



2025-2026

Employee Benefits Guide

AN OVERVIEW OF THE WIDE ARRAY OF BENEFITS
PROVIDED BY INTEGRITY EDUCATIONAL SERVICES TO
HELP YOU ENJOY INCREASED WELL-BEING AND
FINANCIAL SECURITY

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Welcome to your 2025 - 2026 Benefits!

Integrity Educational Services offers you and your eligible family members a comprehensive and valuable benefits program. You will be able to enroll in Medical, Dental, Vision, Life, Disability, Voluntary Life, and Flexible Spending. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

Who is Eligible?

Full-Time Employees

Medical Benefits: Team members hired as a Full-Time Employee for 30 hours or more per week and continue to work in a position that is regularly scheduled to work 30 or more hours per week.

Short and Long Term Disability: Team members hired as a Full-Time Employee for 35 hours or more per week and continue to work in a position that is regularly scheduled to work 35 hours or more per week.

All Other Benefits (except 401k Retirement Plan): Team members hired as a Full-Time Employee for 32 hours or more per week and continue to work in a position that is regularly scheduled to work 32 or more hours per week.

How to Make Changes?

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. Qualified changes in status include, for example: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence, commencement or termination of adoption proceedings, change in employment status or change in coverage under another employer-sponsored plan. You have 30 days to notify the Human Resources Coordinator (Benefits) of qualified changes and to provide documentation of the change.

Important Reminders!

Spousal Carve-Out: Integrity Educational Services implements a Spousal Carve-Out for its Medical Insurance Coverage. If your spouse is working Full-Time and is offered insurance coverage through their employer, they must accept or remain on that employer's coverage.

Legal Dependents: You may only enroll Legal Dependents under your insurance coverage. Legal Dependents include - Spouse (except when excluded by the Spousal Carve-Out), Child, Stepchild, or a Child of whom you have Legal Guardianship. Any employee found to have enrolled a person(s) who is not a legal dependent may face termination and potential legal action for Insurance Fraud from the insurance carrier(s).

✓ You may be asked to provide legal documentation.

Benefits for 2025 - 2026

Benefit Overview

Integrity Educational Services provides a complete package of benefits aimed at providing flexible insurance protection and programs to meet your ever-changing needs. Integrity Educational Services shares the cost of some benefits with you, while making additional benefits available that you pay for if you choose to enroll. The part of the benefit costs that you are responsible for will be automatically deducted from your paycheck, either before or after your taxes are calculated.

The table below summarizes the benefits available to eligible staff and their dependents. These benefits are described in greater detail in this booklet.

BENEFITS AT-A-GLANCE

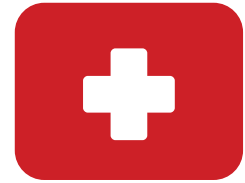
Benefit	Carrier	Pre-tax or Post-tax?	Who pays the cost?
Medical/Rx	Priority Health	Pre-Tax	IES & You
Virtual Visits	MI Partner Health	Not Applicable	IES
Dental	Delta Dental	Pre-Tax	IES & You
Voluntary Vision	EyeMed	Pre-Tax	You
Basic Life/AD&D	Mutual of Omaha	Not Applicable	IES
Long Term Disability	Mutual of Omaha	Not Applicable	IES
Short Term Disability	Mutual of Omaha	Not Applicable	IES
Voluntary Life/AD&D	Mutual of Omaha	Post-Tax	You

WHY DO I PAY FOR SOME BENEFITS WITH PRE-TAX MONEY?

While not all benefits qualify for pre-tax contribution, there is a definite advantage to paying for those that do: Taking the money out before your taxes are calculated lower the amount of your taxable income. Therefore, you pay less in taxes.

Benefits for 2025 - 2026

Medical/ Rx



Summary of Coverage



Full-Time Employees working 30+ Hours/Week

Plan Features	Priority Health – HMO HSA
IN NETWORK	
Deductibles (Indiv / Family)	\$3000 / \$6000
Preventive Care	100% Covered
Out-of-Pocket Max (Indiv / Family)	\$6000 / \$12000
Primary Care Visit	30% Coinsurance After Deductible
Specialist Visit	30% Coinsurance After Deductible
Telemedicine	30% Coinsurance After Deductible
Diagnostic Exam	30% Coinsurance After Deductible
X-Rays	30% Coinsurance After Deductible
Complex Images	30% Coinsurance After Deductible
Outpatient Procedure	30% Coinsurance After Deductible
Inpatient Visit	30% Coinsurance After Deductible
Emergency Room	30% Coinsurance After Deductible
Urgent Care	30% Coinsurance After Deductible
PHARMACY	
Generic	\$15 After Deductible
Preferred brand	\$50 After Deductible
Non-Preferred Brand	\$80 After Deductible
Preferred Specialty	80% After Deductible (Max \$150)
Non-Preferred Specialty	80% After Deductible (Max \$300)

Per Pay Period	
Employee	\$26.57
Employee + 1	\$63.77
Family	\$79.71

Benefits for 2025 - 2026

Health Savings Account (HSA)

FOR 2025 – 2026 - INTEGRITY EDUCATIONAL SERVICES IS OFFERING A HEALTH SAVINGS ACCOUNT (HSA). THIS IS HOW AN HSA WORKS:



A health savings account (HSA) is a health care account and savings account in one. The main purpose of this account is to offset the cost of a qualifying high deductible health plan (HDHP) and provide savings for your out-of-pocket eligible health care expenses – those you and your tax dependents may have now, in the future, and during your retirement.



This is a “portable” account. You own your HSA! It’s included in your employee benefits package, but after you set up your account, it’s yours to keep, even if you change jobs or retire.



Once your HSA is established, money is contributed to your account by you, Integrity Educational Services or friends and family, and you can then use your HSA dollars tax-free to pay for eligible health care expenses. You save money on expenses you’re already paying for, like doctors’ office visits, prescription drugs, and much more. Best of all, you decide how and when to use your HSA dollars.

WHY IS IT A GOOD IDEA TO HAVE AN HSA?

HSAs benefit everyone who is eligible to have this account – single individuals, families, and soon-to-be retirees. You save money on taxes in three ways:

› Tax-free deposits –

› The money you contribute to your HSA isn’t taxed (up to the IRS annual limit)

› Tax-free earnings –

› Your interest and any investment earnings grow tax-free.

› Tax-free withdrawals –

The money used toward eligible health care expenses isn’t taxed – now or in the future.

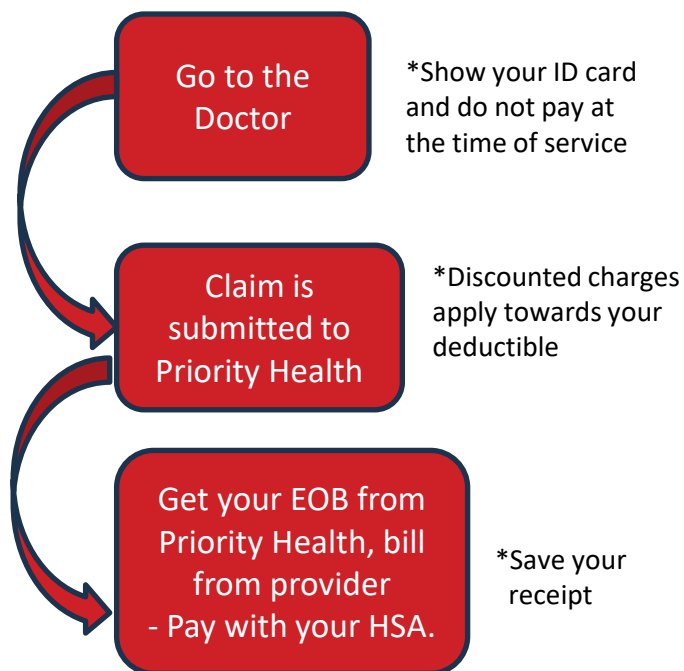
› Setting aside pre-tax dollars into your HSA means you pay fewer taxes and increase your take-home pay by your tax savings. You save money on eligible expenses that you are paying for out of your pocket. The amount you save depends on your tax bracket. For example, if you are in the 30 percent tax bracket, you can save \$30 on every \$100 spent on eligible health care expenses.

2025 IRS Contribution Limits: Individual \$4,300/Family \$8,550
Age 55+ additional \$1,000 Catch-Up Contribution

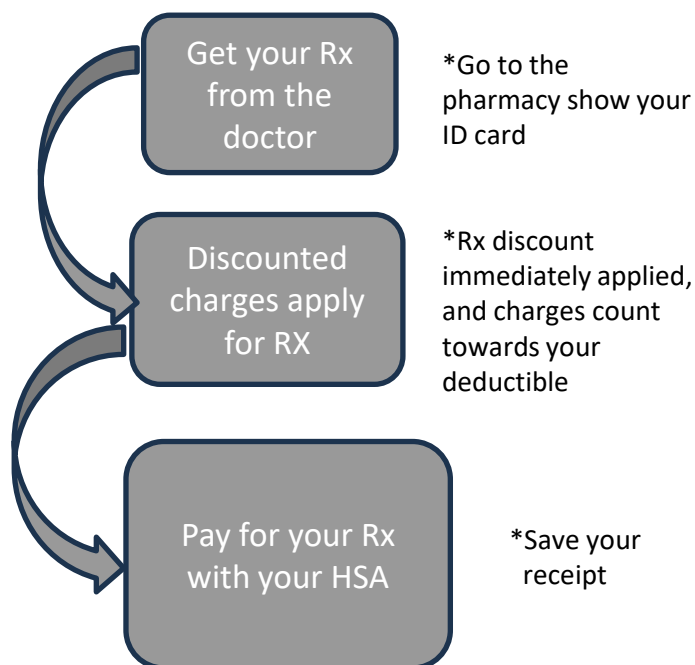
HSA funds roll over from year to year and accumulate in your account. There is no “use-it-or-lose-it” rule with HSAs, and you decide how and when to use your HSA funds, which can be used for eligible expenses you have now, in the future, or during retirement. And when you have a certain balance in your HSA, investment opportunities are available.

