

2023 Benefit Enrollment Guide

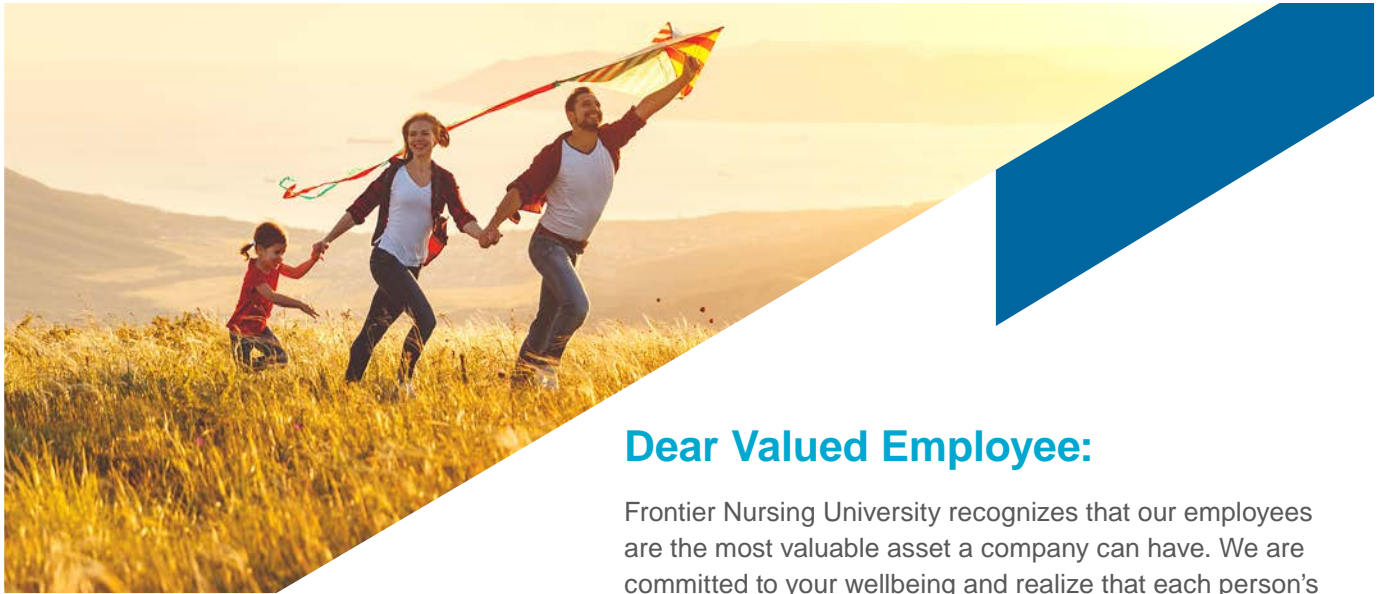
WHAT'S INSIDE?

- ▶ How Your Benefits Work
- ▶ Your Insurance Plans
- ▶ Benefits Enrollment



FRONTIER NURSING
UNIVERSITY





Dear Valued Employee:

Frontier Nursing University recognizes that our employees are the most valuable asset a company can have. We are committed to your wellbeing and realize that each person's needs are unique. Our objective is to provide a benefits package that is comprehensive, affordable, diverse, mindful of our unique corporate culture, and sensitive to our business needs. In consideration of this, we strive to offer a variety of benefits with highly rated carriers and vendors designed to offer you opportunities to mitigate your risks and provide peace of mind to you and your family.

To fulfill these objectives, we are committed to:

- **Continuously evaluating how we choose our healthcare coverage**, how we are using healthcare services and how we can help our employees manage their personal health decisions.
- **Providing affordable opportunities** for our employees to mitigate their financial risks.
- **Communicating with and educating** you about the benefits and resources available to you.

As benefits represent an important component of your total compensation package, we are pleased to provide you with the 2023 benefit offerings included in this guide. Please review this enrollment guide for a summary* of the benefits that are available to you and your family for enrollment along with tips and resources that will help you maximize the value of the coverage you elect. This guide will summarize who is eligible to enroll, when you are eligible to enroll, what coverage options are available to you and the cost of coverage. It will also provide you contact information in case you have detailed questions or need more information.

Best Regards,
Frontier Nursing University

What's Inside

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This communication represents a brief summary of the various benefits available to you and is provided as a reference only. The actual carrier policies determine coverage and contain exclusions, limitations, full coverage terms, conditions and requirements. Any notices included in this document do not replace other potential employer requirements for communication.



CONTACT INFORMATION



Medical

Anthem

1-833-578-4443
www.anthem.com

Pharmacy

Anthem

1-833-578-4443
www.anthem.com

Dental

Anthem

1-855-769-1464
www.anthem.com

Vision

Anthem

1-866-723-0515
www.anthem.com

Short Term and Long Term Disability

Symetra

1-800-796-3872
www.symetra.com

Life with AD&D Insurance

Symetra

1-800-796-3872
www.symetra.com

Voluntary Life with AD&D Insurance

Symetra

1-800-796-3872
www.symetra.com

Flexible Spending Account (FSA)

BMS

1-800-919-2696
www.bmsllc.net

Health Savings Account (HSA)

BMS

1-800-919-2696
www.bmsllc.net

Health Reimbursement Account (HRA)

BMS

1-800-919-2696
www.bmsllc.net

Employee Assistance Program (EAP)

Symetra

1-800-796-3872
www.symetra.com



WORK, LIFE BALANCE

BEREAVEMENT LEAVE

If a full-time employee wishes to take time off due to the death of an immediate family member (including domestic partners' family), they can use up to five days paid bereavement leave. Payment is based on the employee's current rate of pay. Additionally, they may use three days of bereavement leave for an extended family member and one day for a close friend or co worker/associate.

VACATION BENEFITS

Regular full-time employees accrue vacation benefits, which increase with the length of employment.

- Upon initial eligibility an employee accrues ten days per year.
- After one year of service employees accrue fifteen days per year.
- After five years of service employees accrue twenty days per year.
- Frontier Nursing University faculty will be per contract up to four weeks per year.

HOLIDAYS

Holiday time off is granted to all full-time employees on the holidays listed below:

- New Years Day
- Martin Luther King, Jr. Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Thanksgiving Day
- Friday after Thanksgiving Day Christmas Day
- Two (2) Personal Holidays (as eligible) Holiday pay will be calculated based on the employee's straight-time pay rate.
- Winter Break (Dates TBD by President's Cabinet)

SICK LEAVE

Sick Leave benefits are paid to all full-time employees for periods of temporary absence due to illnesses or injuries. Employees will accrue sick leave benefits at the rate of twelve days per year (once per month).

JURY DUTY

Full-time employees may request up to four weeks of paid jury duty leave over any two-year period. Jury duty pay will be calculated on the employee's base pay rate times the number of hours the employee would otherwise have worked on the day of absence.

EDUCATIONAL ASSISTANCE

Full-time employees who have completed 365 days of service may apply for educational assistance.

BUSINESS TRAVEL EXPENSES

Frontier Nursing University will reimburse employees for reasonable business travel expenses incurred while on assignments away from their normal work location.

RETIREMENT BENEFITS

Our 401(k) plan is administered by TIAA-Cref. In addition to allowing you to save for your retirement, Frontier Nursing University will match 100% of your contributions to the plan up to 9% of gross wages. Please contact Human Resources for more information regarding your eligibility for the 401(k) Profit Sharing Plan.

