



# 2020 Benefits Guide





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## A Message from HR at Arisa Health

Arisa Health values our employees' hard work and loyalty. We strive to provide a comprehensive benefits package for you and your family. We encourage you to take time to review this Benefits Guide to educate yourself about your benefit options and choose the best coverage to fit your needs. Full details of the plans are contained in the summary plan description (SPD), which governs each plan's operation. A copy of each SPD may be obtained from the Human Resources Department.

## Who's Eligible for Benefits

If you are a new hire, you are eligible for coverage on the first day of the month following 60 days of employment.

### DEPENDENT ELIGIBILITY

You may also enroll your eligible dependents in the same plans you choose for yourself. Eligible dependents for medical, dental and vision coverage include your spouse and your dependent children up to age 26.

### LEVELS OF COVERAGE

You can choose the level of coverage most suitable to your needs from the following categories:

#### Medical, Dental and Vision

- ◆ Employee Only
- ◆ Employee + Spouse
- ◆ Employee + Child(ren)
- ◆ Employee + Family

Keep in mind, you may select any combination of coverage categories. For example, you may select medical coverage for you and your family, but select dental coverage for only yourself. The only requirement is that an employee must select coverage for himself/herself in order to elect dependent coverage.

## MAKING CHANGES DURING THE YEAR

The choices you make for your medical, dental, vision, life and disability coverages when you first become eligible or during annual open enrollment, remain in effect for the entire plan year, which ends December 31, 2020. Once you are enrolled, you must wait until the next annual open enrollment period to change your benefits or add or remove coverage for dependents, unless you have a qualified change in family status as defined by the IRS.

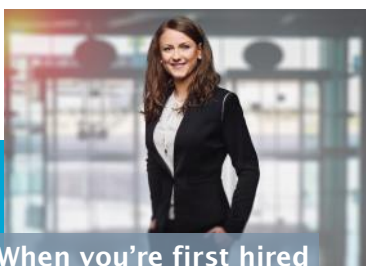
These changes in status events may include the following:

- ◆ Marriage, divorce, or legal separation
- ◆ Birth or adoption of a child
- ◆ Gain or Loss of other health coverage
- ◆ Death of covered dependent

**Note:** Any changes you make to your coverage must be consistent with the change in status.



## WHEN TO ENROLL



### When you're first hired

You may only enroll for coverage within 30 days of your eligibility date. If you do not enroll for coverage within 30 days of your eligibility date, you must wait for the next annual open enrollment period, unless you experience a qualified change in family status.



### If you have a life change

Certain life events like birth or adoption of a child, change in marital status, death, or loss of coverage due to no fault of your own may allow you to change your coverage during the year.

If you have a family status change, you have 30 days to make changes to your coverage by notifying your HR manager.



### At Open Enrollment

Annual Enrollment is your opportunity once each year to evaluate your benefit options and make selections for the following year.

Benefits selected at Annual Enrollment are effective February through January.



# New Hire Benefits Enrollment

## Steps to a Successful Enrollment

### 1. Download the Benefits Mobile App

Text emb to **71441** | Enter company code: **arisa**

### 2. Review your Benefit Guide, brochures and other important benefits forms and information at :

[www.Arisa-Benefits.com](http://www.Arisa-Benefits.com)



### 3. Choose your Enrollment Options listed below.

**Enroll Online, via the Mobile App or with a Benefit Counselor**

**Arisa Health** provides electronic enrollment through Explain My Benefits providing eligible employees the ability to make group insurance benefit elections online during the annual open enrollment, new hire orientation and qualifying events.



#### Self-Service Enrollment

- Visit [www.Arisa-Benefits.com](http://www.Arisa-Benefits.com) on any computer, click on the “Log into Your Benefit System” button and move through the enrollment system at your own pace.  
*Or, download the new Mobile App on your phone or tablet and move through the enrollment at your own pace.*



#### Benefit Counselor Assisted Enrollment

- Schedule a telephonic enrollment meeting with a benefits counselor from Explain My Benefits. Visit the Benefits Portal and Click the Schedule Enrollment Meeting Button to select the available date and time for a benefits counselor to call you and enroll you in your benefits. [www.Arisa-Benefits.com](http://www.Arisa-Benefits.com)



You will be called at your selected date and time with the number you provided.