Refer to your HSA documentation for more information.

At the Doctor?



At the Pharmacy?



HSA ELIGIBLE CHARGES

- Alcohol/Drug Rehab
- Ambulance
- Chiropractor
- Copays
- Dental Care
- Medical Equipment
- Eye Care/Lasik Surgery
- Hearing Aids/Batteries
- Home Health Care and Nurses' Fees
- Diabetic Supplies
- Laboratory fees
- Obstetrical expense
- Over The Counter (non-prescription)
- Pediatrician
- Pregnancy Tests
- Podiatrist
- Prescription drugs
- Psychiatrist
- Smoking Cessation
- Surgery
- Weight Loss Program (if prescribed)
- X-ray

HSA INELIGIBLE CHARGES

- Childbirth Classes
- Childcare Classes
- Cosmetic Surgery
- Cosmetics
- Dancing Lessons
- Swimming Lessons
- Reimbursed Expenses
- Food
- Gym Membership
- Herbal Supplements
- Insurance Premiums
- Swimming Pools
- Hot Tubs
- Exercise Equipment
- Toothpaste
- Vitamins (non-prescription)
- Weight Loss Programs (non-prescription)

*These are not an all-inclusive list.

Integrity Educational Services

HSA Contribution

To help each team member participating in the IES medical plan, IES will assist by making contributions to the Health Savings Account (HSA).

Contributions will be made each pay date. The 2025 – 2026 IES HSA contribution will be \$41.67/single or \$83.33/family.

IES Contributions will be made to a Fidelity Account depending upon your election.

If you are participating in the medical plan, then you will be eligible for the IES HSA Contribution. The IES contribution will be prorated for enrollments after the plan year begins.

If a team member has a significant medical expense early in the plan year, the team member may request an earlier contribution to the HSA account. The team member will be required to document the significant medical expense.

Team members are also able to contribute to their HSA accounts to the maximum annual contributions; \$4,300 for a single and \$8,550 for a family.

Remember that your HSA account rolls over each year.

If you are currently covered by Medicare and elect to participate in the IES medical plan, please contact the HR department to discuss your IES HSA Contribution.

Benefits for 2025 - 2026

Key Terms to Remember



ANNUAL DEDUCTIBLE

The amount you have to pay each year before the plan starts paying a portion of medical expenses. All family members' expenses that count toward a health plan deductible accumulate together in the aggregate; however, each person also has a limit on their own individual accumulated expenses (the amount varies by plan).



OUT-OF-POCKET MAXIMUM

This is the total amount you can pay out of pocket each calendar year before the plan pays 100 percent of covered expenses for the rest of the calendar year. Most expenses that meet provider network requirements count toward the annual out-of-pocket maximum, including expenses paid to the annual deductible*, copays and coinsurance.

*Except for Grandfathered medical plans



COPAYS AND COINSURANCE

These expenses are your share of cost paid for covered health care services. Copays are a fixed dollar amount, and are usually due at the time you receive care. Coinsurance is your share of the allowed amount charged for a service, and is generally billed to you after the health insurance company reconciles the bill with the provider.



PLAN TYPES

- › HMO – A network that requires you to select a Primary Care Physician (PCP) who coordinates your health care
- › HDHP – A plan that has higher annual deductibles in exchange for lower premiums.

Wellness & Health Management

The Value of Preventive Care

Understanding the full value of covered benefits allows you to take responsibility for maintaining good health and incorporating healthy habits into your lifestyle. Some examples include getting regular physical examinations, mammograms and immunizations.

Through the plans offered by Integrity Educational Services, all covered individuals and family members are eligible to receive routine wellness services like these, at no cost; all copays, coinsurance, and deductibles are waived.

Which Preventive Care Services Are Covered?

Below is a list of common services:

- Routine Physical Exam
- Well Baby and Child Care
- Well Woman Visits
- Immunizations
- Routine Bone Density Test
- Routine Breast Exam
- Routine Gynecological Exam
- Screening for Gestational Diabetes
- Obesity Screening and Counseling
- Routine Digital Rectal Exam
- Routine Colonoscopy
- Routine Colorectal Cancer Screening
- Routine Prostate Test
- Routine Lab Procedures
- Routine Mammograms
- Routine Pap Smear
- Smoking Cessation Programs



Know where to go

If you're faced with a sudden illness or injury, making an informed choice on where to seek medical care is crucial to your personal and financial well-being.

Making the wrong choice can result in delayed medical attention and may cost hundreds, if not thousands, of dollars. More than 10% of all emergency room visits could have been better addressed in either an urgent care facility or a doctor's office.

Remember: Unless it is a true emergency – a serious or life-threatening condition that requires immediate treatment that is only available in a hospital – consider your options for appropriate, quality care that is efficient and economical.

DON'T PAY MORE IF YOU DON'T HAVE TO:

MI Partner Health Virtual Clinic where services may be provided at no cost compared to urgent or emergency care as they are subject to primary care office visit copays and/or coinsurance.

MI Partner Health Virtual Clinic is suitable for every day and preventative healthcare. Examples include common infections (ear, bladder, pink eye, strep throat), minor skin conditions, allergies, and more. Details of this program are on page 13.



Emergency Room

The emergency room (ER) is equipped to handle life-threatening injuries and illnesses and other serious medical conditions.

Patients are seen according to the seriousness of their conditions in relation to the other patients.

You should go to the nearest ER if you experience any of the following:

- Compound fractures
- Deep knife or gunshot wound
- Moderate to severe burns Poisoning or suspected poisoning
- Seizures or loss of consciousness
- Serious head, neck or back issues
- Severe abdominal pain
- Severe chest pain or difficulty breathing
- Sign of a heart attack or stroke
- Suicidal or homicidal feelings
- Uncontrollable bleeding



Urgent Care

Urgent care centers are not equipped to handle life-threatening injuries, illnesses or medical conditions. These centers are designed to address conditions where delaying treatment could cause serious problems or discomfort.

Some examples of conditions that require a visit to an urgent care center include:

- Controlled bleeding or cuts that require stitches
- Diagnostic services (x-rays, lab tests)
- Ear infection
- High fever or the flu
- Minor or broken bones (e.g., toes, fingers)
- Severe sore throat or cough
- Sprains or strains
- Skin rashes and infections
- Urinary tract infections
- Vomiting, diarrhea or dehydration

DO YOU NEED MEDICAL CARE?

Contact IES Virtual Care Clinic

Care provided by



We take care of all primary care needs for all ages

- Routine health exams and sports physicals
- Lab tests
- Cough, sore throat, fever, ear pain, sinus pain
- Weight loss and nutrition
- Chronic diseases such as high blood pressure, diabetes, arthritis, asthma, COPD
- Minor bumps, cuts, and bruises
- Sprains and strains
- Concussion
- Minor burns



- Nausea, vomiting, diarrhea
- Rashes and moles
- Eye swelling and pain
- Urinary symptoms
- Allergic reactions
- Headaches
- Smoking cessation
- Referral to specialists
- Pre-surgery clearance
- Biometric screening
- And MORE



Contact 911/ER if you experience a life-threatening issue, such as...

- | | | | |
|--|---|-------------------------|----------------------|
| • Severe shortness of breath or chest pain | • Stroke symptoms (facial drooping, limb weakness, speech difficulty) | • Severe cuts or burns | • Major limb injury |
| • Seizure (first time) | | • Uncontrolled bleeding | • Severe head injury |
| | | | • Overdose |

616-441-3563

Call or text the Virtual Clinic to schedule an appointment:

Monday - Friday 7:00am - 7:00pm

For urgent needs outside of clinic hours,
call or text the clinic.



Scan and visit the
IES Virtual Care Clinic website
to learn more or to schedule an appointment online.
<https://sites.google.com/mipartnerhealth.com/ies-virtual-clinic/home>

STRETCHING YOUR HEALTHCARE DOLLARS

As healthcare costs continue to rise, it is increasingly important that you take an active role in decisions about your health, the care you receive and your benefits. Here are some tips to help get you the most for your money.

Choose a Primary Care Physician

Selecting a primary care physician is one of the best things you can do for your health. This person knows your health history and schedules routine screening tests that frequently help prevent and detect diseases, such as heart disease, cancer, and diabetes. Your PCP can provide necessary medical advice and identify health concerns before they become a major issue.

Stay In-Network

In-network providers have a contract with the health insurance company to provide services at reduced rates. In most cases, if you visit a physician or other provider within the network, the amount you will be responsible for paying will be less than if you go to an out-of-network provider. **Out-of-network coverage is only available for emergency services.**

Don't Skip Preventive Care

Be sure your child gets routine checkups and vaccines as needed, both of which can prevent medical problems (and bills) down the road. Also, adults should get the preventive screenings recommended for their age in order to detect health conditions early.

