



Industries of Greater Cleveland & East Central Ohio, Inc.

2026 Employee Benefit Guide

Effective: June 1, 2026 through May 31, 2027



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This brochure summarizes the benefit plans that are available to Goodwill Industries of Greater Cleveland and East Central Ohio, Inc. eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.



A Message from Goodwill Industries of Greater Cleveland and East Central Ohio, Inc.

Welcome to your 2026 employee benefits guide. In these pages, you will learn about the Goodwill Industries of Greater Cleveland and East Central Ohio benefits program, which is designed to help you stay healthy, secure, and maintain a work/life balance.

Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. We work hard every year to evaluate benefit needs and negotiate the most cost-effective benefit packages. Due to this focus and our employees making wise decisions about their health, our medical plan rates have remained flat since 2021 while the average increase is between 4%-7% per year.

Please read the information in this guide carefully, and for full details about our plans, refer to each plan's summary plan description located in UKG.

Who is Eligible?

Full-Time employees working at least 30 hours per week and their eligible dependents may participate in the benefit program.

Generally, eligible dependents are defined as:

- Your spouse
- Dependent child(ren) through the end of the month in which they turn 26. Coverage may continue past age 26 for disabled dependents if application is made to the carriers.

When and How Can I Enroll?

Open enrollment for current employees is May 3rd, 2026, through **May 16, 2026**. Newly eligible employees must complete their new hire enrollment within 30 days of their hire date.

Both open enrollment and new hire enrollment are completed in UKG at <https://ew33.ultipro.com/>.

When is Coverage Effective?

Benefits elected at open enrollment are effective on 6/1/2026.

Benefits elected during new hire enrollment are effective on the 1st of the month following 30 days of employment.

Coverage will remain in effect through the earliest of your date of separation, the plan year end date (5/31/2026), or you choose to terminate coverage due to a life event.

When Can I Change My Enrollment?

You can change coverage during the year only when you experience a qualifying life event, such as marriage, divorce, birth, adoption, placement for adoption, or loss of coverage. The change must be consistent with the event. You must notify HR and provide supporting documentation within 30 days of the event.

What if I Have Questions?

For questions about your benefits or enrollment options, call 800-942-3577 and ask to speak with a member of Human Resources or email hr@goodwillgoodskills.org.

Medical Insurance



You can choose either the Core HDHP or the Buy-Up PPO Plan through Anthem BlueCross BlueShield. Your premiums for this plan are deducted on a pre-tax basis.

Note: While the plan year runs June 1 through May 31, the deductible year runs from January 1 through December 31.

Let's review a few "insurance terms" that will help you with understanding your plan choices.

Copay: Flat dollar amount member is responsible for at the time of service. The plan usually pays 100% of the remaining balance.

Deductible: Amount member is responsible for before the plan pays for certain services.

Coinsurance: Percentage of payment shared between the member and the plan for certain services after the deductible has been met.

Network Provider: Medical and pharmacy providers that have contracted with the plan to provide lower out-of-pocket costs for members. To find an in-network provider, go to www.anthem.com/find-care.

	Anthem Blue Cross and Blue Shield Core Plan		Anthem Blue Cross and Blue Shield Buy-Up Plan	
	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
Annual Deductible				
Individual	\$3,400	\$3,400	\$800	\$3,000
Family	\$6,800	\$6,800	\$1,600	\$6,000
Coinsurance	100%	70%	80%	60%
Maximum Out-of-Pocket				
Individual	\$3,400	\$6,600	\$3,000	\$6,000
Family	\$6,800	\$13,200	\$6,000	\$12,000
Physician Office Visit				
Primary Care	100% after deductible	70% after deductible	\$20 copay per visit	60% after deductible
Specialty Care	100% after deductible	70% after deductible	\$30 copay per visit	60% after deductible
Preventive Care				
Adult Periodic Exams	100%	70% after deductible	100%	60% after deductible
Well-Child Care	100%	70% after deductible	100%	60% after deductible
Diagnostic Services				
X-ray and Lab Tests	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Complex Radiology	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Urgent Care Facility	100% after deductible	70% after deductible	\$35 copay per visit	60% after deductible
Emergency Room Facility Charges	100% after deductible; waived if admitted	100% after deductible; waived if admitted	\$150 copay per visit; Waived if admitted	\$150 copay per visit; Waived if admitted
Inpatient Facility Charges	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Outpatient Facility and Surgical Charges	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Mental Health				
Inpatient	100% after deductible	70% after deductible	80% after deductible	60% after deductible

