

EMPLOYEE BENEFITS GUIDE

Plan Year:
08/01/2026 - 07/31/2027



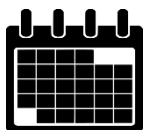
An overview of the wide array of benefits provided by the Drummond Communications, LLC to help you enjoy increased well-being and financial security.

2026 OPEN ENROLLMENT



Your Benefits. Your Choices.

Open Enrollment is your annual opportunity to review your benefits, make choices that are right for you and your family, and confirm your information for the upcoming plan year.



ENROLLMENT OPENS
Monday, June 15, 2026



ENROLLMENT CLOSES
Friday, June 26, 2026
at 5:00 PM



NEW BENEFITS EFFECTIVE
August 1, 2026



WHO IS ELIGIBLE?
See below for eligibility
and dependent details.

All elections must be completed by 5:00 PM on Friday, June 26, 2026

WHO IS ELIGIBLE?

If you're a full-time employee, you're eligible to enroll in the benefits outlines in this guide

- Full-time eligible work 30 or more hours per week
- Benefits are effective 1st of the month following 60 days of full-time eligible employment.
- Eligible dependents for medical, dental, and vision coverage include:
 - Your spouse
 - Your natural child, a stepchild, an adopted child or child placed for adoption who is under 26 years of age, regardless of presence or absence of a child's financial dependency, residency, student status, employment status, marital status, eligibility for other coverage, or any combination of those factors

See HR for further description of eligible dependents

WHAT YOU NEED TO KNOW

REVIEW

- Review your current benefits, covered dependents, and beneficiary information.

DECIDE

- Compare your options and choose the benefits that best fit your needs and budget.

ENROLL

- Make your elections online during the Open Enrollment period.

PLAN YEAR

- Your new elections will be effective August 1, 2026.

This year we will be having a *passive* enrollment. If you do not go in and elect and/or decline and are currently enrolled in any benefit(s), you will be automatically "rolled over" with your current benefit elections for the new plan year. Please be aware there could be changes in per pay period costs.

HOW TO ENROLL

- 1) Go to **Employee Navigator**
- 2) Log in with your existing username and password
- 3) Review your benefits and dependents
- 4) Make your elections and confirm

YOU MUST USE EMPLOYEE NAVIGATOR TO COMPLETE YOUR ENROLLMENT ONLINE.

WHEN TO MAKE CHANGES

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period and changes would not go into effect until August 1, 2027. Life-changing qualifying events must be submitted within 30 days of the event.

OVERVIEW OF CHANGES

What's New

Medical

- New costs per pay period
- New copays added to plans (highlighted on next page)

What's Staying the Same

Medical

- Remaining with Blue Cross Blue Shield of Oklahoma

Dental

- Remaining with Delta Dental of Oklahoma
- Same costs per pay period

Vision

- Remaining with Mutual of Omaha vision (Eyemed)
- Same costs per pay period

Voluntary Life and AD&D

- Employees who currently have coverage can increase that coverage by \$25,000 up to the Guaranteed Issue (\$150,000) without Evidence of Insurability

Ancillary

- Voluntary Short-Term Disability, Voluntary Long-Term Disability, & Accident rates are staying the same

Health Savings Account (H.S.A.)

- Still offered via HSA Bank
- Annual contribution limits for 2026 are \$4,400 for individual coverage or \$8,750 for family coverage
- If you're age 55 or older, you may make an additional "catch-up contribution" of \$1,000 annually



