

# ENCHANTED FAIRIES™

MAGICAL FINE ART PORTRAITURE



2026-27

## BENEFITS GUIDE



Your Health & Wellness

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The information in this Enrollment Guide is intended for illustrative and informational purposes only. The information contained herein was taken from various summary plan descriptions, certificates of coverage, and benefit information. While every effort was taken to accurately report your benefits, discrepancies and errors are always possible. It is not intended to alter or expand rights or liabilities set forth in the official plan documents or contracts. It is not an offer to contract nor are there any expressed or implied guarantees. In case of a discrepancy between this information and the actual plan documents, the actual plan documents will prevail. If you have any questions about this summary, please contact Human Resources. © 2026 Marsh & McLennan Agency, LLC. All rights reserved.



# WELCOME TO YOUR 2026-27 BENEFITS!

Enchanted Fairies Studio Team,

We hope this message finds you well.

At Enchanted Fairies, we remain committed to providing benefits that support the health and well-being of our team. The company will continue to cover 75% of medical premiums, helping make medical coverage more affordable for employees. Dental and vision plans will also remain available for employees who choose to enroll through payroll deductions.

We are proud to offer benefits that help support our team's overall wellness and provide access to important coverage options for employees and their families.



# ELIGIBILITY

If you are regularly scheduled to work at least 30 hours per week, you are eligible for the Enchanted Fairies benefits program. For newly hired individuals, most of your benefits are effective the first day of the month following 30 days of employment. You may also enroll your eligible dependents for coverage. Eligible dependents include:

- Your legal spouse or qualified domestic partner (of the same/opposite sex);
- Children under the age of 26, regardless of student, dependency or marital status;
- Children past the age of 26 who are fully dependent on you for support due to a mental or physical disability (and are indicated as such on your federal tax return).
- Newborn infants are automatically covered for medical coverage for the first 60 days of life.

For details on eligibility and when your benefits begin and end, refer to your summary plan documents.

## Benefits End

Your medical, dental and vision benefits end the last day of the month in which your employment ends. Your life and disability benefits end on your date of termination.

## Changing Benefits After Enrollment

During the year, you cannot make changes to your elections unless you experience a Qualified Life Event, such as marriage or the birth of a child. If you experience a Qualified Life Event (examples below), you should contact People Operations within 30 days of the event (60 days for the birth of a child for medical coverage only), or you will have to wait until the next annual open enrollment period to make changes (unless you experience another Qualified Life Event).

Qualified Life Event	Possible Documentation Needed
Change in marital status	
Marriage	Copy of marriage certificate
Divorce/Legal Separation	Copy of divorce decree
Death	Copy of death certificate
Change in number of dependents	
Birth or adoption	Copy of birth certificate or copy of legal adoption papers
Stepchild	Copy of birth certificate plus a copy of the marriage certificate between employee and spouse
Death	Copy of death certificate
Change in employment	
Change in your eligibility status (i.e., full-time to part-time)	Notification of increase or reduction of hours that changes coverage status
Change in spouse's benefits or employment status	Notification of spouse's employment status that results in a loss or gain of coverage



# HOW TO ENROLL

If you are a new hire, you have 31 days to enroll from your date of hire. You must complete your enrollment to receive benefit coverage for the plan year.

## Before You Enroll

- Carefully review the benefits listed in this guide and determine the medical, dental, vision and other coverage that's best for you and your family.
- Ensure family members meet the eligibility requirements.
- Understand the cost of the plans you selected.
- Be sure to consider a beneficiary for life insurance.

Contact People Operations if you have questions.

## Paylocity Enrollment Instructions

To enroll, simply follow these steps:

- Log into your Paylocity Self Service Portal at <https://access.paylocity.com>
- In the applications menu at the top left, select Enterprise Web Benefits
- Click the "Enroll Now" button to begin your benefits enrollment



# STAYING CONNECTED YEAR-ROUND

## iNGAGED

### Your Benefits On-the-Go

The iNGAGED app allows you to access your benefits information on your mobile device.

Available for iOS and Android, you can:

- View Enchanted Fairies' benefits information 24/7
- Store images of your ID cards
- Access group ID numbers and review detailed plan information
- Quickly contact an insurance company
- Keep up with important benefit plan announcements, such as Open Enrollment deadlines and more
- Share the app with your family members

Download iNGAGED Benefits now from your smartphone's app store and use Company Code: **myenchantedfairiesbenefits**



## UnitedHealthcare Mobile App

Managing health care on the go is easy with the UnitedHealthcare app! Designed to help you save time by providing easy access to your information, you can:

- Find and manage providers
- Manage claims
- View and share your ID card
- View cost estimates
- Review your benefits
- View personalized recommendations for preventative care



Search for the UnitedHealthcare mobile app in the App Store or Google Play to get started!



## Member Support Center

Marsh McLennan Agency's Member Support Center is here for you — to answer your questions, including insurance claim questions, by phone and email. The representatives are licensed agents, are familiar with your benefits package and can assist with the following:

- Central point of contact for benefits questions and coverage inquiries
- Assist with ID Card request
- Assist employees with entering enrollment elections (New Hires/Life Events)
- Claims Inquiries
- Assist with finding in-network providers/facilities
- Assist with determining covered services

Contact them via email at [enchantedfairies@marshmma.com](mailto:enchantedfairies@marshmma.com) or via telephone at +1-855-550-9882 PIN 2203.