	Anthem Blue Cross and Blue Shield Core Plan		Anthem Blue Cross and Blue Shield Buy-Up Plan	
	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
Outpatient	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Substance Abuse				
Inpatient	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Outpatient	100% after deductible	70% after deductible	80% after deductible	60% after deductible
Other Services				
Chiropractic	100% after deductible; 12 visits per year	70% after deductible	80% after deductible; 20 visits per year	60% after deductible
Retail Pharmacy (30 Day Supply)				
Generic (Tier 1)	0% after deductible	30% after deductible	\$10 copay	\$60 or 50%
Preferred (Tier 2)	0% after deductible	30% after deductible	\$30 copay	\$60 or 50%
Non-Preferred (Tier 3)	0% after deductible	30% after deductible	\$60 copay	\$60 or 50%
Preferred Specialty (Tier 4)	0% after deductible	30% after deductible	N/A	N/A
Mail Order Pharmacy (90 Day Supply)				
Generic (Tier 1)	0% after deductible	Not covered	\$10 copay	Not covered
Preferred (Tier 2)	0% after deductible	Not covered	\$75 copay	Not covered
Non-Preferred (Tier 3)	0% after deductible	Not covered	\$180 copay	Not covered
Preferred Specialty (Tier 4)	0% after deductible	Not covered	N/A	N/A

Employee Contributions: Medical

Core Plan				
	Total Cost per Month	Goodwill's Cost per Month	Your Cost per Month	Your cost per Pay
Employee	\$683.28	\$585.28	\$98.00	\$49.00
Employee & Spouse	\$1,434.90	\$1,098.90	\$336.00	\$168.00
Employee & Child(ren)	\$1,264.07	\$1,070.07	\$194.00	\$97.00
Family	\$2,015.69	\$1,585.69	\$430.00	\$215.00

Buy-Up PPO Plan				
	Total Cost per Month	Goodwill's Cost per Month	Your Cost per Month	Your cost per Pay
Employee	\$752.13	\$614.13	\$138.00	\$69.00
Employee & Spouse	\$1,579.47	\$1,157.47	\$422.00	\$211.00
Employee & Child(ren)	\$1,391.44	\$1,123.44	\$268.00	\$134.00
Family	\$2,218.78	\$1,666.78	\$552.00	\$276.00

Tobacco users pay an additional \$10.00 per pay in both plans.

Wellness Disclosure: Rewards for being a non-tobacco user are available to all employees enrolled in a medical plan. If you are unable to meet the non-tobacco standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by completing the free Ohio Tobacco Quit Line tobacco cessation program. Participants that successfully complete this program will receive the \$10 per pay discount. Call 1-800-QUIT-NOW (1-800-784-8669) to speak with a program specialist.

Dental Insurance



Although you can go to any dentist you wish using a Sun Life PPO network provider, your plan year maximum will stretch further if you go to an in-network who offers discounts on their usual fees. To find a provider, visit www.sunlife.com/findadentist.

Note: While the plan year runs June 1 - May 31, the benefit year runs from January 1 - December 31 for deductible and accumulation purposes. The chart below is a brief outline of the plan.

	Low Plan		High Plan	
	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
Annual Deductible				
Individual	\$0	\$0	\$50	\$50
Family	\$0	\$0	\$150	\$150
Waived for Preventive Care	Yes	Yes	Yes	Yes
Annual Maximum				
Per Person / Family	\$1,000	\$1,000	\$1,500	\$1,500
Preventive	100% after deductible	100% after deductible	100% after deductible	100% after deductible
Basic	80% after deductible	50% after deductible	100% after deductible	80% after deductible
Major	50% after deductible	25% after deductible	60% after deductible	50% after deductible
Orthodontia				
Benefit Percentage	Not covered	Not covered	50% after deductible	50% after deductible
Adults (and Covered Full-Time Students, if Eligible)	Not covered	Not covered	Not covered	Not covered
Dependent Child(ren)	Not covered	Not covered	Covered up to age 26	Covered up to age 26
Lifetime Maximum	N/A	N/A	\$1,000	\$1,000