MEDICAL PLANS

Plan Features	Option 1 BCBS of Oklahoma MOBAP1055 H.S.A.	Option 2 BCBS of Oklahoma MOBAP0106	Option 3 BCBS of Oklahoma MOBAP0086 IOK Approved Plan
IN NETWORK	Blue Advantage PPO	Blue Advantage PPO	Blue Advantage PPO
Individual Deductible	\$5,100	\$3,100	\$1,000
Family Deductible	\$10,200	\$9,300	\$3,000
Individual Coinsurance	0%	30%	20%
Individual Out-of-Pocket Maximum	\$5,100	\$7,250	\$3,000
Family Out-of-Pocket Maximum	\$10,200	\$14,500	\$9,000
Primary Care / Specialist Office Visit	Deductible, then Covered 100%	\$25 Primary Care \$50 Specialist	\$25 Primary Care \$30 Specialist
Emergency Room	Deductible, then Covered 100%	\$500 Copay, then Deductible & Coinsurance (Copay waived if admitted)	\$500 Copay, then Deductible & Coinsurance (Copay waived if admitted)
Hospital Inpatient	Deductible, then Covered 100%	\$750 Copay, then Deductible & Coinsurance	\$750 Copay, then Deductible & Coinsurance
Hospital Outpatient	Deductible, then Covered 100%	\$250 Copay, then Deductible & Coinsurance	\$250 Copay, then Deductible & Coinsurance
Pharmacy / RX (30 Day Supply)	Deductible, then Covered 100%	Preferred Net: \$0 / \$10 / \$50 / \$100 / \$250 / \$350 Standard Net: \$10 / \$20 / \$70 / \$120 / \$250 / \$350	Preferred Net: \$0 / \$10 / \$35 / \$75 / \$250 / \$350 Standard Net: \$10 / \$20 / \$55 / \$95 / \$250 / \$350
Lifetime Maximum	Unlimited	Unlimited	Unlimited

Please note that deductibles and out-of-pocket maximums run on the calendar year.

For additional benefit details, provider search directions for the new network, the new Rx drug list, and value-add enhancements, please see your online enrollment by logging in to Employee Navigator.

MEDICAL COST COMPARISON

2025 COST PER PAY PERIOD (24 ANNUAL DEDUCTIONS)			
Plan	MOBAP1055 H.S.A.	MOBAP01015	MOBAP0085 IOK Approved Plan
Employee	\$59.69	\$98.91	\$142.71
Employee + Spouse	\$311.33	\$397.61	\$493.97
Employee + Child(ren)	\$248.41	\$322.93	\$406.15
Employee + Family	\$500.05	\$621.63	\$757.41

2026 COST PER PAY PERIOD (24 ANNUAL DEDUCTIONS)			
Plan	MOBAP1055 H.S.A.	MOBAP01016	MOBAP0086 IOK Approved Plan
Employee	\$77.69	\$112.05	\$160.54
Employee + Spouse	\$359.95	\$435.56	\$542.24
Employee + Child(ren)	\$289.39	\$354.69	\$446.82
Employee + Family	\$571.66	\$678.20	\$828.52

This year we will be having a *passive* enrollment. If you do not go in and elect and/or decline and are currently enrolled in any benefit(s), you will be automatically “rolled over” with your current benefit elections for the new plan year. Please be aware there could be changes in per pay period costs.

HEALTH SAVINGS ACCOUNT (H.S.A.)

For the 2026-2027 plan year, Drummond Communications, LLC will continue to offer an H.S.A. via HSA Bank.



Pay for qualified medical, dental, and vision expenses for yourself, your spouse, and your dependents. Both current and past expenses are covered if they're from after you opened your H.S.A.



Use your HSA Bank Health Benefits Debit Card to pay for qualified expenses directly, or pay out of pocket for reimbursement or to grow your H.S.A. funds.



Roll over any unused funds year to year. It's your money—for life. Even if you change jobs or retire, the account belongs to you!



Save on taxes in three ways:

1. You don't pay federal taxes on contributions to your H.S.A.
2. Earnings from interest and investments are tax-free.
3. Distributions are tax-free when used for qualified medical expenses.



Invest your H.S.A. funds and potentially grow your savings.

Am I eligible for an H.S.A.?

You're most likely eligible to open an H.S.A. if:

- You enroll in the H.S.A.-eligible medical plan, Option 1 - MOBAP1055
- You're not covered by any other non-H.S.A. compatible health plan, like Medicare Parts A and B
- You're not covered by TriCare
- No one (other than your spouse) claims you as a dependent on their tax return

How much can I contribute?

