

Atlantic Care
— Services —

Your benefits

Effective January - December 2026



Making benefit selections

Eligibility

For you

You are eligible for benefits as a full-time employee working an average of 30 hours per week.

Covering your family

You may also cover your eligible dependents when you elect coverage for yourself.

Your Spouse or Partner

You may cover your legal spouse or domestic partner.

Your Children

Dependent children are eligible:

- **Medical, dental and vision:** until age 26 regardless of student or marital status
- Or up to age 30 in certain situations for Medical coverage
- **Child life insurance:** until age 21, or 26 if a full-time student

Enroll through your company's online enrollment portal: **Employee Navigator**. Click the link below to follow prompts to log back in to your account or, if newly enrolling, register with company identifier: **AtICar2023**

[Enroll now](#)

Enrolling in coverage

Your benefit plans are in effect January 1 – December 31 each year. In general, there are three times you can make benefit selections:

When you're first eligible

Your benefits begin on the first day of the month coinciding with or following 30 days of employment; this is your effective date. Be sure to submit your selections within your first 30 days of benefits eligibility. Your benefit selections will be in effect through December 31.

At Open Enrollment

Open Enrollment is your one chance each year to review your coverage options and make changes to your benefits. Your choices are in effect from January – December of the following year unless you have a qualifying life event.

If you have a qualifying life event

Qualifying life events allow you to change your coverage during the year outside of Open Enrollment. Examples include:

- marriage or divorce,
- birth or adoption,
- death of a covered dependent, and
- a change in eligibility through Medicare, Medicaid, or a spouse or parent's coverage.



You must request a change to your benefits within **30 days** of your life event (**60 days for changes involving Medicaid eligibility**). Documentation may be required.

Key terms

We've removed as much jargon as possible.

But you'll probably still encounter some terms as you enroll in and use your benefits. **Here's what to know:**

Balance billing

When you use an out-of-network medical or dental provider, they may bill you the difference between what they charge and the amount your insurance pays.

Medical: balance billing is in addition to – and does not count towards – your out-of-pocket maximum. *The No Surprises Act prohibits balance billing under certain circumstances.*

Coinsurance

After you've met your deductible, you're sometimes responsible for a percentage of the cost of the medical care, dental care, or prescription medication you received. This percentage is coinsurance.

Copay

A flat fee you pay each time you receive a copay-eligible medical, dental, or vision service or prescription medication.

Deductible

The amount you're responsible for paying in care expenses before the medical or dental plan starts paying deductible-eligible expenses.

In-network

In-network care is always your lowest-cost option. Networks are groups of medical, dental, and vision providers, pharmacies, and facilities that agree to discount the cost of their care or service.

Learn more about:

Insurance costs >

Out-of-pocket maximum

The most you'll pay for **covered** in-network medical care in a year. This includes your deductible, any coinsurance or copays, and prescription drugs.

The out-of-pocket maximum does not include your premium (the amount you pay for coverage), non-covered expenses, or out-of-network care that's been balance billed.

Pre/Prior-authorization

Some specialty medical providers, services and prescriptions require prior authorization from your insurance company. These may include – but are not limited to – surgery, imaging (CT, MRI) and certain prescription medications.

Primary care physician

A primary care physician (PCP) is your main medical doctor – usually a general practitioner (GP), family doctor, internist, OB/GYN, or pediatrician (for children).

Annual Notices

We're required to tell you about certain rights and responsibilities you have as an employee of Atlantic Care Services, LLC. You can request a paper copy at no charge from:

Bonnie Bennett, Chief Human Resource Officer
bonnie@atlanticcareservices.com

[Review these notices](#)

Contact information

Medical insurance

Curative

855-428-7284
www.curative.com**Dental insurance**

MetLife

1-800-638-5433
www.metlife.com**Vision insurance**

MetLife

1-800-638-5433
www.metlife.com**Life and AD&D insurance**

MetLife

1-800-638-5433
www.metlife.com**Disability insurance**

MetLife

1-800-638-5433
www.metlife.com**Additional benefit options**

MetLife

1-800-638-5433
www.metlife.com

Your advocate, **Gigi Rodriguez**, is here to help you with claims, ID cards, coverage questions, and more!

gigi.rodriguez@ondigital.com

407-863-1796

*Monday - Friday, 8am-5pm EST
Bilingual (Spanish) assistance is available*





Benefit Enrollment and Education Center (BEEC)

Do you have questions about your benefits? Do you need help enrolling? Contact the Benefit Enrollment and Education Center (BEEC)!

