



**Glick Employee Benefits** 

2025-2026 Open Enrollment June 18th - July 2nd



#### Your 2025-2026 **Benefits**

The health and financial security of our employees is important to us. Our benefits program provides a variety of plans that can enhance the lives of you and your family – both now and in the future. As an eligible employee, you will be asked to make decisions about the employee benefits described in this guide. This guide provides information to enable you to effectively enroll in your benefits. Take time to carefully read the guide and use the available resources to ensure you make decisions that are right for you and your family.

### Eligibility



#### **Employees**

All employees working 15 hours per week, or more are eligible for the benefits program. You may insure yourself and eligible family members under the program.



#### **Spouse & Legal Dependents**

Your children are eligible for medical, dental, and vision to age 26. Your children of any age are also eligible if you support them, and they are incapable of self-support due to disability. As required by our insurance contracts, you may be required to provide proof of eligibility for your dependents. If your dependent becomes ineligible for coverage during the year, you must contact your plan administrator within 30 days.



#### **Qualifying Events**

You may make a change to your benefits if you have a qualified status change such as: marriage divorce, birth/adoption, death, changes in spouse's benefits, and more.

### **Employee Cost**

Bi-Weekly Premiums

DEDUCTIBLE **MEDICAL PLAN** 

	Wellness (Non- Tobacco)	Wellness (Tobacco)	Non- Wellness
Employee Only	\$65.00	\$90.00	\$110.00
Employee + Spouse	\$211.00	\$242.00	\$261.00
Employee + Child(ren)	\$143.00	\$167.00	\$186.00
Family	\$272.00	\$303.00	\$322.00

**SEE THIS PLAN** 

Bi-Weekly Premiums

#### COPAY MEDICAL PLAN

	Wellness (Non- Tobacco)	Wellness (Tobacco)	Non- Wellness
Employee Only	\$50.00	\$73.00	\$91.00
Employee + Spouse	\$173.00	\$202.00	\$224.00
Employee + Child(ren)	\$113.00	\$137.00	\$156.00
Family	\$224.00	\$254.00	\$276.00

**SEE THIS PLAN** 

Bi-Weekly Premiums

#### DENTAL

	Base Plan
Employee Only	\$7.00
Employee + Spouse	\$14.00
Employee + Child(ren)	\$16.00
Family	\$25.00

**SEE THIS PLAN** 

Bi-Weekly Premiums

#### VISION

	Base Plan
Employee Only	\$3.01
Employee + Spouse	\$5.87
Employee + Child(ren)	\$6.16
Family	\$8.53

**SEE THIS PLAN** 

## **Medical**BENEFITS

For 2025-2026, Glick will offer employees an option between a Copay Medical Plan through Surest, and a Deductible Health Plan through UMR.

**Surest Portal** 

**UMR Portal** 



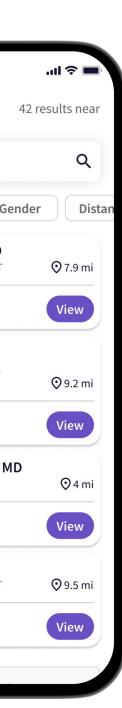


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	IN NETWORK	OUT-OF-NETWORK	IN NETWOR	
Embedded Deductible (Single/Family)	\$2,500 / \$5,000	\$3,000 / \$6,000	N/A	
Out-of-Pocket Max (Single/Family)	\$5,000 / \$10,000	\$10,000 / \$20,000	\$5,550 / \$11,00	
Coinsurance	N/A	N/A	N/A	
Preventive Care	100% covered	Not covered	100% Coverage	
Primary Care	20% after deductible	50% after deductible	\$25 - \$125 Copayn	
Specialist Visit	20% after deductible	50% after deductible	\$25 - \$125 Copayn	
Hospital Services	20% after deductible	50% after deductible	\$400 - \$3,500 Copay	
Emergency Room	20% afte	er deductible	\$700 visit copaym	
Urgent Care Centers	20% after deductible	50% after deductible	\$70 Copaymen	
Inpatient	20% after deductible	50% after deductible	\$2,750 Copayme	
Outpatient	20% after deductible	50% after deductible	\$25 - \$140 Copayn	

#### **Copay Plan**

IN NETWORK	OUT-OF-NETWORK
N/A	N/A
\$5,550 / \$11,000	\$11,000 / \$22,000
N/A	N/A
100% Coverage	\$190 Copayment
\$25 - \$125 Copayment	\$375 Copayment
\$25 - \$125 Copayment	\$375 Copayment
\$400 - \$3,500 Copayment	Up to \$10,000 Copayment
\$700 visit copayment, \$350	) Copayment for transport
\$70 Copayment	\$210 Copayment
\$2,750 Copayment	\$8,250 Copayment
\$25 - \$140 Copayment	Up to \$10,000 Copayment





Watch the Surest "How it Works"
Video

**Learn More About Surest** 

## UnitedHealthcare's **Surest** Health Plan



#### **Upfront Pricing**

No deductibles. No coinsurance. Copay-only plan with lower out-of-pocket costs.



