



2026-2027 Employee Benefits Guide

AN OVERVIEW OF THE WIDE ARRAY OF BENEFITS
PROVIDED BY INTEGRITY EDUCATIONAL SERVICES TO
HELP YOU ENJOY INCREASED WELL-BEING AND
FINANCIAL SECURITY

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Welcome to your 2026 - 2027 Benefits!

Integrity Educational Services offers you and your eligible family members a comprehensive and valuable benefits program. You will be able to enroll in Medical, Dental, Vision, Life, Disability, Voluntary Life, and Flexible Spending. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

Eligibility for Coverage

Team members hired as a Full-Time Employee for 30 hours or more per week and continue to work in a position that is regularly scheduled to work 30 or more hours per week.

When Coverage Begins and Ends

- * Coverage will begin on the 1st of the month following your date of hire.
- * Coverage will end on the date you no longer meet the eligibility requirements; your contributions are discontinued, or the Group Insurance Policy is terminated.

How to Make Changes?

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. Qualified changes in status include, for example: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence, commencement or termination of adoption proceedings, change in employment status or change in coverage under another employer-sponsored plan. You have 30 days to notify the Human Resources Coordinator (Benefits) of qualified changes and to provide documentation of the change.

Important Reminders!

Spousal Carve-Out: Integrity Educational Services implements a Spousal Carve-Out for its Medical Insurance Coverage. If your spouse is working Full-Time and is offered insurance coverage through their employer, they must accept or remain on that employer's coverage.

Legal Dependents: You may only enroll Legal Dependents under your insurance coverage. Legal Dependents include - Spouse (except when excluded by the Spousal Carve-Out), Child, Stepchild, or a Child of whom you have Legal Guardianship. Any employee found to have enrolled a person(s) who is not a legal dependent may face termination and potential legal action for Insurance Fraud from the insurance carrier(s).

- ✓ You may be asked to provide legal documentation.

Benefits for 2026 - 2027

Benefit Overview

Integrity Educational Services provides a complete package of benefits aimed at providing flexible insurance protection and programs to meet your ever-changing needs. Integrity Educational Services shares the cost of some benefits with you, while making additional benefits available that you pay for if you choose to enroll. The part of the benefit costs that you are responsible for will be automatically deducted from your paycheck, either before or after your taxes are calculated.

The table below summarizes the benefits available to eligible staff and their dependents. These benefits are described in greater detail in this booklet.

BENEFITS AT-A-GLANCE

Benefit	Carrier	Pre-tax or Post-tax?	Who pays the cost?
Medical/Rx	Priority Health	Pre-Tax	IES & You
Virtual Visits	MI Partner Health	Not Applicable	IES
Dental	Delta Dental	Pre-Tax	IES & You
Voluntary Vision	EyeMed	Pre-Tax	You
Basic Life/AD&D	UNUM	Not Applicable	IES
Long Term Disability	UNUM	Not Applicable	IES
Short Term Disability	UNUM	Not Applicable	IES
Voluntary Life/AD&D	UNUM	Post-Tax	You

WHY DO I PAY FOR SOME BENEFITS WITH PRE-TAX MONEY?

While not all benefits qualify for pre-tax contribution, there is a definite advantage to paying for those that do: Taking the money out before your taxes are calculated lower the amount of your taxable income. Therefore, you pay less in taxes.

Benefits for 2026 - 2027

Medical/ Rx**Summary of Coverage**

Full-Time Employees working 30+ Hours/Week

PriorityHealth

Plan Features	Priority Health – WMP HMO HSA	
IN NETWORK	Tier 1	Tier 2
Deductibles (Indiv / Family)	\$4,500 / \$9,000 (Embedded)	\$7,500 / \$15,000 (Embedded)
Preventive Care	100% Covered	100% Covered
Out-of-Pocket Max (Indiv / Family)	\$8,500 / \$17,000	\$8,500 / \$17,000
Primary Care Visit	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Specialist Visit	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Telemedicine	0% Coinsurance After Deductible	0% Coinsurance After Deductible
Diagnostic Exam	30% Coinsurance After Deductible	50% Coinsurance After Deductible
X-Rays	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Complex Images	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Outpatient Procedure	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Inpatient Visit	30% Coinsurance After Deductible	50% Coinsurance After Deductible
Emergency Room	30% Coinsurance After Deductible	30% Coinsurance After Deductible
Urgent Care	30% Coinsurance After Deductible	50% Coinsurance After Deductible
PHARMACY	Tier 1	Tier 2
Generic	\$15 After Deductible	Not Covered
Preferred brand	\$50 After Deductible	Not Covered
Non-Preferred Brand	\$80 After Deductible	Not Covered
Preferred Specialty	80% After Deductible (Max \$150)	Not Covered
Non-Preferred Specialty	80% After Deductible (Max \$300)	Not Covered

Per Pay Period	
Employee	\$28.55
Employee + 1	\$68.51
Family	\$85.63

Benefits summary:



Coverage period: 09.01.2026 to 08.31.2027

HMO PriorityHSA - West MI Partners

Empowering members to take greater control of their health care spending

INTEGRITY EDUCATIONAL SERVICES

This document is intended to be an easy-to-read summary to provide a general overview of your benefits. It is not a contract or legal document. Additional limitations and exclusions may apply to covered services. This plan has a specific network of providers, so check the Provider Directory prior to receiving services. Prior authorizations for certain services may apply. A complete description of benefits is contained in the Certificate of Coverage, Schedule or Agreement as applicable.

Member cost-sharing	Tier 1	Tier 2
Embedded Deductible <i>The amount you pay before we begin to pay.</i>	\$4,500 individual/\$9,000 family Tier 1 deductible costs apply to Tier 1 only.	\$7,500 individual/\$15,000 family Tier 2 deductible costs apply to Tier 1 and Tier 2.
Coinsurance <i>Your share of the costs of a covered health care service.</i>	30% coinsurance for services after deductible is met, except where noted.	50% coinsurance for services after deductible is met, except where noted.
Coinsurance maximum <i>The most coinsurance cost share you'll pay for covered services in a contract year. Your coinsurance cost share counts toward your out-of-pocket limit.</i>	Not applicable	Not applicable
Out-of-pocket limit <i>The most you'll pay in a contract year for covered services before we begin to pay 100% of the costs.</i>	\$8,500 individual/\$17,000 family	\$8,500 individual/\$17,000 family
Office visits	Tier 1	Tier 2
Primary care provider (PCP)	30% coinsurance after deductible	50% coinsurance after deductible
Specialists	30% coinsurance after deductible	50% coinsurance after deductible
Urgent care	30% coinsurance after deductible	50% coinsurance after deductible
Virtual Care Services <i>For medical and behavioral health visits</i>	Covered in full after deductible	Covered in full after deductible
Allergy testing, serum and injections	30% coinsurance after deductible	50% coinsurance after deductible
Retail health clinic <i>Located in a retail center, like a supermarket or pharmacy and provides care for common illnesses and services (examples: ear aches, sore throats, flu shots)</i>	30% coinsurance after deductible	30% coinsurance after deductible
Mental and behavioral health	Tier 1	Tier 2
Inpatient hospital	30% coinsurance after deductible	50% coinsurance after deductible
Outpatient office visits	30% coinsurance after deductible	50% coinsurance after deductible

Prescription drug coverage

Visit priorityhealth.com and search *Optimized* or *Traditional* in the **Approved Drug** list to see coverage and pricing information.

Formulary	Traditional	
Tier 1	\$15 copayment; after deductible	
Tier 2	\$50 copayment; after deductible	
Tier 3	\$80 copayment; after deductible	
Tier 4	20% coinsurance, \$150 max; after deductible	
Tier 5	20% coinsurance, \$300 max; after deductible	
Mail Order / Retail	Tier 1/2/3 90-day supply = Mail Order 2x, after deductible / Retail 3x, after deductible	
Preventive care	Tier 1	Tier 2
Preventive care, immunizations	Covered in full; includes women's preventative health care services, well-child visits, flu shots and routine physical exams. Get the most up-to-date list of all the care that's recommended in our Preventative Health Care Guidelines when you login to your online account at PriorityHealth.com	Covered in full; includes women's preventative health care services, well-child visits, flu shots and routine physical exams. Get the most up-to-date list of all the care that's recommended in our Preventative Health Care Guidelines when you login to your online account at PriorityHealth.com
Laboratory and X-ray	Tier 1	Tier 2
Radiology	30% coinsurance after deductible	50% coinsurance after deductible
Advanced imaging (CT/ PET/MRI)	30% coinsurance after deductible	50% coinsurance after deductible
Laboratory	30% coinsurance after deductible	50% coinsurance after deductible
Emergency services	Tier 1	Tier 2
Emergency room	30% coinsurance after deductible	30% coinsurance after deductible
Emergency transportation/ ambulance services	30% coinsurance after deductible	30% coinsurance after deductible
Hospital care	Tier 1	Tier 2
Inpatient hospital physician services	30% coinsurance after deductible	50% coinsurance after deductible
Surgery and/or facility fee	30% coinsurance after deductible; exceptions apply	50% coinsurance after deductible; exceptions apply
Bariatric surgery	30% coinsurance after deductible; covered once per lifetime	50% coinsurance after deductible; covered once per lifetime
Outpatient care	Tier 1	Tier 2
Skilled nursing services and residential treatment	30% coinsurance after deductible; Up to 45 days covered per member each contract year	50% coinsurance after deductible; Up to 45 days covered per member each contract year
Outpatient surgery	30% coinsurance after deductible	50% coinsurance after deductible
In-home and hospice care	30% coinsurance after deductible	50% coinsurance after deductible
Rehabilitation services and devices	Tier 1	Tier 2
Physical and occupational therapy	30% coinsurance after deductible Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2	50% coinsurance after deductible Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2
Chiropractic care	30% coinsurance after deductible Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2	50% coinsurance after deductible Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2
Speech therapy	30% coinsurance after deductible; Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2	50% coinsurance after deductible Maximum 30 visits per member per contract year, combined Tier 1 & Tier 2
Prosthetic and orthotic support	20% coinsurance after deductible	50% coinsurance after deductible
Durable medical equipment (DME)	20% coinsurance after deductible	50% coinsurance after deductible