You'll get one-on-one access to a licensed OneDigital team member who will help answer questions you may have regarding your benefits and help you enroll. This is not a call center, but an extension of your employer's OneDigital team dedicated to helping you.

We can help you to:

- Understand how benefits work
- Understand your company's benefits
- Understand pre-tax accounts
- Enroll you in your benefits

Contact us:

770-250-2926 or 866-354-1327

benefitscc@on.digital.com

Monday - Friday 9am - 5pm EST

Medical insurance - when compliant with Baseline visit

Select from three medical options through Curative.

All plans cover in-network preventive care at 100%, prescription drugs, and include an annual limit on your expenses. The differences are:

- what you pay for the **plan**,
- what you pay when you **get care**,
- how **out-of-network care** is covered, and
- your annual **maximum cost for care** (out-of-pocket maximum).



In-network care	Curative EPO See plan summary	Curative PPO See plan summary	Curative Buy-Up See plan summary
Network name:	Curative/Cash Card	Curative/Cash Card	Curative/Cash Card
Annual Deductible (DED) Calendar year	\$0/\$0	\$0/\$0	\$0/\$0
How the deductible works when you cover more than one person:	Each person has their own deductible with a combined maximum for the family.	With dependents applies to the whole family, and everyone's expenses count.	With dependents applies to the whole family, and everyone's expenses count.
Out of pocket maximum	\$0/\$0	\$0/\$0	\$0/\$0
Preventive care	\$0	\$0	\$0
Primary care visit	\$0	\$0	\$0
Specialist visit	\$0	\$0	\$0
Virtual visit (learn more)	\$0	\$0	\$0
Urgent care	\$0	\$0	\$0
Emergency room	\$0	\$0	\$0
Inpatient hospital care	\$0	\$0	\$0
Outpatient surgery	\$0	\$0	\$0
Prescription drugs			
Preferred	\$0 copay	\$0 copay	\$0 copay
Non-preferred	\$50 copay	\$50 copay	\$50 copay
Specialty brand	\$250 copay	\$250 copay	\$250 copay
Out-of-network care			
See your plan summary for out-of-network information (balance billing applies).			
Annual deductible	N/A	\$10,000 / \$20,000	\$0
Out-of-pocket maximum	N/A	\$15,000 / \$30,000	\$0
Your cost for coverage			
Employee only	Per paycheck \$ 74.80	Per paycheck \$ 98.01	Per paycheck \$ 131.98
Employee + spouse	\$ 296.42	\$ 349.34	\$ 426.80
Employee + child(ren)	\$ 254.18	\$ 300.60	\$ 368.54
Employee + family	\$ 435.21	\$ 509.48	\$ 618.19

Medical insurance - NOT compliant with Baseline visit

Select from three medical options through Curative.

All plans cover in-network preventive care at 100%, prescription drugs, and include an annual limit on your expenses. The differences are:

- what you pay for the **plan**,
- what you pay when you **get care**,
- how **out-of-network care** is covered, and
- your annual **maximum cost for care** (out-of-pocket maximum).



