



2026

Benefits Guide

[CLICK HERE
TO EXPLORE
YOUR
BENEFITS](#)



January 1 – December 31, 2026

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Welcome

Welcome to your benefits enrollment! As a Millennium Health employee, you have access to a robust benefits program intended to support the health and well-being of both you and those you care most about. This guide is an overview of what Millennium Health has to offer. Review this information carefully so you can take full advantage of those benefits, which provide you and your family the coverage you expect at a cost you're comfortable with. Please share this information with those involved in your decision-making process.



Eligibility and Enrollment

ELIGIBILITY

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

Your legally married spouse

Your registered domestic partner (RDP) and/or their children, where applicable by state law

Your children who are your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

WHEN COVERAGE BEGINS

New Hires: You must complete the enrollment process within 30 days of your date of hire. If you enroll on time, coverage is effective on the first of the month following date of hire.

As a new hire, if you fail to enroll on time, you will NOT have benefits coverage (except for company-paid benefits). Your next opportunity to enroll would be during Open Enrollment.

Open Enrollment: Changes made during Open Enrollment are effective January 1 - December 31, 2026.

Required Information—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

CHOOSE CAREFULLY!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualifying life event during the year. Following are examples of the most common qualifying life events:

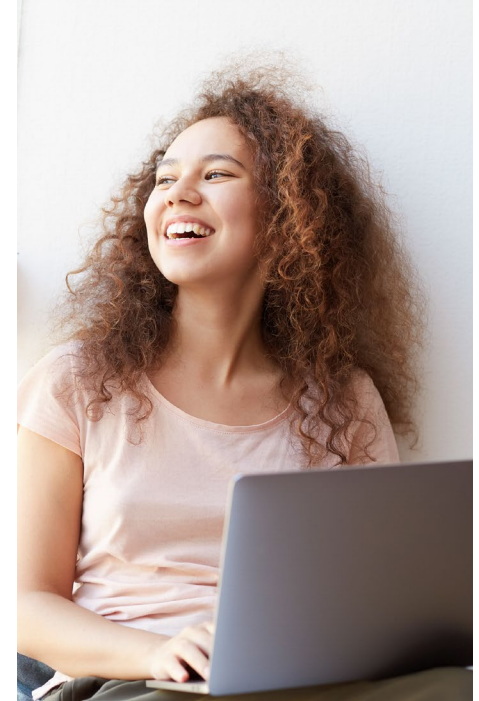
- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, RDP or child
- You lose coverage under your spouse's/RDP's plan
- You gain access to state coverage under Medicaid or CHIP

MAKING CHANGES

To make changes to your benefit elections, you must contact Human Resources within 30 days of the qualifying life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

WATCH AND LEARN

This guide includes insurance jargon you may not know. For an overview of common terms and definitions, [click here](#).



Medical

We are proud to offer you a choice among three different medical plans that provide comprehensive medical and prescription drug coverage. The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

CIGNA OPEN ACCESS PLUS PPO PLAN

This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna network. The calendar-year deductible must be met before certain services are covered.

CIGNA OPEN ACCESS PLUS WITH HSA PLANS

Like the PPO plan, the Open Access Plus with HSA plans give you the freedom to seek care from the provider of your choice. You will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna network. In addition, the HSA plans come with a health savings account (HSA) that allows you to save pre-tax dollars¹ to pay for any qualified health care expenses as defined by the IRS, including most out-of-pocket medical, prescription drug, dental and vision expenses. For a complete list of qualified health care expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Here's how the medical plan works:

- **Annual Deductible:** You must meet the entire annual deductible before the plan starts to pay for non-preventive medical and prescription drug expenses. NOTE: If you enroll one or more family members, each covered family member is only required to meet the INDIVIDUAL IN A FAMILY deductible (up to the family limit) before the plan starts to pay expenses for that individual.

- **Coinsurance:** Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80% and you may pay 20%.
- **Out-of-Pocket Maximum:** Once your deductible and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100% of all eligible covered services for the rest of the calendar year. NOTE: If you enroll one or more family members, each covered family member is only required to meet the INDIVIDUAL IN A FAMILY out-of-pocket maximum (up to the family limit) before the plan starts to pay covered services at 100% for that individual.
- **Health Savings Account (HSA):** You may contribute to your HSA through pre-tax payroll deductions to help offset your annual deductible and pay for qualified health care expenses.
 - Basic HSA plan members will receive:
 - \$750 for individual coverage
 - \$1,500 for family coverage annually
 - Enhanced HSA plan members will receive:
 - \$350 for individual coverage
 - \$700 for family coverage annually.

