

Health Reimbursement Arrangement

DEDUCTIBLE CLAIMS:

EMPLOYEE ONLY COVERAGE

Covered Expenses: After a \$1,500 medical deductible as listed on the medical summary is reached, the plan will reimburse \$750.

| CLAIMS | REIMBURSEMENT RATE |
|---------------------|--------------------|
| \$0.00 - \$1,499.99 | 0% |
| \$1,500.00 | \$750.00 |

EMPLOYEE+ COVERAGE (Employee + Spouse; Employee + Child(ren); Family)

Covered Expenses: After a \$3,000 medical deductible as listed on the medical summary is reached, the plan will reimburse \$1,500. If at the end of the plan year the \$3,000 medical deductible has not been met but one covered person the Employee+ plan did meet \$1,500 medical deductible individually, the plan will reimburse one person \$750.00.

| CLAIMS | REIMBURSEMENT RATE |
|---------------------|--------------------|
| \$0.00 - \$2,499.99 | 0% |
| \$3,000.00 | \$1,500.00 |

OUT OF POCKET CLAIMS

EMPLOYEE ONLY COVERAGE

Covered Expenses: After a \$6,350 medical Out of Pocket maximum as listed on the medical summary is reached, the plan will reimburse \$1,850 less deductible already paid.

| Claims | Less Deductible Paid | Reimbursement Rate |
|---------------------|-------------------------|--------------------|
| \$0.00 - \$6,349.99 | | 0% |
| \$6,350 | \$1,850.00 - \$750.00 = | \$1,100.00 |

EMPLOYEE+ COVERAGE (Employee + Spouse; Employee + Child(ren); Family)

Covered Expenses: After \$12,700 medical Out of Pocket maximum as listed on the medical summary is reached, the plan will reimburse up to \$3,700 less deductible already paid. If at the end of the plan year the \$12,700 medical Out of Pocket has not been met but one covered person the Employee+ plan did meet \$6,350 medical Out of Pocket individually, the plan will reimburse one covered person up to \$1,850 less deductible already paid.

| Claims | Less Deductible Paid | Reimbursement Rate |
|----------------------|---------------------------|--------------------|
| \$0.00 - \$12,699.99 | | 0% |
| \$12,700.00 | \$3,700.00 - \$1,500.00 = | \$2,200.00 |

TOTAL MAXIMUM PAYOUT BENEFIT AVAILABLE (Deductible and Out of Pocket Combined):

| | |
|------------------------|------------|
| Employee Only Coverage | \$1,850.00 |
| Employee+ Coverage | \$3,700.00 |