In-network care	Curative EPO See plan summary	Curative PPO See plan summary	Curative Buy-Up See plan summary
Network name:	Curative/Cash Card	Curative/Cash Card	Curative/Cash Card
Annual Deductible (DED) Calendar year	\$5,000 per person, up to \$10,000 family maximum <i>How the deductible works when you cover more than one person:</i>	\$5,000 per person, up to \$10,000 family maximum <i>Each person has their own deductible with a combined maximum for the family.</i>	\$5,000 per person, up to \$10,000 family maximum <i>With dependents applies to the whole family, and everyone's expenses count.</i>
Out of pocket maximum	\$7,500 per person \$15,000 family maximum	\$7,500 per person \$15,000 family maximum	\$7,500 per person \$15,000 family maximum
Preventive care Primary care visit Specialist visit Virtual visit (learn more)	100% covered \$25 copay \$50 copay \$25 / \$50copay	100% covered \$25 copay \$50 copay \$25 / \$50copay	100% covered \$25 copay \$50 copay \$25 / \$50copay
Urgent care Emergency room Inpatient hospital care Outpatient surgery	DED then you pay 20% DED then you pay 20% DED then you pay 20% DED then you pay 20%	DED then you pay 20% DED then you pay 20% DED then you pay 20% DED then you pay 20%	DED then you pay 20% DED then you pay 20% DED then you pay 20% DED then you pay 20%
Prescription drugs			
Preferred Non-preferred Specialty brand	\$50 copay \$100 copay 25% coinsurance	\$50 copay \$100 copay 25% coinsurance	\$50 copay \$100 copay 25% coinsurance
Out-of-network care			
See your plan summary for out-of-network information (balance billing applies).			
Annual deductible Out-of-pocket maximum	N/A N/A	\$10,000 / \$20,000 \$15,000 / \$30,000	\$5,000 / \$10,000 \$7,500 / \$15,000
Your cost for coverage			
Employee only Employee + spouse Employee + child(ren) Employee + family	Per paycheck \$ 74.80 \$ 296.42 \$ 254.18 \$ 435.21	Per paycheck \$ 98.01 \$ 349.34 \$ 300.60 \$ 509.48	Per paycheck \$ 131.98 \$ 426.80 \$ 368.54 \$ 618.19

Jumpstart your health with a Baseline Visit

At Curative, we're committed to helping our members get the most out of their health plan from day one. Curative members are invited to participate in a Baseline Visit to help take the guesswork out of their health. By completing a visit in the first 120 days of plan effective date, members continue with \$0 out-of-pocket costs for in-network care and preferred prescriptions.

It is completely confidential and won't impact your premiums or costs in any way.

98% of health plan participants complete the Baseline Visit.

Here's what you get with your virtual visit:



Say hello to your Care Navigator

- Learn all about your new plan and benefits
- Get support on finding in-network care and 24/7/365 telemedicine
- Transfer prescriptions to an in-network pharmacy
- Get connected to programs to help reach your health goals



Meet with a clinician

Members who meet with a clinician can discuss any healthcare goals or needs.



Unlock \$0 in-network care

After your Baseline Visit, continue to get \$0 deductibles and copays for all in-network care and preferred prescriptions.

Care Navigator

Each Curative plan member is paired with a Care Navigator who will be their first point of contact to the plan and follow-up post-Baseline Visit. They provide resources and guidance on maximizing Curative benefits, find in-network care, and help navigate an often complex health system. Members can reach them by phone, text or email. Plus there's 24/7/365 member services support.

Your Baseline Visit is our investment in you. Enroll in Curative today and experience a health plan you'll love to use. More information: curative.com/faq/prospective-members.





You're now a
Curative member.
Congrats!

We've made it official. So, what happens next?



1. Register your account

To get started, you'll receive a Curative welcome email where you can register for the member portal. Keep an eye out for this email to arrive in your inbox 1-2 days before your effective date.

Once your effective date begins, your digital member ID card will be ready for immediate use through the member portal. You can expect your physical member ID card to arrive within two weeks of your effective date.

Through the Member Portal, you can:

- ✓ Download, print, and request a replacement ID card
- ✓ View your pharmacy and care benefits
- ✓ Update personal information
- ✓ Register and connect to virtual urgent care

Visit the member portal at health.curative.com. Learn more at curative.com/virtual-urgent-care.