In 2026, you can contribute up to \$4,400 as an individual or \$8,750 as a family. You may be eligible to make a \$1,000 catch-up contribution if you're:

- Over the age of 55
- An HSA accountholder
- Not enrolled in Medicare

ADDITIONAL MEDICAL PLAN BENEFITS

Blue Cross Blue Shield of Oklahoma offers additional benefits to enrollees to support your wellness journey:

Global Core

Provides medical care while in a foreign country

MDLive

Virtual visits with doctors available 24/7, including behavioral/mental health providers

Mental Health Hub

Online resource for your behavioral and mental health needs

Pharmacy Vaccine Program

Protect yourself from preventable illnesses

Mail Order Pharmacy

Get up to a 90-day supply of long-term or maintenance medicine through a network of retail or home delivery service pharmacies

Rx Savings Solutions

Medication finder gives you options to help make your medications more affordable

Free Glucose Meter

Visit your local pharmacy to get one of two free preferred meter models

Metabolic Health

Access to a suite of programs that aim to prevent, manage, and reverse metabolic disease

Well onTarget

Provides tools to help you set and reach your wellness and fitness goals

Blue365

Website with weekly featured deals on health and wellness products and services

Member Rewards

Shop and earn cash rewards when you select quality, reward-eligible providers

***For more details on these benefits, please see the flyers on Employee Navigator.**



BlueCross BlueShield of Oklahoma



Virtual Visits: **Get Cost-Effective, 24/7 Care**

With Virtual Visits from MDLIVE®, the doctor is always in. This Blue Cross and Blue Shield of Oklahoma (BCBSOK) benefit gives you access to 24/7 non-emergency care from a board-certified doctor or therapist by phone, online video or mobile app from almost anywhere.

Skip expensive ER bills and waiting to see a doctor. You can speak with a Virtual Visits doctor within minutes.

Services are available in both English and Spanish with translation services available in other languages.

Why Virtual Visits?

- 24/7 access to an independently contracted, board-certified doctor or therapist
- Access via phone, online video or mobile app from almost anywhere
- Average wait time of less than 20 minutes
- Doctors can send e-prescriptions to your local pharmacy

The Virtual Visits benefit is a convenient alternative for treatment of more than 80 health conditions, including:

- Allergies
- Cold/Flu
- Fever
- Headaches
- Nausea
- Sinus infections

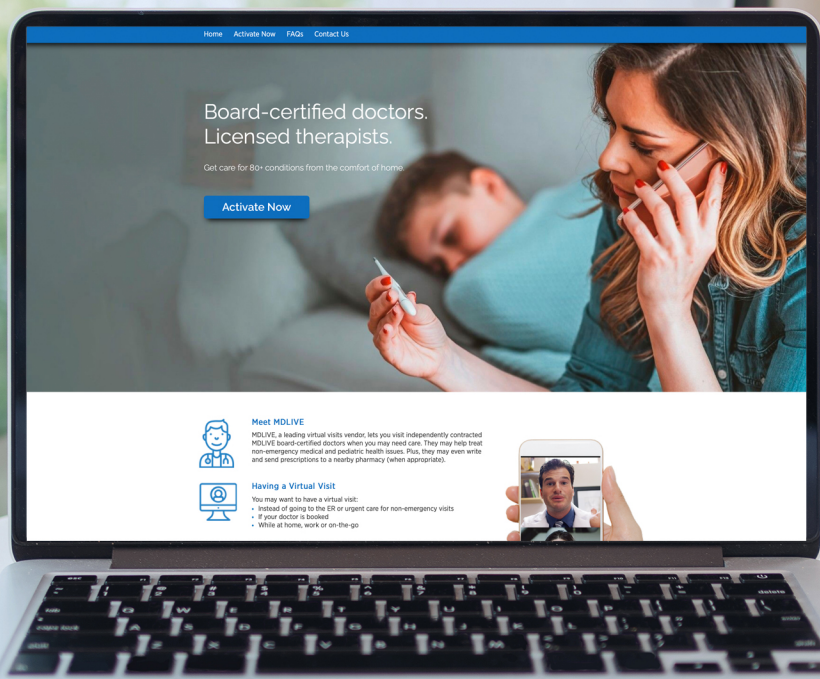
Virtual Visits sessions with licensed behavioral health therapists are available by appointment. Get virtual care for:

- Depression
- Eating disorders
- ADHD
- Substance use disorders
- Trauma and PTSD
- Autism spectrum disorder

First, call your doctor's office; they may also offer telehealth consultations by phone or online video. If you have any questions about this or any other BCBSOK benefit, please call the number on the back of your ID card.

