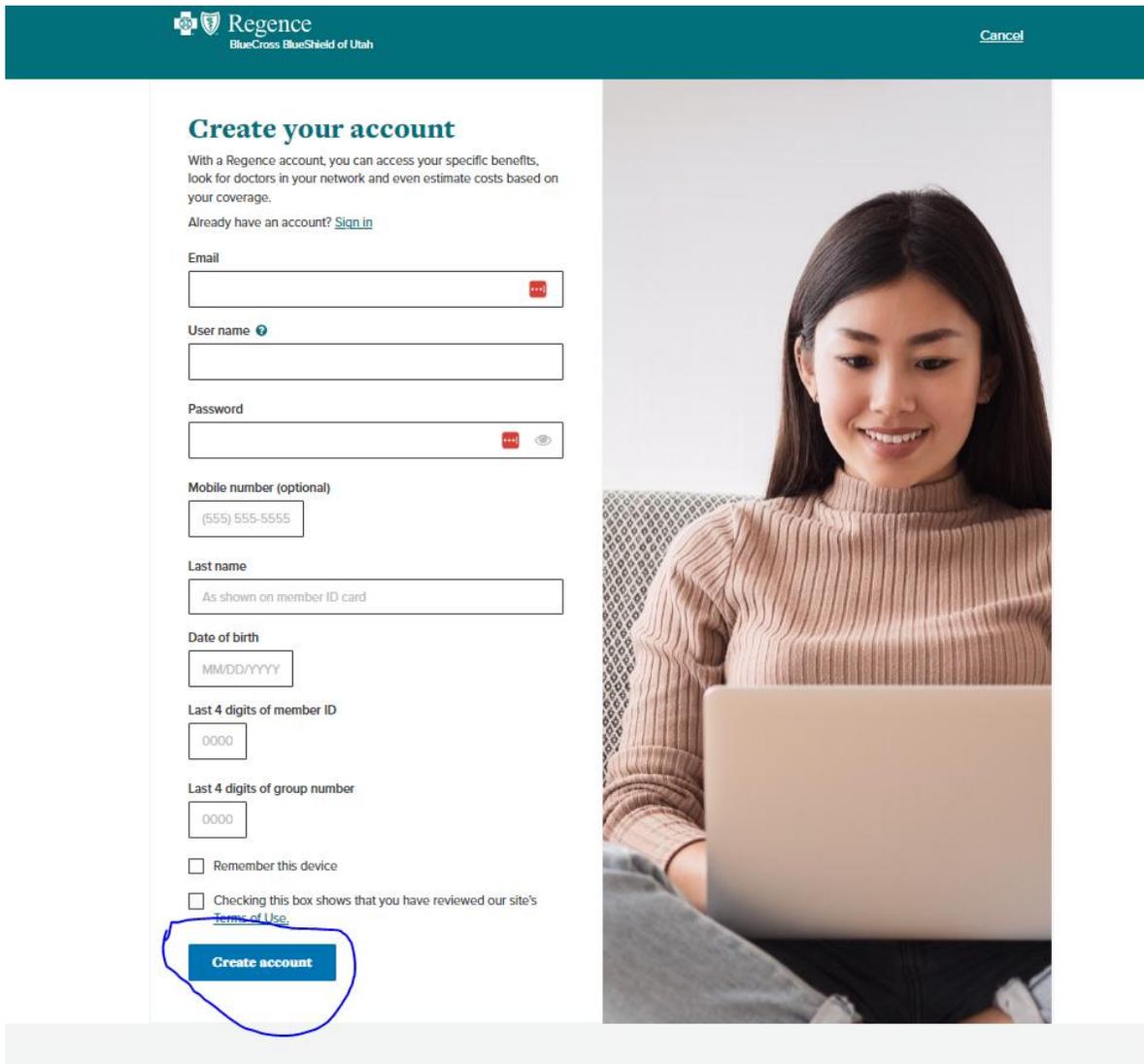


How to Register to your Regence Online Member Account

MEMBER PORTAL INSTRUCTIONS FOR REGENCE/BCBS:

Step 5:

Please fill in the information on the next screen. Once complete, click continue and then you will be taken to the steps to create your customized username and password. Once you Logged in, you can then download the smart phone app and your id card will be on your cell phone at all times.



 **Regence**
BlueCross BlueShield of Utah Cancel

Create your account

With a Regence account, you can access your specific benefits, look for doctors in your network and even estimate costs based on your coverage.

