



# Your Benefits

Effective July 2025 – June 2026

**teal**



# Making benefit selections

## Eligibility

### For you

You are eligible for benefits as a full-time employee working at least 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
- **Child life insurance:** until age 21, or 26 if a full-time student

[Enroll now](#)

## Enrolling in coverage

Your benefit plans are in effect July 1 – June 30 next year. In general, there are **three times** you can make benefit selections:

### 1 When you're first eligible

Your benefits begin on the first day 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 June 30 next year.

### 2 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 July – June of the following year unless you have a qualifying life event.

### 3 If you have a qualifying life event

Qualifying life events allow you to change your coverage during the year outside of Open Enrollment. These 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 will be required.**



# Helpful terms & resources

We've removed as much jargon as possible

But you'll probably still encounter some terms as you enroll in and use your benefits, and we want you to be prepared!

## 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.*

## 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.

## 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).

## Have questions?

Your advocate is here to help you with all things benefits. **See their contact information on the next page.**

## Annual Notices

We're required to tell you about certain rights and responsibilities you have as an employee of Teal LLC.

You can request a paper copy at no charge from:

**Shannon Anderson**

**1-813-475-1423**

**shannon.anderson@tealtech.com**

How to handle medical bills (2:04)

[Learn more](#)



[Download now](#)

# Contact information

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

1-866-736-6640  
[service@onedigital.com](mailto:service@onedigital.com)

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



<b>Medical insurance</b>	Anthem Blue Cross and Blue Shield Group: L08473	1-866-755-2680 anthem.com
<b>Health Savings Account (HSA)</b>	Elevate	<a href="https://elevatehealth.net/contact-us/">https://elevatehealth.net/contact-us/</a>
<b>Employee Assistance Program (EAP)</b>	Anthem	1-800-999-7222 anthemeap.com/anthemvirginia
<b>Employee Assistance Program (EAP)</b>	Principal: Magellan Healthcare	1-800-450-1327 Member.MagellanHealthcare.com
<b>Dental insurance</b>	Anthem Blue Cross and Blue Shield Group: L08473	Toll free phone: 1-844-729-1565 anthem.com
<b>Vision insurance</b>	Anthem Blue Cross and Blue Shield Group: L08473	Toll free phone: 1-844-729-1565 anthem.com
<b>Life and AD&amp;D insurance</b>	Principal Group: 1176945	1-800-986-3343 principal.com
<b>Disability insurance</b>	Principal Group: 1176945	1-800-986-3343 principal.com

# Medical insurance

Mental health support

Select from three medical options through Anthem Blue Cross and Blue Shield.

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).

See your plan details for out-of-network information.

[Find an in-network provider](#)



## In-network care

### KeyCare HSA 2000 (8DES)

[See plan details](#)

### KeyCare 30 1500 (8DBR)

[See plan details](#)

### KeyCare 25 500 (8DB3)

[See plan details](#)