Family planning and maternity care	Tier 1	Tier 2
Family planning	50% coinsurance after deductible	50% coinsurance after deductible
Routine prenatal and postpartum care	Covered in full for evaluation and management; see Preventative Health Care Guidelines for recommendations and services	Covered in full for evaluation and management; see Preventative Health Care Guidelines for recommendations and services
Maternity delivery and nursery care	30% coinsurance after deductible	50% coinsurance after deductible
Tubal ligation	Covered in full for physician's services and outpatient facility Note: Hospital inpatient charges are subject to deductible and coinsurance when in connection with delivery or other covered inpatient surgery	Covered in full for physician's services and outpatient facility Note: Hospital inpatient charges are subject to deductible and coinsurance when in connection with delivery or other covered inpatient surgery
Vasectomy	30% coinsurance after deductible	50% coinsurance after deductible

Riders	
Embedded deductible (HSA only)	Includes embedded deductible and embedded TrOOP. The deductible/TrOOP paid by all members will be combined to satisfy the family deductible/TrOOP. One member cannot contribute more than the individual deductible/TrOOP. Deductible \$4,500 per member, \$9,000 per family per contract year TrOOP \$8,500 per member, \$17,000 per family per contract year
Oral and non-oral treatment for sexual dysfunction – matching drug copay	Coverage is limited to the following: injectable, intra-urethral and oral tablets. Prescription must be certified by Priority Health.
Durable medical equipment	80%/50% coverage
Prosthetics and orthotics	80%/50% coverage
PSA test rider	Covers the PSA (prostate specific antigen) test at 100% coverage; after deductible for HSA. This is a blood test used to screen for prostate cancer.

Additional benefits:



Cost estimator: Calculates specific costs for hundreds of procedures, based on where you're at with your deductible, coinsurance, etc. If a selected procedure is above fair market price, the tool will provide a list of nearby facilities where it's offered at a lower cost.

Benefits for 2026 - 2027

Health Savings Account (HSA)

FOR 2026 – 2027 - INTEGRITY EDUCATIONAL SERVICES IS OFFERING A HEALTH SAVINGS ACCOUNT (HSA). THIS IS HOW AN HSA WORKS:



A health savings account (HSA) is a health care account and savings account in one. The main purpose of this account is to offset the cost of a qualifying high deductible health plan (HDHP) and provide savings for your out-of-pocket eligible health care expenses – those you and your tax dependents may have now, in the future, and during your retirement.



This is a “portable” account. You own your HSA! It’s included in your employee benefits package, but after you set up your account, it’s yours to keep, even if you change jobs or retire.



Once your HSA is established, money is contributed to your account by you, Integrity Educational Services or friends and family, and you can then use your HSA dollars tax-free to pay for eligible health care expenses. You save money on expenses you’re already paying for, like doctors’ office visits, prescription drugs, and much more. Best of all, you decide how and when to use your HSA dollars.

WHY IS IT A GOOD IDEA TO HAVE AN HSA?

HSAs benefit everyone who is eligible to have this account – single individuals, families, and soon-to-be retirees. You save money on taxes in three ways:

› Tax-free deposits – › The money you contribute to your HSA isn’t taxed (up to the IRS annual limit)	› Tax-free earnings – › Your interest and any investment earnings grow tax-free.	› Tax-free withdrawals – The money used toward eligible health care expenses isn’t taxed – now or in the future.
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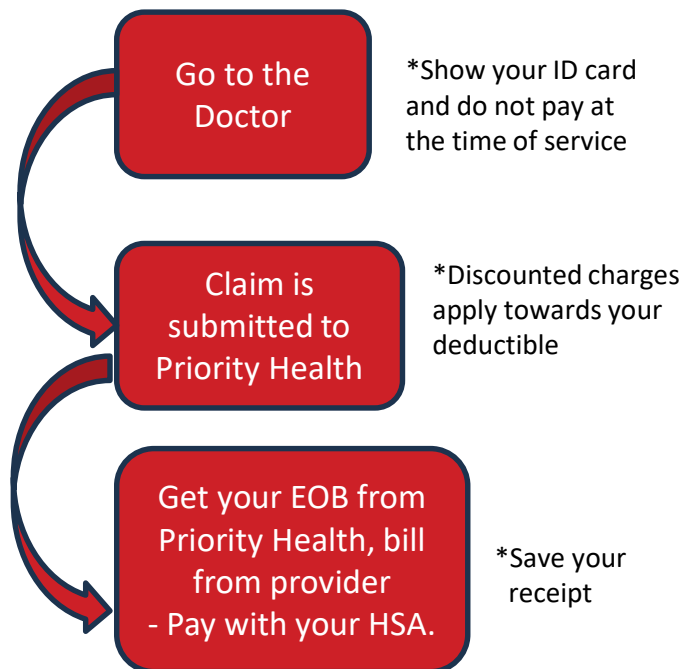
› Setting aside pre-tax dollars into your HSA means you pay fewer taxes and increase your take-home pay by your tax savings. You save money on eligible expenses that you are paying for out of your pocket. The amount you save depends on your tax bracket. For example, if you are in the 30 percent tax bracket, you can save \$30 on every \$100 spent on eligible health care expenses.

2026 IRS Contribution Limits: Individual \$4,400/Family \$8,750
Age 55+ additional \$1,000 Catch-Up Contribution

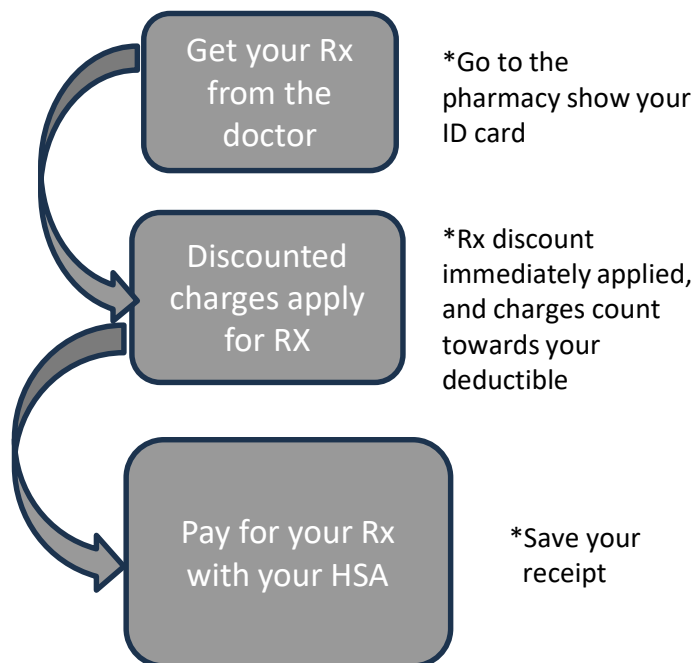
HSA funds roll over from year to year and accumulate in your account. There is no “use-it-or-lose-it” rule with HSAs, and you decide how and when to use your HSA funds, which can be used for eligible expenses you have now, in the future, or during retirement. And when you have a certain balance in your HSA, investment opportunities are available.

Refer to your HSA documentation for more information.

At the Doctor?



At the Pharmacy?



HSA ELIGIBLE CHARGES

- Alcohol/Drug Rehab
- Ambulance
- Chiropractor
- Copays
- Dental Care
- Medical Equipment
- Eye Care/Lasik Surgery
- Hearing Aids/Batteries
- Home Health Care and Nurses' Fees
- Diabetic Supplies
- Laboratory fees
- Obstetrical expense
- Over The Counter (non-prescription)
- Pediatrician
- Pregnancy Tests
- Podiatrist
- Prescription drugs
- Psychiatrist
- Smoking Cessation
- Surgery
- Weight Loss Program (if prescribed)
- X-ray

HSA INELIGIBLE CHARGES

- Childbirth Classes
- Childcare Classes
- Cosmetic Surgery
- Cosmetics
- Dancing Lessons
- Swimming Lessons
- Reimbursed Expenses
- Food
- Gym Membership
- Herbal Supplements
- Insurance Premiums
- Swimming Pools
- Hot Tubs
- Exercise Equipment
- Toothpaste
- Vitamins (non-prescription)
- Weight Loss Programs (non-prescription)

*These are not an all-inclusive list.

Integrity Educational Services

HSA Contribution

To help each team member participating in the IES medical plan, IES will assist by making contributions to the Health Savings Account (HSA).