Make sure to keep your appointment!

# Mobile App



## NEW! BENEFITS ENROLLMENT APP

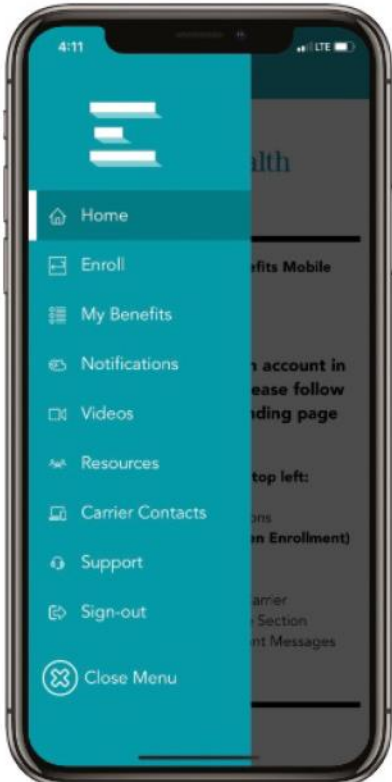
**Arisa Health** has provided you a brand new app to manage your benefits that allows you to:

- ✓ Enroll in your benefits from your phone
- ✓ View your current benefits
- ✓ Watch benefit education videos, review benefit guides and plan summaries
- ✓ Receive important message notifications about your benefits



**Benefits at your fingertips!**

- TO DOWNLOAD:**
1. Visit the Apple or Android App Store
  2. Search for: **Explain My Benefits**
  3. Download the free app!
  4. Enter company code: **arisa**



# Medical

## STAY HEALTHY WITH MEDICAL COVERAGE

Nothing is more important the health of you and your family. That is why we offer 3 comprehensive medical plans through Cigna that are designed to help you get the care you need at an affordable price. In-network providers can be found on [www.cigna.com](http://www.cigna.com) and click on "Find A Doctor, Dentist or Facility". Please review the chart below for a comparison of medical plan features.

	Medical Plan					
	Standard HDHP Plan		Enhanced PPO Plan		Premier PPO Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Annual Deductible</b>						
Employee	\$3,000	\$6,000	\$3,000	\$6,000	\$1,500	\$3,000
Family	\$6,000	\$12,000	\$6,000	\$12,000	\$4,500	\$9,000
<b>Out-of-Pocket Maximum</b>						
Employee	\$6,000	\$12,000	\$6,000	\$12,000	\$4,500	\$9,000
Family	\$12,000	\$24,000	\$12,000	\$24,000	\$13,500	\$27,000
<b>Coinsurance</b>	20%	40%	20%	40%	20%	40%
<b>Office Visits</b>						
Primary Care	20% after ded.	40% after ded.	\$30 copay	25% after ded.	\$20 copay	25% after ded.
Specialist	20% after ded.	40% after ded.	\$50 copay	25% after ded.	\$40 copay	25% after ded.
<b>Preventive Care</b> (including preventive Lab & X-ray)	Plan pays 100%	40% after ded.	Plan pays 100%	25% after ded.	Plan pays 100%	25% after ded.
<b>Diagnostic Lab &amp; X-ray</b>	20% after ded.	40% after ded.	20% after ded.	40% after ded.	20% after ded.	40% after ded.
<b>Urgent Care</b>	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.
<b>Emergency Room</b>	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.
<b>Outpatient Services</b>	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.	20% after ded.
<b>Hospital &amp; Surgical Services</b>	20% after ded.	40% after ded.	20% after ded.	40% after ded.	20% after ded.	40% after ded.
<b>Prescription Drugs</b>						
<b>Retail (30-day)</b>						
Generic	20% after ded.	40% after ded.	\$10 copay	20% after ded.	\$10 copay	20% after ded.
Preferred	20% after ded.	40% after ded.	\$40 copay	20% after ded.	\$40 copay	20% after ded.
Non-Preferred	20% after ded.	40% after ded.	\$60 copay	20% after ded.	\$60 copay	20% after ded.
<b>Mail Order (90-day)</b>						
Generic	20% after ded.	40% after ded.	\$30 copay	20% after ded.	\$30 copay	20% after ded.
Preferred	20% after ded.	40% after ded.	\$120 copay	20% after ded.	\$120 copay	20% after ded.
Non-Preferred	20% after ded.	40% after ded.	\$180 copay	20% after ded.	\$180 copay	20% after ded.