To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.

Important: Your contributions, in addition to the company's contributions, may not exceed the annual IRS limits listed below.

HSA Contribution Limit	2026
Employee Only	\$4,400
Family (employee + 1 or more)	\$8,750
Catch-up (age 55+)	\$1,000

Your HSA is yours for life. The money is yours to spend or save, regardless of whether you change health plans², retire or leave the company. There is no "use it or lose it" rule. Your account grows tax free over time as you continue to roll over unused dollars from year to year. You decide how or if you want to spend your HSA funds. You can use them to pay for you and your dependents' doctor's visits, prescriptions, braces, glasses—even laser vision correction surgery.

¹ Tax free under federal tax law; state taxation rules may apply

² You must be enrolled in a qualified health plan to contribute to an HSA.

ID CARDS

Cigna has transitioned from physical ID cards to digital ID cards to allow for easier access to plan coverage information. You can access your digital ID card by following these steps:

- Download and log in to the myCigna app and select "ID cards."
- Select the desired ID card type and covered Cigna member.
- Your ID card will then be displayed. You can share or print as needed.

You can also access your digital ID card through myCigna.com. Simply log in and follow the steps above. You may also contact Cigna OneGuide by calling 888-806-5042.

WATCH & LEARN

For a deeper dive into health insurance and how it works, click on the following links:

- [Prescription Drugs](#)
- [HSA Overview](#)
- [HSA Eligible Expenses](#)
- [HSA VS PPO](#)

Medical

Following is a high-level overview of the coverage available. For complete coverage details, please refer to the Summaries of Benefits and Coverage (SBCs).

Key Medical Benefits	Basic Open Access Plus with HSA		Enhanced Open Access Plus with HSA		Open Access Plus	
	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Deductible (per calendar year)						
Individual	\$4,500	\$9,000	\$3,000	\$6,000	\$1,500	\$3,000
Individual in a Family	\$4,500	\$9,000	\$3,400	\$6,800	\$1,500	\$3,000
Family	\$9,000	\$18,000	\$6,000	\$12,000	\$2,500	\$5,000
Out-of-Pocket Maximum (per calendar year)						
Individual	\$8,000	\$16,000	\$6,000	\$12,000	\$5,500	\$11,000
Individual in a Family	\$8,000	\$16,000	\$6,000	\$12,000	\$5,500	\$11,000
Family	\$16,000	\$32,000	\$12,000	\$24,000	\$11,000	\$22,000
Company Contribution to Your Health Savings Account (HSA) (per calendar year; prorated for new hires/newly eligible)						
Individual / Family	\$750 / \$1,500		\$350 / \$700		N/A	
Covered Services						
Office Visits (physician/specialist)	30%* / 30%*	50%*	20%* / 20%*	40%*	\$25 / \$40 copay	40%*
Telehealth Visit (MDLIVE)	\$0	Not covered	\$0	Not covered	\$0	Not covered
Routine Preventive Care	No charge	50%*	No charge	40%*	No charge	40%*
Outpatient Diagnostic (lab/X-ray)	30%*	50%*	20%*	40%*	20%*	40%*
Complex Imaging	30%*	50%*	20%*	40%*	20%*	40%*
Chiropractic	30%* ²	50%* ²	20%* ²	40%* ²	\$25 (primary) / \$40 copay (specialist) ²	40%* ²
Ambulance	30%*	30%*	20%*	20%*	20%*	20%*
Emergency Room	30%*	30%*	20%*	20%*	\$100 copay	\$100 copay
Urgent Care Facility	30%*	50%*	20%*	40%*	\$25 copay	40%*
Inpatient Hospital Stay	30%*	50%*	20%*	40%*	\$100 copay then 20%	40%*
Outpatient Surgery	30%*	50%*	20%*	40%*	20%*	40%*
Prescription Drugs (Generic / Brand / Non-Formulary / Specialty)						
Retail Pharmacy (30-day supply)	\$15*/\$35*/\$60*/ 30% up to \$200*	Not covered	\$15*/\$35*/\$60*/ 30% up to \$200*	Not covered	\$15/\$35/\$60/ 30% up to \$200	Not covered
Mail Order (90-day supply)	\$30*/\$70*/\$120*/ 30% up to \$200	Not covered	\$30*/\$70*/\$120*/ 30% up to \$200	Not covered	\$30/\$70/\$120/ 30% up to \$200	Not covered

The coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying. *Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay. 1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount. 2. 20 visits per calendar year

Medical Rates

MEDICAL BIWEEKLY COSTS (BASED ON 26 PAY PERIODS)

	Basic Open Access Plus with HSA	Enhanced Cigna Open Access Plus with HSA	Cigna Open Access Plus
Employee Only	\$25.01	\$46.60	\$110.49
Employee + Spouse/Domestic Partner	\$137.85	\$195.72	\$297.00
Employee + Child(ren)	\$71.27	\$108.97	\$176.34
Employee + Family	\$168.80	\$236.58	\$357.99

Note: Adding a domestic partner (or their dependents) to your benefits may result in imputed income, which is taxable if your partner does not qualify as your IRS tax dependent. Please consult your tax advisor for details.



Behavioral & Health Care Resources

LIFE ASSISTANCE PROGRAM

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The life assistance program is provided at **NO COST** to you through New York Life. **The life assistance program can help with issues such as mental health, relationships, help finding child and eldercare, pet sitters, continuing education, travel information, grief and loss, legal or financial issues, and more.**

Life Assistance Program Benefits

- Assistance for you and your household members
- Up to three face-to-face sessions with a counselor per issue, per year, per individual
- Unlimited toll-free phone access and online resources
- Legal: Free 30-minute legal consultation with an attorney, and up to a 25% discount on select fees
- Financial: Free 30-minute consultation and 25% discount on tax planning and preparation

TELEHEALTH CONNECTION

We have partnered with MDLIVE to provide Cigna medical plan members and their loved ones a safe and convenient alternative to doctor's office visits. U.S. board-certified practitioners are available 24/7 by phone or video chat to help diagnose a range of non-emergency conditions, such as asthma, allergies, cold/flu and sinus infections. They can even write you a prescription, if needed. Finally, you can use MDLIVE to address behavior health concerns, such as anxiety, grief, depression and stress. All services are now available at \$0 copay.

CIGNA RESOURCES

Cigna offers a number of services to medical plan members. Resources include:

- **HeadSpace:** Happy minds, health workplaces with Headspace for Cigna Healthcare. This unique partnership offers Cigna members access to thousands of meditations, mindfulness exercises, clinically validated programs, sleepcasts, guided workouts, and focus music. Members can explore content on their own or receive personalized recommendations based on their needs. In addition to a wide range of everyday support tools, members also have access to Ebb, headspace's empathetic AI companion for reflection, emotional check-ins, and personalized guidance.

CIGNA MOTIVATEME WELLNESS PROGRAM

Earn up to \$500 in rewards by completing certain health activities and annual preventive care screenings. Spouses or domestic partners who are covered under our Cigna medical plans are also eligible to earn up to \$500 in rewards. Examples of healthy activities include:

Goals	Value
Health Assessment	\$50
Biometric Screening	\$100
Preventive Care Well Visit	\$150
Preventive Care Cancer Screenings	\$300
Omada (5% Weight Loss)	\$300
Complete a Goal with a Health Coach	\$100

To start earning rewards, log on to [myCigna.com](https://mycigna.com), click on Wellness, and then View All Incentives.

CIGNA ONE GUIDE

The Cigna One Guide service can guide you through the complexities of the health care system so you can make informed decisions and lower your costs. One Guide can help you:

- Understand your benefits
- Find in-network doctors and other health care providers
- Decode your medical bills
- Get cost estimates
- And more

WATCH & LEARN

To learn more about the importance of well-being, watch our short video by [clicking here](#).

Dental

We are proud to offer you a choice between three different dental plans.

CIGNA DHMO

With this plan, you choose a primary dental provider to manage your care. There are no charges for most preventive services, no claim forms and no deductibles. Reduced, pre-set charges apply to other services.