Already have an account? [Sign in](#)

Email

User name

Password

Mobile number (optional)

Last name

Date of birth

Last 4 digits of member ID

Last 4 digits of group number

Remember this device

Checking this box shows that you have reviewed our site's [Terms of Use](#).

Create account

How to Register to your Principal Online Member Account



Principal allows for one single sign to access all your benefit plans for the following:

- Dental
- Vision
- ER Paid Life AD&D
- Vol Life AD&D
- STD
- LTD

MEMBER PORTAL INSTRUCTIONS FOR PRINCIPAL:

Step 1:

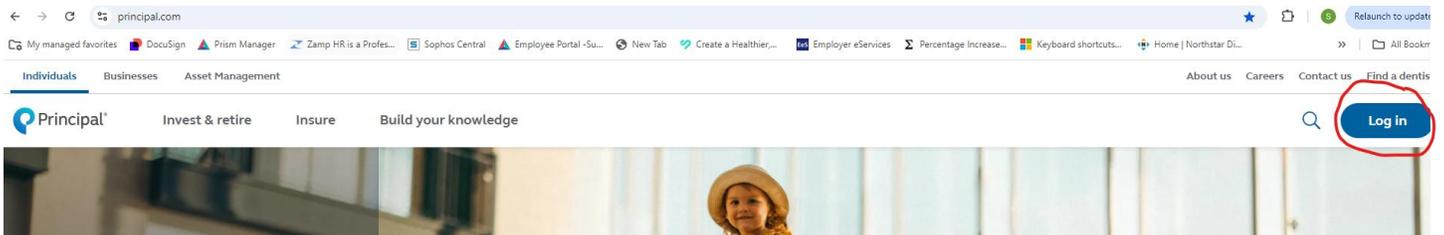
To create your online member account, please visit: www.principal.com

Step 2:

You will click login, and then click create online account.

Step 4:

Please click on Sign In, and then click: Register Here (circled in the below screenshot):



Log in to your account

Username

Remember this device

Next

[Forgot username or password?](#)

[New user? Register here.](#)

How to Register to your Principal Online Member Account



MEMBER PORTAL INSTRUCTIONS FOR PRINCIPAL:

Step 5:

Select Individuals:

Register an account

Choose one of the following that best describes your role



Individuals

"I have retirement or insurance products, either through my workplace or Principal."



Dental providers

"I am a dental provider or work in a dental office."

How to Register to your Principal Online Member Account



Step 6:

Complete the information on the next screen. Once complete, click continue and you will be taken to the next screen to customize your username and password. Once complete, you can print off an id card or request a new one.

First name *

Please use your legal name.

Last name *

Date of birth *

Valid format is MM/DD/YYYY

Phone number *

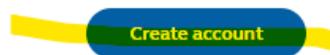
Valid format is (XXX) XXX-XXXX. This is the quickest way for us to verify your identity.

ID Number *optional*

If your employer provided you with a Privacy or Alternate ID, use it here. Otherwise, you can try your Social Security Number, or leave this field blank.

Primary zip code *optional*

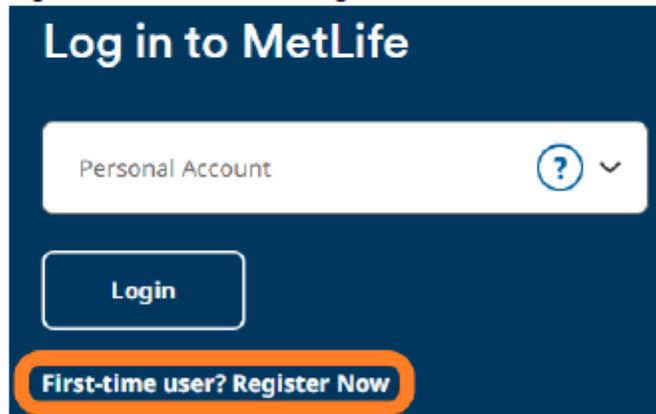
I consent to doing business electronically.