Coverage Tier	Payroll Deductions		
	Standard HDHP	Enhanced PPO	Premier PPO
<b>Employee Only</b>	\$15.88	\$43.40	\$59.44
<b>Employee + Spouse</b>	\$214.35	\$269.39	\$301.46
<b>Employee + Child(ren)</b>	\$184.58	\$235.50	\$265.16
<b>Family</b>	\$392.97	\$472.78	\$519.28

# THE CARE YOU NEED - WHEN, WHERE AND HOW YOU NEED IT.

## Cigna Telehealth Connection



Cigna provides access to telehealth services as part of your medical plan through **MDLIVE**.

Cigna Telehealth Connection lets you get the care you need - including most prescriptions (when appropriate) - for a wide range of minor conditions. Now you can connect with a board-certified doctor via video chat or phone, without leaving your home or office. When, where and how it works best for you!

**Choose when:** Day or night, weekdays, weekends or holidays.

**Choose where:** Home, work or on the go.

**Choose how:** Phone or video chat.

Say it's the middle of the night and your child is sick. Or you're at work and not feeling well. If you pre-register on MDLIVE, you can speak with a doctor for help with:

- > Sore throats
- > Headaches
- > Stomachaches
- > Fevers
- > Colds and flu
- > Allergies
- > Rashes
- > Acne
- > Shingles
- > Bronchitis
- > Urinary tract infections and more

### The cost savings are clear.

Televisits with MDLIVE can be a cost-effective alternative to a convenience care clinic or urgent care center, and cost less than going to the emergency room. And the cost of a phone or online visit will be \$20 on the Premium plan, \$30 on the Enhanced plan and \$55 on the Standard plan. Remember, your telehealth services are only available for minor, non-life threatening conditions. In an emergency, dial 911 or go to the nearest hospital.

**MDLIVEforCigna.com**  
888.726.3171

**MDLIVE** for Cigna\*



Connect to MDLIVE through **myCigna.com**. No separate login needed.



Complete a medical history using their virtual clipboard.



Download the MyCignaApp and you'll be able to access your telehealth providers on your smartphone/mobile device.

MDLIVE is only available for medical visits. For covered services related to mental health and substance use disorder, you have access to the **Cigna Behavioral Health** network of providers.

- > Go to **myCigna.com** to search for a telehealth provider under Specialty in the Behavioral Directory link
- > Call to make an appointment with your select provider

Telehealth visits with Cigna Behavioral Health network providers cost the same as an in-office visit.



# Flexible Spending Accounts & Health Savings Account

## How can I save money with an FSA?

Arisa Health provides you the opportunity to pay for out-of-pocket medical, dental, vision and dependent care expenses with pre-tax dollars through the Flexible Spending Accounts. You must enroll/re-enroll in the plan each year to participate.

Contributions to your FSA come out of your paycheck before any taxes are taken out. This means that you don't pay federal income tax, Social Security taxes, and state and local income taxes on the portion of your paycheck you contribute to your FSA. You should contribute the amount of money you expect to pay out of pocket for eligible expenses for the plan period.

The amount you elect for the year will be divided into equal amounts and deducted through your payroll before taxes. Your entire elected amount will be available to you for eligible expenses whenever you need it.

### PLAN CAREFULLY!

Under IRS rules:

- ◆ You can only change your FSA contributions during the year if you have a family status change.
- ◆ New government regulations allow you to carryover up to \$500 of your unused Medical Reimbursement FSA funds from year to year. You can now carryover up to \$500 of your 2020 contributions and use it for expenses in 2021 - with no cost or penalties. Also, Over the Counter drugs are no longer eligible for reimbursement without a prescription.

