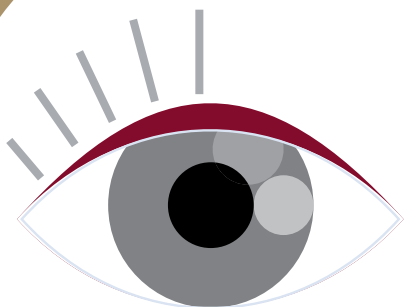


20 BENEFITS 26 GUIDE

The Health & Wellness Connection



MEDICAL MEANS MORE



Your medical election includes value-based benefits from the best service providers in the country.

The Right Care at the Right Time

If you're experiencing a health-related issue, chances are ICUBA has a program that will help you get the care you need, when you need it.


We design value-based benefits, programs, and services to reduce your out-of-pocket expenses and help you identify chronic conditions before they become a problem. In this guide, you'll find user-friendly information about these great value-based benefits:

- For elective surgery, **Lantern Surgery Care** gives you access to an elite network of surgeons for eligible procedures covered at 100%!
- When you choose an **Embold Health** designated provider, you're seeing a top-rated provider that consistently delivers quality care.
- You have access to a dedicated cancer care team, nurse case manager, and behavioral health case manager for complex care from **BCBS**.
- Virtual musculoskeletal care and chronic pain management from **Hinge Health**.
- Dedicated pharmacist advocates from **ICUBAcares**.
- Telemedicine from **Teladoc**.
- Lifestyle management from **My Health Novel**.
- A comprehensive wellbeing incentive program from **Personify Health**.



CONTENTS

Eligibility & Special Enrollment.....	5
How to Enroll	6
ICUBA Medical Plan Options.....	8
Behavioral Health	10
ICUBA Prescription Plan.....	11
ICUBAcares Pharmacist Advocate Program ...	12
Care Management	13
Embold Preferred Providers.....	14
Teladoc	15
Lantern	16
Hinge Health	17
My Health Novel.....	18
Personify Health	19
Spending Accounts	21
Dental benefit Options	23
Vision Benefit Option	24
Employee Assistance Program (EAP)	25
Income Protection	27
Voluntary Benefits	28
LegalShield & IDShield	30
Pet Insurance	31
Contacts	32
Additional Resources.....	33





EMPLOYEE

Health & Welfare Benefits

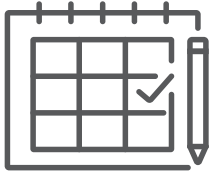
We appreciate your commitment to our success. We're equally committed to providing you with competitive, affordable, health and wellbeing benefits to help you take care of yourself and your family.

Please read this guide carefully as it includes a summary of your options and helpful tips for getting the most value from your benefit plans. We understand that you may have questions about your benefit enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource. Anytime you have questions about benefits or the enrollment process, you can contact the Florida Tech Office of Human Resources or visit fit.edu/hr/employee-benefits. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD).

If you and your spouse or partner are both employed at an ICUBA school, please make sure you do not duplicate coverage for yourself or for any of your dependents. Duplicate coverage is not permissible under any plan or policy available through your employer or ICUBA.

ELIGIBILITY & SPECIAL ENROLLMENT



New Hire Enrollment

New Hire Enrollment is your first opportunity to enroll in benefits for you and your eligible

dependents. As a new employee, you must make your benefit elections within 30 days of your hire date. Once you have enrolled in benefits, your elections are binding for the remainder of the plan year, 4/1/26-3/31/27.

Mid-year changes to your benefits are permitted when you or a family member experiences a Qualifying Life Event, or during Annual Enrollment for benefits. Annual Enrollment is your opportunity to review your coverage and make changes to your benefits without a Qualifying Life Event. During annual enrollment, you can add or remove coverage and eligible dependents in your family to your benefits effective at the beginning of the next plan year.

Eligibility Requirements

EMPLOYEE

Full-time employees of your institution.

DEPENDENTS

Your eligible dependents include: your legally recognized spouse or qualified domestic partner and your legal child dependent(s) including natural child, legally adopted child, stepchild, child required to be covered pursuant to a Qualified Medical Child Support Order, child with proof of legal guardianship who resides with you, or a foster child. Dependent children may remain on the ICUBA plan until the end of the calendar year in which age 26 is attained.

WAITING PERIOD

Eligible on 1st of the month following or coinciding with the date of hire.

Qualifying Life Events

The Health Insurance Portability and Accountability Act 1996 (HIPAA), allows you to make certain changes to your benefits when you experience a Qualifying Life Event outside of your new hire or annual enrollment periods. Qualifying life events permit you to make changes to your benefits, provided you notify your employer, make your benefit elections online, and provide documentation to support the changes within 30 days of the event.