Contributions will be made each pay date. The 2026 – 2027 IES HSA contribution will be \$46.88/single or \$93.75/family.

IES Contributions will be made to a Fidelity Account depending upon your election.

If you are participating in the medical plan, then you will be eligible for the IES HSA Contribution. The IES contribution will be prorated for enrollments after the plan year begins.

If a team member has a significant medical expense early in the plan year, the team member may request an earlier contribution to the HSA account. The team member will be required to document the significant medical expense.

Team members are also able to contribute to their HSA accounts to the maximum annual contributions; \$4,400 for a single and \$8,750 for a family.

Remember that your HSA account rolls over each year.

If you are currently covered by Medicare and elect to participate in the IES medical plan, please contact the HR department to discuss your IES HSA Contribution.

Please note: If a team member has HSA medical expenses greater than the plan deductible (\$4,500/\$9,000), they may submit a request for additional Employer funded HSA contributions of \$1,000 / \$2,000. Requests must include the Priority Health Explanation of Benefits, provider invoice and a request email. Please reach out to Human Resources for additional information.

Benefits for 2026 - 2027

Key Terms to Remember



ANNUAL DEDUCTIBLE

The amount you have to pay each year before the plan starts paying a portion of medical expenses. All family members' expenses that count toward a health plan deductible accumulate together in the aggregate; however, each person also has a limit on their own individual accumulated expenses (the amount varies by plan).



OUT-OF-POCKET MAXIMUM

This is the total amount you can pay out of pocket each calendar year before the plan pays 100 percent of covered expenses for the rest of the calendar year. Most expenses that meet provider network requirements count toward the annual out-of-pocket maximum, including expenses paid to the annual deductible*, copays and coinsurance.

*Except for Grandfathered medical plans



COPAYS AND COINSURANCE

These expenses are your share of cost paid for covered health care services. Copays are a fixed dollar amount, and are usually due at the time you receive care. Coinsurance is your share of the allowed amount charged for a service, and is generally billed to you after the health insurance company reconciles the bill with the provider.



PLAN TYPES

- › HMO – A network that requires you to select a Primary Care Physician (PCP) who coordinates your health care
- › HDHP – A plan that has higher annual deductibles in exchange for lower premiums.

Wellness & Health Management

The Value of Preventive Care

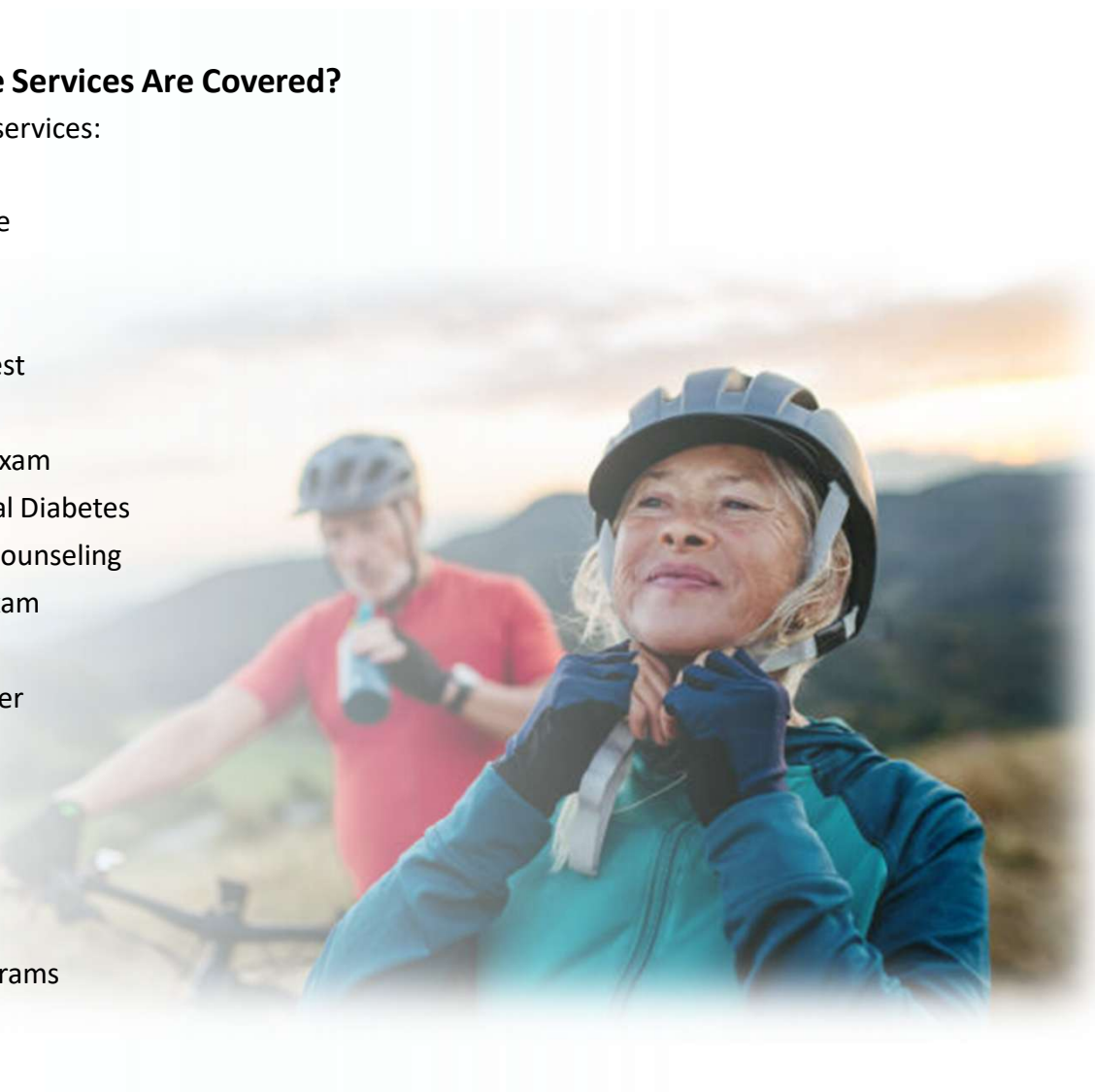
Understanding the full value of covered benefits allows you to take responsibility for maintaining good health and incorporating healthy habits into your lifestyle. Some examples include getting regular physical examinations, mammograms and immunizations.

Through the plans offered by Integrity Educational Services, all covered individuals and family members are eligible to receive routine wellness services like these, at no cost; all copays, coinsurance, and deductibles are waived.

Which Preventive Care Services Are Covered?

Below is a list of common services:

- Routine Physical Exam
- Well Baby and Child Care
- Well Woman Visits
- Immunizations
- Routine Bone Density Test
- Routine Breast Exam
- Routine Gynecological Exam
- Screening for Gestational Diabetes
- Obesity Screening and Counseling
- Routine Digital Rectal Exam
- Routine Colonoscopy
- Routine Colorectal Cancer Screening
- Routine Prostate Test
- Routine Lab Procedures
- Routine Mammograms
- Routine Pap Smear
- Smoking Cessation Programs



Know where to go

If you're faced with a sudden illness or injury, making an informed choice on where to seek medical care is crucial to your personal and financial well-being.

Making the wrong choice can result in delayed medical attention and may cost hundreds, if not thousands, of dollars. More than 10% of all emergency room visits could have been better addressed in either an urgent care facility or a doctor's office.

Remember: Unless it is a true emergency – a serious or life-threatening condition that requires immediate treatment that is only available in a hospital – consider your options for appropriate, quality care that is efficient and economical.

DON'T PAY MORE IF YOU DON'T HAVE TO:

MI Partner Health Virtual Clinic where services may be provided at no cost compared to urgent or emergency care as they are subject to primary care office visit copays and/or coinsurance. MI Partner Health Virtual Clinic is suitable for every day and preventative healthcare. Examples include common infections (ear, bladder, pink eye, strep throat), minor skin conditions, allergies, and more. Details of this program are on page 13.



Emergency Room

The emergency room (ER) is equipped to handle life-threatening injuries and illnesses and other serious medical conditions.

Patients are seen according to the seriousness of their conditions in relation to the other patients.

You should go to the nearest ER if you experience any of the following:

- Compound fractures
- Deep knife or gunshot wound
- Moderate to severe burns Poisoning or suspected poisoning
- Seizures or loss of consciousness
- Serious head, neck or back issues
- Severe abdominal pain
- Severe chest pain or difficulty breathing
- Sign of a heart attack or stroke
- Suicidal or homicidal feelings
- Uncontrollable bleeding



Urgent Care

Urgent care centers are not equipped to handle life-threatening injuries, illnesses or medical conditions. These centers are designed to address conditions where delaying treatment could cause serious problems or discomfort.

Some examples of conditions that require a visit to an urgent care center include:

- Controlled bleeding or cuts that require stitches
- Diagnostic services (x-rays, lab tests)
- Ear infection
- High fever or the flu
- Minor or broken bones (e.g., toes, fingers)
- Severe sore throat or cough
- Sprains or strains
- Skin rashes and infections
- Urinary tract infections
- Vomiting, diarrhea or dehydration

DO YOU NEED MEDICAL CARE?