Representatives are available Monday through Friday, from 8 a.m. – 6 p.m. Central. Spanish speaking representatives are available.

## Telemedicine - Virtual Visits

Under the weather and need a doctor visit fast? Telemedicine gives you 24/7 access to U.S. board-certified doctors through the convenience of your phone. You and a practitioner can speak or video chat to answer questions, make a diagnosis and even prescribe some medications. This convenient and affordable option provides you on-demand access to treat many medical conditions. As always, call 911 for any emergency.

Telemedicine is provided through UnitedHealthcare and can be accessed by downloading the UnitedHealthcare app or calling +1-855-615-8335. For more information visit [www.myuhc.com/virtualvisits](http://www.myuhc.com/virtualvisits).



# MEDICAL

Enchanted Fairies' medical coverage, through UnitedHealthcare, provides you and your family the protection you need for everyday health issues or unexpected medical expenses.

## How Medical Coverage Works

When you enroll in medical coverage, you pay a portion of your health care costs when you receive care and the plan pays a portion, as detailed below. Note that 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:

- **Deductibles** — the amount you pay each year for eligible in-network and out-of-network charges before the plan begins to pay a portion of the costs.
- **Copays** — a fixed amount you pay for a health care service. Copays do not count toward your annual deductible but do count toward your annual out-of-pocket maximum.
- **Coinsurances** — Once you've met your deductible, you and the plan share the cost of care, which is called coinsurance. For example, you pay 20% for services and the plan pays 80% of the cost until you reach your annual out-of-pocket maximum.
- **Out-of-pocket maximums** — the most you will pay each year for eligible in- or out-of-network services, including prescriptions. After you reach your out-of-pocket maximum, the plan pays the full cost of eligible health care services for the rest of the year.
- **Prescriptions** — For the Base HDHP PPO plan, you are responsible for the applicable costs until the medical deductible has been met. For the other plans, you are responsible for the applicable copays until the overall out-of-pocket maximum has been met.

## Before You Enroll

Consider this:

1. Think about the per-pay-period cost and out-of-pocket expenses you will incur and your possible future medical expenses. The option that has the highest per-pay-period cost typically pays more, which results in lower deductibles, coinsurance, and/or copays when you need care.
2. Want to stay with your doctor? Ensure they are in the plan's network by visiting [www.myuhc.com](http://www.myuhc.com) and selecting the Choice Plus network. If they're out of network, services may not be covered or may be more expensive.
3. Consider the cost of services and prescription drugs you expect to receive during the year.
4. Evaluate how your out-of-pocket expenses may fluctuate and consider adding accident, critical illness and/or hospital indemnity insurance to help offset your out-of-pocket medical costs.



The table below summarizes the key features of the medical coverage. Please refer to the official plan documents for additional information on coverage and exclusions.

	Base HDHP PPO Plan - UHC EIS7	Buy-Up I PPO Plan - UHC EI23	Buy-Up II PPO Plan - UHC EIXZ
	Choice Plus Network	Choice Plus Network	Choice Plus Network
	In-Network	In-Network	In-Network
<b>Calendar Year Deductible</b>			
Individual	\$5,000	\$3,000	\$500
Family	\$10,000	\$6,000	\$1,000
<b>Calendar Year Out-of-Pocket Maximum (Includes Deductible)</b>			
Individual	\$5,000	\$8,000	\$3,500
Family	\$10,000	\$16,000	\$7,000
	You pay	You pay	You pay
Coinsurance	0%	20%	50%
Preventive Care	\$0	\$0	\$0
Telemedicine - Virtual Visits	\$54	\$0	\$0
Primary Care Physician	\$0*	\$30 Under age 19: \$0	\$25 Under age 19: \$0
Specialist	\$0*	Designated: \$30 Network: \$60	Designated: \$25 Network: \$50
Urgent Care	\$0*	\$50	\$50
Emergency Room	\$0*	\$500 + 20%*	\$500 + 50%*
Lab & X-ray	\$0*	\$0	\$0
Hospitalization	\$0*	20%*	50%*
Diagnostic Imaging (MRI/CT)	\$0*	20%*	50%*
<b>Pharmacy</b>			
Rx Deductible	Included in medical	N/A	N/A
Rx Out-of-Pocket Max	Included in medical	Included in medical	Included in medical
<b>Retail Rx (up to 31-day supply)</b>			
Tier 1	\$0*	\$15	\$15
Tier 2	\$0*	\$45	\$45
Tier 3	\$0*	\$85	\$85
Specialty	\$0*	\$15 / \$100 / \$300	\$15 / \$100 / \$300
<b>Mail Order Rx (90-day supply)</b>	\$0*	2.5x copay	2.5x copay
<b>Medical Bi-Weekly Payroll Deductions</b>			
Employee Only	\$65.85	\$78.97	\$87.17
Employee + Spouse	\$144.54	\$173.34	\$191.32
Employee + Child(ren)	\$124.85	\$149.73	\$165.26
Employee + Family	\$210.13	\$252.00	\$278.14
*After Deductible			



# HEALTH SAVINGS ACCOUNT (HSA)

A Health Savings Account (HSA) is a personal savings account that you own and can use to pay for qualified out-of-pocket medical expenses. Your contributions to the HSA are taken out of your paycheck and are tax-free. Once you enroll in the HSA, you'll receive a debit card to pay for qualified out-of-pocket medical expenses. Your HSA can be used to pay for your health care expenses and those of your spouse and dependents, even if they are not covered by the High Deductible Health Plan (HDHP).