2. Sign-up for Virtual Urgent Care

When you register for the member portal, you'll also receive a sign-up email for virtual urgent care. Members in Texas will have access to NormanMD, and if you're outside Texas, you'll be able to use Teladoc. Through both partnerships, you can access virtual urgent care 24/7/365.



Access family doctors and pediatricians



Messaging, audio, or video chat



Prescriptions available to your door



\$0 copay

3. Schedule your Baseline Visit

As a Curative member, you and your dependents over the age of 18 year-old, will get the most out of your health plan by completing a Baseline Visit (mobile/in-person visits available in select locations). Think of a Baseline Visit as an individualized appointment that focuses on your complete well-being. By completing your visit within 120 days of your plan effective date, you'll also keep your \$0 copays and \$0 deductible for in-network care and preferred prescriptions. For more info on the Baseline Visit, go to curative.com/baseline.

Questions? We're here for you. Contact Member Services
at 855-4-CURATIVE (855-428-7284)

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Get care when you need it with Curative



Find a provider near you

Use our network search tool to find your go-to care providers and pharmacies near you at curative.com/providers

Provider search tips

- ✳ *Search using the provider, facility, or pharmacy name.*
- ✳ *Use filters to select a care type to get the most accurate results.*
- ✳ *Enable location services or add your location in the search box to populate providers or pharmacies near you.*

Traveling? Simply enter your travel location to find in-network providers in that area (only within the U.S.)

- ✳ *When filtering, be sure to select your language preference and check the box reading "Accepting new patients" when looking for a new provider.*
- ✳ *When searching for a primary care provider, note that providers may be found under "family medicine" or "internal medicine."*

Don't see a retailer?

**If you are out-of-area for our preferred in network pharmacies, go to the provider search tool at curative.com/providers or contact Member Services at 855-428-7284.*

Free delivery from Curative Pharmacy — no more waiting in line. Overnight and same-day delivery options are available in select locations. Check your local pharmacy retailers for delivery options. Questions? Call Member Services at 855-428-7284

Meds made simple.



*Transferring prescriptions?
Follow these simple steps below
or go to health.curative.com/pharmacy*

Step 1

Get your Baseline Visit within 120 days of your plan's effective date to unlock \$0 coverage for in-network care and preferred prescriptions.

Step 2

Visit an in-network provider who prescribes a preferred medication.

Step 3

Use the preferred in-network pharmacies.

Our in-network pharmacies include all locations across the United States and include: Curative, H-E-B, ACME, Albertsons, Amigos, Carrs, Haggen, Jewel-Osco, Market Street, MedCart, Pavillions, Randalls, Safeway, Sav-on, Tom Thumb, United, Vons, Publix, Brookshire Brothers.



For more information on what's covered, prescription transfers, and updates on Curative Pharmacy's Expansion, visit curative.com/pharmacy



Pharmacy Operational Overview



No Copays for Preferred Prescriptions. No... Really.

Optimize the pharmacy benefit of \$0 copay on preferred medications. In fact, 97% of conditions are covered on our preferred list.

1. Get your Baseline Visit within 120 days of your start date.

2. Visit an in-network provider who prescribes a preferred medication.

3. Use our preferred in-network pharmacies.



Preferred

Consists of generic, biosimilars, select brand and specialty medications.