#### **Find Care Quickly**

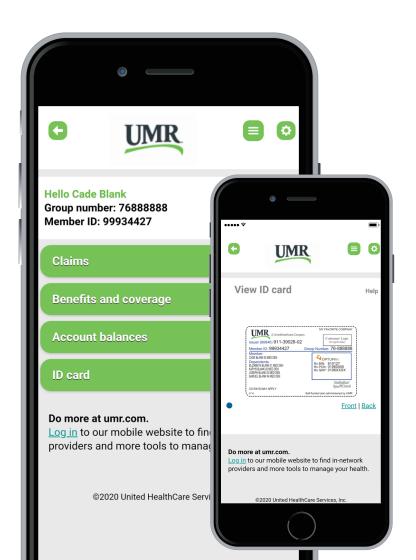
Find the care you need on the Surest app or website.



#### **Compare & Save**

Check costs and compare options before you make an appointment.

### **UMR** Mobile App & Desktop Portal



- Store & Easily Access Virtual ID Cards
- Manage Claims for You & Your Dependents
- Track Your Deductible & Out-of-Pocket Max Totals
- Find In-Network
  Providers



**Download the UMR App** 

**View Your UMR Portal** 

### **24/7** Virtual Doctor Visits





#### General Medical – \$54/visit

Talk to a U.S. licensed doctor for nonemergency conditions 24/7 from anywhere.

#### Mental Health Care - Price Varies

Talk to a therapist or psychiatrist of your choice 7 days a week from wherever you are.

\$95/therapist visit \$235/psychiatrist first visit \$105/psychiatrist ongoing visit

#### Dermatology – \$85/Online Review

Upload images of a skin issue online or on the app and get a custom treatment plan within 24 hours.

**Download the App** 

Register or Schedule Online



## Prescription DRUGS

Prescription coverage is available through which medical plan you elect. Learn more about each carrier's prescription drug coverage using the member portals below.

**Surest Portal** 

**UMR Portal** 





#### **Deductible Plan**

	IN NETWORK	OUT-OF-NETWORK
Retail Prescriptions: Tier 1	\$10	Not covered
Retail Prescriptions: Tier 2	\$60	Not covered
Retail Prescriptions: <b>Tier 3</b>	\$90	Not covered
Mail Order Prescriptions: <b>Tier 1</b>	\$25	Not covered
Mail Order Prescriptions: <b>Tier 2</b>	\$150	Not covered
Mail Order Prescriptions: <b>Tier 3</b>	\$225	Not covered
Specialty Medications	\$240, \$270, or \$300	Not covered

#### **Copay Plan**

	IN NETWORK	OUT-OF-NETWORK
Retail Prescriptions:  Generic	20% Copayment	50% after Deductible
Retail Prescriptions:  Preferred	35% Copayment	50% after Deductible
Retail Prescriptions:  Specialty	35% Copayment	50% after Deductible
Retail Prescriptions: Preventive Generic	\$4 Copayment	Not Covered
Retail Prescriptions:  Preventive Preferred	\$20 Copayment	Not Covered
Mail-Order Prescriptions: <b>Generic</b>	35% Copayment	50% after Deductible
Mail-Order Prescriptions: <b>Preferred</b>	35% Copayment	50% after Deductible
Mail-Order Prescriptions:  Specialty	35% Copayment	50% after Deductible
Mail-Order Prescriptions:  Preventive Generic	\$10 Copayment	Not Covered
Mail-Order Prescriptions:  Preventive Preferred	\$50 Copayment	Not Covered

### Pharmacy Cost TOOLS

Watch Pharmacy
Coupon Video



#### GoodRx

GoodRx has both a website and a mobile app that can be used to compare prices. Go to the website and type in your drug name. GoodRx will display the cost available at multiple pharmacies. Print the coupon and present to your pharmacist.

**Learn More** 



#### **Rx Help Centers**

RX Help Centers provides assistance in finding resources for high-cost brand name medications by advocating directly with drug manufacturers.

**Learn More** 



#### **CostPlus Drug Company**

The goal of the Mark Cuban Cost Plus Drug Company is to dramatically reduce the cost of drugs and introduce transparency to the pricing of drugs, so patients know they are getting a fair price.

**Learn More** 

## Flexible Savings ACCOUNT

Flexible Spending Accounts (FSA) are set up to pay for many of out-of-pocket medical expenses with tax-free dollars. The FSA account holder sets aside a pre-tax dollar amount for the year used to pay for medical expenses. Unused FSA funds can expire at the end of the year.

## Flexible Spending **Accounts**

Watch This FSA Video to Learn More

GENERAL PURPOSE FSA

DEPENDENT CARE ACCOUNT

**General Purpose FSA** 

An FSA is an alternative to an HSA. FSAs are typically paired with a PPO plan while an HSA is paired with an HDHP. HSA funds can be used on various medical, dental, and vision related expenses.

**View Eligible Expenses** 

Dependent Care Account (DCA)

A DCA is a tax-free spending account for dependent care expenses such as daycare, preschool, or day camps for any dependent under the age of 13 or who is physically or mentally incapable of self-care.