Employees who have completed 90-days of service in an eligible classification may contribute to the 401(k)-plan. Entry dates for retirement benefits will be quarterly (January 1, April 1, July 1, and October 1.) Frontier Nursing University will match 100% of your contributions to the plan up to 9% of gross wages.

Faculty who are considered PRN and who have completed 1,000 hours in the prior year are eligible to participate in the plan. Faculty who are .5 FTE and above are eligible to participate after completing 90 days of service.

FACULTY BENEFITS

After six month introductory period 1.0 FTE are eligible for the following annually:

- \$1,900 for Continuing Education (must be pre approved)
- Up to \$1,500 for Scholarly Endeavors (must be pre-approved)

Eligible for reimbursement of professional membership dues up to \$400 annually, per specialty certification (CNM, FNP, WHCNP and/or PMHNP) annually upon hire.



ELIGIBILITY



What is Open Enrollment?
<https://www.brainshark.com/1/player/mmawest?pi=zluz16QLHazUxwmz0&r3f1=&fb=0>



Eligibility for you and your dependents

You are eligible to participate in the group benefit plans if you are an active full-time employee and scheduled to work 30 or more hours per week. Employees are eligible to enroll on the first day of full-time employment. Certain dependents of eligible team members can enroll in the medical, dental, vision, dependent life insurance plans and voluntary benefits.



Eligible dependents include:

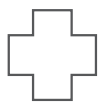
- Your legal spouse
- Your natural children, legally adopted children, step children and children for whom you assume legal guardianship up to age 26
- Children age 26 or older incapable of self-support due to a mental or physical condition incurred prior to age 26. You may be required to complete a Handicapped/Disabled Certification form prior to the child attaining age 26

Please note: If you pay for health insurance for domestic partners or other beneficiaries that are not legal spouses or dependents as defined by the Internal Revenue Service (IRS), ADP will calculate the estimated fair market value (FMV) of those health benefits and credit that amount as "imputed income". Please refer to IRS guidelines for domestic partner benefits.

Qualifying Life Events

The choices you make during your New Hire period or Annual Open Enrollment period are irrevocable until either the next Annual Open Enrollment period or unless you experience a qualifying life event. Qualifying life events include changes to your legal marital status, giving birth or adopting a child, a change in you or your spouse's employment status or your entitlement to Medicare.

If you anticipate any of these changes, please see Human Resources in advance of the event to verify your right to change plan coverage(s). You must elect your change in benefits within 30 days of the qualified life event. **If you do not notify Human Resources within 30 days of a qualifying event, you will have to wait until the next annual open enrollment period to make benefit changes unless you have another qualifying event.**



Loss of Essential Coverage



Loss of COBRA Benefits



Marriage or Divorce



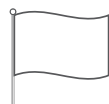
Permanent Relocation



Birth, adoption or new dependent



Aged off of Parent's Plan



Change in Citizenship



Change in Employment Status



Death in Family



Change in Government Assistance Eligibility



Q&A

Can you explain the meaning of some of the key terms in this guide?

- **Deductible:** a set dollar amount that a person must pay before insurance coverage for medical expenses can begin. They are usually charged on an annual basis.
- **Coinsurance:** the money that an individual is required to pay for services after the deductible has been met. It is often a specified percentage of the charges.
- **Copayment (aka Copay):** an arrangement where an individual pays a specified amount for various health care services and the health plan or insurance company pays the remainder. The individual must usually pay his/her share when services are rendered. Copayments are usually a set dollar amount.
- **Out-of-pocket Maximum:** the total amount paid each year by the member for the deductible, coinsurance, copayments and other covered health care expenses, excluding the premium. After reaching the out-of-pocket maximum, the plan pays 100% of the allowable charges for covered services the rest of that year.

Can I have an FSA and HSA at the same time? If you participate in the Dependent Care FSA, you can also participate in the HSA plan. However, if you have an HSA you can't participate in the Health FSA (unless it is a limited FSA).

How much life insurance do I need? Many people decide based on an income replacement calculation, between 5 and 10 times the amount of your current income. Think about your personal circumstances: Is yours the sole income in your household? Are there other expenses, such as college tuition, that may arise in the future? Don't forget to include potential medical and funeral costs. Above everything, you want to be sure your family does not get stuck with bills, debts or expenses that they cannot afford. Depending on your needs, you may want to consider buying supplementary coverage beyond what offers.

Do I need Long Term Care coverage if I have medical insurance and/or disability insurance? Doesn't Medicare cover the cost of a nursing home for seniors? Major medical insurance or disability insurance does not protect you and your family in the same way that long-term care insurance can. In fact, health insurance plans generally cover only about 30 days of recuperative time, while a long-term plan may cover two years or more.

Disability insurance, though it replaces your salary at the time of injury, does not cover any ongoing medical care.

Medicare is even more restrictive, and should not be relied on as your sole resource for substantial long-term care expenses. This is because it reimburses only up to a maximum of 100 days—with the average repayment of expenses being only 28 days.

How much should I contribute to my FSA? Review your out-of-pocket medical expenses and/or dependent daycare expenses from last year.

Can the FSA pay for my health insurance premiums? No.

Why might I want Accident/Critical Illness coverage if I am enrolled in a major medical plan?

These plans are not intended to replace major medical coverage. These plans complement medical plans by eliminating the concern of having to pay for a high deductible or other out-of-pocket expenses in the event of applicable catastrophic events. These plans can serve as an affordable way to fill in a gap in coverage and help reduce your financial risks.



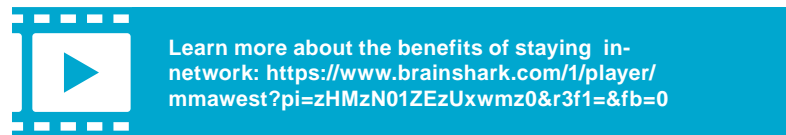
MAKING THE MOST OF YOUR BENEFITS

Staying In-Network

Anthem has contracted with a network of providers, including physicians, hospitals and other types of providers. In order to receive the highest level of benefits and pay the least amount out-of-pocket, you need to access care from the providers who have elected to be part of the network. This plan does allow you to seek care from a provider who is not in the network. Just remember that if you make this choice, you will be required to pay a larger portion of the expenses out of your pocket, and the expenses may be subject to the Reasonable and Customary charging pattern for the area. This could also result in a greater out-of-pocket expense for you. We want you to get the most from your healthcare plan.

Your medical network is made up of:

- Convenience care (quick) clinics
- Physicians
- Facilities (urgent care, emergency room)
- Nurse practitioners
- Specialists
- Pharmacies



When you see an in-network provider, you will:

- Have lower health care costs for medical services and prescription drugs.
- Not need to obtain pre-authorization before a procedure such as surgery, your in-network provider will handle this on your behalf.
- Not have to worry about paying for balance-billed charges and charges above the usual, reasonable, and customary.
- Not have to fill out forms to send to the insurance carrier in order to receive reimbursement, your in-network provider will handle this on your behalf.