Network name:	KeyCare	KeyCare	KeyCare
<b>Annual Deductible (DED)[Plan year]</b>	\$2,000 per person <b>up to</b> \$4,000 family maximum <div>Each person has their own deductible with a <b>combined maximum</b> for the family.</div>	\$1,500 per person <b>up to</b> \$3,000 family maximum <div>Each person has their own deductible with a <b>combined maximum</b> for the family.</div>	\$500 per person <b>up to</b> \$1,000 family maximum <div>Each person has their own deductible with a <b>combined maximum</b> for the family.</div>
<b>Out-of-pocket maximum</b>	\$4,250 single coverage \$8,500 with dependents	\$5,250 per person \$10,500 family maximum	\$4,000 per person \$8,000 family maximum
<b>Pre-tax account availability</b>	Health Savings Account (HSA)	N/A	N/A
<b>Preventive care</b>	100% covered	100% covered	100% covered
<b>Primary care visit</b>	DED then you pay 20%	\$20 copay (EPHC)/\$30 copay (PCP)	\$15 copay (EPHC)/\$25 copay (PCP)
<b>Specialist visit</b>	DED then you pay 20%	\$50 copay	\$50 copay
<b>Virtual visit (Telehealth)</b> <a href="#">Learn more</a>	Available	Available	Available
<b>Urgent care</b>	DED then you pay 20%	\$50 copay	\$50 copay
<b>Emergency room</b>	DED then you pay 20%	DED then you pay 20%	DED then you pay 20%
<b>Inpatient hospital care</b>	DED then you pay 20%	DED then you pay 20%	DED then you pay 20%
<b>Outpatient surgery</b>	DED then you pay 20%	DED then you pay 20%	DED then you pay 20%
<b>Prescription drugs</b>	<b>(30 days   90 days)</b>	<b>(30 days   90 days)</b>	<b>(30 days   90 days)</b>
<i>Prescription deductible</i>	<i>Combined with medical</i>	<i>Does not apply</i>	<i>Does not apply</i>
<b>Tier 1</b>	DED then: \$10   \$20	\$10   \$20	10   \$20
<b>Tier 2</b>	DED then: \$40   \$100	\$40   \$100	\$40   \$100
<b>Tier 3</b>	DED then: \$70   \$175	\$70   \$175	\$70   \$175
<b>Tier 4</b>	DED then 20% up to \$300	20% up to \$300	20% up to \$300
<b>Out-of-network care</b>	<b>Balance billing applies</b>	<b>Balance billing applies</b>	<b>Balance billing applies</b>
<b>Annual deductible</b>	\$4,000 /\$8,000	\$3,000 /\$6,000	\$1,000 /\$2,000
<b>Out-of-pocket maximum</b>	\$10,625 /\$21,250	\$13,125 /\$26,250	\$10,000 /\$20,000
<b>Your cost for coverage</b>	<b>Bi-weekly</b>	<b>Bi-weekly</b>	<b>Bi-weekly</b>
Employee only	\$14.72	\$37.01	\$57.18
Employee + spouse	\$380.79	\$432.93	\$480.15
Employee + child(ren)	\$181.36	\$217.24	\$249.73
Employee + family	\$574.74	\$642.72	\$704.26

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.

# Additional Perks

**There's more to love with these extra benefits when you elect medical coverage.**

## Engagement Package 200 with Gift Cards

[See plan details](#)

## Medicare creditable coverage

[See plan details](#)

## Wellbeing Solutions Foundational Flyer

[See plan details](#)

## Behavioral Health

[See plan details](#)

## The Sydney – Free Health App from Anthem BlueCross BlueShield

[Download now](#)

Access claims information, get your ID card, and find a provider – all in one convenient location!

## Connected Care program

[See plan details](#)

## Finding a therapist just got easier

[See plan details](#)





# Health Savings Account (HSA)

An HSA through Elevate is paired with a High Deductible Health Plan (HDHP).

Save pre-tax money for health care expenses – or retirement!



## Contributions

You may contribute tax-free funds to save for current and future health expenses – and retirement!

	If you cover yourself only	If you cover dependents
<b>2025 IRS maximum contribution</b>	\$4,300	\$8,550

**55 or older?** You can contribute an extra **\$1,000** per year in catch-up contributions.

## Eligibility

In order to make – or receive – contributions to a Health Savings Account (HSA), you must:

- **be enrolled** in a qualified High Deductible Health Plan (HDHP),
- **not be covered** under any other non-HDHP health coverage, including a full health care FSA through your spouse,
- **not** be anyone else's tax dependent, and
- **not** be enrolled in Medicare A or B, Tricare, or certain VA benefits.

## HSA funds

### Using your money

- Spend your HSA balance on health care expenses (medical, prescription, dental, and vision) for you and your tax dependents, OR
- Let your balance grow for retirement.

The money in your HSA is **always yours** and available for qualified health care expenses – even if you change jobs or health plans. Before retirement, any funds used for non-healthcare expenses are subject to tax penalties. **Keep your receipts!**

### Growing your money + tax savings

HSA dollars go in tax-free, grow tax-free, and come out tax-free when you use them for qualified health expenses. You may also be able to invest part of your balance once it meets a certain level.

### In retirement

At age 65, you can withdraw the funds in your HSA for any use (not just health care!) without tax penalties; regular income tax will still apply.



Learn how HSAs can help you save for today and tomorrow.

[Learn more](#)



# Virtual care & mental health

Support for your health, finances, and life.

## Telehealth/Virtual care

### Virtual health care that fits your schedule

Access quality care in the convenience of your own home, on your lunch break, or on the way to your child's soccer game!