## Traditional Health Care FSA

The traditional Health Care FSA is used to reimburse out-of-pocket medical, dental and vision expenses incurred by you and your dependents. This includes our insurance deductibles, co-payments, co-insurance and prescription costs. The maximum that you can contribute to the Traditional Health Care FSA is \$2,750.

## Dependent Care FSA

A Dependent Care FSA is used to reimburse expenses related to the care of eligible dependents while you and your spouse work. The maximum that you can contribute to the Dependent Care Flexible Spending Account is \$5,000 if you are a single employee or married filing jointly, or \$2,500 if you are married and filing separately.

## Health Savings Account

A health savings account (HSA) is a tax-favored savings account. Money in the savings account helps pay your deductibles, coinsurance and out-of-pocket expenses. Once the deductible is met, the plan starts paying. Money left in the savings account may earn interest and is yours to keep.

### HSA Cost Savings Advantages:

- **Triple Tax Savings:** HSA contributions are excluded from federal income tax, interest is earned tax-free, and withdrawals for eligible expenses are exempt from federal income tax.
- **Reduce Out-of-Pocket Costs:** Use HSA funds to help you satisfy annual deductible and coinsurance expenses.
- **Long Term Financial Benefits;** You own the account, save unused funds from year-to-year, unused money is held in an interest-bearing savings or investment account.
- **Choice:** You control and manage when you use your HSA funds.

### Maximum Annual HSA Contributions

Individual - \$3,550      Family - \$7,100

If you are 55 years or older, you may contribute an additional \$1,000 annually

If you answer **YES** to any of the following questions, you are **NOT** eligible to open or fund a Health Savings Account:

- In 2020, will you be covered by another non-qualified medical plan such as a PPO, Medicare or Tricare?
- In 2020, will you or a spouse participate in a *General Purpose* Flexible Spending Account?
- In 2020, will you be enrolled in either Medicare Part A, Part B, Part C or Part D?
- In 2020, if you are under age 26, will you be claimed as a dependent on your parents tax return, or covered under your parents health insurance plan?



# Voluntary Benefits

## What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- ◆ Ownership - Policies are fully portable and belong to you if you leave your employer, same price and plan
- ◆ Benefits are payroll deducted
- ◆ Cash benefits are paid directly to you, not to a hospital or doctor
- ◆ Benefits are paid regardless of any other coverage you may have
- ◆ Level premiums - Rates do not increase with age
- ◆ Guaranteed Renewable
- ◆ Designed to provide additional cash flow to assist with out of pocket medical costs and other bills



# Accident



A plan, through **MetLife**, that helps pay for the unexpected expenses that result from an accident.

### On and Off the Job Coverage

Family coverage available

Sports related injuries covered as well

Just a few examples of benefits included in the plan:

- Emergency Room Visits - up to \$250
- Urgent Care - \$125
- Hospitalization - \$2,000 admission benefit, \$400 per day benefit
- ICU Hospitalization - \$2,000 admission benefit, \$800 per day benefit
- Fractures - up to \$12,000
- Dislocations - up to \$12,000
- Ambulance - Ground \$500, Air \$1,500
- Accident Follow-up Treatment - \$125
- Surgery - Inpatient up to \$2,500, Outpatient \$500
- Health Screening Benefit - \$50 per insured per year

See brochure for a complete list of benefits.

	Employee	Employee & Spouse	Employee & Child(ren)	Family
Payroll Deductions	\$9.00	\$17.77	\$20.05	\$24.85



# Voluntary Benefits

## Critical Illness

Critical Illness through **MetLife**, is a plan that will pay you a lump sum of money if you are diagnosed with a critical illness, heart attack or stroke. The cash benefit is provided upon the first diagnosis of a covered condition to help you with associated costs and beyond. Regardless of other coverage in force, the benefit is paid out in a full lump sum. Employees can elect \$10,000, \$20,000 or \$30,000 of coverage.