How to find an in-network provider:

- Visit Anthem's website at www.anthem.com
- Check the Sydney mobile app



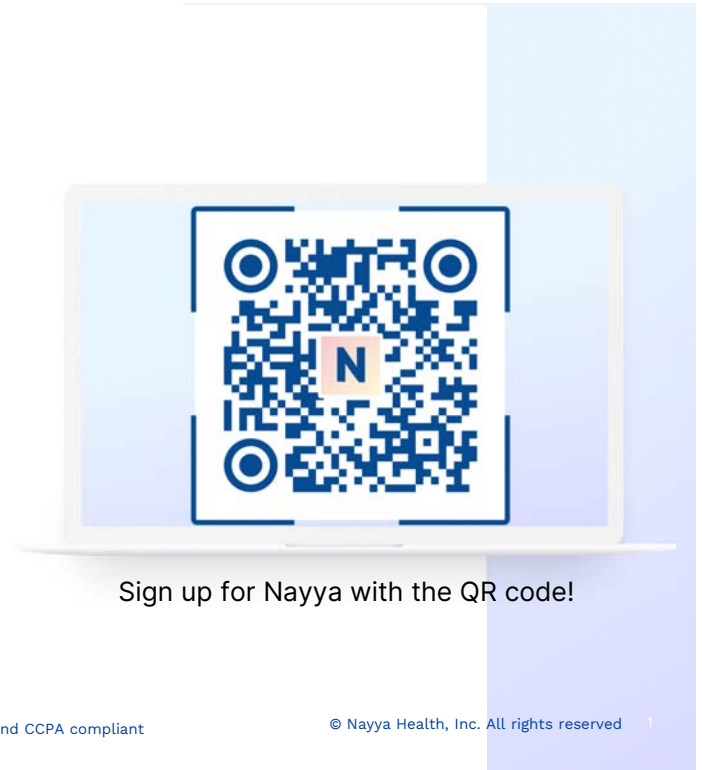


Meet Nayya

Giving consumers financial peace on their best days and confidence on their worst. In order to help you better understand which benefits best serve the unique needs of you and your family, **Frontier Nursing University has partnered with Nayya** to provide each employee access to their own personalized benefit recommendations.

Complete Nayya's short survey and get your **personalized benefit bundle**.

After you've completed the survey, proceed to ADP to complete your benefit elections.



Sign up for Nayya with the QR code!

Nayya

SOC-2, HIPAA, and CCPA compliant

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HEALTHCARE BENEFITS

MEDICAL | HSA | DENTAL | VISION | FSA



Medical Summary of Benefits

Medical Plan Highlights			
Plan Type	HSA	Core PPO 2500	Enhanced PPO 500
In-Network			
Employee Deductible	\$3,000	\$2,500	\$500
Family Deductible	\$6,000	\$7,500	\$1,500
Employee Out-of-Pocket	\$5,000	\$6,250	\$2,800
Family Out-of-Pocket	\$10,000	\$12,500	\$5,600
Coinsurance	20%	20%	20%
Preventive Annual Exam	100% Covered	100% Covered	100% covered
Primary Care	Ded + 20%	Preferred PCP: \$10 PCP: \$25	Preferred PCP: \$10 PCP: \$25
Specialist	Ded + 20%	\$25	\$25
Inpatient Hospital	Ded + 20%	Ded + 20%	Ded + 20%
Outpatient Surgery	Ded + 20%	Ded + 20%	Ded + 20%
Urgent Care	Ded + 20%	\$75	\$75
Emergency Room	Ded + 20%	\$250+ 20%	\$250 + 20%

Medical Payroll Deductions Salary > \$45,000			
Plan Type	HSA	Core	Enhanced
Employee Only	\$34.78	\$39.46	\$84.75
Employee + Spouse	\$126.27	\$143.22	\$301.60
Employee + Child(ren)	\$94.44	\$107.12	\$225.57
Family	\$173.75	\$197.07	\$415.01

Medical Payroll Deductions Salary < \$45,000			
Plan Type	HSA	Core	Enhanced
Employee Only	\$34.78	\$39.46	\$74.78
Employee + Spouse	\$84.18	\$95.48	\$180.96
Employee + Child(ren)	\$62.96	\$71.41	\$135.34
Family	\$115.83	\$131.38	\$249.00



Understanding Medical Plan Types:
<https://www.brainshark.com/mmawest/vu?pi=zHZz8bJ5BzUxwmz0>

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.



Prescription Medication Coverage

Our medical coverage through Anthem (IngenioRx) includes a Prescription Drug Program. The cost of each prescription is determined by the tier it falls under. The three tiers are Generic, Preferred Drugs, and Non-Preferred drugs. You can find in-network pharmacies and a list of covered prescriptions at www.anthem.com.

Generic Drugs

To get more out of your health care plan, choose Generic drugs when possible. Generic drugs are the chemical equivalent of their more expensive brand name drug counterparts. Even if your doctor prescribes you a brand name drug, you can always ask for the Generic equivalent.

Preferred Drugs

Preferred brand drugs are prescriptions that your pharmacy benefit plan has selected as the most effective and cost efficient to treat certain conditions or illnesses. These brand name drugs are often more expensive than their generic counterpart.

Non-Preferred Drugs

Non-preferred brand drugs treat conditions or illnesses that can also be treated by a preferred brand or generic prescription. These drugs typically have a higher copayment.

Prescription Drug Tier Pricing			
In-Network Retail Rx (30 day supply)	HSA	Core	Enhanced
Generic	20% coinsurance after deductible is met	\$15	\$15
Preferred	20% coinsurance after deductible is met	\$40	\$40
Non-Preferred	20% coinsurance after deductible is met	\$75	\$75





SYDNEY MOBILE APP



Sydney Health makes healthcare easier

Access personalized health and wellness information when you need it

With the Sydney Health mobile app, you can access your medical, pharmacy, dental, vision, life, and disability benefits details in one place. Our simple experience makes it easy to find what you need — with one-tap access to benefits information, Member Services, virtual care, and wellness resources. Sydney Health helps you manage your benefits, so you can focus on your health.

Find Care

Search for doctors, hospitals, and other health care professionals in your plan's network and compare costs. You can filter providers by what is most important to you such as gender, languages spoken, or location.

My Health Dashboard

Use My Health Dashboard to find information on health topics that interest you, useful health and wellness tips, and personalized action plans that can help you reach your goals.

Live Chat

Find answers quickly with the Live Chat tool in Sydney Health. You can use the interactive chat feature or talk to an Anthem representative when you have questions about your benefits or need information.

Virtual Care

You can now conveniently connect with care from the comfort of home. Assess your symptoms quickly with the Symptom Checker, and visit a doctor over text or video chat to receive care through Sydney Health.

Community Resources

This resource center helps you connect with organizations offering free and reduced-cost programs to help with challenges such as food, transportation, and child care.

My Health Records

See a full picture of your family's health in one secure place. Use a single profile to view, download, and share information such as health histories and electronic medical records directly from your smartphone or computer.



Download Sydney Health today

Use the app anytime to:

- Find care and compare costs
- See what's covered and check claims
- View and use digital ID cards



Use your smartphone camera to scan this QR code



Say hello to Go365.

It's your personalized wellness and rewards program.

Getting healthier is easier – and lots more fun – with Go365™. When it comes to health and wellness, you have your own approach. One that works for you. Go365 makes it easier to get moving along your path with more ways to start, more Activities to unlock, and more ways to rack up rewards.



Unlock Activities.

Go365 is all about you. You'll receive Activities personalized to help you reach your health goals, no matter where you are on your journey to better health. Just unlock your Activities and earn Points for higher Status.