## How a Health Savings Account (HSA) Works



### Eligibility

Anyone who is:

- Covered by a High Deductible Health Plan (HDHP);
- Not covered under another medical plan that is not a High Deductible Health Plan (HDHP);
- Not entitled to Medicare benefits;
- Not eligible to be claimed on another person's tax return;
- Not in receipt of VA benefits within the last three months; or
- Not covered under your or your spouse's Flexible Spending Accounts (FSAs), except for a Limited Purpose FSA



### Your Contributions

You choose how much to contribute from each paycheck on a pretax basis.

You can contribute up to the IRS maximum of \$4,400/individual or \$8,750/family for 2026.

You can make an additional "catch-up" contribution of up to \$1,000 per year if you are age 55 or older.



### Eligible Expenses

You can use your HSA to pay for medical, dental, vision, and prescription drug expenses incurred by you and your eligible family members. *Please note: Funds available for reimbursement are limited to the balance in your HSA.*



### Using Your Account

Use the debit card linked to your HSA to cover eligible expenses — or pay for expenses out of your own pocket and save your HSA dollars for future health care expenses.



### Your HSA is always yours – no matter what

One of the best features of an HSA is that money left over at the end of the year remains in the account so you can use it the following year or at any time in the future. And if you leave the Enchanted Fairies or retire, your HSA goes with you.




## The Triple Tax Advantage

HSAs offer three significant tax advantages:

1. You can use your HSA funds to cover qualified medical expenses, including dental and vision expenses — tax-free.
2. Unused funds grow and can earn interest over time — tax-free.
3. You can save your HSA dollars to use for your health care when you leave Enchanted Fairies or retire — tax-free.

If you want to pay less per paycheck for health care coverage and save tax-free money for future medical expenses, consider enrolling in the HDHP with HSA.

## How a High Deductible Health Plan (HDHP) and a Health Savings Account (HSA) Work Together

Year 1 Example: You enroll in the HDHP with HSA during enrollment		Year 2 Example: You enroll in the HDHP plan again next year
You contribute \$3,650 for a total of \$3,650		\$2,900 rolls over from last year and you contribute \$3,650 for a total of \$6,550
You use the HSA to pay \$750 of eligible expenses		You use the HSA to pay \$1,250 of eligible expenses
<b>You have \$2,900 in the HSA to roll over to next year!</b>		<b>You have \$5,300 in the HSA to roll over to next year!</b>



## DENTAL

Taking care of your oral health is not a luxury; it is necessary for optimal long-term health. With a focus on prevention, early diagnosis and treatment, dental coverage can greatly reduce the cost of restorative and emergency procedures. Preventive services at in-network providers are generally covered at no cost to you and include routine exams and cleanings. You pay a small deductible and coinsurance for basic and major services.

You may enroll yourself and your eligible dependents — or you may waive dental coverage. You do not have to be enrolled in medical coverage to elect a dental plan.

Enchanted Fairies offers dental coverage through Guardian. For information on finding a dental provider using the DentalGuard Preferred PPO network, visit [www.guardianlife.com](http://www.guardianlife.com).

### Before You Enroll

Consider this:

1. Most in-network preventive cleanings and exams are covered at 100%.
2. You may receive dental care in- or out-of-network. However, when you go out of network, the provider can charge more and the plan will only reimburse up to the reasonable and customary rates.





The table below summarizes the key features of the dental plan. Please refer to the official plan documents for additional information on coverage and exclusions.

	Dental Plan	
	DentalGuard Preferred PPO Network	
	In-Network	Out-of-Network
<b>Calendar Year Deductible</b>		
Individual		\$50
Family		\$150
<b>Calendar Year Benefit Maximum</b>		
Per Individual		\$1,500
		You pay
<b>Preventive Care</b>		
Exams, Cleanings, X-rays, Fluoride Treatments, Sealants		0%
<b>Basic Services</b>		
Fillings, Space Maintainers, Extractions		20%*
<b>Major Services</b>		
Crowns, Inlays/Onlays, Dentures and Bridgework, Repairs, Oral Surgery, Endodontics, Periodontics		50%*
<b>Orthodontia</b>		
Adults & Children (up to 26th birthday)		50% up to a lifetime maximum benefit of \$1,500 per individual; deductible waived
<b>Dental Bi-Weekly Payroll Deductions</b>		
Employee Only		\$13.48
Employee + Spouse		\$27.36
Employee + Child(ren)		\$33.21
Employee + Family		\$50.13
<i>*After deductible</i>		



# VISION

Healthy eyes and clear vision are an important part of your overall health and quality of life. You may enroll yourself and your eligible dependents — or you may waive vision coverage. You do not have to be enrolled in medical coverage to elect a vision plan.