\$0 Copay*

\$50/\$250 Copay*



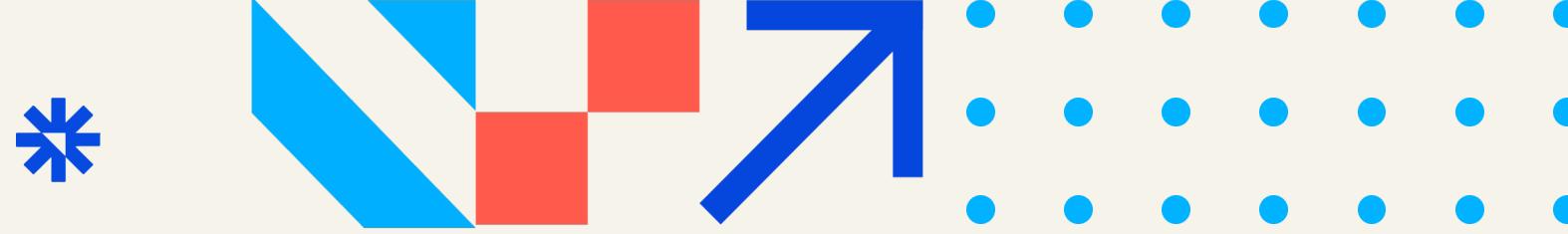
Non-Preferred

Consists of lower value generics, brands, and specialty medications.

Affordability = Adherence

	Curative Adherence	Average PBM Adherence
Hypertension - CCB	93.2%	76.5%
Hypertension - RASA	91.5%	79.4%
Diabetes	94.9%	75.7%
Cholesterol - STATIN	94.3%	75.7%
COPD - LABA	92.2%	41.2%





Your Pharmacy Choice: *From Exclusive to Everywhere*



Pharmacy Network

Our in-network pharmacies include all locations across the United States.

Curative Pharmacy	National Pharmacy Options
	<p>Albertsons Pharmacy Companies: Acme Pharmacy, Albertsons Pharmacy, Albertsons Market Pharmacy, Amigos Pharmacy, Carrs Pharmacy, Haggen Pharmacy, Jewel-Osco Pharmacy, Market Street Pharmacy, Pavilions Pharmacy, Randalls Pharmacy, Safeway Pharmacy, Say-On Pharmacy, Star Market Pharmacy, Shaws Pharmacy, Tom Thumb Pharmacy, United Coalition Pharmacy, United Pharmacy, Vons Pharmacy</p> <p>Publix Pharmacy H-E-B Pharmacy Out of standard service area: CapRx Wrap Network* includes major partners, such as Walgreens, CVS, RiteAid, and Walmart</p>

Don't see a retailer? Never fear. If a member is not near an in-network retail pharmacy and not in range of the Curative Pharmacy, Curative will use find an alternative custom option using the CapRx network to each person that is convenient.





Redefining Pharmacy, the Curative Way

We made our own Curative Pharmacy simple.

Serving only Curative members, we're the overly attentive partner in health members never knew you needed.



✳️ Next Day Delivery

Next-day delivery available in most states and actively working to add the remaining.

✳️ Flexible Delivery Points:

Home, workplace, or wherever a member might be.

✳️ Two-Way Text Capabilities:

Members can communicate directly with our pharmacy about new medications, or refills.

✳️ Making it Simple

Curative Pharmacy will work with doctors, previous pharmacies and anyone in between to make sure members are covered every step of the way.

✳️ Regular Check-ins:

We stay in touch and make sure medications are going well.

✳️ One-Stop-Shop

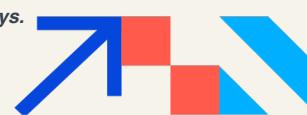
Members with multiple medications can be serviced by one easy-to-use pharmacy.

✳️ Trusted Tips

We know the cost-effective choices to help members make the most of their benefits.

↗️ Members can sign-up 24/7/365 for the Curative Pharmacy through member services: 855-4-CURATIVE.

*Every Curative member can qualify for the \$0 deductible or copay for in-network care. Just complete a Baseline Visit in your first 120 days. See curative.com to learn more. Curative Insurance Company PPO.BR230921-1





Virtual Urgent Care and Therapy for \$0 with Teladoc

Access on-demand virtual urgent care and therapy from the comfort of home with Teladoc. Say goodbye to long wait times.



24/7 Virtual Care

Access doctors anytime, anywhere, through phone or video.



Expert Medical Guidance

Receive accurate diagnoses and treatment options from healthcare professionals, not the internet.



Virtual Mental Health Support

Connect with licensed psychologists, psychiatrists, and therapists to address your mental health and emotional well-being.