Stay inspired.

Getting healthier can be hard. Go365 makes it easier by connecting you to all the tools and resources you need to get there. Tracking your activity is a breeze – just connect your compatible apps or fitness devices and earn Points for all your healthy activities.



Earn rewards.

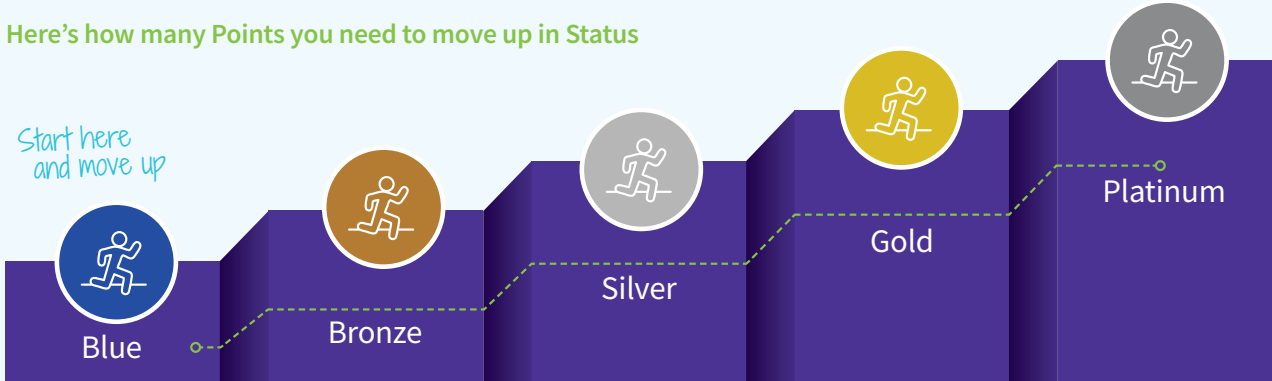
Making healthier choices is a lot more fun with Go365. The more you move up in Status, the more Bucks you can earn and spend on great items in the Go365 Mall. Plus, Bonus Bucks, surprise rewards, and monthly Jackpot drawings make getting healthy more fun!



More Points. Higher Status.

Earning Points pays off big with higher Status levels. Get your spouse and kids involved too and see how fast you can move up in Status.

Here's how many Points you need to move up in Status



3 ways to get to Bronze

1. Complete at least one Health Assessment section online or on the Go365 App
2. Get a Biometric Screening
3. Log a verified workout

5,000 One adult per policy	8,000 One adult per policy	10,000 One adult per policy
8,000 combined two adults per policy	12,000 combined two adults per policy	15,000 combined two adults per policy
+3,000 for each member 18 years and older per policy	+4,000 for each member 18 years and older per policy	+5,000 for each member 18 years and older per policy

Adult children can only move a family out of Blue Status by completing a verified workout.



Go365.com



Unlock Activities. Watch your success lead to your wellbeing.

Go365 is for anyone, at any stage... no matter what shape you're in or how hard you work out. Go365 knows what it takes to motivate and reward you to make healthier choices for life.

Activities	These are simple things you can do every day to get healthier. Tracking your steps, getting a flu shot, going for a bike ride – these are easy ways to keep moving forward with Go365.
Recommended Activities	Once you complete your Health Assessment, you'll get personalized Activities based on your responses. Because Recommended Activities are created just for you, they can have a big impact on your overall health. Plus, you earn more Points for each one you complete.
Go365 Kids*	Kids can earn Points when they do “kid” things, like playing on a soccer or baseball team. When you do things that are good for their health, like keeping up with their immunizations and getting a dental check-up, your kids earn more Points.
Challenges	Earn Points by going head-to-head against your friends and co-workers and compete for the most steps taken or pounds lost.

Have some healthy fun.

Getting healthier is a lot more fun with Go365. Earn Bucks you can use in the Go365 Mall for e-giftcards from Amazon.com, Target, Lowes and Spafinder, the latest activity trackers from Fitbit and Garmin and Fitbit, and more. Plus, you could win a prize in our monthly Jackpot drawings or get a surprise reward.

The image shows a circular graphic labeled "go365 Mall" containing logos for several retailers and brands: Lowe's Gift Card, iTunes, Wellness 365 by Spafinder, Macy's, and Amazon.com gift Card. In the background, a person's hand is shown adjusting a black Fitbit activity tracker on their wrist.



Go365.com

The merchants represented are not sponsors of Go365 or otherwise affiliated with Go365. The logos and other identifying marks attached are trademarks of and owned by each represented company and/or its affiliates. Please visit each company's website for additional terms and conditions. *Go365 Kids is not available to all Go365 programs. Check with your Employer or Benefits Administrator to check your eligibility. Go365 is not an insurance product. Not available with all Humana health plans. Humana Inc. and its subsidiaries ("Humana") comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que figura en su tarjeta de identificación. 注意:如果您能用繁體粵文·您聽電話費獲得語言援護服務。請致電會話熱線的電話號碼。

GCHJQZVEN



HEALTH SAVINGS ACCOUNT

Benefit Marketing Solutions

A Health Savings Account (HSA) allows you to set aside money on a pretax basis to pay for qualified expenses, such as doctor visits, prescriptions, braces, or even Lasik eye surgery, with tax-free dollars.

There is no use it or lose it rule with HSAs. Any remaining balance at the end of the year will roll over into the next plan year. HSAs are also portable. This means that if you were to change jobs or health plans, the money in your account stays with you.

One of the best parts of the HSA is its triple-tax advantage: tax-free deductions when you contribute to your account, tax-free investment earnings, and tax-free withdrawals for qualified medical expenses. You earn tax-free interest on the money in your HSA account. You may also have the option to invest the money in your HSA.

You will receive a card linked to your account to pay for qualified expenses. You may be penalized or taxed if you use your HSA funds to pay for ineligible expenses. A full list of qualified expenses can be found on the IRS website at www.irs.gov (section 213(d)).

Eligibility

- You are enrolled in the High Deductible Health Plan (HDHP); and,
- Are not covered under another medical plan such as Medicare, Tricare or a spouse’s medical plan (not an HDHP) which provides similar coverage; and,
- Cannot be claimed as a dependent on another person’s insurance policy or tax return.

Just a few examples of HSA eligible expenses:

- Acupuncture
- Alcoholism
- Ambulance
- Annual Physical Examination
- Artificial Limb
- Bandages
- Birth Control Pills
- Breast Pumps and Supplies
- Breast Reconstruction Surgery
- Contact Lenses
- Crutches
- Dental Treatment
- Diagnostic Devices
- Eye Exam
- Eyeglasses
- Hearing Aids
- Home Care
- Hospital Services
- Learning Disability
- Legal Fees
- Nursing Home
- Optometrist



2023 IRS Calendar Year Contribution Limits

\$3,850

INDIVIDUAL

\$7,750

FAMILY

\$1,000

AGE 55+ CATCH UP

\$500

Frontier Nursing University will contribute \$500 annually towards the HSA for employees enrolling in the HDHP plan.



Understanding Savings Accounts:
<https://www.brainshark.com/1/player/mmawest?pi=zlrzv9WWMzUxwmz0&r3f1=&fb=0>



HEALTH REIMBURSEMENT ACCOUNT

Benefit Marketing Solutions

What is a Health Reimbursement Arrangement?