Activate your Virtual Visits account today:

- Call 888-970-4081
- Go to MDLIVE.com/bcbsok
- Text BCBSOK to 635-483
- Download the app



Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Oklahoma. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

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BlueCross BlueShield
of Oklahoma



Save Time and Money

90-Day Supply Prescription Drug Program

You can get up to a 90-day supply of long-term (or maintenance) medicine through a network of retail or home delivery service pharmacies. How much you pay will be based on the medicine and your benefit plan.



Visit **bcbsok.com** or **myprime.com** to find an in-network retail or home delivery service pharmacy convenient for you. Log into Blue Access for MembersSM and click on Pharmacies or Pharmacy Search under **Find Care**.

Blue Cross and Blue Shield of Oklahoma, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

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90-Day Supply Prescription Drug Program



To Purchase Your Long-Term Medicine at a Retail Pharmacy

1. Ask your doctor for a prescription for a 90-day supply of each of your long-term medicines.
2. Take your prescription or have your doctor submit electronically to an in-network retail pharmacy. Based on your benefit, that may be a “90-day” or preferred pharmacy.
3. Certain coverage exclusions and limits may apply, based on your health plan. Not all plans have 90-day supply options available at retail pharmacies. Check your benefit materials for details.



To Purchase Your Long-Term Medicine Through a Home Delivery Service Pharmacy

1. Ask your doctor for a prescription for a 90-day supply of each of your long-term medicines.
2. If you need to start your medicine right away, ask for a prescription for a one-month supply to take to a retail pharmacy.
3. You can order online, through a mobile device, over the phone or through the mail. You can find contact information for the home delivery pharmacy at **myprime.com**. To print a new prescription order form, log into BAMSM, click on **Forms & Documents** under the My Account tab and select the mail order form.
4. If mailing your order, send your prescription, completed order form and payment to the home delivery service pharmacy.
5. Keep in mind that medicines can take up to 5 business days to deliver after the home delivery service pharmacy receives and verifies your order.



You can also ask your doctor to fax or send your prescription electronically to the home delivery service pharmacy. Be sure to complete and submit the mail order form to avoid a delay in processing your order.

Prime Therapeutics LLC is a separate pharmacy benefit management company contracted by Blue Cross and Blue Shield of Oklahoma to provide pharmacy benefit management and related other services. BCBSOK as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics. Myprime.com is an online resource offered by Prime Therapeutics LLC.

DENTAL & VISION

DENTAL	PPO Point of Service
IN NETWORK	PPO + Premier
Deductible	\$50 per insured, up to \$150 Type II & III Only
Annual Maximum	\$1,500
Type I / A Preventive	100%
Type II / B Basic	PPO Network – 90% Premier Network – 80%
Type III / C Major	PPO Network – 60% Premier Network – 50%
Type IV / D Orthodontic	PPO Network – 50% Premier Network – 40% \$2,000 Lifetime for Covered Adults & Children Up to Age 26
Costs Per Pay Period – 24 Annual Deductions	
Employee Only	\$19.53
Employee + Spouse	\$39.01
Employee + Child(ren)	\$55.65
Family	\$75.14

VISION	Mutual of Omaha Eyemed
IN NETWORK	Insight
Exams / Materials	\$10 / \$25 Copay Exam Every 12 Months
Frames	\$150 Allowance Every 12 Months
Lenses	Included in Materials Copay Every 12 Months
Contact Lenses	\$150 Allowance In lieu of glasses Every 12 Months
Costs Per Pay Period – 24 Annual Deductions	
Employee Only	\$4.48
Employee + Spouse	\$8.77
Employee + Child(ren)	\$6.96
Family	\$11.73

For benefit summaries and additional details, please see your online employee portal by logging in to Employee Navigator.