The following events are considered Qualifying Life Events that would enable you to make changes to your benefits:

- Marriage or divorce
- Birth, adoption or placement for adoption.
Eligible employees and other dependents who previously did not elect to be covered under the plan may also enroll at the time the new dependent is enrolled.
- Gain of other coverage and enrollment into another plan.
- Loss of other coverage.
- A court has ordered coverage be provided for a spouse or minor child under this plan.

For further information on eligible qualifying events, please refer to the ICUBA Plan Document or contact your Human Resources Department.

The Plan Document can be found at <https://www.fit.edu/hr/employee-benefits> under "Health Insurance".

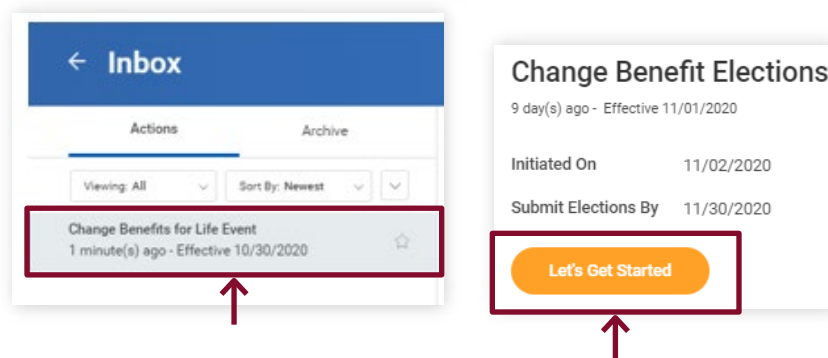
A Section 125 plan, also known as a cafeteria plan, allows employees to pay for eligible benefits, such as health insurance, FSAs, and certain supplemental plan, using pre-tax dollars, reducing their taxable income and overall tax burden. Your employer must follow strict IRS rules governing mid-year election changes, eligibility, and plan administration. All permitted changes must align with the qualifying life events defined in the Section 125 plan document.

HOW TO ENROLL

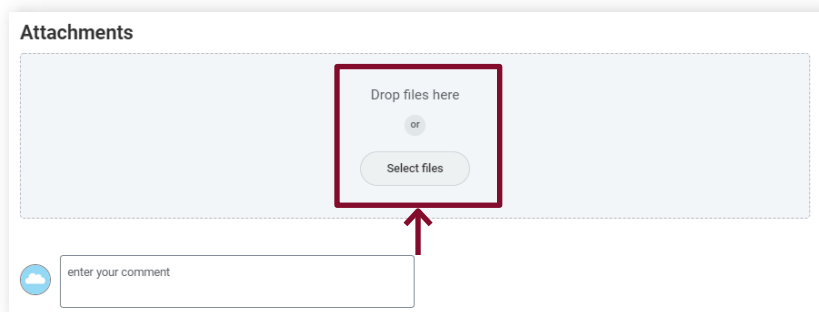
Complete your enrollment online with Workday.

Step 1. Login to Workday using your TRACKS username and password.

Step 2. Select the **Change Benefits** task from your Workday Inbox. Click on **Change Benefit** and then **Let's Get Started**.



Step 3. If you are adding dependents to your benefits you must upload the supporting documents during this process. Document Examples – Marriage Certificate, Birth Certificate, last year's Tax Return with dependents listed (black out financial information).



Step 4. Benefits are grouped into three sections, Health Care and Accounts, Insurance, and Additional Benefits. Click on **Enroll** or **Manage** for each benefit plan and make an election. There is help text to the right of each page to help navigate through the system.

If enrolling in a Medical plan you must also enroll in the Health Reimbursement Account in order to receive your Florida Tech funded HRA monthly deposit.

Benefits provided to you at no cost will be gray and cannot be changed. However, there may be actions needed to **Manage** the benefit. For instance, when you click **Manage** on Basic Life Insurance benefit plan, you can list the name of your beneficiary.

The screenshot displays the benefits enrollment interface with three main sections:

- Health Care and Accounts:** Contains three cards: "Medical Waived" (with an "Enroll" button), "Health Reimbursement Account Waived" (with an "Enroll" button), and "Dental Waived" (with an "Enroll" button). A red box highlights the "Health Care and Accounts" header, and a red arrow points to the "Medical Waived" card.
- Insurance:** Contains three cards: "Basic Life Insurance Symetra (Employee)" (with "Cost per paycheck" and "Coverage" details, and a "Manage" button), "Basic AD&D Symetra (Employee)" (with "Cost per paycheck" and "Coverage" details, and a "Manage" button), and "Long Term Disability Symetra (Employee)" (with "Cost per paycheck" and "Coverage" details, and a "Manage" button). A red box highlights the "Insurance" header, and a red arrow points to the "Basic Life Insurance" card.
- Additional Benefits:** Contains one card: "EAP ICUBA" (with "Coverage" and "Employee" details, and a "Manage" button). A red box highlights the "Additional Benefits" header, and a red arrow points to the "EAP ICUBA" card.

