

2022-2023

Rippling PEO National Benefits Guide

Rippling PEO is pleased to offer the employee benefits outlined in this guide to companies headquartered in any state with the exception of New York, New Jersey, and Connecticut.*

* If your company is headquartered in New York, New Jersey, or Connecticut, please reach out to your Rippling contact as these plans are not available in your state.





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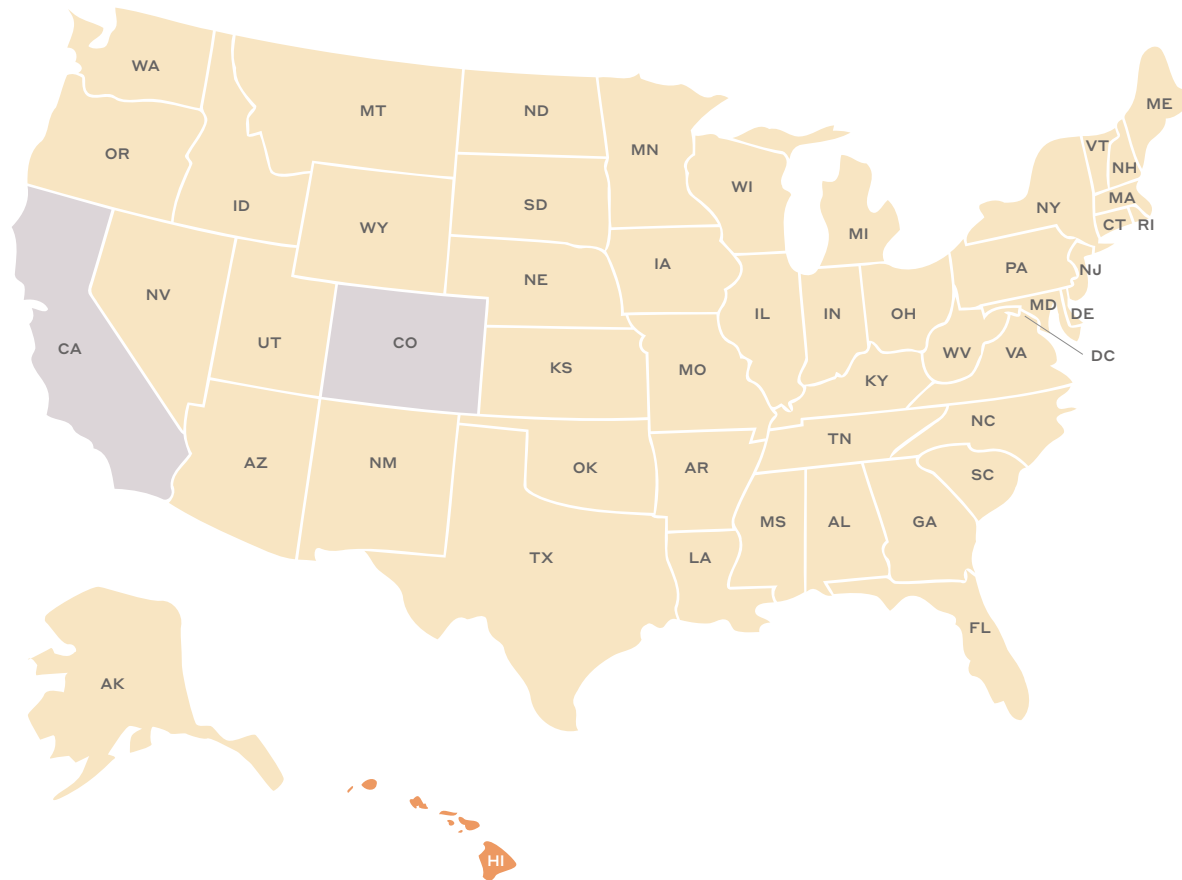
Actual benefits are subject to the provisions and limitations of the agreements between Rippling PEO and its benefits providers. This information is intended to provide only an overview of the major features of Rippling PEO's employee benefits programs.

Detailed benefits information, including additional descriptions of each benefit offered, eligibility details, enrollment instructions, as well as Summary Plan Descriptions and plan documents, are available at [Rippling.com](https://www.rippling.com).

Should there be a discrepancy or conflict between the information presented here and the actual Plan documents, the Plan documents will govern. Rippling PEO reserves the right to amend or discontinue any Plan or program at any time at its sole discretion. In no event should the benefits provided by Rippling PEO be interpreted as a guarantee of continued employment.