A Health Reimbursement Arrangement (HRA) is an account funded by Frontier Nursing University that is designed to reimburse employees for qualified medical expenses that are paid for out-of-pocket. HRAs are often designed to operate with a high deductible health plan (HDHP), thereby reducing premium costs while encourages employees to spend wisely.

You may want to consider the CORE plan with the HRA plan as the health care coverage option for you and your family. Participants who choose the CORE plan for their health insurance coverage are eligible to participate in the Frontier Nursing University HRA administered through Benefit Marketing Solutions.

How does your HRA work?

FNU contributes \$2,000 towards the single CORE plan deductible and \$4,000 towards the family CORE plan deductible. The FNU contribution will be applied to the deductible first and you will be responsible for the remainder.

Single plan example: Health Deductible = \$2,500

FNU Contribution = \$2,000

Your Responsibility = \$500

Reduce your out-of-pocket costs. You can use the money in your HRA to pay for eligible medical expenses. The HRA funds you use can help you satisfy your plan's annual deductible.



DENTAL

Anthem



Understanding Dental Insurance:
<https://www.brainshark.com/1/player/mmawest?pi=zlpz101XfXzUxwmz0&r3f1=&fb=0>

You have one dental plan option through Anthem. Although you can use an out-of-network dentist, you will save the most money out of your pocket by using Anthem’s Essential Choice and Complete Network dentists who have agreed to give you negotiated rates. To see what dentists are in the network, visit www.anthem.com.

Your Dental Plan



**Carrier
(Plan Type)
Plan Name**

- COVERED AT 100%** **Preventive Services:**
x-rays, cleanings, exams
- COVERED AT 80%** **Basic Services:**
fillings, endodontics, periodontics
- COVERED AT 50%** **Major Services:**
implants, crowns, bridges, prosthetics

Dental Summary of Benefits	In-Network	Out-of-Network
Calendar Year Benefit Maximum	\$1,000	\$1,000
Calendar Year Deductible <i>(applies to Basic & Major Only)</i>	\$50	\$50
Preventive Services	Covered in Full	Covered in Full
Basic Services	20%	20%
Major Services	50%	50%
Orthodontics <i>(for children up to age 19)</i>	50%	50%

Dental Payroll Deductions	
Employee Only	\$13.93
Employee + Spouse	\$33.33
Employee + Child(ren)	\$37.63
Family	\$64.24

TIP **Minimize your out-of-pocket expenses for dental care by asking your dentist for a pre-treatment estimate before you agree to receive any prescribed major treatment. Your dentist may be able to present alternative treatment options that will lower your share of the bill while still meeting your basic dental care needs.**

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.

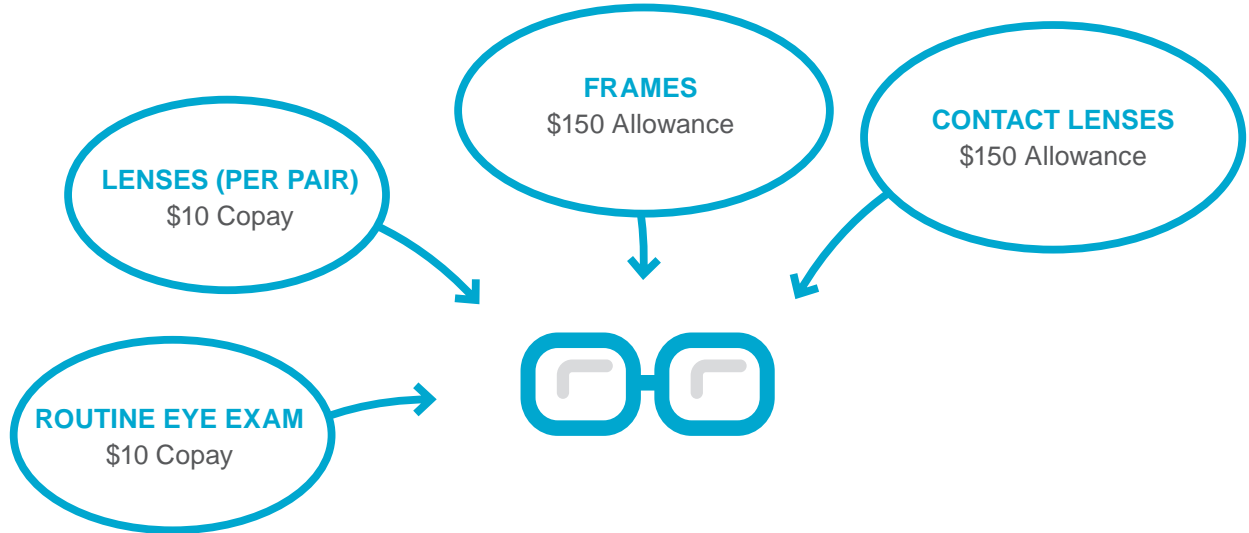


VISION

Anthem



Understanding Vision Insurance:
<https://www.brainshark.com/1/player/mmawest?pi=zHfz8FbH9zUxwmz0&r3f1=&fb=0>



Whether you have glasses, contacts, or even 20/20 vision, Frontier Nursing University offers a comprehensive vision benefit provided by Anthem. Vision insurance is the key to maintaining good eye health, as annual exams may detect early warning signs of various health conditions.

Discovering Your Provider Network

For your convenience, this plan utilizes the Anthem network. When looking for a provider, please make sure they participate in the network.

Additional Discounts

Additional discounts may be available for Laser Surgery and additional materials. Please refer to the plan summary for a complete listing.

Vision Summary of Benefits

Routine Eye Exam <i>(once every 12 months)</i>	\$10
Lenses <i>(once every 24 months)</i>	\$10
Frames <i>(once every 24 months)</i>	\$150 allowance
Contact Lenses <i>(in lieu of glasses)</i>	\$150 allowance

Vision Payroll Deductions

Employee Only	100% Covered by Employer
Employee + Spouse	100% Covered by Employer
Employee + Child(ren)	100% Covered by Employer
Family	100% Covered by Employer

This page is a summary only. For a complete list of benefit restrictions, limitations and exclusions, please refer to your Certificate of Coverage.



FLEXIBLE SPENDING ACCOUNT

Benefit Marketing Solutions

A Flexible Spending Account, or FSA, is an account set-up by your employer that allows you to pay for medical and dependent care expenses on a pre-tax basis. Pre-tax means before federal, state, and social security taxes are deducted from your paycheck. Refer to the IRS website for a full list of qualified and unqualified expenses. Our FSA Administrator is Benefit Marketing Solutions

Eligibility

You do not need to participate in medical, dental, or vision plans sponsored by Frontier Nursing University to contribute to a Flexible Spending Account.



2023 IRS Calendar Year Contribution Limits

\$3,050

HEALTH CARE FSA

\$5,000

DEPENDENT CARE FSA

\$3,050

LIMITED PURPOSE FSA

The Plan Year for the Health Care FSA will run from May 1, 2023 through April 30, 2024. The Plan Year for the DCFSA will move to a calendar year plan beginning on 01/01/24.

There are 3 types of FSA's:

Health Care FSA

- Access to entire amount of money you set aside for the plan year on the first day of the plan
- "Use it or lose it" – Forfeit any money remaining in the account at the end of the plan year. \$570 Rollover Feature, grace period or run out period applicable?
- You will receive a debit card that can be used at your doctor's office or pharmacy for qualified expenses.