Prescriptions and Lab Tests



Get the medications and tests you need without leaving your home.



\$0 Copay

Enjoy virtual urgent care and therapy visits without out-of-pocket expenses.



Get treated for conditions and symptoms including:

- Flu
- Cold
- Sore throat
- Bronchitis
- Cough
- Pink eye
- Arthritis
- Backache
- Rash
- Allergies
- Sinus problems
- Skin conditions



Access remote mental health support to help with:

- Anxiety, stress, feeling overwhelmed
- Negative thought patterns
- Depression
- Not feeling like yourself
- Not wanting to get out of bed
- Relationship conflicts
- Marriage and relationship issues
- Trauma and PTSD
- Mood swings
- Medication management (Psychiatry only)



To sign up, visit teladoc.com, and select register now. (No code needed)

Questions on Teladoc? Contact 1-800-835-2362

*Teladoc is available to Curative members residing outside of Texas. Members in Texas can access virtual urgent care through NormanMD.



Curative Guide to \$0 Care*

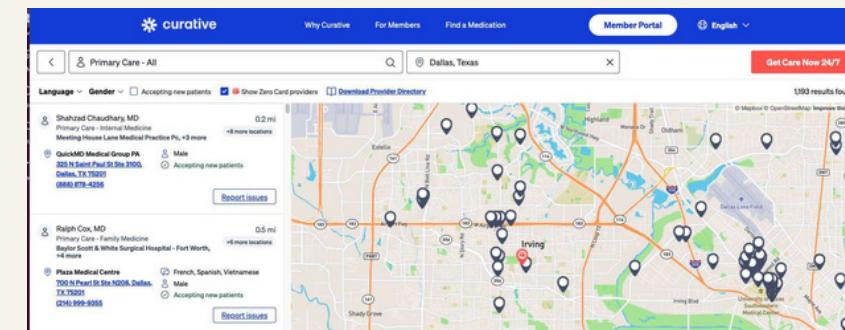
Two cards. One goal. Zero dollars.

We guarantee \$0 copays and deductibles for covered services provided by any doctor in our search.* There are two options to provide payment covered by Curative: 1) insurance billing using the Curative Member ID Card and 2) self-pay using our unique **Curative Cash Card**.

Either way, you don't pay. Here is a quick and easy guide to \$0 care.

Start here Provider Search

All clinicians shown at curative.com/providers have \$0 out-of-pocket costs for covered services.



Use the Curative Member ID Card first if the provider shows in our search.

Option 2 Curative Cash Card



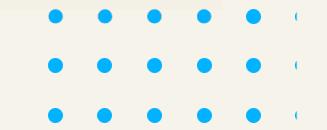
Use the Curative Cash Card for any provider that shows as Curative Cash Card. Tell the front desk you will **self-pay** and hand over your Curative Cash Card. Think of it as a payment card with no impact on credit. It can be used for office visits, urgent care, behavioral health, and certain services without hospital stays. It does not include medications, labs and non-covered benefits.

More \$0 Providers: It's easy to nominate a provider for the Curative Cash Card. Fill out a quick form cur.tv/nominate or call Member Services 855-428-7284.

Backup: If a provider appears in our search but does not take your Member ID Card for any reason or tries to charge a copay, say you'll self-pay instead and hand over your Curative Cash Card.

Members must be 18 years and older to use the Curative Cash Card and complete their Baseline Visit in the first 120 days of their plan start date to maintain \$0 out-of-pocket costs. Curative Cash Card Visa® Commercial Credit cards are issued by Celtic Bank. Additional Terms & Conditions can be found in your Member Portal Account at health.curative.com.

©2024 Curative Insurance Company



Complete care resources

Support for your health, finances, and life.

Mental health care

Rula: virtual mental health care

Schedule a virtual (online) session with a licensed mental health professional in about 5 minutes – and see your provider **as soon as tomorrow**.