Carriers by state



Medical carriers

- National**
Aetna
- California & Colorado**
Aetna
Kaiser Permanente
- Hawaii**
HMSA BCBS



MEDICAL BENEFITS

Aetna PPO



		PPO 0	PPO 300	PPO 500	PPO 1000	PPO 1500	PPO 2000/80	PPO 2000/60
Coverage In network	Deductible							
	– Individual	\$0	\$300	\$500	\$1,000	\$1,500	\$2,000	\$2,000
	– Family	\$0	\$900	\$1,000	\$2,000	\$3,000	\$4,000	\$4,000
	Max out-of-pocket							
	– Individual	\$4,500	\$3,000	\$3,500	\$4,500	\$4,500	\$6,850	\$6,850
	– Family	\$9,000	\$6,000	\$7,000	\$9,000	\$9,000	\$13,700	\$13,700
	Coinsurance	20%	10%	20%	20%	30%	20%	40%
Office visits	Preventative	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Doctor	\$35	\$20	\$25	\$25	\$35	\$30	\$35
	Specialist	\$70	\$40	\$50	\$50	\$70	\$60	\$70
	Urgent care	\$85	\$85	\$85	\$85	\$85	\$85	\$85
Emergencies	ER	\$350	\$350	\$350	\$350	\$350	\$350	\$350
	Surgery	\$250 copay 20% after	10%	20%	20%	30%	20%	40%
	Hospital	\$1,000 copay 20% after	10%	20%	20%	30%	20%	40%
Prescriptions	Deductible	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Generic	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10
	Brand (Preferred)	\$45	\$45	\$45	\$45	\$45	\$45	\$45
	Brand (Non-preferred)	\$70	\$70	\$70	\$70	\$70	\$70	\$70
		SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗

After deductible



MEDICAL BENEFITS

Aetna PPO



		PPO 3000	PPO 4000	PPO 5000	PPO 6350	PPO (HSA) 2800/100%	PPO (HSA) 2800/90%	PPO (HSA) 3500	PPO (HSA) 6000
Coverage In network	Deductible								
	– Individual	\$3,000	\$4,000	\$5,000	\$6,350	\$2,800	\$2,800	\$3,500	\$6,000
	– Family	\$6,000	\$8,000	\$10,000	\$12,700	\$5,600	\$5,600	\$7,000	\$12,000
	Max out-of-pocket								
	– Individual	\$6,850	\$6,850	\$6,850	\$6,850	\$5,500	\$4,500	\$6,500	\$6,750
	– Family	\$13,700	\$13,700	\$13,700	\$13,700	\$11,000	\$9,000	\$13,000	\$13,500
	Coinsurance	30%	30%	30%	0%	0%	10%	20%	0%
Office visits	Preventative	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Doctor	\$40	\$40	\$40	\$25	\$30	10%	20%	\$30
	Specialist	\$80	\$80	\$80	\$0	\$60	10%	20%	\$60
	Urgent care	\$85	\$85	\$85	\$0	\$85	10%	20%	\$85
Emergencies	ER	\$350	\$350	\$350	\$0	\$350	10%	20%	\$350
	Surgery	30%	30%	30%	\$0	\$300	10%	20%	\$300
	Hospital	30%	30%	30%	\$0	\$500	10%	20%	\$500
Prescriptions	Deductible	\$0	\$0	\$0	\$0	medical deductible applies	medical deductible applies	medical deductible applies	medical deductible applies
	Generic	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10
	Brand (Preferred)	\$45	\$45	\$45	\$45	\$45	\$45	\$45	\$45
	Brand (Non-preferred)	\$70	\$70	\$70	\$70	\$70	\$70	\$70	\$70
		SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗

After deductible



MEDICAL BENEFITS

Aetna EPO



		EPO 0	EPO 1500/100%	EPO 1500/80%	EPO 3000/100%	EPO 3000/70%	EPO 6350	EPO (HSA) 3500	EPO (HSA) 6000
Coverage In network	Deductible								
	– Individual	\$0	\$1,500	\$1,500	\$3,000	\$3,000	\$6,350	\$3,500	\$6,000
	– Family	\$0	\$3,000	\$3,000	\$6,000	\$6,000	\$12,700	\$7,000	\$12,000
	Max out-of-pocket								
	– Individual	\$4,000	\$5,000	\$6,000	\$5,500	\$6,850	\$7,350	\$6,500	\$6,500
– Family	\$8,000	\$10,000	\$12,000	\$11,000	\$13,700	\$14,700	\$13,000	\$13,000	
	Coinsurance	0%	0%	20%	0%	30%	20%	20%	20%
Office visits	Preventative	\$0	\$0	\$0	\$0	\$0	\$0	20%	20%
	Doctor	\$25	\$30	\$30	\$35	\$40	\$40	20%	20%
	Specialist	\$50	\$60	\$60	\$70	\$80	\$80	20%	20%
	Urgent care	\$85	\$85	\$85	\$85	\$85	\$85	20%	20%
Emergencies	ER	\$350	\$350	\$350	\$350	\$350	\$350	20%	20%
	Surgery	0%	0%	20%	0%	30%	20%	20%	20%
	Hospital	\$300/day 5 days	\$300/day 5 days, then 0%	20%	\$600	30%	20%	20%	20%
Prescriptions	Deductible	\$0	\$0	\$0	\$0	\$0	\$0	medical deductible applies	medical deductible applies
	Generic	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10	\$3/\$10
	Brand (Preferred)	\$45	\$45	\$45	\$45	\$45	\$45	\$45	\$45
	Brand (Non-preferred)	\$70	\$70	\$70	\$70	\$70	\$70	\$70	\$70
		SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗	SBC ↗

After deductible

MEDICAL BENEFITS

Aetna HMO (CA only)



		HMO 0	HMO 1000	HMO 2000
Coverage In network	Deductible			
	– Individual	\$0	\$1,000	\$2,000
	– Family	\$0	\$2,000	\$4,000
	Max out-of-pocket			
	– Individual	\$4,000	\$7,000	\$7,000
	– Family	\$8,000	\$14,000	\$14,000
	Coinsurance	0%	0%	0%
Office visits	Preventative	\$0	\$0	\$0
	Doctor	\$20	\$40	\$40
	Specialist	\$50	\$70	\$70
	Urgent care	\$75	\$100	\$100
Emergencies	ER	\$350	\$350	\$350
	Surgery	\$300	\$250	\$300
	Hospital	\$400/day 3 days	\$300/day 5 days	\$400/day 5 days
Prescriptions	Deductible	\$150	\$150	\$150
	Generic	\$3 / \$15	\$3 / \$15	\$3 / \$15
	Brand (Preferred)	\$35	\$35	\$35
	Brand (Non-preferred)	\$60	\$60	\$60
		SBC ↗	SBC ↗	SBC ↗

After deductible



Aetna plans include Teledoc

If your doctor isn't available and you need care right away, or if it's after hours or a weekend, Teledoc makes it easy to connect with a doctor by phone or video. All Aetna plans sponsored by Rippling PEO automatically come with Teledoc services, and the AetnaHealth App makes it simple to find a doctor and connect via video anytime.



A healthier you

Aetna members get access to local and national discounts on brands you know. Aetna has a large selection of options to get you on the track to health and wellness, including: health coaching, at-home weight loss programs, healthy food delivery services, yoga, group fitness on demand and so much more. Visit [Aetna.com](https://www.aetna.com) for more details.

[Learn more ↗](#)



Aetna One Choice condition management

Aetna One Choice elevates care even further by providing higher clinical touch. Integrated group coaching on key clinical factors drives even greater engagement and behavior change. And expanded staffing means a higher level of service for members. With One Choice, Aetna is elevating the standard for condition management. To learn more, visit [Aetna.com](https://www.aetna.com).



Aetna Health App

Need to find a doctor by name, specialty, or location? Looking for your exact copay amounts? Want to talk to your doctor or schedule a telemedicine appointment? Do it all through the Aetna Health App.



MEDICAL BENEFITS

Aetna PPO (Utah / IHC)