Contact IES Virtual Care Clinic

Care provided by



We take care of all primary care needs for all ages

- Routine health exams and sports physicals
- Lab tests
- Cough, sore throat, fever, ear pain, sinus pain
- Weight loss and nutrition
- Chronic diseases such as high blood pressure, diabetes, arthritis, asthma, COPD
- Minor bumps, cuts, and bruises
- Sprains and strains
- Concussion
- Minor burns



- Nausea, vomiting, diarrhea
- Rashes and moles
- Eye swelling and pain
- Urinary symptoms
- Allergic reactions
- Headaches
- Smoking cessation
- Referral to specialists
- Pre-surgery clearance
- Biometric screening
- And MORE



Contact 911/ER if you experience a life-threatening issue, such as...

- Severe shortness of breath or chest pain
- Stroke symptoms (facial drooping, limb weakness, speech difficulty)
- Severe cuts or burns
- Uncontrolled bleeding
- Major limb injury
- Severe head injury
- Overdose

616-441-3563

Call or text the Virtual Clinic to schedule an appointment:

Monday - Friday 7:00am - 7:00pm

For urgent needs outside of clinic hours,
call or text the clinic.

Employee Cost:

- Covered by IES medical plan – No cost
- Not covered by IES medical plan - \$20/family member per month



Scan and visit the
IES Virtual Care Clinic website
to learn more or to schedule an appointment online.

<https://sites.google.com/mipartnerhealth.com/ies-virtual-clinic/home>

STRETCHING YOUR HEALTHCARE DOLLARS

As healthcare costs continue to rise, it is increasingly important that you take an active role in decisions about your health, the care you receive and your benefits. Here are some tips to help get you the most for your money.

Choose a Primary Care Physician

Selecting a primary care physician is one of the best things you can do for your health. This person knows your health history and schedules routine screening tests that frequently help prevent and detect diseases, such as heart disease, cancer, and diabetes. Your PCP can provide necessary medical advice and identify health concerns before they become a major issue.

Stay In-Network

In-network providers have a contract with the health insurance company to provide services at reduced rates. In most cases, if you visit a physician or other provider within the network, the amount you will be responsible for paying will be less than if you go to an out-of-network provider. **Out-of-network coverage is only available for emergency services.**

Don't Skip Preventive Care

Be sure your child gets routine checkups and vaccines as needed, both of which can prevent medical problems (and bills) down the road. Also, adults should get the preventive screenings recommended for their age in order to detect health conditions early.

Price Compare Prescriptions

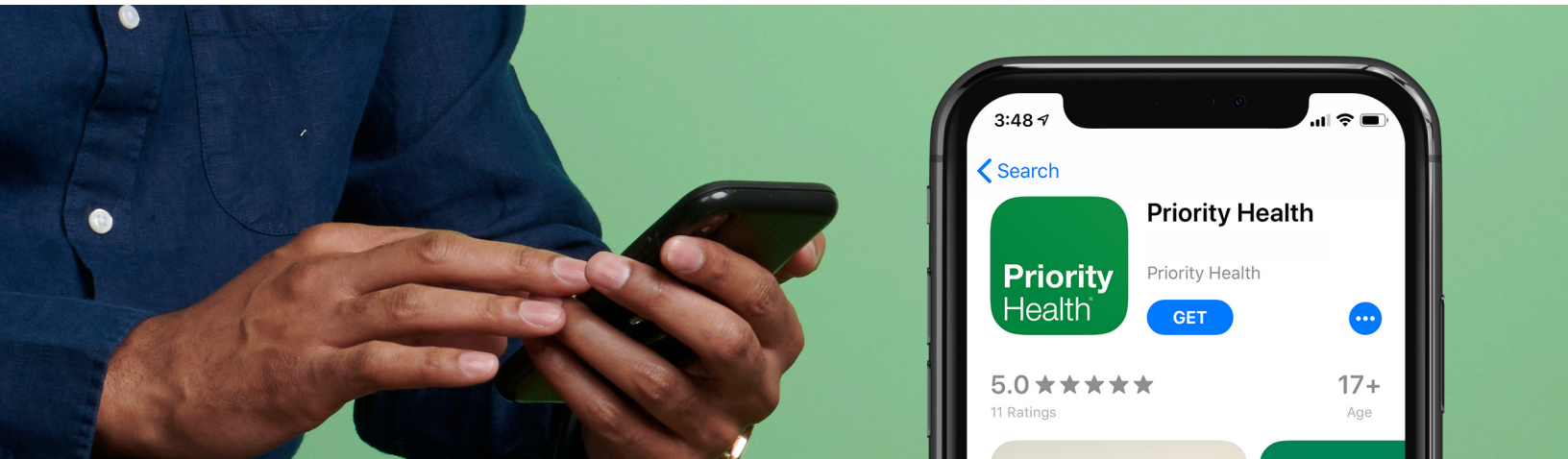
Ask your provider for the generic version of a prescription. If you order your maintenance medications in bulk (90-day supply) through mail order, search for the least expensive pharmacy option near you, or check to ensure prescribed medications are on the plan's formulary list.

Live a Healthy Lifestyle

Focus on eating nutritiously, cutting down on fast food and getting more physical exercise. Take advantage of tobacco cessation programs. Take a walk at lunch to manage stress. Striving toward a healthier lifestyle and maintaining a healthy weight can drastically reduce future medical conditions and diseases.

Use the Plan's Tools & Resources

Many health plans provide access to free disease management programs for chronic conditions like asthma, diabetes and heart disease. These programs can help you stay healthy and manage your condition and can possibly save you money in the long run. Look for other available resources or programs that are designed to prevent illness and lower health costs over the long run.



The smart choice, now on your smartphone

Managing your health insurance is easier than ever with the new Priority Health app.

In your member account, you can quickly and easily:



Track spending balances to keep your budget in check



Search your claims and see a detailed breakdown of care and prescription costs



Compare costs of medical procedures and prescriptions based on your plan so you can save money



Find in-network doctors, specialists, labs and more



Set up a video visit and get virtual care when and where you need it



Download the Priority Health app from the App Store or Google Play or sign up at member.priorityhealth.com to view your personalized health insurance information anytime, anywhere.



Getting started is easy:

1. Download the Priority Health app from the App Store or Google Play, or visit member.priorityhealth.com.
2. Click **Sign up** and follow the instructions.*

Questions about your member account?

If you need technical support or help accessing your account, email us at techsupport@priorityhealth.com or call 833.207.3210. For all other questions about your plan, call the number on the back of your member ID card to speak with a member of our Customer Service team.

**You may be asked security questions to verify your identity.*



Already have a MyHealth account?

You can use your existing MyHealth username and password to log in to the Priority Health app.

Continue using your MyHealth account to access your Spectrum Health providers, appointments and other patient information.

Priority Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia en su idioma. Consulte al número de Servicio al Cliente que está en la parte de atrás de su tarjeta de identificación de miembro. (TTY: 711).

ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. يرجى الاتصال برقم خدمة العملاء على الجانب الخلفي من بطاقة عضويتك الشخصية. (رقم هاتف الصم والبكم: 711).

BenefitHub

A free, online discount marketplace

As a Priority Health member, you can enjoy discounts, rewards, and other perks on thousands of the brands you love with BenefitHub, a free, easy-to-use benefits portal with a full range of discounts and rewards. From apparel to local restaurants and entertainment, you can save big when shopping online. With exclusive offers, cash back and discounted gift cards in your local area, it's easy to start saving.

Why use BenefitHub?

- It's a **no-cost benefit** for you as a Priority Health member*
- The online marketplace is **tailored to where you live**.
Enjoy more, see more, and save more in your local area.
You'll find deals on restaurants, shopping, entertainment and more.
- Traveling? See more great **deals on-the-go** such as car rentals and entertainment.

It's easy to sign up and save

- 1 Go **here** or log in to your member portal at *member.priorityhealth.com*.
- 2 Enter referral code: **745AKW**
- 3 Complete registration



Enjoy discounts, rewards, and other perks on the brands you love in a variety of categories:

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- ✓ Tickets
- ✓ Sports and outdoors

**Available to members with Commercial, MyPriority and Medicaid health plans.*

Priority Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia en su idioma. Consulte al número de Servicio al Cliente que está en la parte de atrás de su tarjeta de identificación de miembro. (TTY: 711).

ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. يرجى الاتصال برقم خدمة العملاء على الجانب الخلفي من بطاقة عضويتك الشخصية. (رقم هاتف الصم والبكم: 711).