Employee Contributions: Dental

Low Plan				
	Total Cost per Month	Goodwill's Cost per Month	Your Cost per Month	Your cost per Pay
Employee	\$15.69	\$7.86	\$7.86	\$3.93
Employee & Spouse	\$35.65	\$17.83	\$17.83	\$8.92
Employee & Child(ren)	\$39.71	\$19.86	\$19.86	\$9.93
Family	\$58.80	\$29.40	\$29.40	\$14.7

High Plan				
	Total Cost per Month	Goodwill's Cost per Month	Your Cost per Month	Your cost per Pay
Employee	\$30.34	\$15.17	\$15.17	\$7.59
Employee & Spouse	\$64.50	\$32.25	\$32.25	\$16.13
Employee & Child(ren)	\$71.82	\$35.91	\$35.91	\$17.96
Family	\$106.06	\$53.03	\$53.03	26.52

Vision Insurance



Vision benefits are available for you and your family for a minimal cost per paycheck through Sun Life. This plan includes benefits for one annual routine eye exam and your choice of eyeglasses or contact lenses, if applicable. Although you can go to any vision provider you choose, you will need to go to a participating network provider for the highest level of coverage.

The plan year runs June 1-May 31. The annual benefit is based on service frequency, which indicates when you will be eligible again for an exam or materials. To find a provider, call VSP at 1-800-877-7195 or log-in using www.vsp.com. Your premiums are deducted on a pre-tax basis.

	In-Network
Eye Examination	
Routine Eye Examination	100% after \$10 copay
Lenses and Frames	
Lenses (Single, Bifocal, Trifocal, Lenticular)	100% after \$25 copay
Frames	100% up to \$130 allowance; 20% off amounts over allowance
Contact Lenses	
Elective Contact Lenses	\$130 for contact lenses; 15% savings for contact lens exam (fitting and evaluation)
Medically Necessary Contact Lenses	100% after \$25 copay

	Frequency
Routine Eye Examination	Every 12 months
Eyeglass Lenses <u>OR</u> Contact Lenses	Every 12 months
Eyeglass Frames	Every 24 months
<i>Note: You can choose either eyeglass lenses or contact lenses every 12 months.</i>	

Employee Contributions: Vision

	Your Cost per Month	Your Cost per Pay
Employee	\$5.14	\$2.57
Employee & Spouse	\$9.35	\$4.68
Employee & Child(ren)	\$9.36	\$4.68
Family	\$16.07	\$8.04

Health Savings Account (HSA)



Health Savings Accounts complement High-Deductible Health Plans. They offer triple tax advantages by allowing you to make pre-tax contributions from your paycheck, invest your funds to grow your savings (interest and earnings grow tax free), and take tax free distributions from the account for current or future eligible expenses.

To participate, you must be enrolled in the Medical Core Plan. You will need to set up your own Health Savings Account at a bank of your choice and provide Human Resources with your account information.

Flexible Spending Accounts (FSA)



Healthcare Flexible Spending Account (Health FSA)

This account allows you to fund eligible expenses such as copays and deductibles, with pre-tax dollars. By paying for out-of-pocket medical expenses with pre-tax dollars, you do not pay Federal Income Tax or FICA tax on your contributions.



Dependent Care Account

This account allows you to fund the costs of care, on a pre-tax basis, for your dependent children aged 12 and younger and adult tax dependents who require care while you are at work. You may contribute up to a maximum of \$7,500 each year, per household. The plan year runs June 1 – May 31 and unused funds are forfeited after the 2 ½ month grace period following the end of the plan year.

HSA vs FSA

General information about the Health Savings Account (HSA) and the Health Flexible Spending Account (FSA) is shown in the chart below. Speak to your tax or legal advisor about your specific tax and benefit situation.