Price Compare Prescriptions

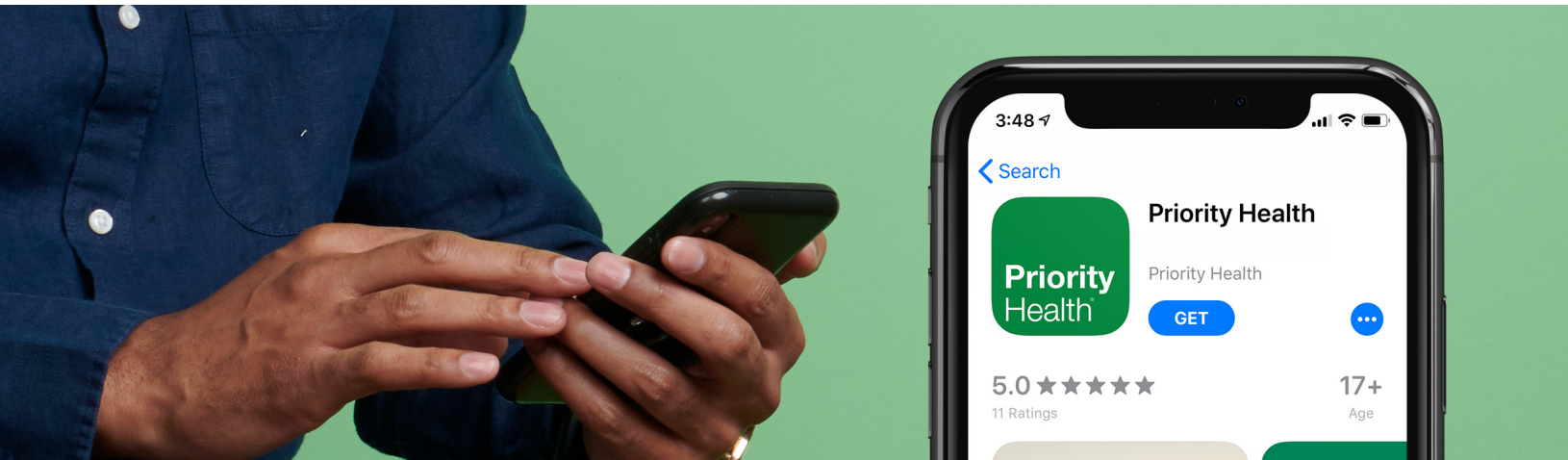
Ask your provider for the generic version of a prescription. If you order your maintenance medications in bulk (90-day supply) through mail order, search for the least expensive pharmacy option near you, or check to ensure prescribed medications are on the plan's formulary list.

Live a Healthy Lifestyle

Focus on eating nutritiously, cutting down on fast food and getting more physical exercise. Take advantage of tobacco cessation programs. Take a walk at lunch to manage stress. Striving toward a healthier lifestyle and maintaining a healthy weight can drastically reduce future medical conditions and diseases.

Use the Plan's Tools & Resources

Many health plans provide access to free disease management programs for chronic conditions like asthma, diabetes and heart disease. These programs can help you stay healthy and manage your condition and can possibly save you money in the long run. Look for other available resources or programs that are designed to prevent illness and lower health costs over the long run.



The smart choice, now on your smartphone

Managing your health insurance is easier than ever with the new Priority Health app.

In your member account, you can quickly and easily:



Track spending balances to keep your budget in check



Search your claims and see a detailed breakdown of care and prescription costs



Compare costs of medical procedures and prescriptions based on your plan so you can save money



Find in-network doctors, specialists, labs and more



Set up a video visit and get virtual care when and where you need it



Download the Priority Health app from the App Store or Google Play or sign up at member.priorityhealth.com to view your personalized health insurance information anytime, anywhere.



Getting started is easy:

1. Download the Priority Health app from the App Store or Google Play, or visit member.priorityhealth.com.
2. Click **Sign up** and follow the instructions.*

Questions about your member account?

If you need technical support or help accessing your account, email us at techsupport@priorityhealth.com or call 833.207.3210. For all other questions about your plan, call the number on the back of your member ID card to speak with a member of our Customer Service team.

**You may be asked security questions to verify your identity.*



Already have a MyHealth account?

You can use your existing MyHealth username and password to log in to the Priority Health app.

Continue using your MyHealth account to access your Spectrum Health providers, appointments and other patient information.

Priority Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia en su idioma. Consulte al número de Servicio al Cliente que está en la parte de atrás de su tarjeta de identificación de miembro. (TTY: 711).

ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. يرجى الاتصال برقم خدمة العملاء على الجانب الخلفي من بطاقة عضويتك الشخصية. (رقم هاتف الصم والبكم: 711).

BenefitHub

A free, online discount marketplace

As a Priority Health member, you can enjoy discounts, rewards, and other perks on thousands of the brands you love with BenefitHub, a free, easy-to-use benefits portal with a full range of discounts and rewards. From apparel to local restaurants and entertainment, you can save big when shopping online. With exclusive offers, cash back and discounted gift cards in your local area, it's easy to start saving.

Why use BenefitHub?

- It's a **no-cost benefit** for you as a Priority Health member*
- The online marketplace is **tailored to where you live**.
Enjoy more, see more, and save more in your local area.
You'll find deals on restaurants, shopping, entertainment and more.
- Traveling? See more great **deals on-the-go** such as car rentals and entertainment.

It's easy to sign up and save

- 1 Go **here** or log in to your member portal at member.priorityhealth.com.
- 2 Enter referral code: **745AKW**
- 3 Complete registration



Enjoy discounts, rewards, and other perks on the brands you love in a variety of categories:

- ✓ Travel
- ✓ Auto
- ✓ Electronics
- ✓ Apparel
- ✓ Local deals
- ✓ Education
- ✓ Entertainment
- ✓ Restaurants
- ✓ Health and wellness
- ✓ Beauty and spa
- ✓ Tickets
- ✓ Sports and outdoors

**Available to members with Commercial, MyPriority and Medicaid health plans.*

Priority Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia en su idioma. Consulte al número de Servicio al Cliente que está en la parte de atrás de su tarjeta de identificación de miembro. (TTY: 711).

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Find doctors in your network

Find a provider in Michigan or nationwide that fits your needs, plan, and budget.

How to find a Michigan-based provider:

- 1 Log in to or sign up for your Priority Health member account at **member.priorityhealth.com** or the Priority Health app. We recommend having a Priority Health member account for the most accurate results.
- 2 Click the **Find care** tab and select **Find a doctor or specialist** from the drop-down menu.

Your search results are based on your specific plan type, so you'll see providers in your network. You can change your location within Michigan and narrow your search to see what is most convenient for you by specialty, labs, urgent care centers, pharmacies, and more.



Don't have a member portal account yet?

You can search for Michigan-based providers at **priorityhealth.com/findadoctor** and browse by the plan type that best suits you, but we recommend checking if they're included in your plan through your member portal account. You can sign up for an account at **member.priorityhealth.com**.

How to find a provider outside of Michigan:

If you have a POS or PPO plan, you can search for participating providers and receive care nationwide through the Cigna Open Access Plus network*. Go to Cigna's directory at **priorityhealth.com/cignadirectory**, where you can search for providers by specialty, provider's name, and healthcare facility.

Benefits for 2025 - 2026

Dental Coverage



Summary of Coverage

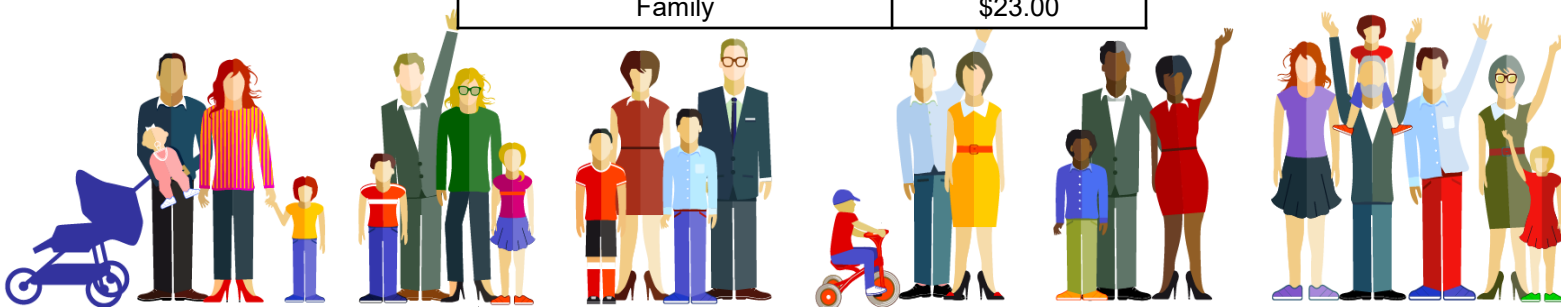
Full-Time Employees working 32+ Hours/Week



Note: You may not elect Stand-Alone Dental Coverage; Employees must be enrolled in Medical to Enroll in the Dental; however, if your spouse is excluded from the Medical Plan, the Spouse IS STILL ELIGIBLE to be enrolled in the Dental Plan. You can; however, enroll in the Medical without also enrolling in the Dental.

	Delta Dental - Integrity Educational Services
IN NETWORK	
Annual Deductible (Individual / Family)	\$25 / \$75
Preventive Care	100% Oral Exams, Cleanings, Topical Fluoride Treatments, Space Maintenance, Bitewing X-Rays, Sealants
Basic Procedures (Extractions, fillings, etc.)	75% Emergency Treatment, Full Mouth/Panoramic X-Rays, Fillings, Simple Extractions, Endodontics, Periodontics, Oral Surgery
Major Procedures (Crowns, dentures, etc.)	50% Crowns, Bridges, Implants and Dentures
Child Orthodontia	\$1,200 for children up to Age 19, 50% coverage
Calendar Year Maximum Benefit	\$1,200
OUT OF NETWORK	
Annual Deductible (Individual / Family)	\$25 / \$75
Preventive Care	100% Oral Exams, Cleanings, Topical Fluoride Treatments, Space Maintenance, Bitewing X-Rays, Sealants
Basic Procedures (Extractions, fillings, etc.)	75% Emergency Treatment, Full Mouth/Panoramic X-Rays, Fillings, Simple Extractions, Endodontics, Periodontics, Oral Surgery
Major Procedures (Crowns, dentures, etc.)	50% Crowns, Bridges, Implants and Dentures
Child Orthodontia	\$1,200 for children up to Age 19, 50% coverage
Calendar Year Maximum Benefit	\$1,200

Per Pay Period	
Employee	\$8.45
Employee + Spouse	\$14.00
Employee + Children	\$16.60
Family	\$23.00



Delta Dental of Michigan

Dental Benefit Highlights for Integrity Educational Services #1673



Delta Dental PPOSM (Point-of-Service)
Coverage effective September 1, 2012

	Delta Dental PPO Dentist	Delta Dental Premier [®] Dentist	Non- participating Dentist
	Plan Pays	Plan Pays	Plan Pays*
Diagnostic & Preventive			
Diagnostic and Preventive Services – includes exams, cleanings, fluoride, and space maintainers	100%	100%	100%
Emergency Palliative Treatment – to temporarily relieve pain	100%	100%	100%
Sealants – to prevent decay of permanent teeth	100%	100%	100%
Brush Biopsy – to detect oral cancer	100%	100%	100%
Radiographs – X-rays	100%	100%	100%
Basic Services			
Minor Restorative Services – fillings and crown repair	75%	75%	75%
Endodontic Services – root canals	75%	75%	75%
Periodontic Services – to treat gum disease	75%	75%	75%
Oral Surgery Services – extractions and dental surgery	75%	75%	75%
Other Basic Services – misc. services	75%	75%	75%
Relines and Repairs – to bridges and dentures	75%	75%	75%
Major Services			
Major Restorative Services – crowns	50%	50%	50%
Prosthodontic Services – includes bridges, implants, and dentures	50%	50%	50%
Orthodontic Services			
Orthodontic Services – includes braces	50%	50%	50%
Orthodontic Age Limit –	19	19	19

* When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. This Nonparticipating Dentist Fee may be less than what your dentist charges, which means that you will be responsible for the difference.