- Care is available in all 50 states.
- Get a personalized cost estimate **before** your session based on your insurance coverage.
- Select from a list of providers who meet your needs: gender, language/culture, therapy type, and more.

[Get started](#)

Mental Health Hub

Access confidential, on-demand mental health resources on a platform built with your mobile device in mind.

The **Mental Health Hub** includes:

- Tips for managing day-to-day stressors,
- Resources for times of crisis,
- Practical information about mental health, and more!

[Access now](#)

Employee Assistance Program (EAP)

Our Employee Assistance Program (EAP) through **MetLife** provides **you and your family** with **no-cost, confidential assistance** with all things related to your life, including mental health, finances, caregiving, relationships, community resources, and more. Support is available **24 hours a day, 7 days a week, 365 days a year**.

[Learn more](#)

Mental health: get up to 5 visits per issue, per year at no cost to you. Household members are eligible as well.

1-888-319-7819
one.telushealth.com

Username: metlifeeap
Password: eap



Always-on toolkit

[Go now](#)

Mobile-friendly, no-cost monthly resources designed to help you support your health, understand your benefits, and manage your finances.

Virtual health care

[See details](#)

Access quality health care wherever you are, whenever you need it through **Curative**. Virtual health care is available **24 hours a day, 7 days a week**. Your cost depends on your medical plan:

Dental insurance

Select from two dental options through MetLife.

Both plans cover in-network preventive care at 100%. The differences are:

- what you pay for the **plan**,
- what you pay when you **get care**,
- the **maximum amount** MetLife will pay each year for dental care (annual maximum benefit),
- how **out-of-network** care is covered, and
- whether **orthodontic** care is covered.

[Find an in-network provider](#)



In-network care	Low plan	High plan
Network name:	Dental PPO	Dental PPO
Annual Deductible (DED)	\$50 per person \$150 family maximum	\$50 per person \$150 family maximum
Annual maximum benefit	\$1,500 per person	\$2,000 per person
Preventive care	100% covered	100% covered
Basic care	DED then you pay 20%	DED then you pay 20%
Major care	DED then you pay 50%	DED then you pay 50%
Orthodontic care		
Coverage	50% covered (Adult and child to age 26)	50% covered (Adult and child to age 26)
Lifetime maximum benefit	\$1,000 lifetime max benefit	\$1,000 lifetime max benefit
Your cost for coverage	Per paycheck	Per paycheck
Employee only	\$ 5.27	\$ 9.03
Employee + spouse	\$ 10.52	\$ 18.07
Employee + child(ren)	\$ 13.02	\$ 21.77
Employee + family	\$ 19.31	\$ 32.50

Stay **in-network** to avoid **balance billing charges** (the difference between what an out-of-network provider charges and the amount your insurance pays).

Vision insurance

Your vision coverage is through **MetLife**.

You'll get an annual exam with coverage for lenses and frames, or contacts in lieu of glasses.

[Find an in-network provider](#)



In-network care

Vision plan

[See plan summary](#)

Network name:

VSP

Annual eye exam
(every 12 months)

\$10 copay

Materials copay
(lenses & frames)

\$10 copay

Lenses
(every 12 months)

Included in materials copay

Frames
(every 12 months)

\$250 allowance

Contact lenses
(every 12 months)

Elective: \$250 allowance
Medically necessary: 100% covered after material copay

Your cost for coverage

Employee only
Employee + spouse
Employee + child(ren)
Employee + family

Per paycheck

\$ 2.44
\$ 4.39
\$ 4.64
\$ 7.32

Your vision plan covers **either** glasses (lenses and frames) **or** contact lenses each year.
If you receive contact lenses, they will be instead of your glasses benefit.

Voluntary Life and AD&D insurance

Financial peace of mind through **MetLife**.

Life insurance pays your beneficiary if you pass away while you're covered. Accidental Death and Dismemberment (AD&D) insurance offers additional support if you pass away or are seriously injured due to an accident.

Voluntary Life and AD&D insurance

You may purchase additional coverage for you, your spouse, and your eligible child(ren).