LIFE INSURANCE

Voluntary Life and AD&D Insurance*

Life insurance can help provide for your loved ones if something were to happen to you. Active full-time employees working 30 hours per week may purchase voluntary life and accidental death and dismemberment coverage. When you enroll yourself and your spouse and dependents in this benefit, you pay the full cost through payroll deductions for this supplemental coverage. Employee must buy voluntary life on themselves to buy dependent life coverage. **See Cost Table below.**

Employee: In increments of \$25,000, up to \$500,000 or 5 times your annual earnings. Amounts over \$150,000 or late entrants require evidence of insurability form.

Spouse: In increments of \$5,000, up to 100% of employee's benefit, up to \$100,000 or 5 times the employee's earnings. Amounts over \$25,000 or late entrants require evidence of insurability form.

Child(ren): In increments of \$2,000, up to \$10,000.

Cost Per Pay Period for Employee per \$25,000 in Coverage

Age	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Cost	\$1.08	\$1.20	\$1.70	\$2.20	\$3.20	\$4.83	\$7.20	\$9.95	\$15.20	\$24.20

Cost Per Pay Period for Spouse per \$5,000 in Coverage

Age	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
Cost	\$0.22	\$0.24	\$0.34	\$0.44	\$0.64	\$0.97	\$1.44	\$1.99	\$3.04	\$4.84

Dependent Children

Cost for \$10,000 in coverage on all children	\$0.95
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DISABILITY

Short Term Disability

Drummond Communications, LLC offers full-time employees the opportunity to purchase short term disability coverage. Without disability coverage, you and your family may struggle to get by if you miss work due to an injury or illness. In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income.

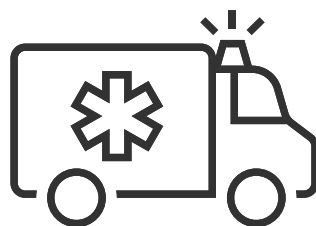
Coverage Amount	60% of your weekly earnings
Maximum Benefit	\$2,000 per week
Benefit Duration	26 weeks
Accident Elimination Period	7 days
Illness Elimination Period	7 days

Long Term Disability*

Long Term Disability insurance is designed to provide you with a percentage of your salary in the event that your disability continues beyond the short-term. This is also 100% voluntary and paid via payroll deductions.

Coverage Amount	60% of your monthly earnings
Maximum Benefit	\$10,000 per month
Benefit Duration	SSNRA or maximum benefit period
Elimination Period	180 days
Preexisting Conditions	3 months / 12 months

For costs and details on each of these plans, please sign onto Employee Navigator.



ACCIDENT

Accident

An accident insurance policy supplements your medical coverage and provides a cash benefit for injuries you or an insured family member sustain from an accident. This benefit can be used to pay out-of-pocket medical expenses, help supplement your daily living expenses, and cover unpaid time off work.

If an insured person is injured as a result of an accident, an express benefit of \$100 will be paid upon notification of the accident. The benefit is payable once per accident for each injured person.

BENEFITS	AMOUNTS
Initial Care & Emergency¹ – Most treatment / service required within 72 hours of accident; Once per accident per insured person	
Emergency Room	\$300
Urgent Care Center	\$225
Initial Physician Office Visit	\$100
Ambulance	Up to \$1,500
Specified Injuries^{1,2}	
Fractures (Surgical / Non-surgical)	Up to \$9,000/Up to \$4,500
Dislocations (Surgical / Non-surgical)	Up to \$10,000/Up to \$5,000
Lacerations	Up to \$900
Burns	Up to \$20,000
Dental	Up to \$300
Hospital, Surgical & Diagnostic^{1,3}	
Admission	\$1,500
Daily Confinement (Up to 365 days per accident)	\$300 per day
ICU Confinement (Up to 15 days per accident)	\$600 per day
Rehab. Facility Confinement (Up to 30 days per accident)	\$200 per day
Surgical	Up to \$3,500
Diagnostic	Up to \$300
Follow-Up Care¹ – Treatment / service required within 365 days of accident; Medical device is once per accident per insured person	
Physician Follow-Up Office Visit	\$150; Up to 6 per accident
Therapy Services	\$75; Up to 6 per accident
Medical Device	\$300
Prosthetic Device(s)	\$1,250; Up to 2 per accident
Additional Benefits¹ – Benefits are payable within 365 days of accident; Health screening benefit is payable once per calendar year	
Transportation (Up to 3 trips per accident)	\$400 per trip
Lodging (Up to 30 nights per accident)	\$200 per night
Childcare (Up to 30 days per accident)	\$30 per day
Health Screening	\$75
Catastrophic Benefits^{1,4} – Benefits are payable within 365 days of accident; Once per accident per insured person	
Principal Sum (PS)	You: \$50,000 Spouse: \$25,000 Child(ren): \$10,000
Common Carrier Accidental Death	300% of PS
Transportation of Remains	Up to \$5,000
Dismemberment & Paralysis	Up to 100% of PS
Reasonable Modifications	Up to 10% of PS
Coma	50% of PS