Dependent Care FSA

- Use pre-tax income for dependent care for children up to age 13 who are being cared for while you or your spouse are working or seeking employment
- Eligible dependents could also include a spouse or other IRS dependent who is mentally or physically disabled.
- Qualified expenses include daycare and at-home care services. Ineligible expenses include tuition for kindergarten or private schools, sports camps, or overnight camps.

Limited Purpose FSA

- For dental and vision expenses only
- Available if you have an HSA

Understanding Savings Accounts:
<https://www.brainshark.com/1/player/mmawest?pi=zJGz121hbdzUxwmz0&r3f1=&fb=0>



Mailing: P.O. Box 43653, Louisville, KY 40253-0653
(502) 244-1161 or (800)919-BMS:: FAX (502) 244-1162:: Email: claims@bmsllc.net:: Website www.bmsllc.net

Frontier Nursing University, Inc. - Section 125 Flexible Spending Account

Benefit Marketing Solutions (BMS LLC) of Louisville, KY has been selected to be the Third Party Administrator for the Flexible Spending Account. ***The Plan Year for the health FSA will run from May 1, 2023 through April 30, 2024. The Plan Year for the Dependent Care FSA will be a Short Plan Year to run from May 1, 2023 through December 31, 2023.*** Please review the information below for important details and information on the FSA.

ABCs of FSA

Save Money Today By Pre-Taxing under the FSA! The FSA is a tax-free account where you can make contributions from your payroll to cover either medical and/or daycare expenses. All contributions to the accounts are pre-tax – deducted from payroll prior to any payroll taxes. Pre-taxing contributions to the FSA allows you to avoid paying federal, state and FICA taxes on your contributions. As a quick example, for every \$1.00 you contribute to the Accounts, you save approximately \$.30-\$.40 (based on 15% or 20% federal tax, 6% state tax and 7.65% FICA tax.) This is money that stays in your pocket for you and your family!

Highlights of your FSA Options

- Your **Health FSA** allows you to set aside monies out of your paycheck to cover any qualified medical expenses for you and your immediate family. This includes: Office Visit Co-Pays, Prescription Co-Pays, Deductible Expenses, Dental Expenses, Vision Expenses, and more! For a full list of qualified expenses visit the BMS LLC website at www.bmsllc.net. ***The annual maximum that you can contribute to the Health FSA for the 2023 Plan Year is \$3,050.00.***

Once you elect to participate in the health FSA for 5/1/23 you have until 4/30/24 to incur expenses to deplete your balance in your account and you have until 7/31/24 (the 90-day run out period) to submit claims to BMS for reimbursement. Service provided dates for those claims must be only from 5/1/23-4/40/24. **Keep in Mind:** Any balance left in your account, up to \$610.00, after the end of the 90-day run out period will be carried over to the next Plan Year. *Any remaining amount over \$610.00 is considered use-it-or-lose-it - meaning any remaining funds over \$610.00 are forfeited.* Simply avoid this IRS rule by starting out conservatively and set aside a small amount to get started. Reviewing the list of qualified items that are eligible for reimbursement will help you avoid this. Once you make an election for the FSA for the Plan Year, you cannot make a change to that election unless you experience a qualifying event. ** Please note that the Carryover applies to the Health FSA ONLY. Dependent Daycare FSA dollars do not Carryover.**

- Your **Dependent Daycare FSA** allows you to set aside monies out of your paycheck to cover for qualified daycare expenses for your dependents under the age of 13. The basic rule is that in order for you and your spouse to work, you can use the account to cover the daycare expenses. This includes licensed daycare facilities but also individuals who care for your children as long as they claim your payment as income. The annual calendar year maximum is set by the IRS as \$5,000 if married filing jointly, or single as head of household, and \$2,500 if married filing separately.
- Once you elect to participate for 5/1/23 you have until 3/15/24 (5/1/23 through 12/31/23, plus a 2 ½ month grace period) to incur expenses to deplete your balance in your account and you have until 1/31/24 (the 90-day run out period) to submit claims to BMS for reimbursement. Service provided dates for those claims must be only from 5/1/23- 3/15/24. **Remember** - Any balance left in your account after the end of the 90-day run out period will be forfeited. Simply avoid this IRS rule by starting out conservatively and set aside a small amount to get started. Reviewing the list of qualified items that are eligible for reimbursement will help you avoid this. Remember, once you make an election for the FSA for the Plan Year, you cannot make a change to that election unless you experience a qualifying event.



YOUR LIFE. YOUR WORK.

LIFE INSURANCE | DISABILITY



LIFE AND AD&D

Symetra

When the unthinkable happens, you want to know your family is covered. Frontier Nursing University provides full-time employees with life and accidental death and dismemberment (AD&D) insurance through Symetra, and pays the full cost of this benefit. You also have the option to purchase supplemental life insurance through Symetra.

Your Life Insurance benefits reduce by:

- 35% at age 65
- Another 15% at age 70

Benefits terminate for employee at retirement and for spouse when employee reaches age 70.

Employer Paid Basic Life Insurance

Life insurance provides you with the peace of mind knowing that if you are no longer able to financially provide for your family due to death that they will receive some financial benefit.

Employer Paid Accidental Death & Dismemberment

If you pass away as the direct result of an accident, your beneficiary will receive both the life and AD&D portion of the benefit. If you suffer a covered accidental injury such as loss of speech and hearing, quadriplegia, paraplegia, loss of limb, or thumb and index finger, you would be the beneficiary of a benefit (based on the type of loss).

Life and AD&D Summary of Benefits

Basic Life Benefit	\$100,000
Basic AD&D Benefit	\$100,000



VOLUNTARY LIFE

Symetra

Voluntary life insurance is available to supplement your employer paid life benefit. You can elect increments of \$10,000 up to a max of \$500,000 or 5x annual earnings. There is a guaranteed issue amount of \$100,000 if you are a new enrollee or if this is a special enrollment period.



What does “Guaranteed Issue” mean? Guaranteed issue is a term used in health insurance to describe a situation where a policy is offered to any eligible applicant without regard to health status.

Voluntary Life Summary of Benefits		
	Benefit Amount	Guarantee Issue*
Employee Life and AD&D Benefit	\$10,000 increments up to 5x annual earnings or \$500,000	\$100,000
Spouse Life and AD&D Benefit	\$5,000 increments up to \$250,000	\$30,000 not to exceed employee benefit
Child(ren) Life Benefit	\$10,000	\$10,000

* The amount of coverage permitted without completing a health questionnaire for new hires.



Understanding Voluntary Life Benefits:
<https://www.brainshark.com/1/player/mmawest?pi=zJqznaelFzUxwmz0&r3f1=&fb=0>



DISABILITY

Symetra

Accidents and illnesses happen every day. How long would your money last if your paycheck suddenly stopped? Thankfully, there is insurance that pays you an income if you become temporarily or permanently disabled.

Frontier Nursing University provides full-time employees with short term and long term disability income benefits, and pays the full cost of this coverage. This coverage is offered through Symetra.

Employer-Paid Short Term Disability

Short Term Disability, STD, provides you with a specified percentage of your pre-disability income on a weekly basis. Conditions that can trigger Short Term Disability are usually temporary in nature, such as pregnancy, broken bones, sprains, or minor surgery. The coverage can begin on the first day, or can have a short waiting period such as 7 to 14 days. Most people use accumulated sick time to cover the waiting period.