*ACO UT Intermountain



		PPO 300*	PPO 1000*	PPO 2000/80%*	PPO 3000*	PPO 3500 (HSA)*	PPO 5000 (HSA)*
Coverage In network	Deductible						
	– Individual	\$300	\$1,000	2,000	\$3,000	\$3,500	\$5,000
	– Family	\$900	\$2,000	4000	\$6,000	\$7,000	\$10,000
	Max out-of-pocket						
	– Individual	\$3,000	\$4,500	\$6,850	\$6,850	\$6,000	\$6,850
– Family	\$6,000	\$9,000	\$13,700	\$13,700	\$12,000	\$13,700	
	Coinsurance	10%	20%	20%	30%	10%	20%
Office visits	Preventative	\$0	\$0	\$0	\$0	\$0	\$0
	Doctor	\$20	\$25	\$30	\$40	10%	20%
	Specialist	\$40	\$50	\$60	\$80	10%	20%
	Urgent care	\$85	\$85	\$85	\$85	10%	20%
Emergencies	ER	\$350	\$350	\$350	\$350	10%	20%
	Surgery	10%	20%	20%	30%	10%	20%
	Hospital	10%	20%	20%	30%	10%	20%
Prescriptions	Deductible	\$0	\$0	\$0	\$0	medical deductible applies	medical deductible applies
	Generic	\$3 / \$10	\$3 / \$10	\$3 / \$10	\$3 / \$10	\$3 / \$10	\$3 / \$10
	Brand (Preferred)	\$45	\$45	\$45	\$45	\$45	\$45
	Brand (Non-preferred)	\$70	\$70	\$70	\$70	\$70	\$70
			<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>

After deductible

*ACO UT Intermountain



MEDICAL BENEFITS

Kaiser HMO (CA only)



		HMO 10	HMO 20	HMO 1000	HMO 2000	HMO (HSA) 3000	HMO (HSA) 6000
Coverage In network	Deductible						
	– Individual	\$0	\$0	\$1,000	\$2,000	\$3,000	\$6,000
	– Family	\$0	\$0	\$2,000	\$4,000	\$6,000	\$12,000
	Max out-of-pocket						
	– Individual	\$1,500	\$2,000	\$2,000	\$4,000	\$6,000	\$6,900
	– Family	\$3,000	\$4,000	\$4,000	\$8,000	\$12,000	\$13,800
	Coinsurance	0%	0%	20%	20%	30%	10%
Office visits	Preventative	\$0	\$0	\$0	\$0	\$0	\$0
	Doctor	\$10	\$20	\$20	\$30	30%	10%
	Specialist	\$20	\$30	\$30	\$40	30%	10%
	Urgent care	\$10	\$20	\$20	\$30	30%	10%
Emergencies	ER	\$250	\$250	20%	20%	30%	10%
	Surgery	\$100	\$100	20%	20%	30%	10%
	Hospital	\$100	\$500	20%	20%	30%	10%
Prescriptions	Deductible	\$0	\$0	\$0	\$0	medical deductible applies	medical deductible applies
	Generic	\$10	\$15	\$15	\$15	\$10	\$10
	Brand (Preferred)	\$20	\$40	\$30	\$30	\$20	\$20
	Brand (Non-preferred)	\$20	\$40	\$30	\$30	\$20	\$20
			<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>

After deductible



MEDICAL BENEFITS

Kaiser HMO (CO only)



	HMO 10	HMO 20	HMO 1000	HMO 2000
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Continued →

Coverage		HMO 10	HMO 20	HMO 1000	HMO 2000
In network	Deductible				
	– Individual	\$0	\$0	\$1,000	\$2,000
	– Family	\$0	\$0	\$2,000	\$4,000
	Max out-of-pocket				
	– Individual	\$1,500	\$2,000	\$2,000	\$4,000
	– Family	\$3,000	\$4,000	\$4,000	\$8,000
	Coinsurance	0%	0%	20%	20%
Office visits	Preventative	\$0	\$0	\$0	\$0
	Doctor	\$10	\$20	\$20	\$30
	Specialist	\$20	\$30	\$30	\$40
	Urgent care	\$20	\$30	\$30	\$40
Emergencies	ER	\$250	\$250	20%	20%
	Surgery	\$100	\$100	20%	20%
	Hospital	\$100	\$500	20%	20%
Prescriptions	Deductible	\$0	\$0	\$0	\$0
	Generic	\$10	\$15	\$15	\$15
	Brand (Preferred)	\$20	\$40	\$30	\$30
	Brand (Non-preferred)	\$40	\$80	\$60	\$60
			<u>SBC ↗</u>	<u>SBC ↗</u>	<u>SBC ↗</u>

After deductible

Kaiser HMO (CO only)



		HMO (HSA) 3000	HMO (HSA) 6000
Coverage In network	Deductible		
	– Individual	\$3,000	\$6,000
	– Family	\$6,000	\$12,000
	Max out-of-pocket		
	– Individual	\$6,000	\$6,900
	– Family	\$12,000	\$13,800
	Coinsurance	30%	10%
Office visits	Preventative	\$0	\$0
	Doctor	30%	10%
	Specialist	30%	10%
	Urgent care	30%	10%
Emergencies	ER	30%	10%
	Surgery	30%	10%
	Hospital	30%	10%
Prescriptions	Deductible	medical deductible applies	medical deductible applies
	Generic	\$10	\$10
	Brand (Preferred)	\$20	\$20
	Brand (Non-preferred)	\$40	\$40
		SBC ↗	SBC ↗

After deductible



24/7 care advice

Get medical advice and care guidance in the moment from a Kaiser Permanente provider.