Maximum Payment – \$1,200 per person total per calendar year on Diagnostic & Preventive, Basic Services, and Major Services. \$1,200 per person total per lifetime on Orthodontics.

Deductible – \$25 deductible per person total per calendar year limited to a maximum deductible of \$75 per family per calendar year. The deductible does not apply to Diagnostic & Preventive and Orthodontics.

Note - This document is intended as a supplement to your Certificate and Summary of Benefits. Please refer to your certificate and summary for policy exclusions and limitations.

Welcome to Michigan's largest dental benefits family!

As a member of Delta Dental of Michigan, you have access to the nation's largest dental networks: Delta Dental PPO and Delta Dental Premier.

- Nationwide, 3 out of 4 dentists participate
- Great access to care as well as reduced fees through our agreements with dentists
- You cannot be balance billed - giving you added savings
- Network dentists will complete and file your claim - no paperwork for you
- You only have to pay your copayments and/or deductibles when you receive dental services from a PPO or Premier Dentist
- You don't have to wait for your claim to be paid to be reimbursed!

While you can visit nonparticipating dentists, you can be billed the full amount immediately and then wait to be reimbursed.

Quality Dental Program

Delta Dental provides quick and accurate claims processing. *We pay more than 90 percent of claims in 10 days or less.* Delta Dental also offers world-class customer service from our award winning call center.

Online Access

Our online Consumer Toolkit lets you access your dental plan securely over the Internet. You can find a dentist, check benefits, select paperless EOBs, review claims and amounts used toward maximums, print ID cards, and more at your convenience.

A Healthy Smile

Keep your smile healthy with dental benefits from Delta Dental. Your smile is a good indicator of your health. Did you know that your dentist can detect up to 120 different diseases, including diabetes and heart disease? Early detection is one of the best ways to prevent further complications.

Questions?

If you have questions, call our Customer Service team at (800) 524-0149 or look online at www.DeltaDentalMI.com.

Benefits for 2025 - 2026

Vision Coverage



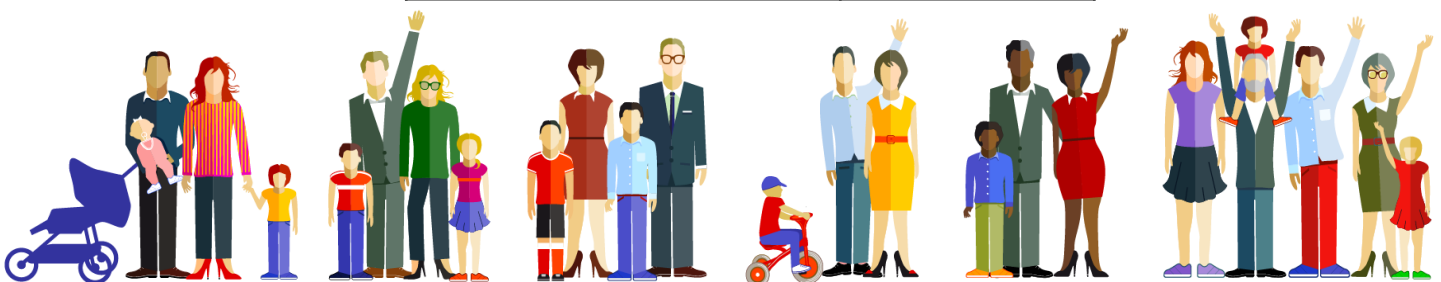
Summary of Coverage



Full-Time Employees working 32+ Hours/Week

	EyeMed Vision - Integrity Educational Services	
Plan Features	In-Network	Out-of-Network
Vision Exam	\$10	\$35 Allowance
Lenses		
Single	\$25	\$25 Allowance
Bifocal	\$25	\$40 Allowance
Trifocal	\$25	\$50 Allowance
Progressive	\$90 Allowance	\$40 Allowance
Frames	\$120 Allowance	\$50 Allowance
Elective Contact Lenses	\$120 Allowance	\$100 Allowance
Medically Necessary Contact Lenses	\$210 Allowance	\$210 Allowance
Frequency (Months)		
Exam	12	
Lenses	12	
Frames	12	
Contacts	12	

Per Pay Period	
Employee	\$3.39
Employee + 1	\$6.44
Family	\$9.45





Integrity Educational Services

Additional discounts

40% OFF

Complete pair of prescription eyeglasses

20% OFF

Non-prescription sunglasses

20% OFF

Remaining balance beyond plan coverage

These discounts are not insured benefits and are for in-network providers only.

Take a sneak peek before enrolling

- You're on the **Insight** Network

• For a complete list of in-network providers near you, use our Enhanced Provider Locator on eyemed.com or call 1-866-804-0982

- For LASIK providers, call 1-877-5LASER6

SUMMARY OF BENEFITS

Vision Care Services	In-Network Member Cost	Out of Network Reimbursement
Exam With Dilation as Necessary	\$10 Copay	Up to \$40
Retinal Imaging	Up to \$39	N/A
Frames	\$0 Copay; \$120 allowance, 20% off balance over \$120	Up to \$84
Standard Plastic Lenses		
Single Vision	\$25 Copay	Up to \$30
Bifocal	\$25 Copay	Up to \$50
Trifocal	\$25 Copay	Up to \$70
Lenticular	\$25 Copay	Up to \$70
Standard Progressive Lens	\$90 Copay	Up to \$50
Premium Progressive Lens ^A	\$110 Copay - \$135 Copay	Up to \$50
Tier 1	\$110 Copay	Up to \$50
Tier 2	\$120 Copay	Up to \$50
Tier 3	\$135 Copay	Up to \$50
Tier 4	\$90 Copay, 20% off charge less \$120 Allowance	Up to \$50
Lens Options (paid by the member and added to the base price of the lens)		
UV Treatment	\$15	N/A
Tint (Solid and Gradient)	\$15	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate - age 19 and over	\$40	N/A
Standard Polycarbonate - under age 19	\$40	N/A
Standard Anti-Reflective Coating	\$45	N/A
Premium Anti-Reflective Coating ^A	\$57 - \$68	N/A
Tier 1	\$57	N/A
Tier 2	\$68	N/A
Tier 3	20% off Retail Price	N/A
Photochromic/Transitions	\$75	N/A
Polarized	20% off retail price	N/A
Other Add-Ons and Services	20% off retail price	N/A
Contact Lens Fit and Follow-up (Contact lens fit and two follow-up visits are available once a comprehensive eye exam has been completed.)		
Standard Contact Lens Fit & Follow-Up:	\$40	N/A
Premium Contact Lens Fit & Follow-Up:	10% off retail price	N/A
Contact Lenses (Contact Lens allowance includes materials only)		
Conventional	\$0 copay, \$120 allowance, 15% off balance over \$120	Up to \$120
Disposable	\$0 copay, \$120 allowance, plus balance over \$120	Up to \$120
Medically Necessary	\$0 copay, Paid-In-Full	Up to \$210
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Hearing Care		
Hearing Health Care from Amplifon Hearing Network	40% off hearing exams and low price guarantee on discounted hearing aids	
Frequency		
Examination	Once every 12 months	
Lenses or Contact Lenses	Once every 12 months	
Frame	Once every 12 months	

QL-0000031737

^A Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits are not provided from services or materials arising from: 1) Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; 2) Medical and/or surgical treatment of the eye, eyes or supporting structures; 3) Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear; 4) Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; 5) Plano (non-prescription) lenses; 6) Non-prescription sunglasses; 7) Two pair of glasses in lieu of bifocals; 8) Services or materials provided by any other group benefit plan providing vision care 9) Services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order. 10) Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/Premium Progressive lens not covered-fund as a Bifocal lens. Standard Progressive lens covered-fund Premium Progressive as a Standard. Benefit allowance provides no remaining balance for future use within the same benefit year. Fees charged for a non-insured benefit must be paid in full to the Provider. Such fees or materials are not covered.

Underwritten by Fidelity Security Life Insurance Company of Kansas City, Missouri, except in New York. Fidelity Security Life Policy number VC-19/VC-20, form number M-9083. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Get more and see more with EyeMed



72%
AVERAGE
SAVINGS



CHOOSE A DOC

EyeMed members choose from the right mix of thousands of providers—independent eye doctors, your favorite retail stores and everything in between. Find your ideal fit at eyemed.com or the EyeMed Members App.



CREATE AN ACCOUNT

Get special offers with an account on eyemed.com. Enter your email, choose a password and sign up for emailed savings. Log in 24/7 to view your benefit details or health and wellness information.