Employer-Paid Long Term Disability

Long Term Disability, LTD, provides you with a specific percentage of your pre-disability income on a monthly basis. This type of policy provides protection for a longer period of time, sometimes to age 65. LTD is often used in situations of a catastrophic disease or illness.

These policies usually start when a short term policy ends. In a long term policy, you are usually defined as disabled if you cannot complete the duties of your own occupation for a first initial period. After the initial period, you are defined as disabled if you cannot complete the duties of any occupation to which you are suited by education, training, or experience, for the remainder of the benefit period.

Disability Summary of Benefits	Short Term Disability	Long Term Disability
Elimination Period	14 days	90 Days
Duration of Benefit	11 Weeks	SSNRA
Percentage of Income Replacement	70%	60%
Maximum Benefit	\$1,650 per week	\$12,000 or \$6,000 per month, depending on your class



What does “elimination period” mean? The elimination period is a period of time an employee must be disabled before benefits are paid.

What are “pre-existing conditions”? A pre-existing condition is one that you have previously received consultation, medical treatment, care or medicine for.



Understanding Short Term Disability Insurance:
<https://www.brainshark.com/1/player/mmawest?pi=zJxz18tVOkzUxwmz0&r3f1=&fb=0>



Understanding Long Term Disability Insurance:
<https://www.brainshark.com/1/player/mmawest?pi=zlUzx8VW6zUxwmz0&r3f1=&fb=0>



ADDITIONAL BENEFITS

CRITICAL ILLNESS | ACCIDENT | EMPLOYEE
ASSISTANCE PROGRAM | WORK, LIFE BALANCE



CRITICAL ILLNESS

Symetra



Critical illness can affect any one at any time.

Critical Illness insurance pays a benefit upon the diagnosis and/or treatment of a named critical illness or certain category of major surgery. Plan options let you choose the amount of coverage you need.

The reasoning behind a critical illness policy is that someone with employer provided health care coverage and disability coverage could still incur a large amount of costs in copayment, deductibles, coinsurance, and non-covered items in the event of a critical illness.

Critical illness policies help to pay these expenses, and assist someone during their recovery by paying the insured a cash benefit. This money would be paid to you in cash for you to use as you see fit.

What is considered a “critical illness”?

Critical illness insurance provides coverage if you experience one or more of the following medical emergencies:

- Heart attack
- Stroke
- Organ transplants
- Cancer
- Coronary bypass

Critical Illness Rates				
Age Band	Employee/Member Monthly Rate per \$1000		Spouse Monthly Rate per \$1,000	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
<30	\$0.29	\$0.33	\$0.65	\$0.72
30-39	\$0.52	\$0.64	\$1.05	\$1.31
40-49	\$1.07	\$1.51	\$2.05	\$3.18
50-59	\$1.82	\$3.18	\$3.95	\$7.50
60-69	\$3.12	\$6.57	\$7.50	\$16.60
70-79	\$4.69	\$10.01	\$11.57	\$26.10
80-99	\$6.91	\$12.46	\$17.07	\$33.59



Understanding Voluntary Benefits –
Critical Illness: <https://www.brainshark.com/1/player/mmawest?pi=zKqzmfjxnzUxwmz0&r3f1=&fb=0>

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ACCIDENT INSURANCE

Symetra



Accidents happen. Accident Insurance can help.

Accident coverage is one of the more common benefits people choose to elect. Any guesses why? It's because accidents are a leading cause of injury for people under age 40, and because they occur more randomly than sickness. Accident insurance pays you with cash benefits for expenses that may not be fully covered by your comprehensive health insurance, including:

- Initial Care Benefit
- Transportation and Lodging Benefits
- Hospital Care
- Follow-up Care
- Emergency Room Treatment
- Employee Assistance Program (EAP)
- Hearing Discount Program

A short list of what your Accident Insurance covers*:

- Accident Emergency Treatment
- Air Ambulance
- Ambulance
- X-Ray Benefit
- Hospital Admission
- Hospital ICU Admission
- Hospital Confinement days max
- Hospital ICU Confinement
- Dislocation (Non-Surgical)
- Fracture (Non-Surgical)

** depending on injury location*

Accident Insurance Payroll Deductions

Employee Only	\$7.66
Employee + Spouse	\$13.03
Employee + Child(ren)	\$15.33
Family	\$21.84



Understanding Benefits – Accident:
<https://www.brainshark.com/1/player/mmawest?pi=zIqzGrKn7zUxwmz0&r3f1=&fb=0>



EMPLOYEE ASSISTANCE PROGRAM (EAP)

Symetra

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 Symetra'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. Services are available 24 hours a day, seven days a week, and are provided at no additional cost to you and your dependents, as defined by your benefits.

You and the members of your household are eligible for up to 3 visits per issue, per household, per year.

Services include:

- Confidential Phone Consultations
- Financial and Legal Consultation
- Elder Care Consultation
- Referrals to Community Resources
- Grief and bereavement support



Life

- Retirement
- Midlife
- Student Life
- Legal
- Relationships
- Disabilities
- Crisis
- Personal Issues



Health

- Mental Health
- Addictions
- Health Habits
- Mindful Living
- Managing Stress
- Sleep
- Alternative Health



Family

- Parenting
- Couples
- Separation/Divorce
- Caregiving
- Adoption
- Death/Loss
- Childcare
- Education



Work

- Time Management
- Career Development
- Work Relationships
- Work Stress
- Managing People
- Shift Work
- Coping with Change
- Communication



Money

- Saving
- Investing
- Budgeting
- Managing Debt
- Home Buying
- Renting
- Estate Planning
- Bankruptcy

We are here for you

Web Id: **SYMETRA**

When talking on the phone mention Symetra as your employer sponsor

Visit [guidanceresources.com](https://www.guidanceresources.com) or call **1-888-3279573** or **TDD:1-800-697-0353** for confidential consultation and resource services.



My Pet Protection[®] from Nationwide[®]

Now with options to meet every budget.

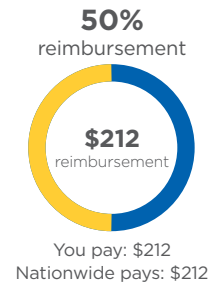
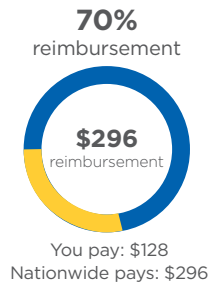
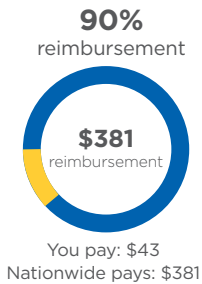


Our popular My Pet Protection pet insurance plans now feature more choices and more flexibility

- ✓ Get **cash back** on eligible vet bills
Choose from three levels of reimbursement: 90%, 70% or 50%*
- ✓ Available **exclusively for employees**
These plans aren't available to the general public
- ✓ **Same price for pets of all ages**
Your rate won't go up because your pet had a birthday
- ✓ Use **any vet**, anywhere
No networks, no pre-approvals
- ✓ Optional **wellness coverage** available
Includes spay/neuter, dental cleaning, exams, vaccinations and more

Choose the reimbursement level that fits your needs

Problems such as upset stomach are among the most common reasons dogs and cats go to the vet. The average cost for this kind of visit is **\$424**. Here's how My Pet Protection would cover the bill.*



Examples reflect reimbursement after \$250 annual deductible has been fulfilled.