Costs Per Pay Period – 24 Annual Deductions	
Employee Only	\$5.00
Employee + Spouse	\$8.50
Employee + Child(ren)	\$10.50
Family	\$15.00

FAQ

When will I get my ID cards?

- Medical – If you enroll in medical coverage, a hard copy of the card should arrive in the mail 1-2 weeks before coverage is effective on August 1.
- H.S.A. – If you're a new enrollee in H.S.A., you'll receive a debit card 1-2 weeks before it is effective on August 1. If you're already contributing to an H.S.A., you'll continue using your current debit card through its expiration date.
- Dental, Vision, Life, Disability, Accident – You will not receive an ID card for dental, vision or ancillary coverages. To verify coverage for yourself or a dependent, you will provide the name of the insurance company and the employee's SSN.

Can I change my benefits mid-year?

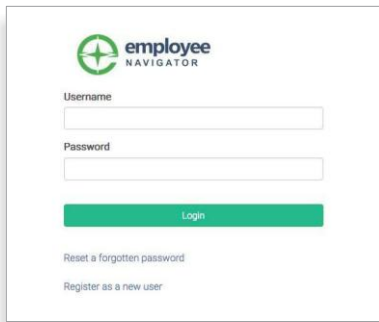
Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period, and changes would not go into effect until August 1, 2027. Life-changing qualifying events must be submitted within 30 days of the event and can include marriage, divorce, birth, death, loss of other coverage, gaining of new coverage, etc. See HR if you are unsure if your situation constitutes a qualifying life event.

I forgot my password for Employee Navigator. Can you provide it to me?

Passwords are private and cannot be viewed by HR Users of the system. If you have forgotten it, you can reset it by clicking "Forgot Password" on the Login page.

Disclaimer: The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.

ENROLL IN YOUR BENEFITS: One step at a time

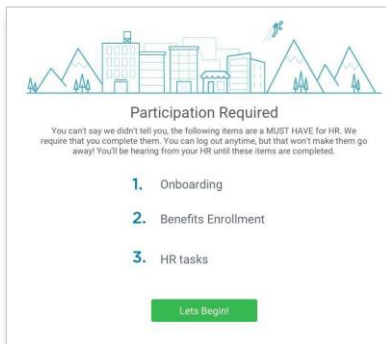
The screenshot shows the Employee Navigator login interface. At the top is the logo with a green compass icon and the text "employee NAVIGATOR". Below the logo are two input fields: "Username" and "Password". A green "Login" button is positioned below the password field. At the bottom of the page, there are two links: "Reset a forgotten password" and "Register as a new user".

Step 1: Log In

Go to www.employeenavigator.com and click **Login**

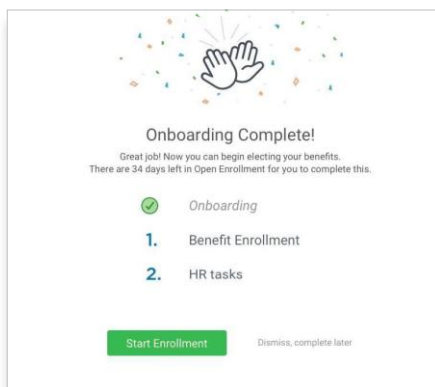
- **Returning users:** Log in with the username and password you selected. Click **Reset a forgotten password**.
- **First time users:** Click on your Registration Link in the email sent to you by your admin or **Register as a new user**. Create an account, and create your own username and password.