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

Enchanted Fairies offers vision coverage through Guardian using the VSP Choice network. For information on finding a vision provider, visit [www.vsp.com](http://www.vsp.com) and click on Find a Doctor.

	Vision Plan	
	In-Network	Out-of-Network
	You pay	Reimbursement
<b>Cost</b>		
Exam	\$10	Up to \$39
Materials	\$25	See Below
<b>Covered Services – Lenses</b>		
Single Lenses	\$25	Up to \$23
Bifocals	\$25	Up to \$37
Trifocals	\$25	Up to \$49
Frames	\$25 copay, \$150 allowance, 20% off balance	Up to \$46
<b>Covered Services – Contacts in lieu of Frames/Lenses</b>		
Contacts – Medically Necessary	\$25	Up to \$210
Contacts – Elective	\$150 allowance	Up to \$100
<b>Benefit Frequency</b>		
Exams	Once every 12 Months	
Lenses	Once every 12 Months	
Frames	Once every 24 Months	
Contacts (in lieu of lenses)	Once every 12 Months	
<b>Vision Bi-Weekly Payroll Deductions</b>		
Employee Only	\$3.24	
Employee + Spouse	\$6.14	
Employee + Child(ren)	\$6.25	
Employee + Family	\$9.90	



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

Life insurance, provided by Guardian, pays a lump-sum benefit to your beneficiaries to help meet expenses in the event you pass away. Accidental death and dismemberment (AD&D) insurance pays a benefit if you die or suffer certain serious injuries as the result of a covered accident. In the case of a covered accidental injury (such as loss of sight or the loss of a limb), the benefit you receive is a percentage of the total AD&D coverage you elected based on the severity of the accidental injury.

## Beneficiary Information

Situations often change, resulting in the need to update beneficiary information. You should review and update this information every year, or prior to retirement. Check with Human Resources for more information.

Life / AD&D Insurance - For You	
	Life and AD&D
Coverage Amount	\$15,000
Evidence of Insurability (EOI) / Proof of Good Health	Not required
Age Reduction Schedule	Benefits reduce by: 35% at age 65, 60% at age 70, 75% at age 75, 85% at age 80.



# VOLUNTARY LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Voluntary life and AD&D insurance allow you to tailor coverage for your individual needs and provide financial protection for your beneficiaries in the event of your death or accidental serious injury. Voluntary life insurance for you and your dependents, also provided by Guardian, can help protect your family during difficult times.

## Life / AD&D Insurance - For You and Your Dependents

	Employee	Spouse	Child(ren) up to age 26
Coverage Amount	Increments of \$10,000 up to \$250,000	Increments of \$5,000 up to \$250,000 – not to exceed 100% of Employee coverage	Increments of \$1,000 to a maximum of \$10,000
Guaranteed Issue (GI)	Less than age 65: \$100,000 65-69: \$50,000 70+: \$10,000	Less than age 65: \$25,000 65-69: \$10,000 70+: \$0	\$10,000
Evidence of Insurability (EOI) / Proof of Good Health	New Hire: Enroll up to GI without EOI  Currently Enrolled: Increase up to \$50,000, up to the GI without EOI	New Hires: Enroll up to GI without EOI	EOI Not Required

## Before You Enroll

Consider this:

1. Typically, the right amount of coverage will depend on your age, your family situation, and any personal savings you may have.
2. It's important to understand any EOI rules that apply. If you enroll when you first become eligible, Voluntary Term Life Insurance for you and your spouse is guaranteed up to the amounts shown in the table. If you initially waive this coverage but want to enroll at a later date, you may need to provide satisfactory EOI before any coverage can take effect.
3. Think about who you want to designate as beneficiaries and make sure to name them as beneficiaries on your policy.

## Life Bi-Weekly Rate per \$1,000 by Age

15-29	\$0.060	50-54	\$0.364
30-34	\$0.064	55-59	\$0.600
35-39	\$0.090	60-64	\$1.028
40-44	\$0.134	65-69	\$2.328
45-49	\$0.216	70+	\$4.232
<b>Employee and Spouse AD&amp;D Rate per \$1,000</b>	\$0.018	<b>Child Life and AD&amp;D rate per \$1,000</b>	<b>Life: \$0.066 AD&amp;D: \$0.018</b>



# VOLUNTARY DISABILITY

Disability insurance replaces a portion of your income when you are unable to work due to a qualified illness or non-work-related injury. Enchanted Fairies provides you with the opportunity to elect Short-Term Disability (STD) and/or Long-Term Disability (LTD) coverage through Guardian.