**Learn More About Your DCA** 

## DENTAL

Dental Coverage with UMR

**Member Portal** 

**Download UMR App** 



Deductible	None
Annual Plan Maximum	\$3,000
<b>Preventive Services</b> <i>Exams, Cleanings, Fluoride, X-Rays</i>	You Pay 0%
<b>Basic Services</b> Fillings, Extractions, Endodontics, Crown Repairs	You Pay 20%
Major Services Crowns, Dentures, In/Outlays, Periodontics	You Pay 50%
Orthodontia Services	You Pay 50%
Orthodontia Lifetime Maximum	\$3,000

## VISION

Vision Coverage through Spectera

**Member Portal** 



	In-Network	Out-of-Network
Exam	\$10 copay	\$40 allowance
Glasses Lenses (Single / Bifocal/ Trifocal / Lenticular)	\$25 copay	\$40 - \$80 allowance
Glasses Frames (Retail / Wholesale)	\$130 / \$50 allowance	\$45 allowance
Contact Lenses (Medically Necessary / Elective)	100% covered / \$125 allowance	\$210 allowance / \$125 allowance

Each material benefit is paid out once per calendar year, except for frames, which are paid out once every other year.

## Additional BENEFITS

Glick provides full-time employees with employer-paid basic life insurance, long-term disability coverage, and opportunities to purchase supplemental coverage.





#### Group Life and AD&D

**Employer-paid** group life and accident, death, and dismember policy is available to all full-time employees. In the event of death, loss of (or loss of use of) a body part or function, speech, eyesight, or hearing, your beneficiaries will pay 100% of basic annual salary up to \$500,000 (benefits rounded down to the next \$5,000). Coverage decreases incrementally beginning at age 65.



#### **Voluntary Life Insurance**

Employees have the option to purchase additional life insurance.

**Employee Benefit:** Increments of \$5,000 up to 2x your basic annual earnings up to \$300,000. **Spouse Benefit:** Increments of \$5,000 up to \$150,000. Guarantee Issue is up to \$20,000. **Child(ren) Benefit:** Increments of \$10,000 for children up to age 26.



#### **Short-Term Disability**

**Employee-paid** short-term disability protects your income during a short period of time due to illness or an accident not related to your job. Benefits begin on 15 days following disability. The policy pays a 66.67 of weekly earnings (maximum weekly benefit of \$3,200) for 24 weeks.



#### **Long-Term Disability**

**Employer-paid** long-term disability protects your income for an extended period of time. This benefit will pay 60% of your monthly earnings (monthly maximum of \$7,500) and last until social security normal retirement age.

### Employee Assistance PROGRAM

All full-time employees are automatically provided access to All One Health's Employee Assistance Program. The EAP is a confidential resource available 24/7/365 to help you deal with a variety of life stages and concerns. The program includes up to 5 confidential consultations a year.

**Get Help** 

**Company Code:** Glick





#### Request a Mental Health Session

Request counseling by submitting an online form or live chat. Choose from in-person or virtual counseling options to meet your needs.



#### Request Referrals & Resources

Submit a request for family care and lifestyle support including childcare and eldercare referrals, legal referrals and financial consultation, personal assistant referrals and medical advocacy consultation.



#### **Explore Self-Care Resources**

Health and lifestyle assessments, interactive checklists, soft skills courses, podcasts, resource locators, exclusive discounts, and expansive articles on whole health and well-being.

# Financial Benefit OFFERING

We value the health of our employees, which includes your financial well-being. That's why we now offer a low-risk, easily accessible loan solution as part of our benefits package. Privately apply for a personal loan online, no credit report required.

Get a Loan





#### **How Much Can I Borrow?**

Standard loans are given in amounts ranging between \$1,000 and \$5,000\*.



#### How Does It Work?

When you apply for a loan, we provide employment information to TrueConnect to confirm your eligibility. No credit report required. Once approved, you will then choose your loan amount, sign your documents and instruct the bank where to deposit your money – all online



#### How Do I Pay It Back?

Your loan will be repaid from your authorized payroll deductions, based on the payment schedule set forth in the loan agreement, beginning on your scheduled payday.

## **Wellness**RESOURCES

Glick's goal is to expand our wellness offering in ways that will help meet your personal needs and improve the health of our employees and their families.







#### TrueLifeCare Diabetes Program

Offering a \$50 incentive for qualified diabetics who enroll in TrueLifeCare! The TrueLifeCare diabetes support program can improve health and dramatically reduce medical costs for those with diabetes. The program is completely free and gives people with diabetes the individual help and support they need to regain and maintain control of their health and life.

#### **Get Started**



#### Wellness Incentives

Qualify for a lower medical plan premium by having your annual physical and being tobacco free.

#### **Annual Physicals:**

- All employees and spouses enrolled in the Wellness Plan are required to participate.
- Complete the Wellness Exam Verification Form within 31 days of insurance effective date.
- Forms can be found online.

## **BSwift**

**Get Enrolled in Benefits Today!** 

**Enroll Online** 