Your Company ID is "DrummondGroup".

The screenshot shows a "Participation Required" page with a city skyline illustration at the top. The text states: "You can't say we didn't tell you, the following items are a MUST HAVE for HR. We require that you complete them. You can log out anytime, but that won't make them go away! You'll be hearing from your HR until these items are completed." Below this is a numbered list: 1. Onboarding, 2. Benefits Enrollment, 3. HR tasks. A green "Let's Begin" button is at the bottom.

Step 2: Welcome!

After you login click **Let's Begin** to complete your required tasks.

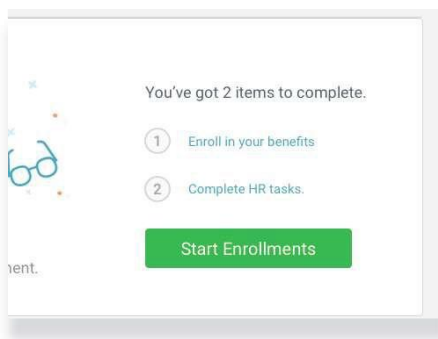
The screenshot shows an "Onboarding Complete!" page with a celebratory graphic of hands and confetti. The text says: "Great job! Now you can begin electing your benefits. There are 34 days left in Open Enrollment for you to complete this." Below is a list with a green checkmark next to "Onboarding": 1. Benefit Enrollment, 2. HR tasks. At the bottom are two buttons: "Start Enrollment" (green) and "Dismiss, complete later" (grey).

Step 3: Onboarding (For first time users, if applicable)

Complete any assigned onboarding tasks before enrolling in your benefits. Once you've completed your tasks click **Start Enrollment** to begin your enrollments.

TIP

If you hit "**Dismiss, complete later**" you'll be taken to your Home Page. You'll still be able to start enrollments again by clicking "**Start Enrollments**"

The screenshot shows a page titled "You've got 2 items to complete." with a graphic of glasses. It contains a numbered list: 1. Enroll in your benefits, 2. Complete HR tasks. A green "Start Enrollments" button is at the bottom.

Step 4: Start Enrollments

After clicking **Start Enrollment**, you'll need to complete some personal & dependent information before moving to your benefit elections.

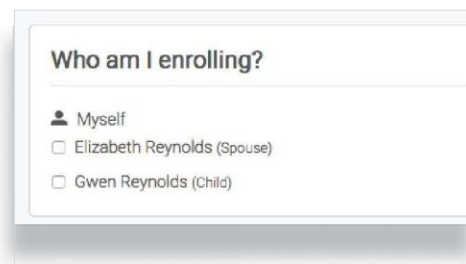
TIP

Have dependent details handy. To enroll a dependent in coverage, you will need their date of birth and Social Security number.

Step 5: Benefit Elections

To enroll dependents in a benefit, click the checkbox next to the dependent's name under **Who am I enrolling?**

Below your dependents you can view your available plans and the cost per pay. To elect a benefit, click **Select Plan** underneath the plan cost.

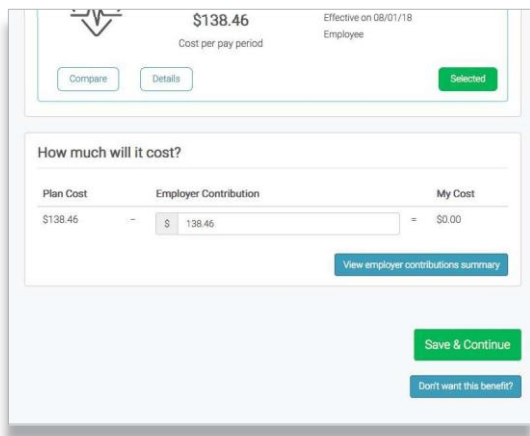


Who am I enrolling?