### Guaranteed Issue at Initial Offering

**\$30,000 Employee / \$15,000 Spouse / \$15,000 Children**

#### Examples of covered conditions:

**100% Benefit:** Alzheimer’s Disease, Coronary Artery Bypass Graft, Full Benefit Cancer, Heart Attack, Kidney Failure, Major Organ Transplant, Stroke

**25% Benefit:** Partial Benefit Cancer, Addison’s Disease, Lou Gehrig’s Disease, Cerebrospinal Meningitis, Cerebral Palsy, Cystic Fibrosis, Diphtheria, Encephalitis, Huntington’s Disease, Legionnaire’s Disease, Malaria, Multiple Sclerosis, Muscular Dystrophy, Myasthenia Gravis, Necrotizing Fasciitis, Osteomyelitis, Poliomyelitis, Rabies, Sickle Cell Anemia, Systemic Lupus Erythematosus, Systemic Sclerosis, Tetanus and Tuberculosis

**A Healthy Screening Benefit is included in your Critical Illness Policy and MetLife pays \$50 for each insured.** Each covered person will get one screening/preventive measure test per calendar year.

#### Examples of Routine Screenings:

- Mammography
- Physical Exam
- HPV Vaccination
- CA125 Blood Test
- Pap Smear
- Colonoscopy
- Prostate Specific Antigen
- Skin Cancer Screening

**Also included is a Recurrent Benefit that provides an amount equal to 50% of the plan benefit amount for Coronary Artery Bypass Graft, Full Benefit Cancer, Heart Attack, Stroke, and 12.5% of the plan benefit amount for Partial Benefit Cancer, if a covered person is diagnosed with the same covered condition.**

**Rates:** This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. **Your specific rate will be calculated for you in the electronic enrollment system.** See brochure on the Benefit Resource website for more details.

## Dental

### ENHANCE YOUR SMILE WITH DENTAL COVERAGE

The MetLife Dental Plans are designed to help you maintain a healthy smile through regular preventive dental care and to fix any problems as soon as they occur. Because preventive care is so important, the plan covers these services in full with no deductible or copay. The plan allows you to see any provider, but you will receive the highest level of benefits when you utilize in-network providers. Please note that if you utilize an out-of-network provider, you may be balance billed for any amounts over the allowed amount. To find a network provider for your and your family, please visit [www.metlife.com](http://www.metlife.com).

MetLife PPO Dental				
Plan Features	Standard Plan		Premier Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Calendar Year Deductible</b>	\$50 Individual \$150 Family	\$50 Individual \$150 Family	\$50 Individual \$150 Family	\$50 Individual \$150 Family
<b>Diagnostic and Preventive Services</b> (e.g. x-rays, cleanings, exams) Deductible Waived	100%	100%	100%	100%
<b>Basic Restorative Services</b> (e.g. fillings, extractions)	80% after deductible	80% after deductible	80% after deductible	80% after deductible
<b>Major Services</b> (e.g. dentures, bridges)	50% after deductible	50% after deductible	50% after deductible	50% after deductible
<b>Calendar Year Maximum</b> Per Person	\$750	\$750	\$1,500	\$1,500
<b>Orthodontics</b> <b>Lifetime Max</b>	Not Covered	Not Covered	50% \$2,000	50% \$2,000

Payroll Deductions		
Coverage Tier	Standard Plan	Premier Plan
Employee Only	\$1.00	\$4.50
Employee & Spouse	\$7.73	\$28.06
Employee & Child(ren)	\$11.91	\$40.96
Employee & Family	\$24.17	\$57.35



# Vision



VSP's Vision Insurance helps pay the cost of periodic vision examinations and necessary lenses and frames. The vision plan covers an annual eye exam, eyeglass lenses or contacts every calendar year, and frames are covered every other calendar year. For a complete list of VSP providers near you, use the Provider Locator on [www.vsp.com](http://www.vsp.com).