	Health Savings Account (HSA)	Health Care Flexible Spending Account (FSA)
Eligibility	Requires enrollment in the Core HDHP Plan	Any FT benefit eligible employee
Limitations	When also enrolled in an FSA, the FSA can only be used on dental/vision expenses	When also enrolled in an HSA, the FSA can only be used on dental/vision expenses
Max Contribution	\$4,400 Single \$8,750 Family \$1,000 "Catch-Up" for ages 55-65	\$3,400
Funds Availability	Funds must be in account before reimbursements are paid	All funds available at start of plan year
What happens to unused funds?	Unused funds accumulate year after year	Rollover up to \$680 of unused funds to the next plan year
Account Ownership	Personal bank account owned by the employee; funds are always yours	Account is owned by the employer, funds are "use it or lose it"
Contribution Changes	Changes can be made anytime	Changes only allowed at Open Enrollment unless you experience a Qualifying Event
Plan Year	1/1/26-12/31/26	6/1/26-5/31/27
Eligible Expenses	Deductibles, medical services, over-the-counter drugs, prescriptions, dental treatment, menstrual care products, eyeglasses. Visit https://www.irs.gov/pub/irs-pdf/p502.pdf for a complete list	

Income Protection

No cost to you!

At Goodwill Industries of Greater Cleveland and East Central Ohio, we offer **NO COST** plans designed to protect your income in the event of childbirth, serious injury, illness, dismemberment, or death.

All eligible employees are automatically enrolled in Basic Life and AD&D, Short-Term Disability and Long-Term Disability plans through Sun Life.

To ensure plan benefits are distributed according to your wishes, you must name a beneficiary in UKG.

Basic Life and AD&D	
Employee Amount	1.5x basic annual earnings
Benefit Maximum	\$300,000
Accidental Death Benefit	In the event of an accidental death, this benefit may double. Please see your booklet for further details.
Dismemberment	In the event of an accidental dismemberment, a benefit is provided up to a scheduled amount corresponding to the loss.
Benefit Reduction Schedule	Benefit amount reduced by 35% at age 65, 60% at age 70, 75% at age 75 and 85% at age 80. Benefits terminate upon retirement.

Disability		
	Short-Term Disability	Long-Term Disability
Benefit Amount	60% of weekly salary (up to \$2,000)	60% of monthly salary (up to \$10,000)
Benefits Begin	1 st day for injury 8 th day for illness	After 90 days of disability
Maximum Benefit Duration	13 weeks	Up to your Social Security Normal Retirement Age or longer, depending on your age at disability.
Pre-Existing Condition	N/A	12 months for a condition treated within 3 months prior to effective date of coverage.

Voluntary Life

Additional life insurance coverage is available for you, your spouse, and your children through Sun Life. Rates are age-based and will be calculated for you as you complete your enrollment in UKG. Costs for this plan are deducted through post-tax payroll deductions.

Employee	
Newly hired employee guaranteed coverage amount	\$200,000
Continuing employee guaranteed coverage annual increase amount	Choice of \$25,000
Maximum coverage amount	10x annual salary (\$200,000 maximum in increments of \$25,000)
Minimum coverage amount	\$25,000
Spouse	
Newly hired employee guaranteed coverage amount	\$25,000
Continuing spouse guaranteed coverage annual increase amount	Choice of \$12,500
Maximum coverage amount	50% of the employee coverage amount (\$50,000 maximum in increments of \$12,500)
Minimum coverage amount	\$12,500
Dependent Children	
Age 6 months to 26 years	\$10,000
Age 14 days to 6 months guaranteed coverage amount	\$250

Guaranteed Life Insurance Coverage Amount

- Initial Open Enrollment:** When you are first offered this coverage, you and your spouse can choose a coverage amount up to the guaranteed issue amount without providing evidence of insurability. If you decline this coverage now and wish to enroll later, evidence of insurability may be required and may be at your own expense.
- Annual Limited Enrollment:** If you are a continuing employee, you can increase your coverage amount by \$25,000 (\$12,500 for your spouse), subject to plan maximums, without providing evidence of insurability. If you submitted evidence of insurability in the past and were declined for medical reasons, you may be required to submit evidence of insurability.

Voluntary Accident

Goodwill Industries of Greater Cleveland and East Central Ohio offers Voluntary Accident Insurance to help offset expenses you occur in the event of an accident. Accident insurance provides cash benefits that you can use to meet any needs.