Get more—enjoy these extras when you protect your pet with a Nationwide pet insurance policy



Unlimited, 24/7 access to a veterinary professional (\$150 value).



Multiple-pet discounts available.†



Mobile claims submission with the free VitusVet app.



Fast, convenient electronic claim payments.



Access to our award-winning magazine, *The Companion*.



Discounts on hand-picked pet products and services.

Get a fast, no-obligation quote today at [PetsNationwide.com](https://www.PetsNationwide.com)





ADDITIONAL BENEFITS



Choose the level of coverage that fits your needs

Get 90%, 70% or 50% reimbursement on these vet bills and more.*



Accidents, including poisonings and allergic reactions	✓	✓
Injuries, including cuts, sprains and broken bones	✓	✓
Common illnesses, including ear infections, vomiting and diarrhea	✓	✓
Serious/chronic illnesses, including cancer and diabetes	✓	✓
Hereditary and congenital conditions	✓	✓
Surgeries and hospitalization	✓	✓
X-rays, MRIs and CT scans	✓	✓
Prescription medications and therapeutic diets	✓	✓
Wellness exams	✓	
Vaccinations	✓	
Spay/neuter	✓	
Flea and tick prevention	✓	
Heartworm testing and prevention	✓	
Routine blood tests	✓	

Both plans feature a \$250 annual deductible and have a maximum annual benefit of \$7,500.

Pre-existing conditions are not covered. Any illness or injury a pet had prior to start of policy will be considered pre-existing.*

How to use your pet insurance plan



1 Visit any vet, anywhere.



2 Submit claim.



3 Get reimbursed.

Get a fast, no-obligation quote today at [PetsNationwide.com](https://www.PetsNationwide.com)

To enroll your bird, rabbit, reptile or other exotic pet, call 877-738-7874.

*Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions. Reimbursement options may not be available in all states. *Pet owners receive a 5% multiple-pet discount by insuring two to three pets or a 10% discount on each policy for four or more pets.

Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Such terms and availability may vary by state and exclusions may apply. Underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH, an AM Best A+ rated company (2018); National Casualty Company (all other states), Columbus, OH, an AM Best A+ rated company (2018). Agency of Record: DVM Insurance Agency, Nationwide, the Nationwide N and Eagle, and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. ©2019 Nationwide. 19GRP5915

19GRMPP907050





The Ultimate Peace of Mind for Employees and Their Families

The Harrison's Story

- Jim and his family were at a local festival when his daughter, Sara, suddenly began experiencing horrible abdominal and back pain, after a fall from earlier in the day.
- His wife, Heather, called 911 and Sara was transported to a local hospital, when it was decided that she needed to be flown to another hospital.
- Upon arrival, Sara underwent multiple procedures and her condition was stabilized.
- After further testing, it was discovered that Sara needed additional specialized treatment at another hospital requiring transport on a non-emergent basis.



Based on a true story. Names were changed to protect identities in compliance with HIPAA.



And then, the Bills came!

		As a MASA Member	If a Non-MASA Member	
		Sara would pay*	If In-Network**	If Out-of-Network**
911 Ground Ambulance Cost: \$1,800		\$0	\$300	\$1,600
Emergent Air Ambulance Cost: \$45,000		\$0	\$4,000	\$30,000
Non-Emergent Air Transport† Cost: \$20,000		\$0	\$20,000	\$20,000
Total Out-of-Pocket Cost		\$0	\$24,300	\$51,600

*Benefit is dependent on Membership Enrolled.
 **Out-of-pocket dollars vary dependent on provider, distance, health plan design, current status of deductible and out-of-pocket max. These figures are an example of the costs one may incur.
 †More and more health plans are not covering interfacility transports on a non-emergent basis.

Any Ground. Any Air. Anywhere.™

No matter how comprehensive your local in-network coverage may be, you still have significant exposure to out-of-network emergency transportation. Moreover, when you and your family travel outside your area, there is an 80% chance of being picked up by an out-of-network provider.

A MASA Membership prepares you for the unexpected. ONLY MASA MTS provides you with:

- **Coverage ANYWHERE** in all 50 states and Canada whether at home or away
- Coverage for BOTH emergent ground ambulance and air ambulance transport **REGARDLESS of the provider**
- **Non-emergent transport services**, which are frequently covered inadequately by your insurance, if at all

For more information, please contact your local MASA MTS representative or visit www.masamts.com

FLYER_COMP_B2B



EMERGENCY TRANSPORTATION COSTS

MASA MTS is here to protect its members and their families from the shortcomings of health insurance coverage by providing them with comprehensive financial protection for lifesaving emergency transportation services, both at home and away from home.

Many American employers and employees believe that their health insurance policies cover most, if not all ambulance expenses. The truth is, they DONOT!

Even after insurance payments for emergency transportation, you could receive a bill up to \$5,000 for ground ambulance and as high as \$70,000 for air ambulance. The financial burdens for medical transportation costs are very real.



HOW MASA IS DIFFERENT

Across the US there are thousands of ground ambulance providers and hundreds of air ambulance carriers. ONLY MASA offers comprehensive coverage since MASA is a PAYER and not a PROVIDER!

ONLY MASA provides over 1.6 million members with coverage for **BOTH ground ambulance and air ambulance transport, REGARDLESS of which provider transports them.**

Members are covered ANYWHERE in all 50 states and Canada!

Worldwide coverage is also available with our Platinum Membership.

Additionally, MASA provides a repatriation benefit: if a member is hospitalized more than 100 miles from home, MASA can arrange and pay to have them transported to a hospital closer to their place of residence.



Any Ground. Any Air. Anywhere.™

OUR BENEFITS

Benefit*	Platinum \$39/Month	Emergent Plus \$14/Month
Emergent Ground Transportation	U.S./Canada	U.S./Canada
Emergent Air Transportation	U.S./Canada	U.S./Canada
Non-Emergent Air Transportation	Worldwide	U.S./Canada
Repatriation	Worldwide	U.S./Canada
Escort Transportation	Worldwide	
Mortal Remains Transportation	Worldwide	
Visitor Transportation	BCA**	
Minor Children/Grandchildren Return	BCA**	
Vehicle Return	BCA**	
Pet Return	BCA**	
Organ Retrieval	U.S./Canada	
Organ Recipient Transportation	U.S./Canada	

* Please refer to the MSA for a detailed explanation of benefits and eligibility.
** Basic Coverage Area (BCA) includes U.S., Canada, Mexico, and Caribbean (excluding Cuba).



A MASA Membership prepares you for the unexpected and gives you the peace of mind to access vital emergency medical transportation no matter where you live, for a minimal monthly fee.

- One low fee for the entire family
- NO deductibles
- NO health questions
- Easy claim process

For more information, please contact
Your MASA Representative
EVERY FAMILY DESERVES A MASA MEMBERSHIP



FRONTIER NURSING UNIVERSITY

This communication represents a brief summary of the various benefits available to you and is provided as a reference only. The actual carrier policies determine coverage and contain exclusions, limitations, full coverage terms, conditions and requirements. Any notices included in this document do not replace other potential employer requirements for communication.