VSP Vision		
Benefits	In-Network	Frequency
Well Vision Exam	\$10 copay	Every calendar year
Prescription Glasses	\$10 copay	See frames & lenses
Frames	\$150 allowance \$170 allowance featured frame brands 20% savings on amount over allowance \$80 Walmart frame allowance	Every other calendar year
<b>Lenses</b>		
Single vision, lined bifocal and lined trifocal lenses Polycarbonate lenses for children	Included in Prescription Glasses	Every calendar year
<b>Lens Enhancements</b>		
Standard Progressive Lenses	\$0	Every calendar year
Premium Progressive Lenses	\$95 - \$105	
Custom Progressive Lenses	\$150 - \$75	
Other Lens Enhancements	20-25% Savings	
Contacts (Instead of glasses) Contact Lens Exam (fitting & evaluation)	\$130 allowance; copay does not apply Up to \$60	Every calendar year
Diabetic Eyecare Plus Program	\$20	As needed
Retinal Screening	Up to \$39 copay as an enhancement to WellVision Exam	
Laser Vision Correction	Average 15% off regular price and 5% off promotional price; discounts only available from contracted facilities	

Payroll Deductions	
Employee Only	\$3.52
Employee & Spouse	\$7.04
Employee & Child(ren)	\$7.53
Employee & Family	\$12.04

## Basic Life and AD&D

Basic life insurance protects your family and other beneficiaries in the event of our death. If your death is due to a covered accident or injury, your beneficiary will receive an additional benefit through Accidental Death and Dismemberment (AD&D) coverage. Arisa Health provides you with 1x your base annual earning to a maximum of \$150,000, whichever is less. **Benefit reduces by 35% at age 65 and 50% at age 70.**

## Voluntary Life and AD&D

Employees who want to supplement their group life insurance benefits may purchase additional coverage. When you enroll yourself and/or your dependents in this benefit, you pay the full cost through post-tax payroll deductions. Your cost automatically adjusts at each annual renewal to reflect the age-banded rates. You must purchase coverage on yourself in order to cover your spouse or children.

	Benefit*	Maximum	Guarantee Issue
<b>Employee</b>	\$10,000 increments	5x salary up to \$5,000,000	Up to \$150,000
<b>Spouse</b>	\$5,000 increments	50% of employee's benefit up to \$100,000	50% of employee's benefit up to \$50,000
<b>Child(ren)</b>	\$2,500 increments	50% of employee's benefit up to \$10,000	50% of employee's benefit up to \$10,000

Monthly Employee & Spouse Rates	
Age	Rate per \$1,000
<30	\$0.080
30-34	\$0.100
35-39	\$0.110
40-44	\$0.120
45-49	\$0.170
50-54	\$0.250
55-59	\$0.450
60-64	\$0.770
65-69	\$1.370
70+	\$2.45

Spouse rate based on employee's age.

Monthly Chil(ren) Rates	
15 days to age 26 (if a full time student)	
\$2,500	\$0.38
\$5,000	\$0.76
\$7,500	\$1.13
\$10,000	\$1.51

### Employee & Spouse premium formula:

Desired Benefit Amount ÷ \$1,000 = Units per \$1,000  
Units x Age Banded Rate = Monthly Premium

**Beneficiary Designation:** Your beneficiary designation is the person you name to receive your life insurance benefits in the event of your death. This includes any life insurance benefits payable under the voluntary life insurance plan available through your employer. Benefits payable for a dependent's death under the voluntary life insurance plan are payable to you if living; otherwise, benefits may, at the option of the insurance company, be payable to your surviving spouse or to the executors or administrators of your estate. It is important that your beneficiary designation be clear so that there will be no questions as to your meaning. It is also important that you name a primary and contingent beneficiary.

# Disability

## SHORT TERM DISABILITY

Short Term Disability insurance protects a portion of your income if you become partially or totally disabled for a short period of time due a non-job related illness or injury. Arisa Health provides employees with Short Term Disability coverage at no cost through MetLife.