Please Note: The DHMO plan is not available in AK, ME, MT, NH, NM, PR, SD, VT, WY, VI.

CIGNA DPPO

These plans offer you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist who participates in the Cigna network.

The table on the right is a high-level overview of the coverage available.

Key Dental Benefits	Dental DHMO	Dental PPO Basic		Dental PPO Enhanced	
	In-Network Only	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Deductible (per calendar year)					
Individual / Family	None / None	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150
Benefit Maximum (per calendar year; preventive, basic, and major services combined)					
Individual	None	\$1,000	\$1,000	\$2,000	\$2,000
Covered Services					
Preventive Services	See Schedule	No charge	No charge	No charge	No charge
Basic Services	See Schedule	20%*	20%*	20%*	20%*
Major Services	See Schedule	50%*	50%*	50%*	50%*
Orthodontia (Child & Adult)	See Schedule	50%; \$1,000 lifetime maximum benefit per member	50%; \$1,000 lifetime maximum benefit per member	50%; \$1,500 lifetime maximum benefit per member	50%; \$1,500 lifetime maximum benefit per member

Coinsurance percentages shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

DENTAL BIWEEKLY COSTS (BASED ON 26 PAY PERIODS)

Key Medical Benefits	Dental DHMO	Dental PPO Basic	Dental PPO Enhanced
Employee Only	\$0.92	\$2.44	\$5.20
Employee + Spouse/Domestic Partner	\$2.59	\$8.33	\$15.78
Employee + Child(ren)	\$3.02	\$10.10	\$19.15
Employee + Family	\$4.51	\$13.48	\$25.55

Vision

VISION PLAN

The Vision Service Provider (VSP) vision plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Vision Service Provider (VSP) network.

The table below is a high-level overview of the coverage available.

Key Vision Benefits	In-Network	Out-of-Network Reimbursement
Exam (once every 12 months)	\$10	\$50 / \$150
Materials Copay	\$25	N/A
Lenses (once every 12 months)		
Single Vision	No charge after materials copay	Up to \$50
Bifocal		Up to \$75
Trifocal		Up to \$100
Frames (once every 24 months)	Covered up to \$150 plus 20% discount on any additional cost	Up to \$70
Contact Lenses (once every 12 months; in lieu of glasses)	Covered up to \$150	Up to \$105

VISION BIWEEKLY COSTS (BASED ON 26 PAY PERIODS)

Key Medical Benefits	VSP PPO
Employee Only	\$0.46
Employee + Spouse/Domestic Partner	\$2.91
Employee + Child(ren)	\$2.97
Employee + Family	\$4.79



Flexible Spending Accounts (FSAs)



We provide you with an opportunity to participate in up to two different flexible spending accounts (FSAs) administered through WEX Benefits. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

Health Care FSA

For 2026, you may contribute up to \$3,400 to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. Some qualified expenses include:

- Coinsurance
- Copayments
- Deductibles
- Prescriptions
- Dental treatment
- Orthodontia
- Eye exams/eyeglasses
- Lasik eye surgery

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Daycare (Dependent Care) FSA

For 2026, you may contribute up to \$7,500 (per family) to cover eligible dependent care expenses (\$3,750 if you and your spouse file separate tax returns). Some eligible expenses include:

- Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

FSA Rules (January 1 - December 31, 2026)

You must enroll each year to participate. The FSAs will be in effect from January 1 to December 31. You may contribute up to \$3,400 to the health care FSA and \$7,500 to the dependent care FSA.

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules:

Health Care FSA: The health care FSA is available to Cigna Open Access Plus PPO plan members only. If you are enrolled in an HSA plan, you cannot participate in the health care FSA.

Rollover: For the Health Care FSA, funds up to \$680 that are not used by December 31, 2026 may be rolled over to the 2027 Plan Year. You **MUST** re-enroll in the Healthcare FSA the following year for the roll over to apply.

Daycare (Dependent Care) FSA: Unused funds will **NOT** be returned to you or carried over to the following year.

You can incur expenses through December 31, 2026, and must file claims by March 30, 2027.

Maximum contribution amount is established by the IRS and your employer each year. See plan document for details.