Benefits for 2026 - 2027

Dental Coverage



Summary of Coverage

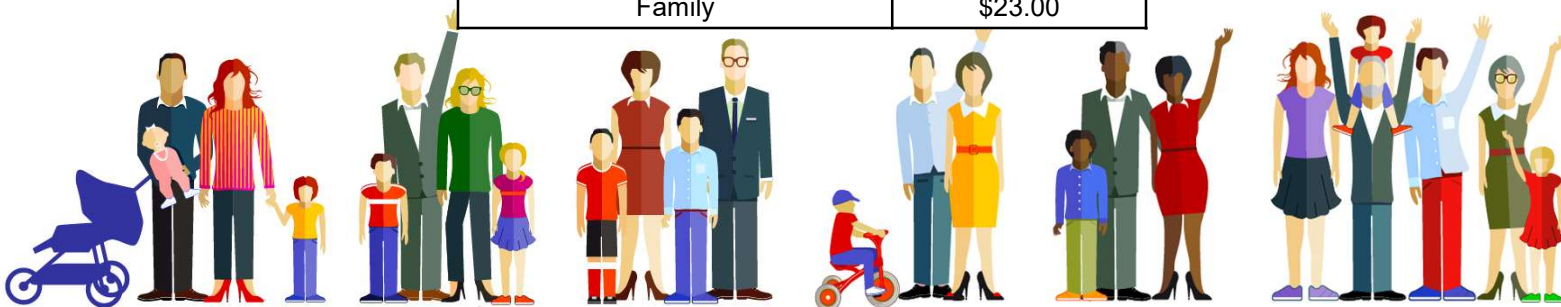
Full-Time Employees working 30+ Hours/Week



Note: You may not elect Stand-Alone Dental Coverage; Employees must be enrolled in Medical to Enroll in the Dental; however, if your spouse is excluded from the Medical Plan, the Spouse IS STILL ELIGIBLE to be enrolled in the Dental Plan. You can; however, enroll in the Medical without also enrolling in the Dental.

	Delta Dental - Integrity Educational Services
IN NETWORK	
Annual Deductible (Individual / Family)	\$25 / \$75
Preventive Care	100% Oral Exams, Cleanings, Topical Fluoride Treatments, Space Maintenance, Bitewing X-Rays, Sealants
Basic Procedures (Extractions, fillings, etc.)	75% Emergency Treatment, Full Mouth/Panoramic X-Rays, Fillings, Simple Extractions, Endodontics, Periodontics, Oral Surgery
Major Procedures (Crowns, dentures, etc.)	50% Crowns, Bridges, Implants and Dentures
Child Orthodontia	\$1,200 for children up to Age 19, 50% coverage
Calendar Year Maximum Benefit	\$1,200
OUT OF NETWORK	
Annual Deductible (Individual / Family)	\$25 / \$75
Preventive Care	100% Oral Exams, Cleanings, Topical Fluoride Treatments, Space Maintenance, Bitewing X-Rays, Sealants
Basic Procedures (Extractions, fillings, etc.)	75% Emergency Treatment, Full Mouth/Panoramic X-Rays, Fillings, Simple Extractions, Endodontics, Periodontics, Oral Surgery
Major Procedures (Crowns, dentures, etc.)	50% Crowns, Bridges, Implants and Dentures
Child Orthodontia	\$1,200 for children up to Age 19, 50% coverage
Calendar Year Maximum Benefit	\$1,200

Per Pay Period	
Employee	\$8.45
Employee + Spouse	\$14.00
Employee + Children	\$16.60
Family	\$23.00



Delta Dental of Michigan

Dental Benefit Highlights for Integrity Educational Services #1673



Delta Dental PPOSM (Point-of-Service)
Coverage effective September 1, 2012

	Delta Dental PPO Dentist	Delta Dental Premier [®] Dentist	Non- participating Dentist
	Plan Pays	Plan Pays	Plan Pays*
Diagnostic & Preventive			
Diagnostic and Preventive Services – includes exams, cleanings, fluoride, and space maintainers	100%	100%	100%
Emergency Palliative Treatment – to temporarily relieve pain	100%	100%	100%
Sealants – to prevent decay of permanent teeth	100%	100%	100%
Brush Biopsy – to detect oral cancer	100%	100%	100%
Radiographs – X-rays	100%	100%	100%
Basic Services			
Minor Restorative Services – fillings and crown repair	75%	75%	75%
Endodontic Services – root canals	75%	75%	75%
Periodontic Services – to treat gum disease	75%	75%	75%
Oral Surgery Services – extractions and dental surgery	75%	75%	75%
Other Basic Services – misc. services	75%	75%	75%
Relines and Repairs – to bridges and dentures	75%	75%	75%
Major Services			
Major Restorative Services – crowns	50%	50%	50%
Prosthodontic Services – includes bridges, implants, and dentures	50%	50%	50%
Orthodontic Services			
Orthodontic Services – includes braces	50%	50%	50%
Orthodontic Age Limit –	19	19	19

* When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. This Nonparticipating Dentist Fee may be less than what your dentist charges, which means that you will be responsible for the difference.

Maximum Payment – \$1,200 per person total per calendar year on Diagnostic & Preventive, Basic Services, and Major Services. \$1,200 per person total per lifetime on Orthodontics.

Deductible – \$25 deductible per person total per calendar year limited to a maximum deductible of \$75 per family per calendar year. The deductible does not apply to Diagnostic & Preventive and Orthodontics.

Note - This document is intended as a supplement to your Certificate and Summary of Benefits. Please refer to your certificate and summary for policy exclusions and limitations.

Welcome to Michigan's largest dental benefits family!

As a member of Delta Dental of Michigan, you have access to the nation's largest dental networks: Delta Dental PPO and Delta Dental Premier.

- Nationwide, 3 out of 4 dentists participate
- Great access to care as well as reduced fees through our agreements with dentists
- You cannot be balance billed - giving you added savings
- Network dentists will complete and file your claim - no paperwork for you
- You only have to pay your copayments and/or deductibles when you receive dental services from a PPO or Premier Dentist
- You don't have to wait for your claim to be paid to be reimbursed!

While you can visit nonparticipating dentists, you can be billed the full amount immediately and then wait to be reimbursed.

Quality Dental Program

Delta Dental provides quick and accurate claims processing. *We pay more than 90 percent of claims in 10 days or less.* Delta Dental also offers world-class customer service from our award winning call center.

Online Access

Our online Consumer Toolkit lets you access your dental plan securely over the Internet. You can find a dentist, check benefits, select paperless EOBs, review claims and amounts used toward maximums, print ID cards, and more at your convenience.

A Healthy Smile

Keep your smile healthy with dental benefits from Delta Dental. Your smile is a good indicator of your health. Did you know that your dentist can detect up to 120 different diseases, including diabetes and heart disease? Early detection is one of the best ways to prevent further complications.

Questions?

If you have questions, call our Customer Service team at (800) 524-0149 or look online at www.DeltaDentalMI.com.

Benefits for 2026 - 2027

Vision Coverage



Summary of Coverage



Full-Time Employees working 30+ Hours/Week

EyeMed Vision - Integrity Educational Services		
Plan Features	In-Network	Out-of-Network
Vision Exam	\$10	\$35 Allowance
Lenses		
Single	\$25	\$25 Allowance
Bifocal	\$25	\$40 Allowance
Trifocal	\$25	\$50 Allowance
Progressive	\$90 Allowance	\$40 Allowance
Frames	\$120 Allowance	\$50 Allowance
Elective Contact Lenses	\$120 Allowance	\$100 Allowance
Medically Necessary Contact Lenses	\$210 Allowance	\$210 Allowance
Frequency (Months)		
Exam	12	
Lenses	12	
Frames	12	
Contacts	12	

Per Pay Period	
Employee	\$3.39
Employee + 1	\$6.44
Family	\$9.45





Integrity Educational Services

Additional discounts

40% OFF

Complete pair of prescription eyeglasses

20% OFF

Non-prescription sunglasses

20% OFF

Remaining balance beyond plan coverage

These discounts are not insured benefits and are for in-network providers only.

Take a sneak peek before enrolling

• You're on the **Insight** Network

• For a complete list of in-network providers near you, use our Enhanced Provider Locator on eyemed.com or call 1-866-804-0982

• For LASIK providers, call 1-877-5LASER6

SUMMARY OF BENEFITS

Vision Care Services	In-Network Member Cost	Out of Network Reimbursement
Exam With Dilation as Necessary	\$10 Copay	Up to \$40
Retinal Imaging	Up to \$39	N/A
Frames	\$0 Copay; \$120 allowance, 20% off balance over \$120	Up to \$84
Standard Plastic Lenses		
Single Vision	\$25 Copay	Up to \$30
Bifocal	\$25 Copay	Up to \$50
Trifocal	\$25 Copay	Up to \$70
Lenticular	\$25 Copay	Up to \$70
Standard Progressive Lens	\$90 Copay	Up to \$50
Premium Progressive Lens ^A	\$110 Copay - \$135 Copay	Up to \$50
Tier 1	\$110 Copay	Up to \$50
Tier 2	\$120 Copay	Up to \$50
Tier 3	\$135 Copay	Up to \$50
Tier 4	\$90 Copay, 20% off charge less \$120 Allowance	Up to \$50
Lens Options (paid by the member and added to the base price of the lens)		
UV Treatment	\$15	N/A
Tint (Solid and Gradient)	\$15	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate - age 19 and over	\$40	N/A
Standard Polycarbonate - under age 19	\$40	N/A
Standard Anti-Reflective Coating	\$45	N/A
Premium Anti-Reflective Coating ^A	\$57 - \$68	N/A
Tier 1	\$57	N/A
Tier 2	\$68	N/A
Tier 3	20% off Retail Price	N/A
Photochromic/Transitions	\$75	N/A
Polarized	20% off retail price	N/A
Other Add-Ons and Services	20% off retail price	N/A
Contact Lens Fit and Follow-up (Contact lens fit and two follow-up visits are available once a comprehensive eye exam has been completed.)		
Standard Contact Lens Fit & Follow-Up:	\$40	N/A
Premium Contact Lens Fit & Follow-Up:	10% off retail price	N/A
Contact Lenses (Contact Lens allowance includes materials only)		
Conventional	\$0 copay, \$120 allowance, 15% off balance over \$120	Up to \$120
Disposable	\$0 copay, \$120 allowance, plus balance over \$120	Up to \$120
Medically Necessary	\$0 copay, Paid-In-Full	Up to \$210
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Hearing Care		
Hearing Health Care from Amplifon Hearing Network	40% off hearing exams and low price guarantee on discounted hearing aids	
Frequency		
Examination	Once every 12 months	
Lenses or Contact Lenses	Once every 12 months	
Frame	Once every 12 months	

QL-0000031737

^A Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits are not provided from services or materials arising from: 1) Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; 2) Medical and/or surgical treatment of the eye, eyes or supporting structures; 3) Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear; 4) Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; 5) Plano (non-prescription) lenses; 6) Non-prescription sunglasses; 7) Two pair of glasses in lieu of bifocals; 8) Services or materials provided by any other group benefit plan providing vision care 9) Services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order. 10) Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/Premium Progressive lens not covered-fund as a Bifocal lens. Standard Progressive lens covered-fund Premium Progressive as a Standard. Benefit allowance provides no remaining balance for future use within the same benefit year. Fees charged for a non-insured benefit must be paid in full to the Provider. Such fees or materials are not covered.