In-person visit

Same-day appointments are often available. Sign on to kp.org anytime, or call to schedule a visit.



Video visit

Meet face to face online with a doctor via computer, smartphone, or tablet for minor conditions or follow-up care.



E-visit

Get quick online care for common health problems. Fill out a short questionnaire about your symptoms, and a physician will get back to you with a care plan and prescriptions (if appropriate)—usually within 2 hours.

[Learn more ↗](#)



MEDICAL BENEFITS

Kaiser (DC, GA, MD, OR, VA, WA)



		HMO 20	HMO 1000	HMO 2000	HMO (HSA) 3000
Coverage In network	Deductible				
	– Individual	\$0	\$1,000	\$2,000	\$3,000
	– Family	\$0	\$2,000	\$4,000	\$6,000
	Max out-of-pocket				
	– Individual	\$2,000	\$3,500	\$4,000	\$6,000
– Family	\$4,000	\$7,000	\$8,000	\$12,000	
	Coinsurance	0%	20%	20%	30%
Office visits	Preventative	\$0	\$0	\$0	\$0
	Doctor	\$20	\$20	\$20	30%
	Specialist	\$30 (WA \$20)	\$30 (WA \$20)	\$30	30%
	Urgent care	\$30	\$30	\$30	30%
Emergencies	ER	\$200	\$200 (WA subject to deductible)	\$200 (WA subject to deductible)	30%
	Surgery	\$125	20%	20%	30%
	Hospital	\$250	20%	20%	30%
Prescriptions	Deductible	\$0	\$0	\$0	medical deductible applies
	Generic	\$15	\$10	\$10	\$15
	Brand (Preferred)	\$30	\$30	\$30	\$35
	Brand (Non-preferred)	\$60	\$60	\$60	\$70
		DC/MD/VA SBC ↗	DC/MD/VA SBC ↗	DC/MD/VA SBC ↗	DC/MD/VA SBC ↗
		GA SBC ↗	GA SBC ↗	GA SBC ↗	GA SBC ↗
		OR SBC ↗	OR SBC ↗	OR SBC ↗	OR SBC ↗
		WA SBC ↗	WA SBC ↗	WA SBC ↗	WA SBC ↗

After deductible



MEDICAL BENEFITS

HMSA (Hawaii only)



PPO 0

Coverage In network	Deductible	
	– Individual	\$0
	– Family	\$0
	Max out-of-pocket	
	– Individual	\$2,500
	– Family	\$7,500
	Coinsurance	20%
Office visits	Preventative	\$0
	Doctor	\$14
	Specialist	\$14
	Urgent care	\$14
Emergencies	ER	20%
	Surgery	20%
	Hospital	20%
Prescriptions	Deductible	\$0
	Generic	\$7
	Brand (Preferred)	\$30
	Brand (Non-preferred)	\$30
		SBC ↗



Dental / Guardian PPO

Guardian		PPO 1000	PPO 1500 (100/80/50)	PPO 1500 + Ortho (100/80/50)	PPO 1500	PPO 1500 + Ortho
Coverage	Maximum	\$1,000	\$1,500	\$1,500	\$1,500	\$1,500
	Deductible	\$50	\$50	\$50	\$50	\$50
	Out-of-Network Coverage	95% UCR	95% UCR	95% UCR	95% UCR	95% UCR
	Child Orthodontia Maximum	N/A	N/A	\$1,500	N/A	\$1,500
Coinsurance	Preventative	100%	100%	100%	100%	100%
	Basic	90%	80%	80%	90%	90%
	Major	60%	50%	50%	60%	60%
		Details ↗	Details ↗	Details ↗	Details ↗	Details ↗

Continued →

After deductible



Rippling PEO's dental provider is Guardian. Guardian has one of the largest dental networks in the nation. Rippling PEO's dental plans also provide excellent out-of-network coverage (95% UCR).