MOBILIZE YOUR BENEFITS

The EyeMed Members App makes your benefits easy to understand—and even easier to use. Find an eye doctor near you, schedule an appointment and manage your vision benefits.

on eye exams and glasses for EyeMed members*

Learn more about enrolling in EyeMed vision benefits at enroll.eyemed.com and see more of the good stuff

*Based on a sample transaction on the Insight network with a covered exam and eyewear benefits



INDEPENDENT
PROVIDER
NETWORK



LENSCRAFTERS[®]


PEARLE
VISION[®]

 OPTICAL[®]



JCPenney | optical

Benefits for 2025 - 2026

Life Insurance



Summary of Coverage



Full-Time Employees working 32+ Hours/Week

Integrity Educational Services provides full-time status team members with Basic Life/AD&D Insurance and pays the full cost of this benefit. Eligible team members are offered the option to purchase additional Voluntary Life/AD&D Insurance. Evidence of Insurability may be required.

Basic Life/AD&D

Plan Features	Basic Life/AD&D
Employee Benefit Amount	1 Times Annual Salary rounded to the next higher \$1,000
Maximum Benefit Amount	\$50,000
AD&D Benefit	1 Times Annual Salary rounded to the next higher \$1,000
The following shows how much benefits are reduced at certain ages:	
Age Band	Benefit Reduction
65	65%
70	40%
75	25%

Voluntary Life/AD&D

Plan Features	Voluntary Life/AD&D
Employee Benefit Amount	Employees can choose different amounts of coverage between the minimum and maximum benefit amount. See plan documentation for more details.
Minimum Benefit Amount	\$10,000
Maximum Benefit Amount	5X Annual Salary, up to \$500,000
AD&D Benefit	Equal to Voluntary Life Amount
Spouse Benefit	100% of Employee's Benefit, up to \$250,000
Dependent Benefit	\$2,000 - \$10,000 Increments of \$2,000
The following shows how much benefits are reduced at certain ages:	
Age Band	Benefit Reduction
65	65%
70+	50%

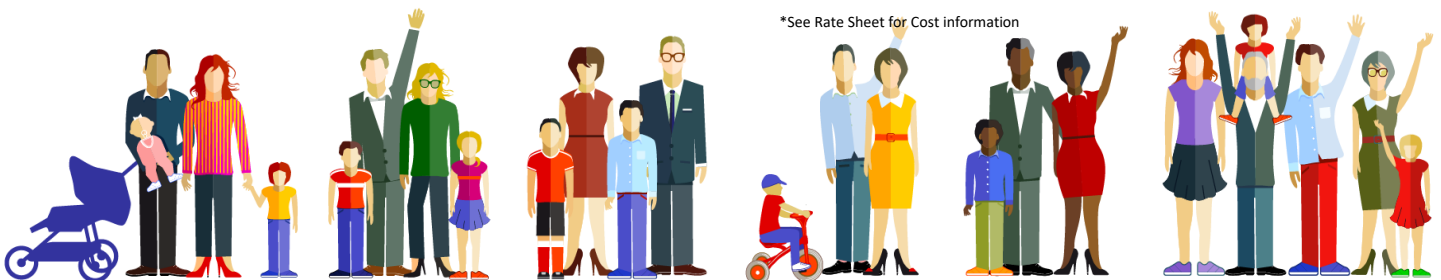
Team Member Cost - \$0.00

Employer Paid Benefit

Paid by Team Member

Employee Paid Benefit

*See Rate Sheet for Cost information



> Term Life Insurance



Help Protect What Matters – You, Your Family & Your Future

We understand you've worked hard to get where you are today. Ensuring your loved ones can maintain financial stability if an unexpected death should occur is something to consider when planning for the future.

We've Got You Covered

As an active employee of Integrity Educational Services, you have access to a life insurance policy from United of Omaha Life Insurance Company.

It replaces the income you would have provided, and helps pay funeral costs, manage debt and cover ongoing expenses.

How much insurance is enough?

When determining how much life insurance you need, think about the expenses you may encounter now and through every stage of your life.

Coverage guidelines and benefits are outlined in the chart below.



ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

Eligibility Requirement	You must be actively working a minimum of 32 hours per week to be eligible for coverage.
Premium Payment	The premiums for this insurance are paid in full by the policyholder. There is no cost to you for this insurance.

BENEFITS

Life Insurance Benefit Amount	For You: An amount equal to 1 times your annual salary, but in no event less than \$0 or more than \$50,000
	In the event of death, the benefit paid will be equal to the benefit amount after any age reductions less any living care/accelerated death benefits previously paid under this plan.
Accidental Death & Dismemberment (AD&D) Benefit Amount	For You: The Principal Sum amount is equal to the amount of your life insurance benefit.

FEATURES

Living Care/ Accelerated Death Benefit	75% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$37,500.
Waiver of Premium	If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions.
Additional AD&D Benefits	In addition to basic AD&D benefits, you are protected by the following benefits: - Seat Belt - Airbag - Common Carrier
Conversion	If your employment ends, you may apply for an individual life insurance policy from Mutual of Omaha without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.

SERVICES

Travel Assistance	The Travel Assistance program is an added benefit that provides assistance for your travels over 100 miles away from home or outside the country.
Hearing Discount Program	The Hearing Discount Program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit www.amplifonusa.com/mutualofomaha to learn more.
Will Prep Services	We work with Epoq, Inc. to offer employees online will prep tools. In just a few clicks you can complete a basic will or other documents to protect your family and property. To get started visit www.willprepservices.com .

AGE REDUCTIONS AND EXCLUSIONS

Insurance benefits and guarantee issue amounts are subject to age reductions:

- At age 65, amounts reduce to 65%
- At age 70, amounts reduce to 40%
- At age 75, amounts reduce to 25%

Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

Please contact your employer if you have questions prior to enrolling.

>Frequently Asked Questions

Who is eligible for this insurance?

You must be actively working (performing all normal duties of your job) at least 32 hours per week.

What is Guarantee Issue?

The amount of insurance applied for without answering any health questions (or which does not require evidence of insurability). Coverage amounts over the Guarantee Issue Amount will require evidence of insurability.

What is Evidence of Insurability?

Evidence of Insurability or proof of good health – may be required if you are a late entrant and/or you request any additional coverage above your guarantee issue amount.

Can I take this insurance with me if I change jobs/am no longer a member of this group?

In the event this insurance ends due to a change in your employment/membership status with the group, or for certain other reasons, you may have the right to continue this insurance under the Conversion provision, subject to certain conditions.

Are there any limitations, reductions or exclusions?

The benefits payable are based on the following:

- Insurance benefits and guarantee issue amounts are subject to age reductions:
 - At age 65, amounts reduce to 65%
 - At age 70, amounts reduce to 40%
 - At age 75, amounts reduce to 25%
- Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

All exclusions may not be applicable, or may be adjusted, as required by state regulations.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this outline, the certificate booklet will prevail. Life insurance and accidental death & dismemberment insurance are underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175. Policy form number 7000GM-U-EZ 2010 or state equivalent (in NC: 7000GM-U-EZ 2010 NC). United of Omaha Life Insurance Company is licensed nationwide, except New York.



> Voluntary Term Life Insurance



Help Protect What Matters – You, Your Family & Your Future

We understand you've worked hard to get where you are today. Ensuring your loved ones can maintain financial stability if an unexpected death should occur is something to consider when planning for the future.

We've Got You Covered

As an active employee of Integrity Educational Services, you have access to a life insurance policy from United of Omaha Life Insurance Company.

It replaces the income you would have provided, and helps pay funeral costs, manage debt and cover ongoing expenses.

How much insurance is enough?

When determining how much life insurance you need, think about the expenses you may encounter now and through every stage of your life.

Coverage guidelines and benefits are outlined in the chart below.



ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

Eligibility Requirement	You must be actively working a minimum of 32 hours per week to be eligible for coverage.
Dependent Eligibility Requirement	To be eligible for coverage, your dependents must be able to perform normal activities, and not be confined (at home, in a hospital, or in any other care facility), and any child(ren) must be under age 26. In order for your spouse and/or children to be eligible for coverage, you must elect coverage for yourself.
Premium Payment	The premiums for this insurance are paid in full by you.

COVERAGE GUIDELINES

	Minimum	Guarantee Issue	Maximum
For You	\$10,000	5 times annual salary, up to \$100,000	\$500,000, in increments of \$10,000, but no more than 5 times annual salary
Spouse	\$5,000	100% of employee's benefit, up to \$25,000	100% of employee's benefit, up to \$250,000
Children	\$2,000	100% of employee's benefit	100% of employee's benefit, up to \$10,000

Subject to any reductions shown below. Guarantee Issue is available to new hires. Amounts over the Guarantee Issue will require a health application/evidence of insurability. For late entrants, all amounts will require a health application/evidence of insurability.

BENEFITS

Life Insurance Benefit Amount	Within the coverage guidelines defined above, you select the amount of life insurance coverage you want. This plan includes the option to select coverage for your spouse and dependent children. Children include those, up to age 26. In the event of death, the benefit paid will be equal to the benefit amount after any age reductions less any living care/accelerated death benefits previously paid under this plan.
Accidental Death & Dismemberment (AD&D) Benefit Amount	For you and your spouse: The Principal Sum amount is equal to the amount of life insurance benefit. AD&D coverage is available if you or your dependents are injured or die as a result of an accident, and the injury or death is independent of sickness and all other causes. The benefit amount depends on the type of loss incurred, and is either all or a portion of the Principal Sum.