## Short-Term Disability Benefits at a Glance

Weekly Benefit	60% of weekly earnings
Weekly Maximum	\$1,000 per week
Benefit Duration	13 weeks
Elimination Period	14 days
Pre-Existing Limitation	3/12*

*\*Benefits may not be paid for any condition treated within three months prior to your effective date until you have been covered under this plan for 12 months.*

## Long-Term Disability Benefits at a Glance

Monthly Benefit	60% of monthly earnings
Monthly Maximum	\$5,000 per month
Benefit Duration	SSNRA
Elimination Period	90 days
Pre-Existing Limitation	12/12*

*\*Benefits may not be paid for any condition treated within 12 months prior to your effective date until you have been covered under this plan for 12 months.*

## Voluntary STD Bi-Weekly Rate per \$10 by Age

15-24	\$0.131	45-49	\$0.124
25-29	\$0.200	50-54	\$0.138
30-34	\$0.269	55-59	\$0.165
35-39	\$0.207	60+	\$0.248
40-44	\$0.117	-	-

## Voluntary LTD Bi-Weekly Rate per \$100 by Age

15-24	\$0.064	45-49	\$0.627
25-29	\$0.080	50-54	\$0.776
30-34	\$0.165	55-59	\$0.885
35-39	\$0.294	60+	\$0.808
40-44	\$0.434	-	-

## Pre-Existing Conditions

A pre-existing condition is an injury or illness for which you have received advice or treatment from a doctor within the designated number of months prior to the effective date of your insurance plan.

## Evidence of Insurability

If you decline coverage when first eligible or if you elect coverage and wish to increase your benefit amount at a later date, Evidence of Insurability (EOI) — proof of good health — may be required before coverage is approved.

A qualifying disability is a sickness or injury certified by a physician that causes you to be unable to perform your normal duties.



# SUPPLEMENTAL BENEFITS

Supplemental benefits plans such as accident, critical illness and hospital indemnity insurance can help you pay for costs you may incur after an accidental injury, illness or hospitalization. These plans are 100% voluntary and are not medical insurance. Coverage is available for your spouse and children with most plans.

Most plans pay benefits regardless of any other insurance and benefits are paid directly to you, unless you specify otherwise. Benefits can help pay for expenses other insurance may not cover, such as out-of-pocket expenses, lost income, childcare, travel to and from treatment, home health care costs or regular household expenses.






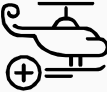
## Before You Enroll

Consider this:

1. What would happen if you had an accident or became seriously ill and unable to work? Would you be covered financially?
2. These benefits provide a lump-sum payment that can help you cover unexpected medical expenses or make up for missed income.

## Accident

Accident coverage, through Guardian, is designed to provide a cash benefit in the event of a covered accident or injury. The plan will pay a set amount based on the injury suffered and treatment received, regardless of any other insurance.

Sample of Eligible Expenses	
 <b>Emergency Room Visits</b>	 <b>Hospital Stays</b>
 <b>Medical Exams</b> – Including major diagnostic exams	 <b>Physical Therapy</b>
 <b>Fractures and Dislocations</b>	 <b>Transportation and Lodging</b> – if you are away from home when the accident happens

Contact Human Resources for a full list of covered accidents.

Accident Bi-Weekly Payroll Deductions			
Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
\$6.05	\$9.54	\$10.00	\$13.50



Accident Benefits Include			
Diagnostic Exam (Major)	\$200	Dislocations	Schedule up to \$5,000
X - Ray	\$40	Hospital Admission	\$1,000
Emergency Room Treatment	\$200	Hospital Confinement	\$250/day - up to one year
Fractures	Schedule up to \$6,000	Transportation	\$0.50 per mile, limited to \$500/round trip, up to three times per accident

Please refer to the benefit summary for more details.

## Critical Illness Insurance

Critical illness coverage, through Guardian, provides a lump-sum cash benefit in the event you are diagnosed with a qualifying illness to help offset the unexpected associated costs. The plan will pay regardless of any other insurance. Critical illness coverage is not medical insurance.







Benefit Amounts		
<b>Employee</b>	\$10,000 or \$20,000	
<b>Spouse</b>	\$10,000 or \$20,000 – not to exceed 100% of Employee amount	
<b>Children</b>	50% of Employee coverage amount – no additional cost	
Benefit Category	Condition	% of Principal Sum
Heart/Circulatory/Motor Function	Heart Attack, Stroke	100%
	Coronary Arteriosclerosis	30%
Organ	Organ Failure, Kidney Failure	100%
Cancer	Invasive	100%
	Carcinoma in Situ	30%
	Skin Cancer	\$250 per lifetime
Additional Conditions	Coma, Loss of Hearing / Sight / Speech	100%
	Alzheimer's Disease	50%
	Addison's Disease, Huntington's Disease	30%
Childhood Conditions (First occurrence only)	Cerebral Palsy, Cleft Lip/Palate, Club Foot, Cystic Fibrosis, Down's Syndrome, Muscular Dystrophy, Spina Bifida, Type 1 Diabetes	100%
Additional Information		
Reoccurrence Benefit	Pays an additional benefit of the critical illness benefit when a specific critical illness recurs more than 12 months after the covered member has received care or treatment for that critical illness.	
Health Screening Benefit	\$50 once per benefit year per covered member	
<p><b>Contact Human Resources for the schedule of coverage for a full list of covered illnesses. Costs will be calculated in Paylocity during enrollment based on age and benefit amount elected.</b></p>		

## Hospital Indemnity Insurance

Hospital indemnity coverage, through Guardian, is designed to provide a cash benefit in the event of a hospitalization and can help pay for expenses not covered by your medical plan. The plan will pay regardless of any other insurance. Contact Human Resources for a full list of covered expenses and cost.