Underwritten by Fidelity Security Life Insurance Company of Kansas City, Missouri, except in New York. Fidelity Security Life Policy number VC-19/VC-20, form number M-9083. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Get more and see more with EyeMed



72%
AVERAGE
SAVINGS



CHOOSE A DOC

EyeMed members choose from the right mix of thousands of providers—independent eye doctors, your favorite retail stores and everything in between. Find your ideal fit at eyemed.com or the EyeMed Members App.



CREATE AN ACCOUNT

Get special offers with an account on eyemed.com. Enter your email, choose a password and sign up for emailed savings. Log in 24/7 to view your benefit details or health and wellness information.



MOBILIZE YOUR BENEFITS

The EyeMed Members App makes your benefits easy to understand—and even easier to use. Find an eye doctor near you, schedule an appointment and manage your vision benefits.

on eye exams and glasses for EyeMed members*

Learn more about enrolling in EyeMed vision benefits at enroll.eyemed.com and see more of the good stuff

*Based on a sample transaction on the Insight network with a covered exam and eyewear benefits



Benefits for 2026 - 2027

Life Insurance



Summary of Coverage



Full-Time Employees working 30+ Hours/Week

Integrity Educational Services provides full-time status team members with Basic Life/AD&D Insurance and pays the full cost of this benefit. Eligible team members are offered the option to purchase additional Voluntary Life/AD&D Insurance. Evidence of Insurability may be required.

Basic Life/AD&D

Plan Features	Basic Life/AD&D
Employee Benefit Amount	1 Times Annual Salary rounded to the next higher \$1,000
Maximum Benefit Amount	\$50,000
AD&D Benefit	1 Times Annual Salary rounded to the next higher \$1,000
The following shows how much benefits are reduced at certain ages:	
Age Band	Benefit Reduction
65	65%
70	40%
75	25%

Voluntary Life/AD&D

Plan Features	Voluntary Life/AD&D
Employee Benefit Amount	Employees can choose different amounts of coverage between the minimum and maximum benefit amount. See plan documentation for more details.
Minimum Benefit Amount	\$10,000
Maximum Benefit Amount	5X Annual Salary, up to \$500,000
AD&D Benefit	Equal to Voluntary Life Amount
Spouse Benefit	50% of Employee's Benefit, up to \$250,000
Dependent Benefit	Live Birth to 6 mnths: \$1,000 max 6+ mnths: \$2,000 - \$10,000 Increments of \$2,000
The following shows how much benefits are reduced at certain ages:	
Age Band	Benefit Reduction
65	65%
70+	50%

Team Member Cost - \$0.00

Employer Paid Benefit

Paid by Team Member

Employee Paid Benefit

*See Rate Sheet for Cost information





Term Life with Accidental Death & Dismemberment (AD&D) Insurance



How does it work?

You keep coverage for a set period of time, or “term.” If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more. AD&D Insurance is also available, which can pay a benefit if you survive an accident but have certain serious injuries. It can pay an additional amount if you die from a covered accident.

Why Choose Unum?

Your employer is offering you this coverage at no cost to you.

What else is included?

A “Living” Benefit

If you are diagnosed with a terminal illness with less than 12 months to live, you can request 75% of your life insurance benefit (up to \$500,000) while you are still living. This amount will be taken out of the death benefit and may be taxable.

Waiver of premium

Your cost may be waived if you are totally disabled for a period of time.

Portability

You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.

Who can get Term Life coverage?

If you are actively at work at least 30 hours per week, you can receive coverage for:

You:	You can receive 1 times your earnings up to a maximum of \$50,000. You can get up to \$50,000 with no medical underwriting.
------	--

Who can get Accidental Death & Dismemberment (AD&D) coverage?

You:	You can get 1 times your earnings of AD&D coverage up to a maximum of \$50,000.
------	---

No medical underwriting is required for AD&D coverage.

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage.

Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths that are caused by suicide occurring within 24 months after the effective date of coverage or the date that increases to existing coverage becomes effective. This exclusion standardly applies to all medically written amounts and contributory amounts that are funded by the employee including shared funding plans.

AD&D specific exclusions and limitations:

Accidental death and dismemberment benefits will not be paid for losses caused by, contributed to by, or resulting from:

- Disease of the body; diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane or self-inflicted injury while insane
- War, declared or undeclared, or any act of war
- Active participation in a riot
- Committing or attempting to commit a crime under state or federal law
- The voluntary use of any prescription or non-prescription drug, poison, fume or other chemical substance unless used according to the prescription or direction of your doctor. This exclusion does not apply to you if the chemical substance is ethanol.
- Intoxication – "Being intoxicated" means your blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.

Delayed effective date of coverage

Employee: Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Age reduction

Coverage amounts for Life and AD&D Insurance for you will reduce to:

- 65% of the original amount when you reach age 65
- 40% of the original amount when you reach age 70
- 25% of the original amount when you reach age 75

Coverage may not be increased after a reduction.

Termination of coverage

Your coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

Life Planning Financial & Legal Resources services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

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Voluntary Term Life Insurance and Accidental Death & Dismemberment (AD&D)



How does it work?

You choose the amount of coverage that's right for you, and you keep coverage for a set period of time, or "term." If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more.

AD&D Insurance is also available, which pays a benefit if you survive an accident but have certain serious injuries. It pays an additional amount if you die from a covered accident.

Why is this coverage so valuable?

If you buy a minimum of \$10,000 of coverage now, you can increase your coverage in the future up to \$100,000 to meet your growing needs. There would be no medical underwriting to qualify for coverage.

What else is included?

A 'Living' Benefit — If you are diagnosed with a terminal illness with less than 12 months to live, you can request 75% of your life insurance benefit (up to \$500,000) while you are still living. This amount will be taken out of the death benefit, and may be taxable. **These benefit payments may adversely affect the recipient's eligibility for Medicaid or other government benefits or entitlements, and may be taxable.** Recipients should consult their tax attorney or advisor before utilizing living benefit payments.

Waiver of premium — Your cost may be waived if you are totally disabled for a period of time.

Portability — You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.

Who can get Term Life coverage?

If you are actively at work at least 30 hours per week, you may apply for coverage for:

You:	Choose from \$10,000 to \$500,000 in \$10,000 increments, up to 5 times your earnings. You can get up to \$100,000. This is the amount of coverage you can qualify for with no medical underwriting.
Your spouse:	Get up to \$250,000 of coverage in \$5,000 increments. Spouse coverage cannot exceed 50% of the coverage amount you purchase for yourself. Your spouse can get up to \$25,000 with no medical underwriting, if eligible (see delayed effective date).
Your children:	Get up to \$10,000 of coverage in \$2,000 increments if eligible (see delayed effective date). One policy covers all of your children until their 26th birthday. The maximum benefit for children live birth to 6 months is \$1,000.

Who can get Accidental Death & Dismemberment (AD&D) coverage?

You:	Get up to \$500,000 of AD&D coverage for yourself in \$10,000 increments to a maximum of 5 times your earnings.
Your spouse:	Get up to \$250,000 of AD&D coverage for your spouse in \$5,000 increments, if eligible (see delayed effective date).
Your children:	Get up to \$10,000 of coverage for your children in \$2,000 increments if eligible (see delayed effective date).

No medical underwriting is required for AD&D coverage.

Exclusions and limitations

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

An unmarried handicapped dependent child who becomes handicapped prior to the child's attainment age of 26 may be eligible for benefits. Please see your plan administrator for details on eligibility.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage. Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths caused by suicide occurring within 24 months after the effective date of coverage. The same applies for increased or additional benefits.

AD&D specific exclusions and limitations:

Accidental death and dismemberment benefits will not be paid for losses caused by, contributed to by, or resulting from:

- Disease of the body; diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane or self-inflicted injury while insane
- War, declared or undeclared, or any act of war
- Active participation in a riot
- Committing or attempting to commit a crime under state or federal law
- The voluntary use of any prescription or non-prescription drug, poison, fume or other chemical substance unless used according to the prescription or direction of your or your dependent's doctor. This exclusion does not apply to you or your dependent if the chemical substance is ethanol.
- Intoxication – "Being intoxicated" means your or your dependent's blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Delayed Effective Date: if your spouse or child has a serious injury, sickness, or disorder, or is confined, their coverage may not take effect. Payment of premium does not guarantee coverage. Please refer to your policy contract or see your plan administrator for an explanation of the delayed effective date provision that applies to your plan.