FEATURES

Living Care/ Accelerated Death Benefit	75% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$250,000.
Waiver of Premium	If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions.
Annual Benefit Amount Increase	If you enroll for even the minimum amount of coverage during your initial enrollment, you have the ability to enroll for additional coverage at your next enrollment by up to \$20,000, provided the total amount of insurance does not exceed your maximum benefit amount. This feature allows you to secure additional life insurance protection in the event your needs change (ex. you get married or have a child). Amounts over the Guarantee Issue will require evidence of insurability (proof of good health).
Additional AD&D Benefits	In addition to basic AD&D benefits, you are protected by the following benefits: - Seat Belt - Airbag - Common Carrier
Portability	Allows you to continue this insurance program for yourself and your dependents should you leave your employer for any reason, without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.
Conversion	If your employment ends, you may apply for an individual life insurance policy from Mutual of Omaha without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.

SERVICES

Hearing Discount Program	The Hearing Discount Program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit www.amplifonusa.com/mutualofomaha to learn more.
Will Prep Services	We work with Epoq, Inc. to offer employees online will prep tools. In just a few clicks you can complete a basic will or other documents to protect your family and property. To get started visit www.willprepservices.com .

AGE REDUCTIONS AND EXCLUSIONS

Insurance benefits and guarantee issue amounts are subject to age reductions:

- At age 65, amounts reduce to 65%
- At age 70, amounts reduce to 50%

Spouse coverage terminates when you reach age 70.

Life insurance benefits will not be paid if the insured's death is the result of suicide within two years from the date coverage begins. If this occurs, the sum of the premiums paid will be returned to the beneficiary. The same applies for any future increases in coverage under this plan.

Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

Please contact your employer if you have questions prior to enrolling.

Voluntary Term Life and AD&D Coverage Selection and Premium Calculation

Please note that the premium amounts presented below may vary slightly from the amounts provided on your enrollment form, due to rounding.

To select your benefit amount and calculate your premium, do the following:

- 1) Locate the benefit amount you want from the top row of the employee premium table. Your benefit amount must be in an increment of \$10,000. Refer to the Coverage Guidelines section for minimums and maximums, if needed.
- 2) Find your age bracket in the far left column.

- 3) Your premium amount is found in the box where the row (your age) and the column (benefit amount) intersect.
- 4) Enter the benefit and premium amounts into their respective areas in the Voluntary Life and AD&D section of your enrollment form.

If the benefit amount you want to select is greater than any amount in the table below, select the benefit amount from the top row that when multiplied by another number results in the benefit amount you want. For example, if you want \$150,000 in coverage, you obtain your premium amount by multiplying the rate for \$50,000 times 3.

EMPLOYEE PREMIUM TABLE (24 PAYROLL DEDUCTIONS PER YEAR)										
Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
0 - 29	\$0.43	\$0.85	\$1.28	\$1.70	\$2.13	\$2.55	\$2.98	\$3.40	\$3.83	\$4.25
30 - 34	\$0.63	\$1.25	\$1.88	\$2.50	\$3.13	\$3.75	\$4.38	\$5.00	\$5.63	\$6.25
35 - 39	\$0.73	\$1.45	\$2.18	\$2.90	\$3.63	\$4.35	\$5.08	\$5.80	\$6.53	\$7.25
40 - 44	\$0.78	\$1.55	\$2.33	\$3.10	\$3.88	\$4.65	\$5.43	\$6.20	\$6.98	\$7.75
45 - 49	\$1.13	\$2.25	\$3.38	\$4.50	\$5.63	\$6.75	\$7.88	\$9.00	\$10.13	\$11.25
50 - 54	\$2.18	\$4.35	\$6.53	\$8.70	\$10.88	\$13.05	\$15.23	\$17.40	\$19.58	\$21.75
55 - 59	\$3.03	\$6.05	\$9.08	\$12.10	\$15.13	\$18.15	\$21.18	\$24.20	\$27.23	\$30.25
60 - 64	\$3.53	\$7.05	\$10.58	\$14.10	\$17.63	\$21.15	\$24.68	\$28.20	\$31.73	\$35.25
65 - 69	\$8.83	\$17.65	\$26.48	\$35.30	\$44.13	\$52.95	\$61.78	\$70.60	\$79.43	\$88.25
70 - 74	\$13.83	\$27.65	\$41.48	\$55.30	\$69.13	\$82.95	\$96.78	\$110.60	\$124.43	\$138.25
75 - 79	\$73.23	\$146.45	\$219.68	\$292.90	\$366.13	\$439.35	\$512.58	\$585.80	\$659.03	\$732.25
80+	\$73.23	\$146.46	\$219.69	\$292.92	\$366.15	\$439.38	\$512.61	\$585.84	\$659.07	\$732.30

Follow the method described above to select a benefit amount and calculate premiums for optional dependent spouse and/or child(ren) coverage. **Your spouse's rate is based on your age**, so find your age bracket in the far left column of the Spouse Premium Table. Your spouse's premium amount is found in the box where the row (the age) and the column (benefit amount) intersect. Your spouse's benefit amount must be in an increment of \$5,000. Refer to the Coverage Guidelines section for minimums and maximums, if needed.

SPOUSE PREMIUM TABLE (24 PAYROLL DEDUCTIONS PER YEAR)										
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
0 - 29	\$0.22	\$0.43	\$0.64	\$0.85	\$1.07	\$1.28	\$1.49	\$1.70	\$1.92	\$2.13
30 - 34	\$0.32	\$0.63	\$0.94	\$1.25	\$1.57	\$1.88	\$2.19	\$2.50	\$2.82	\$3.13
35 - 39	\$0.37	\$0.73	\$1.09	\$1.45	\$1.82	\$2.18	\$2.54	\$2.90	\$3.27	\$3.63
40 - 44	\$0.39	\$0.78	\$1.17	\$1.55	\$1.94	\$2.33	\$2.72	\$3.10	\$3.49	\$3.88
45 - 49	\$0.57	\$1.13	\$1.69	\$2.25	\$2.82	\$3.38	\$3.94	\$4.50	\$5.07	\$5.63
50 - 54	\$1.09	\$2.18	\$3.27	\$4.35	\$5.44	\$6.53	\$7.62	\$8.70	\$9.79	\$10.88
55 - 59	\$1.52	\$3.03	\$4.54	\$6.05	\$7.57	\$9.08	\$10.59	\$12.10	\$13.62	\$15.13
60 - 64	\$1.77	\$3.53	\$5.29	\$7.05	\$8.82	\$10.58	\$12.34	\$14.10	\$15.87	\$17.63
65 - 69	\$4.42	\$8.83	\$13.24	\$17.65	\$22.07	\$26.48	\$30.89	\$35.30	\$39.72	\$44.13

ALL CHILDREN PREMIUM TABLE (24 PAYROLL DEDUCTIONS PER YEAR)*				
\$2,000	\$4,000	\$6,000	\$8,000	\$10,000
\$0.20	\$0.40	\$0.60	\$0.80	\$1.00

*Regardless of how many children you have, they are included in the "All Children" premium amounts listed in the table above.

>Frequently Asked Questions

Who is eligible for this insurance?

- You must be actively working (performing all normal duties of your job) at least 32 hours per week.
- Your dependent(s) must be performing normal activities and not be confined (at home or in a hospital/care facility) and any child(ren) must be under age 26.

What is Guarantee Issue?

The amount of insurance applied for without answering any health questions (or which does not require evidence of insurability). Coverage amounts over the Guarantee Issue Amount will require evidence of insurability.

What is Evidence of Insurability?

Evidence of Insurability or proof of good health – may be required if you are a late entrant and/or you request any additional coverage above your guarantee issue amount.

Can I take this insurance with me if I change jobs/am no longer a member of this group?

In the event this insurance ends due to a change in your employment/membership status with the group, or for certain other reasons, you or your insured spouse may have the right to continue this insurance under the Portability or Conversion provision, subject to certain conditions.

Are there any limitations, reductions or exclusions?

The benefits payable are based on the following:

- Insurance benefits and guarantee issue amounts are subject to age reductions:
 - At age 65, amounts reduce to 65%
 - At age 70, amounts reduce to 50%
- Spouse coverage terminates when you reach age 70.
- Life insurance benefits will not be paid if the insured's death is the result of suicide within two years from the date coverage begins. If this occurs, the sum of the premiums paid will be returned to the beneficiary. The same applies for any future increases in coverage under this plan.
- Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

All exclusions may not be applicable, or may be adjusted, as required by state regulations.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this outline, the certificate booklet will prevail. Availability of benefits is subject to final acceptance and approval of the group application by the underwriting company. Life insurance and accidental death & dismemberment insurance are underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175. Policy form number 7000GM-U-EZ 2010 or state equivalent (in NC: 7000GM-U-EZ 2010 NC). United of Omaha Life Insurance Company is licensed nationwide, except New York.



Benefits for 2025 - 2026

Short Term Disability



Summary of Coverage



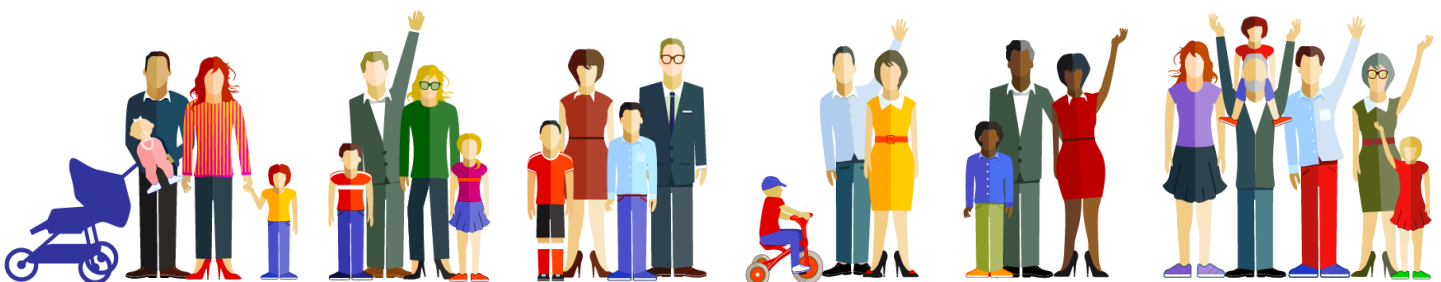
Full-Time Employees working 35+ Hours/Week

Integrity Educational Services provides full-time status team members with Short Term Disability Income Benefits and pays the full cost of this coverage. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income. You are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

Plan Features	
Employee Benefit Amount	60% of weekly salary
Maximum Benefit Amount	\$500 Per week
Elimination Period	1st day from an accident and 8th day from an illness
Benefit Duration	13 Weeks

Team Member Cost - \$0.00

Employer Paid Benefit



> Short-Term Disability Insurance



How Would You Pay Your Bills if You Were Sick or Injured Temporarily?