	LOW PLAN		HIGH PLAN	
	Cost Per Month	Cost Per Pay	Cost Per Month	Cost Per Pay
Employee	\$7.63	\$3.82	\$10.11	\$5.06
Employee & Spouse	\$12.13	\$6.07	\$17.07	\$8.51
Employee & Child(ren)	\$13.78	\$6.89	\$19.54	\$9.77
Family	\$18.28	\$9.14	\$26.44	\$13.22

With Sun Life's Accident Insurance:

- A wide range of covered events and services (*see your plan certificate for a complete listing*)
- Guaranteed Issue
- Lump-sum payments help to cover the unexpected costs in the event of an accident
- Premiums are automatically deducted from your paycheck

Voluntary Hospital Indemnity

We also offer Hospital Indemnity Insurance as a way to provide financial assistance in the event of hospitalization. The daily cash payment can be used to help pay for daily living expenses such as rent, gas, utilities, and other necessities.

	LOW PLAN		HIGH PLAN	
	Cost Per Month	Cost Per Pay	Cost Per Month	Cost Per Pay
Employee	\$14.30	\$7.15	\$26.86	\$13.43
Employee & Spouse	\$30.31	\$15.16	\$57.06	\$28.53
Employee & Child(ren)	\$23.37	\$11.67	\$44.05	\$22.03
Family	\$39.38	\$16.69	\$74.25	\$37.13

With Sun Life's Hospital Indemnity Insurance:

- No health questions to enroll
- Lump sum payment to help offset added expenses from the hospital confinement
- Premiums are automatically deducted from your paycheck

Employee Assistance Program

No cost to you!

ComPsych | GuidanceResources®

Life is challenging. We can help.

We're your GuidanceResources® program.
Talk to us for the tools you need to handle any of life's challenges, big or small.



Our Services:



Confidential Counseling

- Anxiety, depression, stress
- Grief, loss, life adjustments
- Relationship/marital conflicts



Work and Lifestyle Support

- Child, elder, and pet care
- Moving and relocation
- Shelters, government assistance



Legal Guidance

- Divorce, adoption, family law
- Wills, trusts, estate planning
- Free consultation and discounted local representation



Financial Resources

- Financial planning, retirement, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy



Digital Tools and Support

- Immediate connection to counseling, work-life support, and more
- Personalized guided behavioral health and well-being programs
- Interactive articles, videos, on-demand trainings, digital self-care tools
- Accessible resources for anxiety, stress, mindfulness, sleep, and more

Explore your program:
Scan for video tour



Confidential
24/7 support,
when and where
you need it.

Call 877.595.5284 to speak to a highly trained, caring professional.

Go to guidanceresources.com and enter your company ID: EAPCOMPLETE.

Assistance is always confidential. View our privacy notice at guidanceresources.com/privacy



Live Assistance

Call: 877.595.5284
App: GuidanceNow®
Online: guidanceresources.com

TRS: Dial 711
Web ID: EAPCOMPLETE

→
Scan for more resources



Self-Care from AbleTo

No cost to you!





Support your mental health with Self Care

With your Sun Life life insurance coverage, you and your family* have access to Self Care from AbleTo, which offers 24/7 access to self-care tools to help you build resilience and improve your mental health. You can explore content and activities that can help you reach your goals, at your own pace. Whether it's a simple breathing exercise or a deep dive on how to build work-life balance, Self Care empowers you and your family members to take care of your mental health.

You'll get

-  **Mood & Habit Tracking**
Identify patterns and monitor your progress
-  **Collections**
Build life skills with content designed by clinicians on topics that matter most to you

-  **Meditations**
Listen to relaxation, deep breathing, and positive visualization exercises
-  **Journaling**
Develop a more helpful and balanced perspective by writing about your thoughts, emotions, and goals

Sign up for Self Care from AbleTo today at

AbleTo.com/selfcare-sunlife

Access code: SUNLIFE

*Self Care+ is available to dependents age 13 years and older.



403(b) Retirement Account



Goodwill Industries of Greater Cleveland and East Central Ohio offers a 403(b) Retirement Plan with Agency match through Mutual of America. This benefit is available to both Full-time and Part-time Employees.

You may join the plan at any time by visiting www.mutualofamerica.com/signup.