Life/AD&D and Disability Insurance

Life, accidental death and dismemberment (AD&D) and disability insurance provide financial security to you and your family if you pass away, become seriously injured or experience an illness or injury that prevents you from working.

BASIC LIFE/AD&D (COMPANY-PAID)

This benefit is provided at **NO COST** to you through New York Life Insurance.

Benefit Amount	
	<ul style="list-style-type: none"> Hourly (non-exempt): 2x annual salary up to \$100,000 Salaried (exempt): 2x annual salary up to \$150,000 Director-level and above: 2x annual salary up to \$500,000

SUPPLEMENTAL LIFE/AD&D (EMPLOYEE-PAID)

If you determine you need more than the basic coverage, you may purchase additional coverage through New York Life Insurance for yourself and your eligible family members.

Benefit Options		Guaranteed Issue
Employee Only	Units of \$10,000, up to the lesser of 5 times salary or \$500,000	\$150,000
Employee + Spouse/Domestic Partner	Units of \$5,000, up to the lesser of 50% of employee's voluntary coverage or \$250,000	\$30,000
Child(ren)	Birth to 6 months: \$500; 6 months to 26 years: Units of \$2,000 to maximum of \$10,000	All amounts are GI

**Only during your initial new hire eligibility period can you receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.*

TRAVEL ASSISTANCE PROGRAM

New York Life Secure Travel comes with your basic and/or supplemental AD&D coverage and is available whenever you travel more than 100 miles from home. It provides pre-trip planning assistance, emergency medical and travel services, and evacuation and repatriation services. To learn more, call 888-226-4567, or 202-331-7635 if outside the U.S.

DISABILITY

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness. **Note:** Millennium Health voluntary buy-up short-term disability benefits are coordinated with California state disability insurance benefits.

Short-Term Disability (non-California employees)	
Provided at NO COST through New York Life Insurance.	
Benefit Percentage	60%
Weekly Benefit Maximum	\$1,357
When Benefits Begin	After 7th day of disability
Maximum Benefit Duration	13 weeks
Voluntary Buy-Up Short-Term Disability (all employees)	
Provided at an affordable group rate through New York Life Insurance.	
Benefit Percentage	60%
Weekly Benefit Maximum	\$2,500
When Benefits Begin	After 7th day of disability
Maximum Benefit Duration	13 weeks
Voluntary Long-Term Disability*	
Provided at an affordable group rate through New York Life Insurance.	
Benefit Percentage	60%
Monthly Benefit Maximum	\$10,000
When Benefits Begin	After 90th day of disability
Maximum Benefit Duration	To Age 65 or Social Security Retirement Age

*Requires evidence of insurability (EOI).

Voluntary Benefits

METLAW LEGAL PLAN

When you enroll in the voluntary legal plan, you and your family have access to attorneys who can assist and advise on a variety of legal issues. The legal plan gives you access to consultation in-person and over the phone to help with personal legal matters, including document review and creation, court appearances, estate planning, family law, real estate matters and financial concerns. The per pay period cost is **\$9.00**.

For more information, visit MetLife at www.legalplans.com and enter access code GETLAW or call 800-821-6400.

FARMERS AUTO AND HOME INSURANCE

Enjoy exclusive group rates on auto, home and other personal insurance policies. Pay for coverage through automated payments or by credit card. You may enroll by contacting Farmers Insurance directly at myautohome.farmers.com or call 800-438-6381 to enroll in coverage and enjoy discounts provided to Millennium Health employees.

NATIONWIDE PET INSURANCE

We understand that some of your family members bark, meow, chirp or hiss. With Nationwide pet insurance, you'll get:

- Up to 90% back on vet bills for a variety of treatments and conditions
- Wellness plan option with spay/neuter, vaccinations and more
- \$250 deductible with \$7,500 maximum annual benefit

For a free, no-obligation quote, visit www.petinsurance.com/millenniumhealth.



NORTON ID THEFT PROTECTION

Norton LifeLock Benefit Plans provide an all-in-one solution to help protect you and your family's information from falling victim to identity theft. Get alerts to possible identity threats, the ability to proactively lock accounts, and if your identity is stolen, Norton works to fix it. There are two plans available—Premier and Premier Plus, available for Employee Only or Family coverage.