Age Reduction

Coverage amounts for Life and AD&D Insurance for you and your dependents will reduce to 65% of the original amount when you reach age 65, and will reduce to 50% of the original amount when you reach age 70. Coverage may not be increased after a reduction.

Termination of coverage

Your coverage and your dependents' coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

In addition, coverage for any one dependent will end on the earliest of:

- The date your coverage under a plan ends
- The date your dependent ceases to be an eligible dependent
- For a spouse, the date of a divorce or annulment
- For dependents, the date of your death

Unum will provide coverage for a payable claim that occurs while you and your dependents are covered under the policy or plan.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

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Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by:

Unum Life Insurance Company of America, Portland, Maine

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Benefits for 2026 - 2027

Short Term Disability



Summary of Coverage



Full-Time Employees working 35+ Hours/Week

Integrity Educational Services provides full-time status team members with Short Term Disability Income Benefits and pays the full cost of this coverage. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income. You are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

Plan Features	
Employee Benefit Amount	60% of weekly salary
Maximum Benefit Amount	\$500 Per week
Elimination Period	1st day from an accident and 8th day from an illness
Benefit Duration	13 Weeks

Team Member Cost - \$0.00

Employer Paid Benefit





Integrity Educational Services

Short Term Disability Insurance



How does it work?

If a covered illness or injury keeps you from working, this employer-provided Short Term Disability Insurance replaces part of your income while you recover. As long as you remain disabled, you can receive payments for up to 500 weeks, subject to the elimination period. You're generally considered disabled if you're unable to do important parts of your job — and your income suffers as a result.

Why is this coverage so valuable?

Your employer is paying the cost of this coverage. You can use the benefits however you choose. It can help you pay for your rent or mortgage, groceries, out-of-pocket medical expenses and more.

How much coverage can I get?

You*

You are eligible for coverage if you are an active employee in the United States working a minimum of 30 hours per week.

Cover 60% of your weekly income, up to a maximum benefit of \$500 per week.

*See the Legal Disclosures for more information.

The weekly benefit may be reduced or offset by other sources of income. The IRS may require you to pay taxes on certain benefit payments. See your tax advisor for details.

If you don't enroll now but decide to apply later, you may have to answer health questions to receive coverage.

Elimination period (EP)

This is the number of days that must pass between your first day of a covered disability and the day you can begin to accrue your disability benefits. Your benefits would begin after 0 days if you become disabled due to an injury and 7 days if you become disabled due to an illness.

Benefit duration (BD)

The maximum number of weeks you can receive benefits while you're disabled. You have a 13 week benefit duration.

Short Term Disability Insurance pays you a weekly benefit if you have a covered disability that keeps you from working.

What else is included?

Cesarean section benefit

If you have a Cesarean section, you will be considered disabled for a minimum period of six weeks unless you return to work before the end of this period.

Exclusions and Limitations

Active employee

You are considered in active employment, if on the day you apply for coverage, you are being paid regularly by your employer for the required minimum hours each week and you are performing the material and substantial duties of your regular occupation.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Definition of disability

You are considered disabled when Unum determines that, due to sickness or injury:

- You are limited from performing the material and substantial duties of your regular occupation; and
- You have a 20% or more loss in weekly earnings.

You must be under the regular care of a physician in order to be considered disabled.

The loss of a professional or occupational license or certification does not, in itself, constitute disability.

‘Substantial and material acts’ means the important tasks, functions and operations generally required by employers from those engaged in your usual occupation that cannot be reasonably omitted or modified. Unless the policy specifies otherwise, as part of the disability claims evaluation process, Unum will evaluate your occupation based on how it is normally performed in the national economy, not how work is performed for a specific employer, at a specific location or in a specific region.

Deductible sources of income

Your disability benefit may be reduced by deductible sources of income and any earnings you have while you are disabled, including such items as group disability benefits or other amounts you receive or are entitled to receive:

- Workers’ compensation or similar occupational benefit laws
- State compulsory benefit laws
- Automobile liability insurance policy
- Motor vehicle insurance policy or plan
- No fault motor vehicle plan
- Legal judgments and settlements
- Salary continuation or sick leave plans, if applicable
- Other group or association disability programs or insurance
- Social Security or similar governmental programs

Exclusions and limitations

Benefits will not be paid for disabilities caused by, contributed to by, or resulting from:

- War, declared or undeclared or any act of war
- Active participation in a riot
- Intentionally self-inflicted injuries;
- Loss of professional license, occupational license or certification;
- Commission of a crime for which you have been convicted;
- Any period of disability during which you are incarcerated;
- Any occupational injury or sickness (this will not apply to a partner or sole proprietor who cannot be covered by law under workers’ compensation or any similar law);

The loss of a professional or occupational license does not, in itself, constitute disability.

Termination of coverage

Your coverage under the policy ends on the earliest of the following:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are in active employment except as provided under the covered layoff or leave of absence provision.

Unum will provide coverage for a payable claim that occurs while you are covered under the policy or plan.

This information is not intended to be a complete description of the insurance coverage available.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al., or contact your Unum representative.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

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Benefits for 2026 - 2027

Long Term Disability



Summary of Coverage



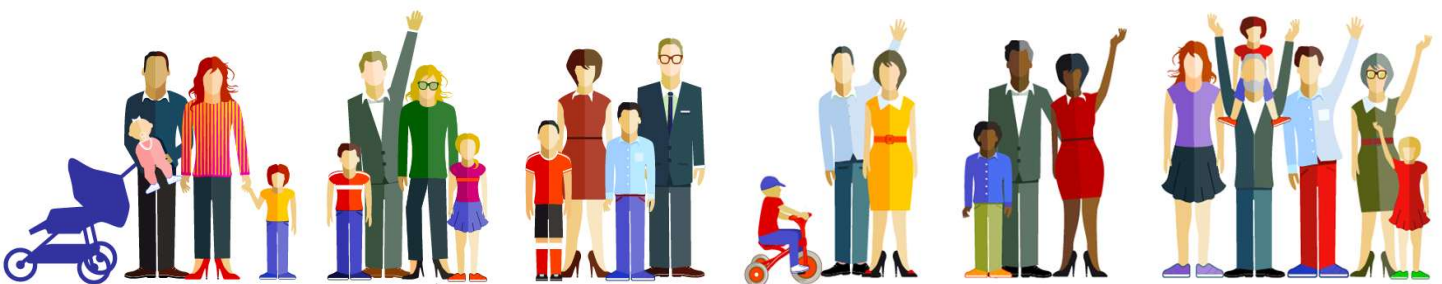
Full-Time Employees working 35+ Hours/Week

Integrity Educational Services provides full-time status team members with Long Term Disability Benefits, and pays the full cost of this coverage. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income. You are not eligible to receive disability benefits if you are receiving Worker's Compensation Benefits.

Plan Features	
Employee Benefit Amount	60% of salary
Maximum Benefit Amount	\$5,000 Per month
Elimination Period	90 days
Benefit Duration	Later of Age 65 or Social Security Normal Retirement Age

Team Member Cost - \$0.00

Employer Paid Benefit





Integrity Educational Services

Long Term Disability Insurance



How does it work?

This employer-paid coverage provides a monthly benefit if you have a covered illness or injury and you can't work for a few months — or even longer. You're generally considered disabled if you're unable to do important parts of your job — and your income suffers as a result.

Why is this coverage so valuable?

Your employer is paying the cost of this coverage. You can use the benefits however you choose. It can help you pay for your rent or mortgage, groceries, out-of-pocket medical expenses and more.

How much coverage can I get?

You*	You are eligible for coverage if you are an active employee in the United States working a minimum of 30 hours per week.
	Cover 60% of your monthly income, up to a maximum payment of \$5,000.
*See the Legal Disclosures for more information.	

The monthly benefit may be reduced or offset by other sources of income. The IRS may require you to pay taxes on certain benefit payments. See your tax advisor for details.

This plan does not cover pre-existing conditions. See the disclosure section to learn more.

Elimination period (EP)

Your elimination period is 90 days. This is the number of days that must pass after a covered accident or illness before you can begin to receive benefits.

Benefit duration (BD)

This is the maximum length of time you can receive benefits while you're disabled. You can receive benefits up to the Social Security (SS) normal retirement age. If you become disabled after your normal retirement age, check with your employer for the maximum length of time applicable to you.

Long Term Disability Insurance can replace part of your income if a disability keeps you out of work for a long period of time

What else is included?

Survivor benefit

If you die while you've been disabled and receiving benefits for at least 180 days, your family could get a benefit equal to 3 months of your gross disability payment.

Exclusions and limitations

Active employee

You are considered in active employment, if on the day you apply for coverage, you are being paid regularly by your employer for the required minimum hours each week and you are performing the material and substantial duties of your regular occupation.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Benefit Duration

The duration of your benefit payments is based on your age when your disability occurs. Your Long Term Disability benefits are payable while you continue to meet the definition of disability. Please refer to your plan document for the duration of benefits under this policy.