Rippling PEO's dental plans with orthodontic coverage cover both child and adult orthodontics.

All employees enrolled in at least one Guardian Plan get access to [Spring Health](#).

Maximum—The most the plan will pay per person, per year.

Orthodontic max—The orthodontic maximum is a lifetime maximum per person.

Preventative care—Includes routine oral exams, cleaning, fluoride treatments, diagnostic X-rays, and sealants.

Basic care—Includes extractions, fillings, oral surgery, periodontal maintenance, root canal, and repair and maintenance of crowns, bridges, and dentures.

Major care—Includes bridges, dentures, crowns, dental implants, inlays, onlays, and veneers.

Orthodontics—Includes braces, retainers, and other appliances that correct misalignments for both adults and children.



Dental / Guardian PPO

Guardian		PPO 2000	PPO 2000 + Ortho	PPO 2500	PPO 2500 + Ortho
Coverage	Maximum	\$2,000	\$2,000	\$2,500	\$2,500
	Deductible	\$50	\$50	\$50	\$50
	Out-of-Network Coverage	95% UCR	95% UCR	95% UCR	95% UCR
	Child Orthodontia Maximum	N/A	\$2,000	N/A	\$2,500
Coinsurance	Preventative	100%	100%	100%	100%
	Basic	90%	90%	90%	90%
	Major	60%	60%	60%	60%
		Details ↗	Details ↗	Details ↗	Details ↗

After deductible

Maximum—The most the plan will pay per person, per year.

Orthodontic max—The orthodontic maximum is a lifetime maximum per person.

Preventative care—Includes routine oral exams, cleaning, fluoride treatments, diagnostic X-rays, and sealants.

Basic care—Includes extractions, fillings, oral surgery, periodontal maintenance, root canal, and repair and maintenance of crowns, bridges, and dentures.

Major care—Includes bridges, dentures, crowns, dental implants, inlays, onlays, and veneers.

Orthodontics—Includes braces, retainers, and other appliances that correct misalignments for both adults and children.



Vision / Choice Network

		VSP Vision Plan B (Choice)	VSP Vision Plan C (Choice)
Eye exam	Appointment	\$10 copay	\$10 copay
	Frequency	Every year	Every year
Glasses	Frame allowance	\$150	\$150
	Frequency	Every 2 years	Every year
Lenses	Glasses lenses	\$10 copay	\$10 copay
	Contacts	\$150	\$150
	Frequency	Every 2 years	Every year
		Details ↗	Details ↗



Rippling's vision provider is Guardian. Guardian utilizes the VSP network, one of the largest networks in the nation.

Benefit levels are in-network. The plans generally pay 100% of eligible expenses after the copay when network providers are used.

VSP savings for your eyes and ears

Additional discounts and special offers for contact lens exams, LASIK, eyeglass frames, sunglass frames, diabetes care, and TruHearing™ digital hearing aids are available to VSP members.

Visit vsp.com/offers for more information.

All employees enrolled a Guardian Vision plan get access to [XP Health](#).

Short- and long-term disability

Guardian		Short-Term 1500	Short-Term 2500	Long Term 2 years	Long Term 5 years	Long Term Age 65
Coverage	Maximum	\$1,500/week	\$2,500/week	\$10,000 or \$12,000/month	\$10,000 or \$12,000/month	\$8,000, \$10,000 or \$12,000/month
	Cap	50% of salary	60% of salary	60% of salary	60% of salary	50% or 60% of salary
Benefit period	Benefits begin	Day 16	Day 8	Day 91	Day 91	Day 91
	Maximum duration	12 weeks	12 weeks	2 years	2 years	SSNRA (age 65-67)
		Details ↗	Details ↗	10k Details ↗ 12k Details ↗	10k Details ↗ 12k Details ↗	8k Details ↗ 10k Details ↗ 12k Details ↗

Life and accidental death & dismemberment

Guardian		Life/AD&D \$10k	Life/AD&D \$50k	Life/AD&D \$250k	Life/AD&D \$500k
Coverage	Amount	\$10,000	\$50,000	1x salary up to \$250k	2x salary up to \$500k
	AD&D	Yes	Yes	Yes	Yes
Benefits	Guarantee issue	Yes	Yes	Yes	Yes
	Conversion	Yes	Yes	Yes	Yes
	Accelerated benefits	Yes	Yes	Yes	Yes
		Details ↗	Details ↗	Details ↗	Details ↗



Employee Assistance Program (EAP)

The Guardian WorkLifeMatters EAP provides employees and their families with confidential and personal support on a wide variety of important and relevant topics to help encourage their well-being, including: stress management; dependent/elder care; nutrition; fitness; legal and financial issues.