### Company Paid Short Term Disability

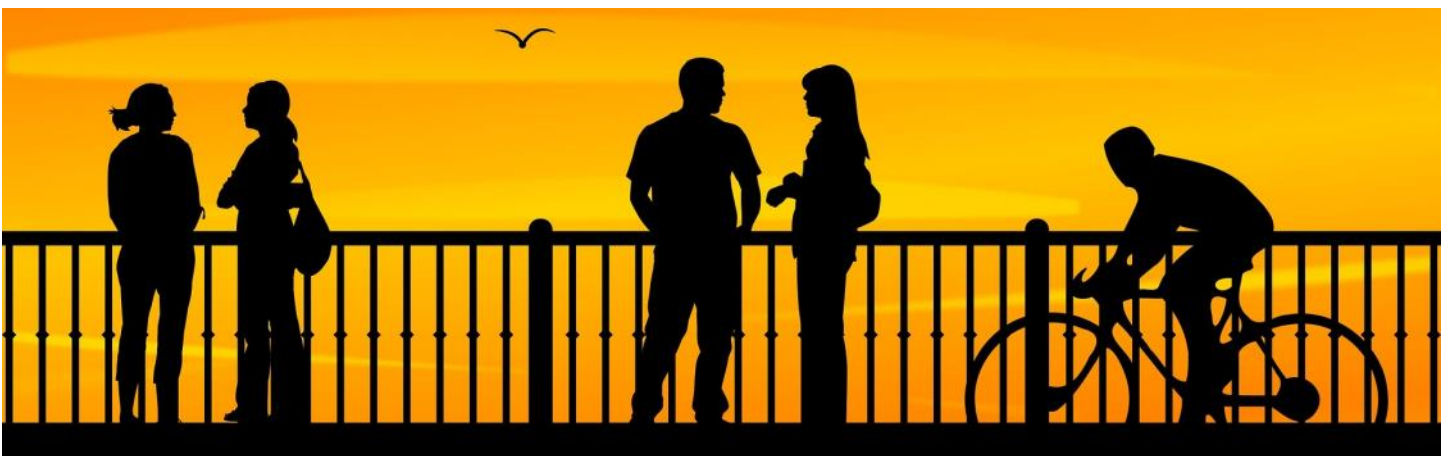
<b>Benefit Begins</b>	On 15th day of illness or injury
<b>Income Replacement</b>	60% of weekly earnings
<b>Weekly Maximum</b>	\$2,500
<b>Benefit Duration</b>	11 weeks
<b>Pre-Existing Condition Limitation</b>	None
<b>Cost</b>	100% Employer Paid

## LONG TERM DISABILITY

Long Term Disability insurance protects a portion of your income if you become partially or totally disabled for longer than 90 days. Benefits begin the day after the elimination period is completed. Pre-existing condition limitations may apply. Long-Term disability is offered through MetLife.

### Voluntary Long Term Disability

<b>Benefit Begins</b>	After 90 days of illness or injury
<b>Income Replacement</b>	60% of monthly earnings
<b>Monthly Maximum</b>	\$7,500
<b>Benefit Duration</b>	Own occupation first 24 months Any occupation after 24 months to SSNRA
<b>Pre-Existing Condition Limitation</b>	3 month look back period / 12 month exclusion period
<b>Cost</b>	\$0.3424 per \$100 of month payroll





## Important Contacts

If you have any questions after you enroll, please call the benefit plan providers directly or log on to their websites.

Benefit	Telephone	Website / Email Address
<b>Medical</b> Cigna	800-997-1654	<a href="http://www.cigna.com">www.cigna.com</a>
<b>Dental</b> MetLife	800-942-0854	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Vision</b> VSP	800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
<b>Flexible Spending Accounts</b> Discovery Benefits	866-451-3399	<a href="http://www.discoverybenefits.com">www.discoverybenefits.com</a>
<b>Health Savings Account</b> Discovery Benefits	866-451-3399	<a href="http://www.discoverybenefits.com">www.discoverybenefits.com</a>
<b>Basic &amp; Supplemental Life</b> MetLife	866-492-6983	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Short &amp; Long Term Disability</b> MetLife	800-858-6506	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Worksite Voluntary Benefits</b> MetLife	800-638-5000	<a href="http://www.metlife.com">www.metlife.com</a>
<b>Worksite Voluntary Benefits Claims Assistance</b> Explain My Benefits	888-734-6937, Option 2	<a href="mailto:service@explainmybenefits.com">service@explainmybenefits.com</a>

### **Benefit Guide Description**

*This summary of benefits is not intended to be a complete description of Arisa Health's insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.*

*In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Arisa Health maintains its benefit plans on an ongoing basis, Arisa Health reserves the right to terminate or amend each plan in its entirety or in any part at any time.*

*For questions regarding the information provided in this overview, please contact your human resources representative.*

