SERVICE VENDOR

lyric

lyric PARAMOUNT Rx

BENEFITBOOST

PARAMOUNTRY

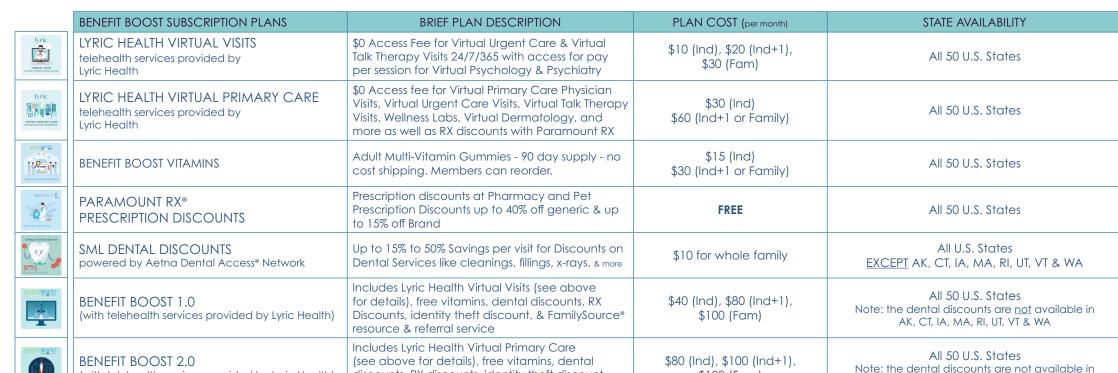
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Aetna Dental Access®

PARAMOUNT ...



ASSOCIATION MEMBERSHIP PLAN	BRIEF PLAN DESCRIPTION	PLAN COST (per month)	STATE AVAILABILITY	VENDOR
	Healthy lifestyle services like: safety apps, medical alert, online fitness, patient advocacy and more.  Membership is required for all plans that include group insurance.	\$15 for whole family	All 50 U.S. States	Healthy America Association (HAA)



	BENEFIT BOOST 1.0 (with telehealth services provided by Lyric Health)	for details), free vitamins, dental discounts, RX Discounts, identity theft discount, & FamilySource® resource & referral service	\$40 (Ind), \$80 (Ind+1), \$100 (Fam)	Note: the dental discounts are <u>not</u> available in AK, CT, IA, MA, RI, UT, VT & WA	Aetna Dental Access® FamilySource®
হা	BENEFIT BOOST 2.0 (with telehealth services provided by Lyric Health)	Includes Lyric Health Virtual Primary Care (see above for details), free vitamins, dental discounts, RX discounts, identity theft discount, FamilySource® resource & referral service	\$80 (Ind), \$100 (Ind+1), \$100 (Fam)	All 50 U.S. States Note: the dental discounts are <u>not</u> available in AK, CT, IA, MA, RI, UT, VT & WA	Aetna Dental Access® PARAMOUNT R, © LifeLock FamilySource®
	DENTAL & VISION PLANS	BRIEF PLAN DESCRIPTION	PLAN COST (per month)	STATE AVAILABILITY	UNDERWRITTEN BY



	SHORT TERM MEDICAL	BRIEF PLAN DESCRIPTION	PLAN COST (per month)	STATE AVAILABILITY	UNDERWRITTEN BY
SHORT BEM MEDICAL REGRANCE	STM GROUP PLAN	3, 6 or 12 month (364 days) plan options (SC-11 mo). \$1,000,000 Lifetime Maximum (2M in IN), \$5000 or \$10,000 Deductible options, \$10,000 OOP, 80/20%, \$40 Doc Visit copay, Prime Network	Plan Cost varies by Age, State & Area Use Quote Engine on application	AL, AZ, AR, DE, FL, GA. IL, IN, KY, LA, MS, NE, NV, OH, SC, TN, TX, VA, WV, WI, & WY	Pan-American Life Insurance Company  PAN AMERICAN  ACCIDENT & HEALTH
BIOR IBM MECKA YOURNEE	STM INDIVIDUAL PLAN	3, 6 or 12 month (364 days) plan options. \$1,000,000 Lifetime Maximum, \$5000 or \$10,000 Deductible options, \$10,000 OOP, 80/20%, \$40 Doc Visit copay, Prime Network	Plan Cost varies by Age, State & Area Use Quote Engine on application	MO, NC, & OK	Pan-American Life Insurance Company  PAN AMERICAN  ACCIDENT & HEALTH

	OPTIONAL SUPPLEMENTAL INSURANCE PLANS	BRIEF PLAN DESCRIPTION	PLAN COST (per month)	STATE AVAILABILITY	UNDERWRITTEN BY
The second secon	*Requires SSN on app  HAA 5+*	\$5000 AME, \$2500 AD&D, & \$5000 Cancer Rider, \$5000 Limited Specified Disease Rider (Heart Attack Stroke), \$2500 Sickness Lump Sum Hospital Rider, \$10,000 Term Life (\$10,000 Death Benefit Primary, Spousal benefits are 50% of primary benefit & Child benefits are 25% of Primary Benefit. Death benefits subject to waiting period & attained age benefit reduction) + Benefit Boost 1.0	\$70 (Ind), \$140 (Ind+1 or Fam)	AL, AR, AZ, DC, DE, GA, IA, IL, MS, NE, OH, OK, SC, TX, VA, WI, WV, & WY	Guarantee Trust Life Insurance Company  GUARANTEE TRUST LIFE
Protect You Loved One.	*Requires SSN on app  HAA LIFEPASS 10*	\$10,000 Death benefit Primary Member & Spousal benefits 50% of Primary benefit & Child benefits are 25% of Primary Benefit (death benefits are subject to waiting period & attained age benefit reduction)	\$12 (Ind) or \$20 (Ind+1 or Fam)	AL, AR, AZ, CA, CT, DC, DE, GA, IA, IL, IN, KS, KY, MI, MS, ND, NE, OH, OK, RI, SC, TN, TX, VA, WI, WV & WY	Guarantee Trust Insurance Company  GUARANTEE TRUST LIFE