Plan Benefits	
Hospital/ICU Admission Benefit	\$1,000/\$2,000 per admission, limited to one admission(s) per insured and three admission(s) per covered family per benefit year
Hospital/ICU Confinement	\$200 / \$400 per day, limited to 15 day(s) per insured per benefit year
Pre-Existing Conditions Limitation	
A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	Three months prior / six months treatment free / 12 months after

Please refer to the benefit summary for more details.

Sample of Eligible Expenses	
 <b>Hospital Admission</b>	 <b>Hospital Confinement</b>
 <b>Intensive Care</b>	 <b>Transportation and Lodging</b>
 <b>Surgical Care</b>	 <b>Diagnostic Testing and Imaging</b>

### How Hospital Indemnity Insurance Works

1. Receive Care
2. Submit a Claim
3. Receive a Check

### Hospital Indemnity Bi-Weekly Payroll Deductions

Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
\$7.98	\$13.47	\$13.06	\$18.55



# PLANNING FOR RETIREMENT

What does retirement look like for you? Whatever your vision for retirement is, it's important to plan ahead so you have the income you'll need in the future.

One of the best ways to ensure a secure retirement is to start saving as early as possible. Our 401(k) savings plan, through Betterment, allows you to save for retirement on a pretax basis. You can begin contributing to the plan through pretax payroll deductions as soon as you become eligible.

## Increase Your Retirement Savings with a 401(k)

- Visit [www.betterment.com/accountaccess](http://www.betterment.com/accountaccess) for more information.
- Contribute using convenient payroll deductions up to the IRS limit of \$24,500 for 2026.
- You can change the amount of your contributions or stop your payroll contributions at any time.
- Decide how to invest your 401(k) or allow the plan to choose for you.
- Are you age 50 or older? You may be eligible to make additional contributions as outlined in the chart below.
- Contact Human Resources for more information, including eligibility requirements.

Catch-up Contributions by Age	
50-59	\$8,000
60-63	\$11,250
64+	\$8,000

Note: Effective 1/1/2026 – If you are 50 or older and earned \$145,000 or more in 2025 FICA wages, your catch-up contributions will be automatically converted to a Roth account.



# ADDITIONAL BENEFITS

## Employee Assistance Program

Enchanted Fairies also provides you access to the Employee Assistance Program (EAP) at no cost. This program, available through UnitedHealthcare, provides professional, confidential telephonic or face-to-face counseling services to you and your loved ones. You are eligible to receive three free counseling sessions per incident, per year sessions per person, per plan year. The EAP can help you resolve personal issues and problems before they affect your health, relationships and work performance.

This program is available 24 hours a day, 365 days a year for confidential assistance and referral services with items such as:

- Managing stress
- Marital or family problems
- Anxiety and depression
- Substance abuse (alcohol and/or drugs)
- Financial issues
- Childcare issues including identifying schools, daycare, tutors, and more
- Aging parents

It's important to note that all EAP conversations are voluntary and strictly confidential. If you and your counselor determine that additional assistance is needed, you'll be referred to the most appropriate and affordable resource available. Although you're responsible for the cost of referrals, these costs are often covered under your medical plan.

## Pet Insurance

Let's not forget about our furry friends! Voluntary Pet Insurance (VPI) helps you manage your veterinary costs. Pet issues often come as a surprise and vet bills can be costly. Pet insurance reimburses you for covered veterinary bills – everything from preventive care to accidents and illness, as well as the costs of X-rays, office visits, medications, surgeries and hospital stays. The cost of coverage depends on your pet's age, species and the level of selected coverage. For more information about this benefit, provided by Nationwide, visit [www.petsnationwide.com](http://www.petsnationwide.com) or <https://benefits.petinsurance.com/enchanted-fairies>.

## Legal Assistance Program

This voluntary legal assistance program gives you access to a network of attorneys for a variety of legal needs, including estate planning, financial matters, real estate matters, defense of civil lawsuits, family law, traffic offenses, document preparation and review, immigration assistance, juvenile matters, and consumer protection.

Most services provided by a network attorney are covered in full, while services provided by non-network attorneys are payable up to specified plan maximums. For more information about this benefit, provided by Legal Shield, visit [www.shieldbenefits.com/enchantedfairies](http://www.shieldbenefits.com/enchantedfairies).



## Will Preparation Services

Creating a will is an important investment in your future. It specifies how you want your possessions to be distributed after you die. Whether you're single, married, have children, or are a grandparent, your will should be tailored for your life situation.

Will preparation services provided by UpriseHealth, through a partnership with Guardian, includes a range of different resources that make it easier for you to prepare a will. These range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details.

## Identity Theft Insurance

Identity theft insurance provides credit monitoring and fully managed identity restoration services should you or an immediate family member become a victim of identity theft. This will help you remain productive at home and at work while your identity is restored to pre-theft status. For more information about this benefit, provided by Norton LifeLock Benefit Solutions, visit [www.norton.com/benefitpremier](http://www.norton.com/benefitpremier).

## Calm Health

The Calm Health app provides programs and tools to help support your mental health and well-being at your own pace. As a UnitedHealthcare member, Calm Health is included in your health plan at no additional cost.