☒ Myself

☐ Elizabeth Reynolds (Spouse)

☐ Gwen Reynolds (Child)



Cost per pay period: \$138.46 Effective on 08/01/18 Employee

Compare Details Selected

How much will it cost?

Plan Cost	Employer Contribution	My Cost
\$138.46	\$ 138.46	\$0.00

View employer contributions summary

Save & Continue

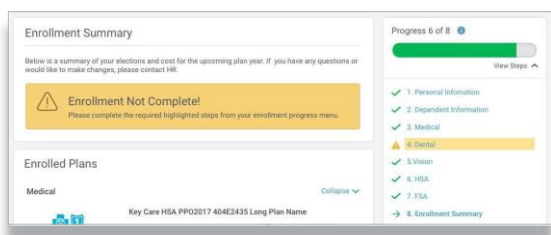
Don't want this benefit?

Click **Save & Continue** at the bottom of each screen to save your elections.

If you do not want a benefit, click **Don't want this benefit?** at the bottom of the screen and select a reason from the drop-down menu.

Step 6: Forms

If you have elected benefits that require a beneficiary designation, Primary Care Physician, or completion of an Evidence of insurability form, you will be prompted to add in those details.



Enrollment Summary

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions or would like to make changes, please contact HR.

Enrollment Not Complete! Please complete the required highlighted steps from your enrollment progress menu.

Enrolled Plans

Medical Key Care HSA PPO2017 404E2435 Long Plan Name

Progress 6 of 8

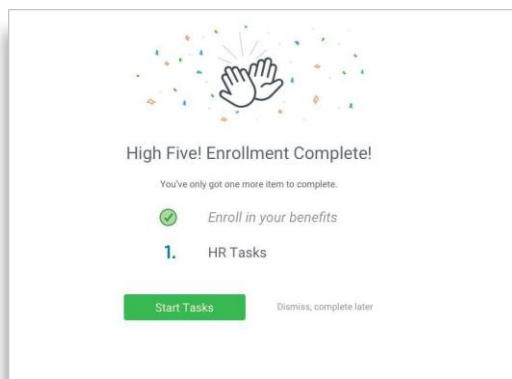
- 1. Personal Information
- 2. Dependent Information
- 3. Medical
- 4. Dental
- 5. Vision
- 6. HSA
- 7. FSA
- 8. Enrollment Summary

Step 7: Review & Confirm Elections

Review the benefits you selected on the enrollment summary page to make sure they are correct then click **Sign & Agree** to complete your enrollment. You can either print a summary of your elections for your records or login at any point during the year to view your summary online.

TIP

If you miss a step you'll see **Enrollment Not Complete** in the progress bar with the incomplete steps highlighted. Click on any incomplete steps to complete them.



High Five! Enrollment Complete!

You've only got one more item to complete.

- Enroll in your benefits
- 1. HR Tasks

Start Tasks Dismiss, complete later

Step 8: HR Tasks (if applicable)

To complete any required HR tasks, click **Start Tasks**. If your HR department has not assigned any tasks, you're finished!



You can login to review your benefits 24/7



CONTACTS

Carrier Contacts and Resources			
Plan	Carrier	Website	Phone Number
Medical & Prescription Claims; Network Providers	BlueCross BlueShield of Oklahoma	www.bcbsook.com	800-942-5837
Dental Claims & Network Providers	Delta Dental of Oklahoma	www.deltadentalok.org	800-522-0188
Vision, Life, AD&D, Disability, Accident Claims & Network Provider	Mutual of Omaha	www.mutualofomaha.com	800-877-5176
Health Savings Account Claims	HSA Bank	www.hsabank.com	800-357-6246

Benefits Contacts		
Contact	Hours of Operation (Central Time)	Phone Number
Jennifer Walker Gallagher Benefits Services Sr. Account Director Jennifer_Walker1@ajg.com	Monday-Friday 8:00 am – 5:00 pm	(405) 445-5038 Phone (405) 445-5184 Fax
Tiffany Davis Gallagher Benefits Services Principal Consultant Tiffany_Davis@ajg.com	Monday-Friday 8:00 am – 5:00 pm	(405) 445-5036 Phone (405) 445-5184 Fax