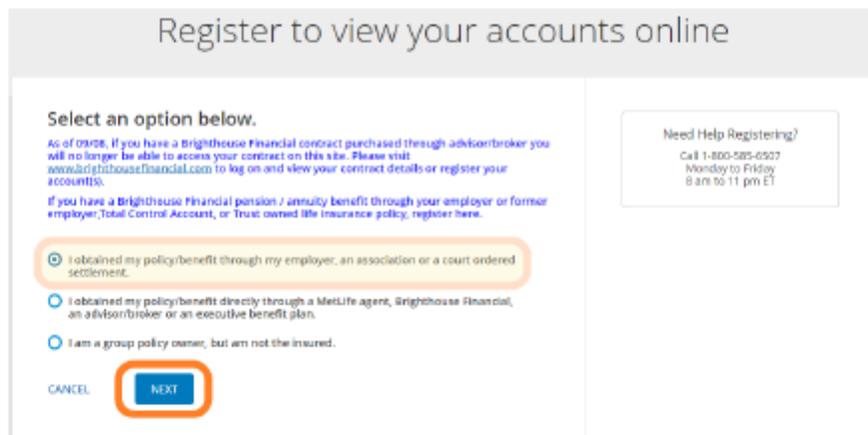
How to Register to MetLife's My Benefits Portal for the first time

Please ensure your browser allows for pop-ups and/or redirects

1. From the <https://www.metlife.com/>, select the  LOG IN , found on the right-side of the web page.
2. Select "First-Time user? Register Now", under the Login button in the middle of the screen.



3. A new window/tab will open on your browser. Select "I obtained my policy/benefit through my employer, an association or a court ordered settlement" and click "Next".



4. Another pop-up will appear. No action is typically taken; however, please select "click here" if needed.



- A new window/tab will appear on your browser. Type *Engage PEO* in the field box on the right-hand side of the screen under Access MyBenefits. Select *Next*.



- Confirm selection of *Engage PEO* and click *Next*.



- To begin the registration process, select *Register Now* on the right-hand side of the screen.



- Enter your personal information and select *Next*. Then, follow all steps with MetLife in order to complete your account registration to arrive on this page for Dental and Vision benefits, under the Engage PEO tab.





2026 Holiday Schedule

Date	Federal Holiday	Day of the Week
January 1, 2026	New Year's Day (observed)	Thursday
January 19, 2026	Martin Luther King Day	Monday
February 16, 2026	President's Day	Monday
May 25, 2026	Memorial Day	Monday
June 19, 2026	Juneteenth (observed)	Friday
July 3, 2025	Independence Day	Friday
September 7, 2026	Labor Day	Monday
November 26, 2026	Thanksgiving Day	Thursday
November 27, 2026	Day After Thanksgiving	Friday
December 25, 2026	Christmas Day (observed)	Friday

Your Zamp HR/Engage PEO Benefits Team

If you have questions about your benefits, would like assistance with enrollments, need claim assistance, experience a life event, or any other benefit question or concern, your Engage PEO Benefits Team is happy to help!

CSP Benefits Manager

Summer Robbins Larson

Works with insurance carriers on service issues, presents competitive quoting benefit options with group contact, and provide open enrollment education and materials.

Phone: Summer: 801.994.6745

Email: slarson@engagepeo.com

HRBP

Nancy Stanton

Assists with HR related matters.

Email: nstanton@engagepeo.com

Phone: 385.273.6251

Benefits Specialist

Valerie Abbott

Works with employees on benefit deductions, maintains **Prism Enrollment Portal** eligibility and manages carrier eligibility, HSA, FSA, including address changes and QLE (qualified life event) requests.

Email: vabbott@engagepeo.com

Phone: 385.295.8629

Payroll Specialist

Vicky Mecham

Assist on payroll matters, assist with PTO and other payroll requests.

Email: vmecham@engagepeo.com

Phone:



CONTACTS

MEDICAL

Regence BCBS
(888) 675.6570
Policy # 10052133
www.regence.com

DENTAL

Principal -Dental
(800) 247.4695
Policy # 1101250
www.principal.com

VISION

Principal (VSP Choice Network)
(800) 877.7195
Policy # 1101250
www.principal.com

FSA/HEALTH SAVINGS ACCOUNT-Inspira

(844) 877.7195
Policy # 3266465-126636
www.inspirafinancial.com

BASIC LIFE & AD&D-Vol Life

Principal
Policy # 1101250
(800) 843.1371
www.principal.com

DISABILITY

Principal
(800) 245.1522
Policy # 1101250
www.principal.com

CRITICAL ILLNESS ACCIDENT HOSPITAL INDEMNITY

MetLife Group Number: Engage PEO 227795
(866) 626.3705
www.metlife.com/info/engage-peo/benefits/supplemental-life-insurance/

Blomquist Hale

Employee Assistance Program (EAP)
(800) 926.9619
Policy Name: Civica
www.blomquisthale.com

401K

Fidelity
(800) 835.5097
www.fidelity.com
Login/register



This guide was created for the employees of Civica by Engage PEO.