Even a short illness or injury could seriously impact your paycheck. Sick time will get you by while it lasts, but what happens when your sick days run out? A short-term disability policy provides you with cash benefits when you need it.

We've Got You Covered

As an active employee of Integrity Educational Services, you have access to a disability income insurance policy from United of Omaha Life Insurance Company.

A disability income insurance policy can help provide security when you need it, plus give you peace of mind so you can recover faster and get back on the job sooner.

Coverage guidelines and benefits are outlined below.



ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

Eligibility Requirement	You must be actively working a minimum of 35 hours per week to be eligible for coverage.
Premium Payment	The premiums for this insurance are paid in full by the policyholder. There is no cost to you for this insurance.

BENEFITS

Elimination Period	If you become disabled, there is an elimination period before benefits are payable. Your benefits begin: • On the day of your disabling injury. • On the 8th day of your disabling illness.
Weekly Benefit	Your benefit is equivalent to 60% of your before-tax weekly earnings, not to exceed the plan's maximum weekly benefit amount less other income sources.
Maximum Benefit Period	Up to 13 weeks
Maximum Weekly Benefit	\$500
Minimum Weekly Benefit	None
Partial Disability Benefits	If you become disabled and can work part-time (but not full-time), you may be eligible for partial disability benefits, which will help supplement your income until you are able to return to work full-time.

DEFINITIONS	
Definition of Disability	Disability and disabled mean that because of an injury or illness, a significant change in your mental or functional abilities has occurred, for which you are prevented from performing at least one of the material duties of your regular job and are unable to generate current earnings which exceed 99% of your weekly earnings from your regular job. You can be totally or partially disabled during the elimination period.
Definition of Weekly Earnings	Weekly earnings for salaried employees is the gross annual salary in effect immediately prior to the date disability begins, divided by 52. Weekly earnings for hourly employees is the hourly rate of pay multiplied by the average number of hours worked per week during the 12 month period immediately prior to the date disability begins. If employed for part of the prior 12 month period, weekly earnings is the hourly rate of pay multiplied by the average number of hours worked.
FEATURES	
Vocational Rehabilitation Benefit	If you become disabled and participate in the vocational rehabilitation program, you will be eligible for a monthly benefit increase of 5%.
Survivor Benefit	If you pass away while receiving disability benefits, a lump sum equal to the total weekly benefit payable for the remainder of the maximum benefit period will be paid to your eligible survivor.
SERVICES	
Hearing Discount Program	The Hearing Discount Program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit www.amplifonusa.com/mutualofomaha to learn more.

> Frequently Asked Questions

Who is eligible for this insurance?

You must be actively working (performing all normal duties of your job) at least 35 hours per week.

How long will my benefits be paid?

Benefits begin after the end of the elimination period and can be payable up to the maximum benefit period as long as you remain disabled.

Will my benefits be reduced by other sources of income?

Yes, depending on the type of income you receive. Your benefit amount may be reduced by other sources of income such as retirement/government plans, other group disability plans, paid family leave, salary continuance/sick leave, settlements on payments received and no-fault benefits.

Does this plan cover me if I become disabled due to an injury at work?

No, your STD insurance only provides benefits for off-the-job coverage for disabilities due to injury or sickness.

Are there any limitations or exclusions?

The benefits payable are subject to the following:

- A pre-existing condition limitation does not apply.
- Benefits are not payable for any disability or loss that:
 - Results from an act of declared or undeclared war or armed aggression
 - Results from participation in a riot or commission of or attempt to commit a felony
 - Arises out of or in the course of employment with the policyholder for benefits under any workers' compensation or occupational disease law, or receives any settlement from the workers' compensation carrier
 - Results, whether the insured person is sane or insane, from an intentionally self-inflicted injury or illness, suicide, or attempted suicide
 - Occurs while incarcerated or imprisoned for any period exceeding 31 days
 - Is solely a result of a loss of a professional license, occupation license or certification

All exclusions may not be applicable, or may be adjusted, as required by state regulations.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this summary, the certificate booklet will prevail. Benefits availability is subject to final acceptance and approval of the group application by the underwriting company. Disability income insurance is underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175, 1-800-769-7159. United of Omaha Life Insurance Company is licensed nationwide, except in New York. Policy form number 7000GM-U-EZ-2010.



Benefits for 2025 - 2026

Long Term Disability



Summary of Coverage



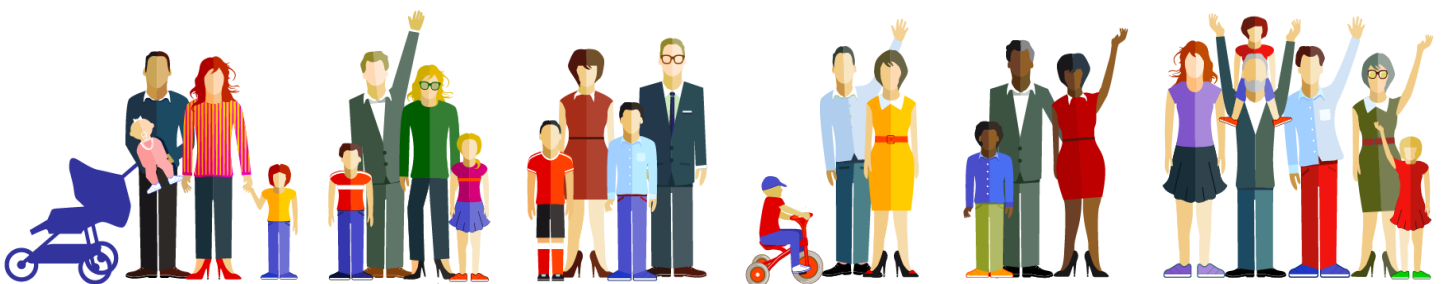
Full-Time Employees working 35+ Hours/Week

Integrity Educational Services provides full-time status team members with Long Term Disability Benefits, and pays the full cost of this coverage. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income. You are not eligible to receive disability benefits if you are receiving Worker's Compensation Benefits.

Plan Features	
Employee Benefit Amount	60% of salary
Maximum Benefit Amount	\$5,000 Per month
Elimination Period	90 days
Benefit Duration	Later of Age 65 or Social Security Normal Retirement Age

Team Member Cost - \$0.00

Employer Paid Benefit



› Long-Term Disability Insurance



Your Ability to Earn an Income May Be Your Most Important Asset

Most people don't think twice about insuring their home, automobile or health. However, many people don't recognize just how important it is to insure their income.

We've Got You Covered

As an active employee of Integrity Educational Services, you have access to a disability income insurance policy from United of Omaha Life Insurance Company.

A lengthy disability can be devastating, and is more common than you might think. It may lead to a loss of income, independence and financial security.

A disability income insurance policy can help provide security when you need it most. It pays you cash benefits when you're sick or hurt and can't work.

Coverage guidelines and benefits are outlined in the chart below.



ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

Eligibility Requirement	You must be actively working a minimum of 35 hours per week to be eligible for coverage.
Premium Payment	The premiums for this insurance are paid in full by the policyholder. There is no cost to you for this insurance.

BENEFITS

Elimination Period	Your benefits begin on the later of 90 calendar days after the onset of your disabling injury or illness or the date your short term disability ends.
Monthly Benefit	Your benefit is equivalent to 60% of your before-tax monthly earnings, not to exceed the plan's maximum monthly benefit amount less other income sources. The premium for your long-term disability coverage is waived while you are receiving benefits.
Maximum Monthly Benefit	\$5,000
Minimum Monthly Benefit	\$100
Maximum Benefit Period	If you become disabled prior to age 62, benefits are payable to age 65, your Social Security Normal Retirement Age or 3.5 years, whichever is longest. At age 62 (and older), the benefit period will be based on a reduced duration schedule.

Partial Disability Benefits	If you become disabled and can work part-time (but not full-time), you may be eligible for partial disability benefits. Additional benefits for family care expenses for eligible family members are also available while receiving partial disability benefits.
DEFINITIONS	
Own Occupation	2 Years
Own Occupation Earnings Test	99%
Definition of Monthly Earnings	Monthly earnings for salaried employees is the gross annual salary in effect immediately prior to the date disability begins, divided by 12. Monthly earnings for hourly employees is the hourly rate of pay multiplied by the average number of hours worked during the 12 month period immediately prior to the date disability begins. If employed for part of the prior 12 month period, monthly earnings is the hourly rate of pay multiplied by the average number of hours worked.
FEATURES	
Vocational Rehabilitation Benefit	If you become disabled and participate in the vocational rehabilitation program, you will be eligible for a monthly benefit increase of 5%.
Survivor Benefit	If you pass away while receiving disability benefits, a lump sum equal to 3 times your monthly benefit will be paid to your eligible survivor.
Enhanced Disability	Provides additional benefits to you if you are unable to perform at least two of five activities of daily living (ADLs).
SERVICES	
Employee Assistance Program (EAP)	The EAP program provides you and your loved ones access to trained professionals and resources for assistance with personal and workplace issues.
Hearing Discount Program	The Hearing Discount Program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit www.amplifonusa.com/mutualofomaha to learn more.

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You must be actively working (performing all normal duties of your job) at least 35 hours per week.

How long will my benefits be paid?