The Calm Health app brings you a library of support, including mindfulness content and programs created by psychologists, for a variety of health experiences and life stages. This information is designed to help you:

- Find tools, music, and sounds to help you meditate, improve focus, move mindfully, and feel calm and help improve your well-being
- Work toward goals through self-guided self-care programs and track your progress along the way
- Access mental health information and support to help you strengthen the mind-body connection

Scan the QR code to get started. You will first need to sign in to your account on [www.myuhc.com](http://www.myuhc.com) or the UnitedHealthcare app.



## UHC Rewards

UHC Rewards is a digital experience where you can earn rewards for reaching program goals and completing one-time reward activities. This program is included in your UnitedHealthcare medical plan at no additional cost and the reward activities you choose are up to you.

Earn rewards for completing activities such as:

- Connect a tracker
- Complete a health survey
- Track steps or sleep to complete daily or weekly program goals
- Get an annual checkup
- Get a flu shot
- Complete certain preventive screenings or exams

For more information, including a full list of rewardable activities, register or log into your UHC member account at [www.uhc.com](http://www.uhc.com) and select UHC Rewards.

## Vital Medications

The new UnitedHealthcare Vital Medication Program offers certain drugs at no additional cost. This means there may be no out-of-pocket costs for preferred insulins and certain other medications, including:

- Insulin – rapid, short and long-acting
- Epinephrine – allergic reactions
- Glucagon – hypoglycemia (low blood sugar)
- Naloxone – opioid overuse
- Albuterol – asthma

To see if you're eligible for no out-of-pocket costs on preferred insulins and other prescription drugs, sign in to [www.myuhc.com/rx](http://www.myuhc.com/rx).

## Wellness & Well-being – Real Appeal

Real Appeal is an online weight management program with a proven track record, that is available at no additional cost with your enrollment in the UnitedHealthcare medical plan. The goal is to provide the tools and resources you and your family members need to get and stay healthier, without incurring extra expenses.

### Take small steps toward healthier habits

Rally Coaches help you set achievable nutrition, exercise and weight management goals that keep you motivated to create lasting change. Track your progress from your daily dashboard.

### Support and community along the way

Feel supported with personalized messages, online group sessions led by coaches and a caring community of members

Join today at <https://enroll.realappeal.com> or scan the QR code below. Once you attend your first live group session, Your Success Kit will be shipped to your home address.





## New Benefits Package

For \$5.35 a paycheck, you can enroll yourself and your dependents in the New Benefits package which consists of the following benefits:

### Teladoc Mental Health

This service provides access to a therapist or psychiatrist by phone or online video—seven days a week, for \$25 a visit. Doctors offer a diagnosis, treatment options and prescription, if medically necessary. By using Teladoc instead of going to an office, you can cut unnecessary out-of-pocket costs and time wasted in crowded waiting rooms.

#### Therapy

- Establish an ongoing relationship with a licensed therapist through video or phone sessions
- Get support for anxiety, depression, stress, grief, PTSD, family or marriage issues, and more
- Adolescent therapy available for teens ages 13-17, excluding psychiatry
- Psychiatry consultations are only available to adults 18 and older

For more information call +1-888-672-5198.

### Fertility, Surrogacy, and Adoption

- Highly trained Nurse Care Managers serve as a personal advocate to help you understand fertility treatment and medication options and determine the best course of action for you
- Employee Adoption & ART program (EAAP) provides comprehensive on-demand videos, one-on-one coaching, and live webinars to support your journey of adoption, foster care, surrogacy, and egg donation
- Receive access to a network of top-ranked fertility specialists, IVF treatment and fertility medication discount bundles, genetic testing and egg freezing services, financial resources, and more

For more information call +1-888-672-5198.