Whether it's a nagging cough, middle-of-the-night fever, or a suspicious-looking mole or rash — telehealth is here when you need it. Connect with a board-certified physician 24 hours a day, 7 days a week.

Your cost per visit depends on your medical plan:

<b>KeyCare HSA 2000 (8DES)</b>	Deductible, then 20%
<b>KeyCare 30 1500 (8DBR)</b>	\$20 copay
<b>KeyCare 25 500 (8DB3)</b>	\$15 copay

### Information when you need it

Access no-cost monthly resources designed to **support your wellbeing, understand your benefits, and manage your finances.**

Topics include:

- tips to connect with your child(ren),
- ways to ditch debt for good, and
- what to do when a medical bill arrives.



[Access now](#)



### Mental health care is health care.

Managing work, family, relationships, finances — or mental health conditions — can be tough.

Our Employee Assistance Program (EAP) provides you and your family with no-cost, confidential assistance with all things related to your life. **24/7/365.**

[Learn more](#)

### On-demand support

Access 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)

**Care for your mind – and your life – with support through Anthem & Principal: Magellan Healthcare.**

Confidential care designed for all that life brings.

[Anthem EAP](#)

[Principal EAP](#)

## Everyone needs support sometimes (even superheroes)

Our Employee Assistance Plan (EAP) is a confidential service with access to guidance and resources **at no cost** for:

- mental health concerns (including substance abuse or addiction),
- adoption, parenting, or caregiving needs,
- financial or legal support,
- familial relationships and friendships,
- coping with day-to-day challenges, and
- so much more.

**Essentially, if it's part of your life, our EAP is here for you.**

Access support online, by mobile app, or over the phone. 24/7/365.

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When needed, each person can receive up to **3** face-to-face (or virtual) visits with a licensed counselor per issue per year. At no cost. Additional visits – if needed – will go through your health insurance.

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### EAP features:

- **Confidential.** No one at Teal LLC will ever know you called or what was discussed.
- **Available 24/7/365.** Life doesn't happen during office hours. The EAP is here when you need them.
- **Family care is included.** Anyone living in your home is eligible for EAP services at no cost.



**24/7/365 access to care.**

#### **Anthem**

1-800-999-7222

[anthemeap.com/anthemvirginia](https://anthemeap.com/anthemvirginia)

**24/7/365 access to care.**

#### **Principal: Magellan Healthcare**

1-800-450-1327

[Member.MagellanHealthcare.com](https://Member.MagellanHealthcare.com)

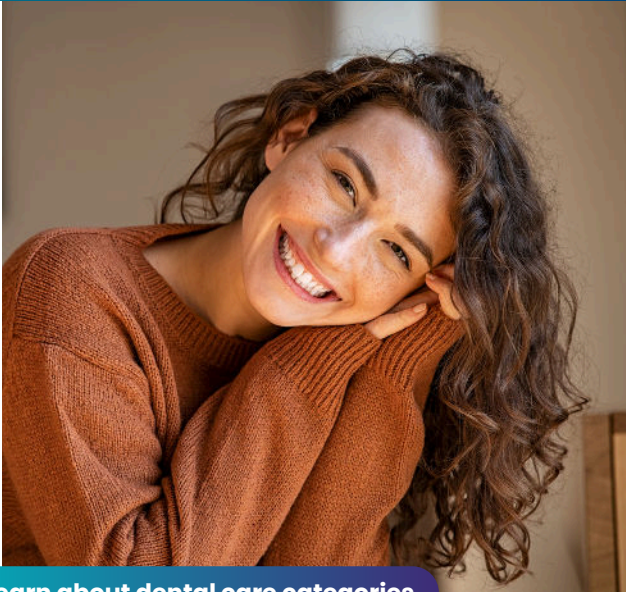
Enter Principal Core as the program name

# Dental insurance

Your dental coverage is through Anthem Blue Cross and Blue Shield.

You'll get in-network preventive care at 100% along with coverage for basic and major dental services.

Orthodontic care is covered.