Definition of disability

You are considered disabled when Unum determines that:

- You are limited from performing the material and substantial duties of your regular occupation due to sickness or injury; and
- You have a 20% or more loss of indexed monthly earnings due to the same sickness or injury

After 24 months, you are considered disabled when Unum determines that due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training or experience.

You must be under the regular care of a physician in order to be considered disabled.

The loss of a professional or occupational license or certification does not, in itself, constitute disability.

“Substantial and material acts” means the important tasks, functions and operations that are generally required by employers from those engaged in your usual occupation and that cannot be reasonably omitted or modified.

Pre-existing conditions

You have a pre-existing condition if:

- You received medical treatment, consultation, care or services including diagnostic measures for the condition, or took prescribed drugs or medicines for it in the 3 months just prior to your effective date of coverage; and
- The disability begins in the first 12 months after your effective date of coverage.

Deductible sources of income

Your disability benefit may be reduced by deductible sources of income and any earnings you have while you are disabled, including such items as group disability benefits or other amounts you receive or are entitled to receive:

- Workers' compensation or similar occupational benefit laws, including a temporary disability benefit under a workers' compensation law
- State compulsory benefit laws
- Automobile liability insurance policy
- No fault motor vehicle plan
- Third-party settlements
- Other group insurance plans
- A group plan sponsored by your employer
- Governmental retirement system
- Salary continuation or sick leave plans - if included
- Retirement payments
- Social Security or similar governmental programs

Exclusions and limitations

Benefits will not be paid for disabilities caused by, contributed to by, or resulting from:

- Intentionally self-inflicted injuries;
- Active participation in a riot;
- War, declared or undeclared or any act of war;
- Commission of a crime for which you have been convicted;
- Loss of professional license, occupational license or certification; or
- Pre-existing conditions (See the disclosure section to learn more).

The loss of a professional or occupational license does not, in itself, constitute disability.

Unum will not pay a benefit for any period of disability during which you are incarcerated.

The lifetime cumulative maximum benefit for all disabilities due to mental illness is 24 months. Disabilities based primarily on self-reported symptoms are limited to 24 months. Only 24 months of benefits will be paid for any combination of such disabilities even if the disabilities are not continuous and/or are not related. Payments can continue beyond 24 months only if you are confined to a hospital or institution as a result of the disability.

Termination of coverage

Your coverage under the policy ends on the earliest of the following:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered

- The last day of the period for which you made any required contributions
- The last day you are in active employment except as provided under the covered layoff or leave of absence provision.

Unum will provide coverage for a payable claim that occurs while you are covered under the policy or plan.

Unum's LTD contracts typically include a provision called the Social Security Claimant Advocacy Program. This feature offers claimants expert advice and assistance with their Social Security Disability claims during both the application and appeal processes. Social Security advocacy services are provided by GENEX Services, LLC or Brown & Brown Absence Services Group, with referrals to these partners determined by Unum.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al. or contact your Unum representative.

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Help, when you need it most

With your Employee Assistance Program and work-life balance services, confidential assistance is as close as your phone or computer.



Employee Assistance Program (EAP)

Your EAP is designed to help you lead a happier and more productive life at home and at work. Call for confidential access to a Licensed Professional Counselor* who can help you.

A Licensed Professional Counselor can help you with:

- Stress, depression, anxiety
- Relationship issues, divorce
- Anger, grief, loss
- Job stress, work conflicts
- Family, parenting problems
- And more



Work-life balance

You can also reach out to a specialist for help with balancing work and life issues. Just call and one of our work-life Specialists can answer your questions and help you find resources in your community.

Ask our work-life Specialists about:

- Child care
- Elder care
- Financial services, debt management, credit report issues
- Identity theft
- Legal questions**
- Even reducing your medical/dental bills
- And more

Who is covered?

EAP services are available to all eligible partners and employees, their spouses or domestic partners, dependent children, parents and parents-in-law.

Always by your side

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver® — helps you save on medical bills

Help is easy to access:

Phone support: 1-800-854-1446

Online support: unum.com/lifebalance

In-person: You can get up to three visits available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support.

**Better
benefits
at work.™**

unum.com

* The counselors must abide by federal regulations regarding duty to warn of harm to self or others. In these instances, the consultant may be mandated to report a situation to the appropriate authority.

**State mandated restrictions for legal services in WA apply.

Work-life balance employee assistance programs may not be available in New York. Other state-specific restrictions may apply based on the product offering.

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EN-2058-3 FOR EMPLOYEES (9-24)

The Unum Employee Assistance Program and Work/Life Balance services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details. Insurance products are underwritten by the subsidiaries of Unum Group.

Benefits for 2026 - 2027

401k Retirement Plan



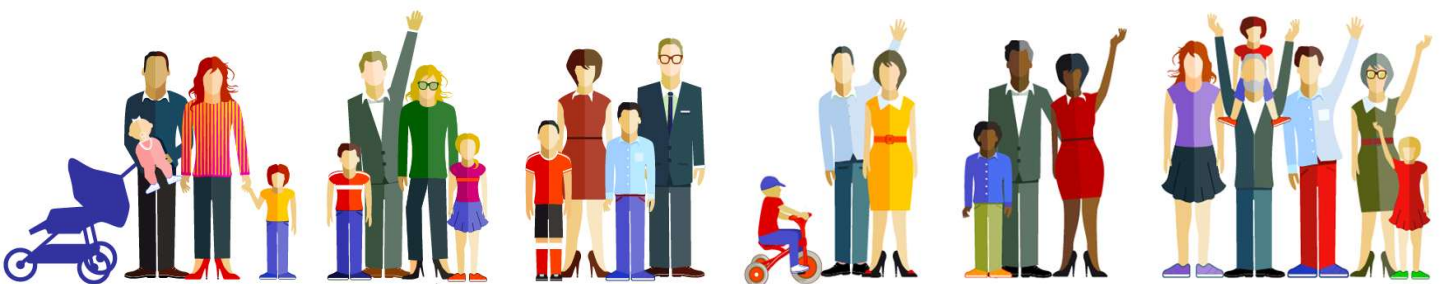
To help you prepare for the future, IES sponsors a 401(k) plan as part of its benefit package. As an Eligible Employee, you may start or stop participating in the plan at any time. Please log into Net Benefits or Contact Fidelity at 1-800-603-4015.

- Your plan is set-up with automatic enrollment.
- This process automatically enrolls participants 30-days after they are hired.
- Your default deferral will be 3% of compensation on a pre-tax basis.
- Integrity Educational Services currently makes a matching contribution to your account. They will match \$.50 for each dollar of your contribution up to 6% of your pay.

Please read the plans' Summary Plan Description regarding these and other plan provisions.

Benefits for 2026 - 2027

Notes

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Benefits for 2026 - 2027

Contact Information

Coverage	Insurance Carrier	Phone Number	Website
Medical/Rx Insurance	Priority Health	(800) 942-0954	www.priorityhealth.com
Virtual Visits	MI Partner Health	(616) 320-0096	n/a
Dental Insurance	Delta Dental	(800) 524-0149	www.deltadentalmi.com
Vision Insurance	EyeMed	(888) 293-7373	www.eyemedvisioncare.com
Basic Life/AD&D Insurance	UNUM	(866) 679-3054	www.unum.com
Disability Insurance	UNUM	(866) 679-3054	www.unum.com
COBRA	iSolved Benefit Services	(800) 594-6957	www.isolvedbenefitservices.com

Your Benefit Service Team

Noreen Organeck

Account Manager

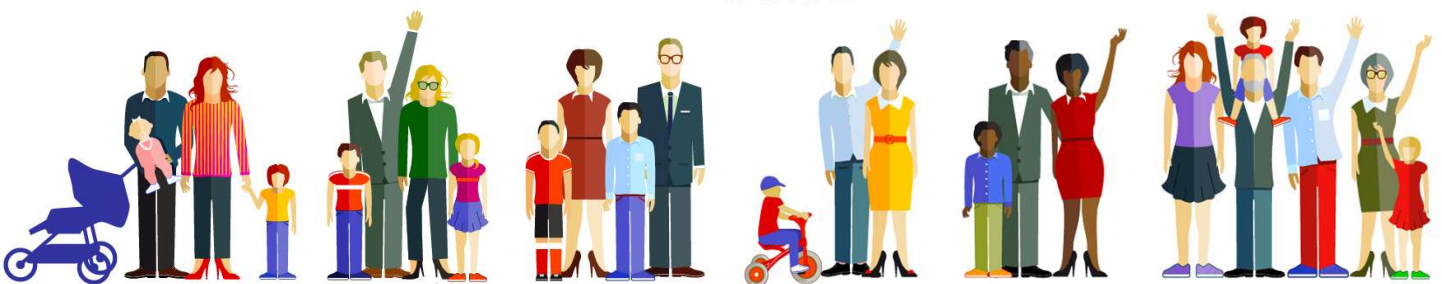
(616) 261-7347

norganeck@bhsins.com

Pat Dalton

Account Executive

(616) 261-7355

pdalton@bhsins.com



2026-2027 Employee Benefits Guide

AN OVERVIEW OF THE WIDE ARRAY OF BENEFITS
PROVIDED BY INTEGRITY EDUCATIONAL SERVICES TO
HELP YOU ENJOY INCREASED WELL-BEING AND
FINANCIAL SECURITY