For more information about the benefit, check out the Norton LifeLock Microsite: lifelockbusinessolutions.com/EmployeeBenefits/Benefitplans.

Biweekly Rates	Premier	Premier Plus
Employee Only	\$3.69	\$5.76
Family	\$6.91	\$9.91



Voluntary Benefits

VOLUNTARY ACCIDENTAL INJURY & HOSPITAL CARE INSURANCE

While Cigna’s medical plans provide comprehensive coverage, you may still face significant medical expenses your plan won’t cover if you have an accident or become sick. In the event of an injury or accident, Cigna’s Accidental Injury insurance can help pay for expenses and bridge these gaps in coverage. The voluntary accidental injury insurance provides a lump sum payment to you, unless otherwise assigned, based on a schedule of covered injuries. The money can be used as you see fit—there are no copays, deductibles, coinsurance, restrictions or network requirements to satisfy. The coverage continues even after the first accident to provide additional protection for future accident events.

Cigna’s Accidental Injury insurance plan comes with a **\$50 incentive benefit** for wellness treatments, health screening tests or preventive care. This means that you and your covered family members can get paid to get an annual adult immunization, general health exam or screenings for conditions such as osteoporosis.

Covered injuries may include:

- Broken bones
- Burns
- Torn ligaments
- Concussions
- Eye injuries
- Ruptured discs
- Cuts requiring stitches

Benefits can pay for:

- Initial treatment
- Emergency room visit
- Hospitalization
- Follow-up care

Cigna Hospital Care provides additional protection to help you and your family when you encounter an unexpected hospital stay resulting from a covered injury or illness. Coverage continues after the first covered hospital stay, to ensure you have additional protection for future hospital stays.

Cigna Hospital Care can help you pay for expenses related to:

- Medical bills (i.e., pregnancy/delivery)
- Child care
- Travel
- Other out-of-pocket expenses

Benefit Type	Benefit Amount
Hospital Admission	\$1,000 per admission
Hospital Chronic Condition Admission	\$50 per day
Hospital Stay	\$100 per day
Hospital Intensive Care Unit Stay	\$200 per day
Hospital Observation Stay	\$100 per 24-hour period

There are no copays, deductibles, coinsurance or network requirements. These two coverage options provide lump-sum payments directly to you, your spouse/domestic partner and children up to age 26. You can use these lump-sum benefits to pay for any out-of-pocket expenses related to your accident or hospital stay.

COST OF VOLUNTARY BENEFITS

Voluntary Accident	
With Wellness	Biweekly Rates
Employee Only	\$3.77
Employee + Spouse/Domestic Partner	\$6.65
Employee + Child(ren)	\$7.08
Employee + Family	\$9.68

Voluntary Hospital Indemnity	
Cigna	Biweekly Rates
Employee Only	\$8.42
Employee + Spouse/Domestic Partner	\$17.52
Employee + Child(ren)	\$14.82
Employee + Family	\$23.91

Financial & Work-Life Benefits

401(K) RETIREMENT PLAN

Contributing to a 401(k) is one of the best ways to prepare yourself for a great retirement and a secure future. You should review your retirement goals to ensure your contribution matches your target retirement income. The following are key features of the plan:

401(k) At-a-Glance	
Eligibility	All employees 18 years+
Employee Contribution	Automatically enrolled at 4% of pay*
Employer Match	1:1 match up to 2% of eligible compensation
Annual Contribution Limit	\$23,500
Catch-up Contributions (if age 50-59 or 64+)	Up to \$7,500
Catch-up Contributions (if age 60-63)	Up to \$11,250

*You may change your contributions at any time.

Deciding between a Traditional and Roth IRA? They both offer tax-advantaged ways to save for retirement. A Roth IRA allows you to contribute after-tax dollars, your money grows tax free and you can generally make tax- and penalty-free withdrawals after age 59½; a Traditional IRA allows you to contribute pre- or after-tax dollars, your money grows tax-deferred and withdrawals are taxed as current income after age 59½. Visit venrollment.com/v/millennium-health.

EMPLOYEE LOAN PROGRAM

Kashable offers access to low-cost personal loans that are automatically repaid through payroll. Funds are deposited directly to your bank account in as little as one business day. Get access to one-on-one financial coaching, low fixed APRs, loans up to \$20,000 and 6- to 24-month repayment terms, with no hidden fees or prepayment penalties. All full-time employees with at least 12 months of employment are eligible. Questions? Call 646-214-7200 or email support@kashable.com.