	For you	For your spouse	For your child(ren) over 6 months old
Coverage increments	\$10,000	\$5,000	Flat amounts \$1k, \$2k, \$4k, \$5k, \$10k
Coverage maximum	5x your annual earnings to \$500,000	50% of employee coverage amount to \$100,000	\$10,000
Medical question limit	\$200,000	\$50,000	Does not apply

Designate a **beneficiary** to make sure your family is cared for as you intend.

[See plan summary](#)


What's AD&D?

Accidental death and dismemberment (AD&D) insurance may pay:

- **your beneficiary** if you pass away due to an accident
- **you** a partial benefit if you lose specified bodily functions (sight, limbs, etc.)

Medical question limit

When you're first eligible (a new hire), you can purchase additional life insurance **up to this limit** without any medical questions required.

Medical questions and approval will be required for all future increase and purchase requests.

Disability insurance

Protect your paycheck with disability insurance through MetLife.

Disability coverage insures your paycheck, replacing a portion of your income if you're unable to work due to a covered illness or injury.

Voluntary Short-term disability

[See plan summary](#)

Short-term disability coverage can replace part of your paycheck if you're unable to work for a shorter period of time.

Benefits begin **Accident:** After 14 days of inability to work
Illness: After 14 days of inability to work

Coverage amount 60% of your income up to \$1,500 per week

Payments may continue Up to 11 weeks if you're unable to return to work

Voluntary Long-term disability

[See plan summary](#)

Long-term disability coverage can provide lasting income protection if you remain unable to work.

Benefits begin After 90 days of inability to work (once short-term disability ends)

Coverage amount 60% of your income up to \$5,000 per month

Payments may continue Until your Social Security Normal Retirement Age if you remain unable to work*.

*See your benefit summary to learn more about the definition of unable to work.

Pre-existing condition limitations

If you make a disability claim within the **first year** of being covered, check your plan details to see how pre-existing condition limitations might impact your coverage.



Planning for the unexpected

Learn about preparing your finances for an illness, large expenses, or a loss of income.

[See details](#)

No-cost financial education

Customize your benefit package

These additional benefit plans, available for purchase, are selected to help you care for the unique needs of you and your family.

Accident coverage

[See plan summary](#)

Accident coverage through **MetLife** pays you a cash benefit to help with your expenses –your deductible or copays, transportation, groceries and more – if you or a covered family member is injured due to an accident. The money is yours to use as you choose.

Identity theft

[See plan summary](#)

Identity theft protection through **MetLife** helps monitor your credit and personal information online. You can buy coverage for yourself, your spouse and/or your child(ren).

The information shown in this presentation is an illustrative summary only. The underlying plan contract or document governs all aspects of the plan. Final rates are dependent on actual enrollment, insurance carrier or plan rules, plan selection, and eligibility criteria. Please refer to the plan document, contract, and other notices contained in this document, applications, and other corresponding communications for additional information.

Hospital indemnity

[See plan summary](#)

Hospital Indemnity coverage through **MetLife** pays you a cash benefit to help with your expenses – your deductible or copays, transportation, groceries and more – if you or a covered family member is admitted to the hospital. The money is yours to use as you choose.

Legal services

[See plan summary](#)

Pre-paid legal care through **MetLife** can provide you with legal advice and consultation about various topics at no added cost. Available topics include wills and estate planning, money and finances, driving or traffic matters and more.



Critical illness

[See plan summary](#)

Critical illness coverage through MetLife pays you a cash benefit to help with your expenses– your deductible or copays, transportation, groceries and more – if you or a covered family member is diagnosed with a covered critical illness. The money is yours to use as you choose.

Pet insurance

[See plan summary](#)

Protect your furry best friend with **MetLife** Pet Insurance. You'll get access to licensed veterinarians for routine care, emergencies, lab tests and wellness visits. Rates vary.



Atlantic Care — Services —

Benefits 1.1.2026 - 12.31.2026