Benefits begin after the end of the elimination period and can be payable up to the maximum benefit period as long as you remain disabled.

Will my benefits be reduced by other sources of income?

Yes, depending on the type of income you receive. Your benefit amount may be reduced by other sources of income such as retirement/government plans, other group disability plans, salary continuance/sick leave, settlements on payments received and no-fault benefits.

Does this plan cover me if I become disabled due to an injury at work?

Yes, your LTD insurance provides benefits for both on-the-job and off-the-job coverage for disabilities due to injury or sickness.

Are there any limitations or exclusions?

The benefits payable are subject to the following:

- Disabilities related to alcohol and drug abuse are only payable for up to 24 months while insured under the policy.
- Disabilities related to mental disorders are only payable for up to 24 months while insured under the policy.
- Disabilities related to self-reported conditions are only payable for up to 24 months while insured under the policy.
- Your plan is subject to a pre-existing condition limitation. A pre-existing condition is one for which you have received medical treatment, consultation, care or services including diagnostic measures, or if you were prescribed or took prescription medications in the predetermined time frame prior to your effective date of coverage. The pre-existing condition under this plan is 3/12 which means any condition that you receive medical attention for in the 3 months prior to your effective date of coverage that results in a disability during the first 12 months of coverage, would not be covered.
- Benefits are not payable for any disability or loss that:
 - Results from an act of declared or undeclared war or armed aggression
 - Results from participation in a riot or commission of or attempt to commit a felony
 - Results, whether the insured person is sane or insane, from an intentionally self-inflicted injury or illness, suicide, or attempted suicide
 - Results from alcohol and drug abuse and/or substance abuse, except as noted above
 - Results from a mental disorder, except as noted above
 - Is caused by alcohol and drug abuse and/or substance abuse, while not being actively supervised by and receiving continuing treatment from a rehabilitation center or designated institution approved for such treatment by an appropriate body in the governing jurisdiction
 - Occurs while incarcerated or imprisoned for any period exceeding 31 days
 - Is solely a result of a loss of a professional license, occupation license or certification

All exclusions may not be applicable, or may be adjusted, as required by state regulations.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this summary, the certificate booklet will prevail. Benefits availability is subject to final acceptance and approval of the group application by the underwriting company. Disability income insurance is underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175, 1-800-769-7159. United of Omaha Life Insurance Company is licensed nationwide, except in New York. Policy form number 7000GM-U-EZ-2010.



Available Services When You Need Help the Most

Life isn't always easy. Sometimes a personal or professional issue can affect your work, health and general well-being. During these tough times, it's important to have someone to talk with to let you know you're not alone!

With Mutual of Omaha's Employee Assistance Program, you can get the help you need so you spend less time worrying about the challenges in your life and can get back to being the productive worker your employer counts on to get the job done.

Learn more about the Employee Assistance Program services available to you.

We are here for you

Visit the Employee Assistance Program website to view timely articles and resources on a variety of financial, well-being, behavioral and mental health topics.

mutualofomaha.com/eap or call us: 1-800-316-2796

Basic EAP Services

Features	Value to Company and Employees
Employee Family Clinical Services	• An in-house team of Master's level EAP professionals who are available 24/7/365 to provide individual assessments • Outstanding customer service from a team dedicated to ongoing training and education in employee assistance matters • Access to subject matter experts in the field of EAP service delivery
Counseling Options	• Three calls per year (per household) with our in-house Master's level EAP professionals, who will provide the caller with community resources • Additional community resources or possible counseling options come at the expense of the employee

Basic EAP Services (Continued)

Features	Value to Company and Employees
Access	1-800 hotline with direct access to a Master's level EAP professional 24/7/365 services available - Telephone support available in more than 120 languages - Online submission form available for EAP service requests
Online Services	- An inclusive website with resources and links for additional assistance, including: - Current events and resources - Family and relationships - Emotional well-being - Financial wellness - Substance abuse and addiction - Legal assistance - Physical well-being - Work and career - Bilingual article library
Employee Family Legal Services	- Valuable resources available via website - Legal libraries & tools - Legal forms 1 Legal consultation with an attorney per year (up to 30 minutes) 25% discount for ongoing legal services for same issue
Employee Family Work/Life Services	- Child care resources and referrals - Elder care resources and referrals
Employee Family Financial Services	- Inclusive financial platform powered by Enrich - Personal financial assessment tool - Personalized courses, articles & resource to meet financial needs - Ongoing progress reports on financial health
Employee Communication	All materials available in English and Spanish
Eligibility	Full-time employees and their immediate family members; including the employee, spouse and dependent children (unmarried and under 26) who reside with the employee
Coordination with Health Plan(s)	EAP professionals will coordinate services with treatment resources/providers within the employee's health insurance network to provide counseling services covered by health insurance benefits, whenever possible

Insurance products and services are offered by Mutual of Omaha Insurance Company or one of its affiliates. Mutual of Omaha Insurance Company is licensed nationwide. United of Omaha Life Insurance Company is licensed nationwide, except in New York. Companion Life Insurance Company is licensed in New York. Each underwriting company is solely responsible for its own contractual and financial obligations. Some exclusions or limitations may apply. Not all services available in New York.

Benefits for 2025 - 2026

401k Retirement Plan



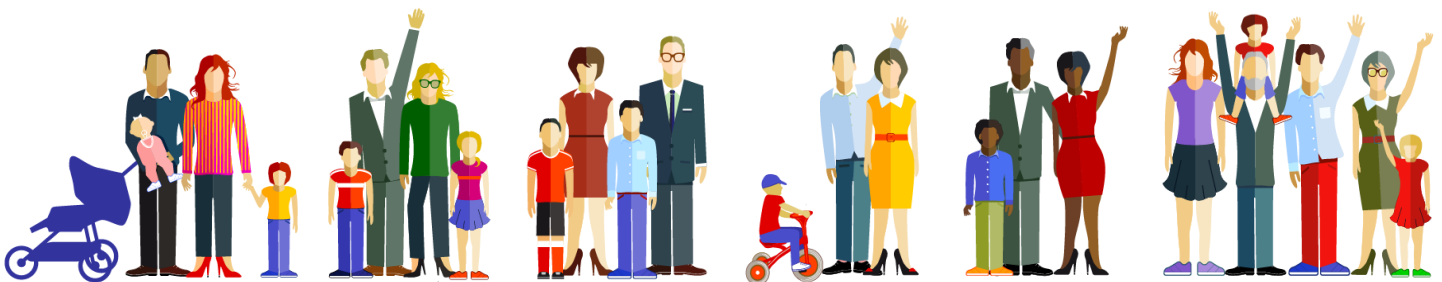
To help you prepare for the future, IES sponsors a 401(k) plan as part of its benefit package. As an Eligible Employee, you may start or stop participating in the plan at any time. Please log into Net Benefits or contact Fidelity at 1-800-603-4015.

- Your plan is set-up with automatic enrollment.
- This process automatically enrolls participants 30-days after they are hired.
- Your default deferral will be 3% of compensation on a pre-tax basis.
- Integrity Educational Services currently makes a matching contribution to your account. They will match \$.50 for each dollar of your contribution up to 6% of your pay.

Please read the plans' Summary Plan Description regarding these and other plan provisions.

Benefits for 2025 - 2026

Notes

[illegible]

Benefits for 2025 - 2026

Contact Information

Coverage	Insurance Carrier	Phone Number	
Medical/Rx Insurance	Priority Health	(800) 942-0954	www.priorityhealth.com
Virtual Visits	MI Partner Health	(616) 320-0096	n/a
Dental Insurance	Delta Dental	(800) 524-0149	www.deltadentalmi.com
Vision Insurance	EyeMed	(888) 293-7373	www.eyemedvisioncare.com
Basic Life/AD&D Insurance	Mutual of Omaha	(800) 228-7104	www.mutualofomaha.com
Disability Insurance	Mutual of Omaha	(800) 228-7104	www.mutualofomaha.com
COBRA	iSolved Benefit Services	(800) 594-6957	www.isolvedbenefitservices.com

Your Benefit Service Team

Noreen Organek

Account Manager

(616) 261-7347

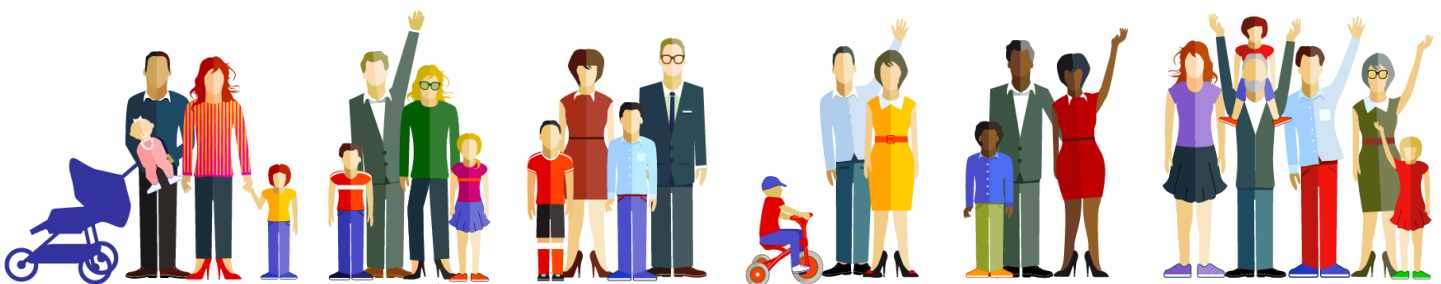
norganek@bhsins.com

Pat Dalton

Account Executive

(616) 261-7355

pdalton@bhsins.com





2025-2026

Employee Benefits Guide

AN OVERVIEW OF THE WIDE ARRAY OF BENEFITS
PROVIDED BY INTEGRITY EDUCATIONAL SERVICES TO
HELP YOU ENJOY INCREASED WELL-BEING AND
FINANCIAL SECURITY