All worksite employees will have access the EAP regardless of their enrollment in a Guardian line of coverage.



Voya employee benefits

What are worksite benefits?

Worksite benefits are voluntary, employee-paid benefits. They provide cash payments directly to the member when the member or covered family member goes to the doctor or hospital for a covered service.

Members can use their cash benefit however they like (for copays and deductibles, other costs related to their injury or sickness, or anything unrelated, including saving the money).

All Rippling worksite plans also pay a cash benefit annually when members take advantage of a covered preventative care visit (e.g., their yearly physical).

Worksite benefits are automatically included in your benefits package.

- Employee-paid—Employers cannot contribute.
- Voluntary—Employees choose if they want to enroll or not.
- Guaranteed issue—No health questions or underwriting.

Accident Insurance

Pays a direct cash benefit when a member seeks treatment for an injury (whether accidental or not). On-the-job accidents are not covered.

Critical Illness Insurance

Pays a direct cash benefit when a member seeks treatment for a covered illness.

Hospital Indemnity Insurance

Pays a direct cash benefit when a member is hospitalized for a covered injury or illness.

Visit voya.com for more information.



Live one-on-one expert healthcare guidance for your team

Rightway

If your employee needs help with anything from a basic benefits question to a complex billing issue, a [Rightway](#) Health Guide is just a chat or call away. They'll educate, advise, and advocate on dozens of healthcare topics, including:

- Benefits enrollment & health plan education
- Symptom assessment and guidance toward appropriate type / site of care
- Upfront healthcare costs & appointment scheduling
- Help with understanding and / or disputing medical bills



Personalized mental health and wellness services

Spring Health

Spring Health provides personalized mental health care to members who are enrolled in at least one Guardian plan at no additional cost. They deliver seamless, quality care for everyone's concerns, from mild insomnia to crisis support.

- 5 free therapy sessions with trusted providers
- In-app wellness exercises for better mental fitness
- Coaching for managing stress, increasing focus, and more
- Access to psychiatrists for medication management



In-person and online support for stress management, dependent care, nutrition, fitness, legal, and financial issues

WorkLifeMatters EAP

Guardian's WorkLifeMatters Employee Assistance Program (EAP) offers services to promote well-being and enhance the quality of life for your employees and their families. All Rippling PEO worksite employees will have access to the EAP regardless of being enrolled in an line of Guardian coverage.

- Up to 3 face-to-face counseling visits per year
- Unlimited, 24/7 phone consultations with master's- and doctoral-level counselors
- Bereavement support
- Unlimited tobacco cessation coaching via phone
- One free 30-minute legal consultation + 25% discount on attorney fees thereafter
- 30 days of financial coaching
- Access to 30,000+ national & local employee discounts



On-demand mental health and wellness support

Ginger

Kaiser Permanente Colorado members have access to Ginger — an on-demand mental health care company that provides emotional support coaching via text message. Ginger offers one-on-one support for coping with many common challenges — from stress, grief, and low mood to issues with work and relationships, and more.

- Text a coach anytime, anywhere
- Discuss goals, share challenges, and create an action plan with a coach
- Get personalized, interactive skill-building tools from a coach and a library of more than 200 activities
- View recaps from each texting session, track progress, and more



Purchase leading eyewear brands, for less

XP Health

XP Health is an online vision platform that gives members the ability to purchase eyewear from leading brands at lower out-of-pocket costs than traditional options. XP Health is available at no additional charge to all members who are enrolled in a Guardian vision plan.

- Up to \$540 of benefit credits every 12 months
- Annual benefit amount is available for up to three additional dependents who are enrolled in a Guardian vision plan
- Includes eyeglasses, sunglasses, and computer glasses with high-quality lenses
- Access to virtual try-on, at-home try-on kits, and online concierge customer service

Plan networks

PPO (Preferred Provider Organization)

PPOs give you the most freedom. They allow you to go to any doctor, anytime—whether they are in-network or out-of-network. This gives you control over how you access medical care. Note: in general, you will want to see in-network doctors, as out-of-network doctors will cost more.