[Learn about dental care categories](#)

## Anthem Dental

### In-network care

[See plan details](#)

Network name:	Essential Choice
Annual Deductible (DED)	\$50 per person \$150 family max
Annual maximum benefit	\$2,000 per person
Preventive care	100% covered
Basic care	DED then you pay 20%
Major care	DED then you pay 50%
Implant coverage:	50% after deductible Covered 1 time per 84-month period
Orthodontic care	
Coverage	50% covered (child through age 18)
Lifetime maximum benefit	\$1,500 lifetime max benefit
Your cost for coverage	Bi-weekly
Employee only	\$0.00
Employee + spouse	\$13.15
Employee + child(ren)	\$13.44
Employee + family	\$31.66



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

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# Vision insurance

Your vision coverage is through Anthem Blue Cross and Blue Shield.

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



## BlueView Vision

### In-network care

[See plan details](#)

Network name:	Anthem
Annual eye exam (once every calendar year)	\$10 copay
Materials copay (lenses)	\$15 copay
Lenses (once every calendar year)	Included in materials copay
Frames (once every other calendar year)	\$150 allowance
Contact lenses (once every calendar year)	Elective: \$150 allowance Medically necessary: 100% covered
Your cost for coverage	Bi-weekly
Employee only	\$0.00
Employee + spouse	\$3.06
Employee + child(ren)	\$3.77
Employee + family	\$7.71

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.

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# Life and AD&D insurance

## Financial peace of mind through Principal.

Life insurance pays a benefit 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.



## Basic life and AD&D insurance

[See plan details](#)

Teal LLC provides life and AD&D insurance at no cost to you.

	Basic life	Basic AD&D
Teal LLC provides	1x your annual compensation up to \$500,000	1x your annual compensation up to \$500,000

Make sure to designate a **beneficiary** for your life insurance coverage to ensure your family is cared for according to your wishes.

## Additional life and AD&D insurance

[See plan details](#)

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

	For you	For your spouse	For your child(ren)
Coverage increments	\$10,000	\$5,000	Options: \$2,000/\$3,000/\$4,000/ \$5,000/\$10,000
Coverage maximum	\$300,000	\$100,000	\$10,000 (Live birth to 14 days: \$1,000)
Medical question limit	\$150,000 (age 70+: \$10,000)	\$30,000 (age 70+: \$10,000)	Does not apply

## 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.

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# Disability insurance

Protect your paycheck with disability insurance through Principal.

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

## Short-term disability

[See plan details](#)

Short-term disability coverage can replace part of your paycheck if you're unable to work for a shorter period of time. Teal LLC provides this coverage at no cost to you.

Benefits begin	<b>Accident:</b> On the first day you're unable to work <b>Illness:</b> After 7 days of inability to work
Coverage amount	60% of your income up to \$2,700 per week
Payments may continue	Up to 13 weeks if you're unable to return to work

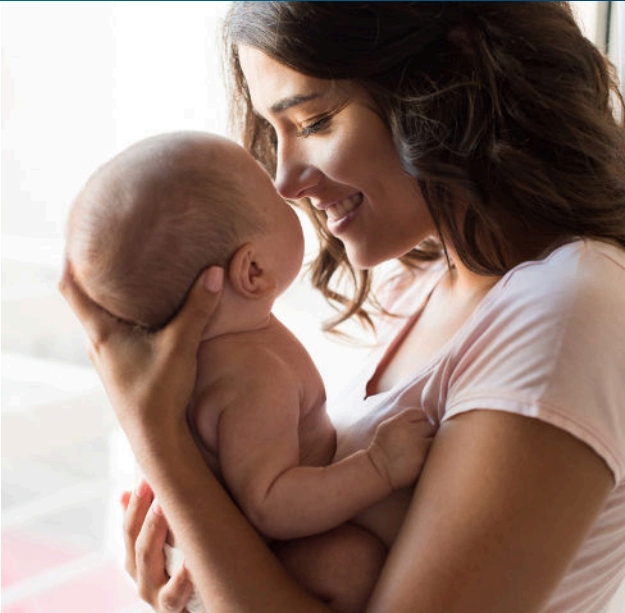
## Long-term disability

[See plan details](#)

Long-term disability coverage can provide lasting income protection if you remain unable to work. Teal LLC provides this coverage at no cost to you.

Benefits begin	After 90 days of inability to work (once short-term disability ends)
Coverage amount	60% of your income up to \$7,500 per month
Payments may continue	Based on your disabled age

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.



[Learn more](#)

Wish you knew more about finances?  
Now you can - **at no cost!**

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2025 – 2026 Benefits