# IMPORTANT CONTACTS

Coverage	Administrator	Phone	Email / Website
<b>Human Resources</b>	Human Resources Department	+1-469-727-2225	<a href="mailto:hr@enchanted-fairies.com">hr@enchanted-fairies.com</a>
<b>Insurance Broker Agency</b>	Marsh McLennan Agency	+1-325-437-0900	<a href="mailto:christina.vaughn@marshmma.com">christina.vaughn@marshmma.com</a> <a href="mailto:rylee.jenkins@marshmma.com">rylee.jenkins@marshmma.com</a>
<b>Member Support Center</b>	Marsh McLennan Agency	+1-855-550-9882 PIN 2203	<a href="mailto:enchantedfairies@marshmma.com">enchantedfairies@marshmma.com</a>
<b>Telemedicine - Virtual Visits</b>	UnitedHealthcare	+1-855-615-8335	<a href="http://www.myuhc.com/virtualvisits">www.myuhc.com/virtualvisits</a>
<b>Medical</b>	UnitedHealthcare	+1-866-801-4409	<a href="http://www.myuhc.com">www.myuhc.com</a>
<b>Health Savings Account (HSA)</b>	Paylocity	+1-833-423-8891	<a href="mailto:batclientsupport@paylocity.com">batclientsupport@paylocity.com</a>
<b>Dental</b>	Guardian	+1-888-600-1600	<a href="http://www.guardianlife.com">www.guardianlife.com</a>
<b>Vision</b>	Guardian	+1-888-600-1600	<a href="http://www.guardianlife.com">www.guardianlife.com</a>
<b>Life and AD&amp;D</b>	Guardian	+1-888-600-1600	<a href="http://www.guardianlife.com">www.guardianlife.com</a>
<b>Disability</b>	Guardian	+1-888-600-1600	<a href="http://www.guardianlife.com">www.guardianlife.com</a>
<b>Accident Insurance Critical Illness Insurance Hospital Indemnity Insurance</b>	Guardian	+1-888-600-1600	<a href="http://www.guardianlife.com">www.guardianlife.com</a>
<b>401(k) Retirement</b>	Betterment	+1-718-400-6898	<a href="http://www.betterment.com">www.betterment.com</a>
<b>Employee Assistance Program (EAP)</b>	UnitedHealthcare	+1-888-887-4114	<a href="https://www.uhc.com/member-resources/mental-health-programs/employee-assistance-program">https://www.uhc.com/member-resources/mental-health-programs/employee-assistance-program</a>
<b>Pet Insurance</b>	Nationwide	+1-877-738-7874	<a href="http://www.petsnationwide.com">www.petsnationwide.com</a> <a href="https://benefits.petinsurance.com/enchanted-fairies">https://benefits.petinsurance.com/enchanted-fairies</a>
<b>Legal Shield</b>	Legal Shield	+1-800-654-7757	<a href="mailto:memberservices@legalshieldcorp.com">memberservices@legalshieldcorp.com</a> <a href="http://www.shieldbenefits.com/enchantedfairies">www.shieldbenefits.com/enchantedfairies</a>
<b>Identity Theft</b>	Norton LifeLock Benefit Solutions	+1-800-607-9174	<a href="http://www.norton.com/benefitpremier">www.norton.com/benefitpremier</a>
<b>Calm Health</b>	UnitedHealthcare	-	<a href="http://www.myuhc.com">www.myuhc.com</a>
<b>UHC Rewards</b>	UnitedHealthcare	+1-866-230-2505	<a href="http://www.uhc.com">www.uhc.com</a>
<b>Vital Medications</b>	UnitedHealthcare	-	<a href="http://www.myuhc.com/rx">www.myuhc.com/rx</a>
<b>Wellness &amp; Well-being – Real Appeal</b>	UnitedHealthcare	+1-844-924-7325	<a href="http://www.realappeal.com">www.realappeal.com</a>
<b>Will Preparation Services</b>	UpriseHealth	+1-877-433-6789	<a href="https://worklife.uprisehealth.com">https://worklife.uprisehealth.com</a> Username: Will Prep Password: GLIC09
<b>New Benefits Package</b>	New Benefits	+1-888-672-5198	<a href="http://www.newbenefits.com">www.newbenefits.com</a>



# GLOSSARY

**Allowed Amount:** Maximum amount on which payment is based for covered health care services. This may be called “eligible expense,” “payment allowance” or “negotiated rate.” If your provider charges more than the allowed amount, you may have to pay the difference (see Balance Billing).

**Annual Maximum Benefit:** A cap on the benefits your insurance company will pay in a year while you’re enrolled in a particular benefit plan. After an annual limit is reached, you must pay all associated health care costs for the rest of the year.

**Balance Billing:** When a provider bills you for the difference between the provider’s charge and the allowed amount. For example, if the provider’s charge is \$100 and the allowed amount is \$70, the provider may bill you for the remaining \$30. A provider who balance bills is typically known as an out-of-network provider. An in-network provider cannot balance bill you for covered services.

**Coinsurance:** The percentage of costs of a covered health care service you pay (20%, for example) after you’ve paid your deductible.

**Copayment (copay):** A fixed amount (\$20, for example) you pay for a covered health care service after you’ve paid your deductible. Copays can vary for different services within the same plan, like drugs, lab tests, and visits to specialists.

**Deductible:** The amount you pay for covered health care services before your insurance plan starts to pay. With a \$2,000 deductible, for example, you pay the first \$2,000 of covered services yourself. After you pay your deductible, you usually pay only a copayment or coinsurance for covered services. Your insurance company pays the rest.

**Guarantee Issue Amount:** The amount of coverage you can be automatically approved for. If you apply for more coverage than the guarantee issue amount you will have to complete an Evidence of Insurability form and be approved for your coverage amount. Usually only available at your first enrollment opportunity.

**In-Network:** Providers who contract with your insurance carrier. In-network coinsurance and copayments usually cost you less than out-of-network providers.

**Out-of-Network:** Providers who don’t contract with your insurance carrier. Out-of-network coinsurance and copayments usually costs you more than in-network coinsurance. In addition, you may be responsible for anything above the allowed amount (see Balance Billing).

**Out-of-Pocket Maximum:** The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your plan pays 100% of the costs of covered benefits. The out-of-pocket limit doesn’t include your monthly premiums. It also doesn’t include anything you may spend for services your plan doesn’t cover.

**Prescription Drug Formulary:** A list of prescription drugs covered by a prescription drug plan. Also called a drug list.

**Prior Authorization:** Approval from a health plan that may be required before you get a service or fill a prescription in order for the service or prescription to be covered by your plan.

**Preventive Care:** Routine health care that includes screenings, check-ups, and patient counseling to prevent illnesses, disease, or other health problems.



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