PAID TIME OFF

Millennium Health recognizes the need to take time off from work. Full-time employees accrue vacation time based on their years of service according to the following schedule. Vacation time for part-time employees is prorated based on hours worked.

Full-Time Employees		
Years of Service	Days Per Year	Hours Per Pay Period
1-5	15	4.62
5-10	20	6.15
10+	22	6.76

SICK LEAVE

Accrual of sick time is determined in accordance with applicable state and local laws. For specific information regarding accrual rates, eligibility and usage, please refer to the Employee Handbook and your applicable State Addendum.

FLEX TIME OFF

Certain management and exempt professional-level employees are eligible for Millennium Health's Flex Time Off program.

COMPANY PAID HOLIDAYS

Millennium Health observes the following paid holidays. Part-time employees will receive holiday pay based on their normal hours of work.

- New Year's Day
- Black History Month (floating)
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Day After Thanksgiving
- Christmas Eve
- Christmas Day

VOLUNTEER DAYS

Millennium Health wants you to make a positive impact on our communities, which is why we encourage you to take one day a year to participate in volunteer work and events.

PAID PARENTAL LEAVE

To help you bond with the newest addition to your family, Millennium Health provides one week of paid parental leave for the birth or adoption of a child. You must be an active Millennium Health employee working a minimum of 20 hours per week for six continuous months.

PERKSPOT

PerkSpot is a platform that provides you with access to a wide array of discounts from brand-name products, services and daily necessities. Unlock exclusive deals by visiting [PerkSpot](#).

TUITION REIMBURSEMENT PROGRAM

Millennium Health invests in your education and career development. **Eligible employees are reimbursed up to \$5,250 a year for qualified expenses in a pre-approved course of study.** To apply, complete and submit the Tuition Reimbursement Application.

Contact Information

Coverage	Carrier	Group/Policy Numbers	Phone #	Website/Email
Medical	Cigna	3339798	800-244-6224	www.mycigna.com
Telehealth Connection	MDLIVE	3339798	888-726-3171	www.mdliveforcigna.com
One Guide	Cigna	3339798	888-806-5042	www.mycigna.com
Health Savings Account (HSA)	HSA Bank	--	800-244-6224	www.mycigna.com
Dental	Cigna	3339798	800-244-6224	www.mycigna.com
Vision	VSP	30025512	800-877-7195	www.vsp.com
Life Assistance Program	New York Life	--	800-344-9752	guidanceresources.com Web ID: NYLGBS
Flexible Spending Accounts (FSAs)	WEX Benefits	--	866-451-3399	www.wexinc.com
Basic Life/AD&D	New York Life	FLX966624 / OK968144	800-362-4462	www.mynylgbs.com
Supplemental Life/AD&D	New York Life	FLX967309/ OK968825	800-362-4462	www.mynylgbs.com
Short-term/Long-term Disability	New York Life	VDT962109 / VDT962567	800-362-4462	www.mynylgbs.com
Voluntary Legal Services	MetLife	--	800-821-6400	www.legalplans.com (access code: GETLAW)
Voluntary Auto/Home Insurance	Farmers	--	800-438-6381	www.myautohome.farmers.com
Voluntary Accident & Hospital Insurance	Cigna	AI112222 / HC111769	800-754-3207	www.mycigna.com
Voluntary Pet Insurance	Nationwide	--	Claims: 800-540-2016	www.petinsurance.com/millenniumhealth
Voluntary ID Theft Protection	Norton LifeLock	E0017802	800-607-9174	www.lifelockbusinesssolutions.com/ EmployeeBenefits/Benefitplans
Employee Loan Program	Kashable	--	646-214-7200	support@kashable.com
401(k)	Fidelity Investments	85857	800-835-5097	www.401k.com

Benefits Website: Our benefits website www.millenniumbenefits.org can be accessed anytime you want additional information on our benefits programs
Questions? If you have additional questions, you may also contact Benefits@MillenniumHealth.com.
LEGAL NOTICES: 2026 Millenium Legal Notices and Medicare Part D Notices can be found [here](#).