EPO (Exclusive Provider Organization)

EPOs are similar to PPOs, but they don't cover out-of-network doctors. So you can go to any doctor, anytime, as long as they are in-network. This gives you control over how you access medical care, as long as your doctor is in-network.

HMO (Health Maintenance Organization)

HMOs are very different from PPOs and EPOs. With an HMO, you must designate a primary care physician, commonly called a PCP. This doctor will serve as your first point of contact when you need non-emergency medical care. If you want to see a specialist, with few exceptions, you need to see your PCP first so they can refer you.

Of course, if you ever find yourself in a life-or-death emergency, you should go to the nearest hospital immediately. If your life is in danger, it will be covered.

POS (Point of Service)

POS plans are less defined—they can mean different things depending on the carrier or specific set of plans. Many POS plans work just like PPOs; others may provide lower copays if you go to a subset of in-network doctors. Contact your insurer to see exactly how your POS operates. Note: Rippling PEO's POS plans operate just like PPOs, meaning you can go to any doctor you want, whenever you want.

In-network

Doctors and facilities that are contracted with your insurer are considered in-network. In-network services cost less than out-of-network services, so seeing in-network doctors lowers your out-of-pocket health-care spending.

Out-of-network

Doctors and facilities that are not contracted with your insurer are considered out-of-network. If out-of-network services are covered by your plan, they will cost more than in-network services, so seeing out-of-network doctors and facilities increases your out-of-pocket healthcare spending. HMOs and EPOs do not cover out-of-network services, with the exception of life-or-limb emergency care.

Medical coverage terms

Deductible—Some services are not covered until you reach your deductible. Examples include hospitalizations and surgeries. If a service is subject to the deductible, you must reach your deductible before the plan starts paying for the service.

Maximum—Commonly known as your worst-case scenario, the maximum is the most you will pay for covered services in any calendar year. Once you reach your medical maximum, the plan pays 100% for covered services. All spending (copays, deductibles, and coinsurance) count towards your maximum.

Preventative care—As long as the preventative care service is received by an in-network provider, Rippling PEO's plans cover preventative care 100%. There is no cost to the member. Examples of preventative care include annual physicals, well-women visits, and child immunizations.

Coinsurance—Coinsurance, which is always presented as a %, is the percentage you pay for specified services until you reach your maximum. If a service has an associated coinsurance, you pay that % and the plan pays the remaining %. Once you have reached your maximum, you no longer have to pay co-insurance; the plan pays 100% for covered services.

Copays—Copays, which are always expressed as a \$, are fixed amounts you pay for specified services until you reach your maximum. Copays are most commonly associated with the cost to see your doctor or fill a prescription, but can also apply to other services, like emergency room visits. Many copays are not subject to your deductible, meaning that, even if you have not yet reached your deductible, you only have to pay your copay for that service. An example would be paying \$25 for a doctor visit or \$10 for your prescription. Once you have reached your maximum, you no longer have to pay copays; the plan pays 100% for all covered services.

HDHP/HSA plans—On a High Deductible Health Plan (HDHP), commonly known as an HSA plan, all services are subject to the deductible. This means the member pays 100% for covered services until they reach their deductible. There is one exception: preventative care. All Rippling PEO plans cover preventative care 100%. There is no cost to the member.

Important notices

Insurance policies

Rippling PEO provides medical, dental, and vision benefits as well as life, personal accident, and disability insurance through fully insured group insurance policies. Rippling PEO does not self-fund these benefits.

Governing documents

As sponsor of the Rippling PEO Group Health and Welfare Benefits Plans, Rippling PEO provides employees with a Summary Plan Description (SPD) and plan documents prepared by each insurance carrier. Together, these documents describe eligibility requirements, the benefits available under the Plans, and other important rights and obligations of enrolled individuals.

Rippling PEO also makes available Summaries of Benefits and Coverage (SBCs) for each medical coverage option. The SBCs contain important coverage details presented in a standardized format to help you compare different options.

The information contained in this document is intended to provide only an overview of the major features of Rippling PEO's employee benefits programs. Full details are contained in the SPDs, SPCs, and plan documents that govern each plan or program.

Should there be a discrepancy or conflict between the information presented here and the actual Plan documents, the Plan documents will govern. Rippling PEO reserves the right to amend or discontinue any Plan or program at any time at its sole discretion. In no event should the benefits provided by Rippling PEO be interpreted as a guarantee of continued employment.

This document is not a contract or agreement, nor is it a binding offer to provide services.