Eligibility	All employees (Full-time and Part-time)
Enrollment window	Enroll any time, no waiting period
Agency Match Amount	\$0.50 for every \$1.00 you contribute, up to the first 8% of your income
Agency Match Eligibility	1 year of service, at least 1,000 hours worked in the last year, and at least 21 years old
Vesting	The funds you contribute are always yours; Agency contributions will be considered vested and become employee funds after three years of employment

Accessing Your Benefits

Your medical ID card and FSA debit card will be mailed directly to your home address. For your dental coverage, you can access your ID card conveniently online through the Sun Life website, and your vision card is available on the VSP website. Need a replacement card for any of these benefits? Contact the Benefit Resource Center at 855-874-0829 or by sending an email to BRCMidwest@usi.com.



Medical Anthem (Group # W43330)

Access personalized health and wellness information wherever you are! The Sydney Health mobile app is the one place to keep track of your health and your benefits.

With a few taps, you can quickly access your plan details, Member Services, virtual care, and wellness resources.

Download the Sydney Health app today

Use the app anytime to:

- Find care and compare costs.
- See what's covered and check claims.
- View and use digital ID cards.
- Check your plan progress.
- Fill prescriptions.



Scan the QR code to download the Sydney Health app.

You can also set up an account at [anthem.com/register](https://www.anthem.com/register) to access most of the same features from your computer.

Dental Sun Life (Group # 966825)

It is easy to find information about your dental benefits when you register for your Sun Life online account! To sign up, visit www.sunlife.com/account. You will need your social security number and date of birth to register. After registering, you can:

- Print an ID card
- Check claim status
- Estimate the cost of a dental procedure
- View plan details

Vision Sun Life (Group # 966825)

Online access to your vision benefits is available at www.vsp.com. You will need your social security number to create an account. By registering, you will be able to:

- Find a provider
- See your coverage and costs
- View a list of covered contact lens brands
- Learn how to use your vision benefits

Employee Assistance Program Employee Connect ComPsych – Guidance Resources

Easily connect to the help you need, when you need it, with the Employee Connect ComPsych – Guidance Resources Worldwide website or app. Scan the QR code or visit www.guidanceresources.com. Register using web ID: **EAPComplete**



Self-Care AbleTo

With Self Care from AbleTo, you can learn how to improve your mood, become more resilient to change, manage stress and feel more in control. To sign up, visit www.AbleTo.com/selfcare-sunlife and register using access code: **SUNLIFE**



Benefit Resource Center

Goodwill Industries of Greater Cleveland and East Central Ohio, Inc. has partnered with the USI Benefit Resource Center (BRC) to give you additional support for all your benefit needs including escalated claims, eligibility problems, and ID card assistance.

You can reach a Benefits Specialist at the BRC Monday through Friday 8:00 a.m. to 5:00 p.m. Eastern & Central Standard Time at 855-874-0829 or via e-mail at BRCMidwest@usi.com.

If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Escalated Claims or Benefit Concerns?

Contact the Benefit Resource Center ("BRC")!

Toll Free: 855-874-0829
BRCMidwest@usi.com

Our Benefits Specialists can assist you Monday through Friday, 8am to 5pm EST & CST

Carrier Contacts

Benefits Plan	Carrier/Group Number	Phone Number	Website
Medical (Buy-Up and Core)	Anthem Blue Cross and Blue Shield Group ID: W43330	833-639-1634	www.anthem.com
Dental (Buy-Up and Core)	Sun Life Group ID: 966825	800-442-7742	www.sunlife.com/account
Vision	Sun Life Group ID: 966825	800-877-7195	www.vsp.com
Basic Life and AD&D	Sun Life Group ID: 966825	800-247-6875	www.sunlife.com/account
Voluntary Life, Accident & Hospital Indemnity	Sun Life Group ID: 966825	800-247-6875	www.sunlife.com/account
Short Term Disability (STD)	Sun Life Group ID: 966825	800-247-6875	www.sunlife.com/account
Long Term Disability (LTD)	Sun Life Group ID: 966825	800-247-6875	www.sunlife.com/account
Employee Assistance Program	EAPComplete through ComPsych – Guidance Resources	877-595-5284	www.guidanceresources.com
Flexible Spending Account	Chard Snyder	800-982-7715	www.chard-snyder.com
403(b) Retirement Plan	Mutual of America	330-576-7012	www.mutualofamerica.com/signup