Step 5. When you have finished making your benefit elections, click **Review and Sign**. After reviewing your elections, scroll down and provide your electronic signature by checking **I Accept** and click **Submit**.

Once the Submitted screen comes up click **Done**. **Congratulations, you are finished!**

The screenshot shows the "Submitted" screen with a blue header. Below the header, it says "Success, You're Enrolled" and "Thank you for enrolling in your insurance benefits. Your elections will be sent to the Benefits Partner inbox." There is a button labeled "View 2020 Benefits Statement". At the bottom, a red arrow points to a yellow "Done" button, which is highlighted with a red box.



**BlueCross.
BlueShield.**

ICUBA MEDICAL PLAN OPTIONS

Preferred PPO Plan

	Preferred PPO	
	In-Network	Out-of-Network
	Employee Pays	
Deductible (Individual/Family)	\$3,000/\$6,000	\$4,500/\$11,750
Coinsurance	20%	40%
Out-of-Pocket Maximum (Individual/Family) Includes all medical copays, deductibles & coinsurance	\$7,400/\$14,800	\$10,900/\$21,800
HRA is funded by your Institution	An HRA account is funded through your Institution to help you pay for qualified expenses such as your deductible, copays, co-insurance and/or prescriptions. The Institution funds \$120 towards single/ \$240 towards employee + spouse and \$260 towards employee + child(ren) or employee + family per month.	
Total Care (BDTC) (Family Practice, Internal Medicine, Pediatrics)	\$0	Not applicable
Physician Office Visits	\$15 copay	40% after deductible
Specialist Office Visits	\$35 copay	40% after deductible
Convenient Care Clinics	\$10 copay	N/A
Independent Clinical Labs** (free standing facilities & office visits)	0%**	40% after deductible
Preventive Care	0%	Not covered
Teladoc Visit	\$5 copay	Not covered
Urgent Care Center	\$30 copay	
Emergency Room Services	0% after \$500 copay (waived if admitted)	
Ambulance	\$250 copay	
Hospital Inpatient	20% after deductible	40% after deductible
Lantern Health	\$0	N/A

**Quest Diagnostic Labs is the In-Network Lab for BlueCross BlueShield of Florida.

Medical Monthly Contributions

	Employer HRA Contribution	Employer Cost	Employee Premium
Employee	\$120.00	\$876.00	\$140.00
Employee + Spouse	\$240.00	\$1,626.00	\$541.00
Employee + Child(ren)	\$260.00	\$1,374.00	\$458.00
Employee + Family	\$260.00	\$2,140.00	\$713.00



**BlueCross
BlueShield**

ICUBA MEDICAL PLAN OPTIONS

High Deductible PPO Plan

	High Deductible PPO Plan	
	In-Network	Out-of-Network
	Employee Pays	
Deductible (Individual/Family)	\$4,500/\$9,000	\$8,500/\$17,000
Coinsurance	30%	50%
Out-of-Pocket Maximum (Individual/Family) Includes all medical copays, deductibles & coinsurance	\$8,600/\$17,200	\$14,100/\$28,200
HRA is funded by your Institution	An HRA account is funded through your Institution to help you pay for qualified expenses such as your deductible, copays, co-insurance and/or prescriptions. The Institution funds \$120 towards single/ \$240 towards employee + spouse and \$260 towards employee + child(ren) or employee + family per month.	
Total Care (BDTC) (Family Practice, Internal Medicine, Pediatrics)	\$0	Not applicable
Physician Office Visits	\$15 copay	50% after deductible
Specialist Office Visits	\$35 copay	50% after deductible
Convenient Care Clinics	\$10 copay	N/A
Independent Clinical Labs** (free standing facilities & office visits)	0%**	50% after deductible
Preventive Care	0%	Not covered
Teladoc Visit	\$5 copay	Not covered
Urgent Care Center	\$30 copay	
Emergency Room Services	0% after \$500 copay (waived if admitted)	
Ambulance	\$250 copay	
Hospital Inpatient	30% after deductible	50% after deductible
Lantern Health	\$0	N/A

**Quest Diagnostic Labs is the In-Network Lab for BlueCross BlueShield of Florida.

Medical Monthly Contributions

	Employer HRA Contribution	Employer Cost	Employee Premium
Employee	\$120.00	\$870.00	\$139.00
Employee + Spouse	\$240.00	\$1,611.00	\$537.00
Employee + Child(ren)	\$260.00	\$1,094.00	\$364.00
Employee + Family	\$260.00	\$1,831.00	\$610.00



BlueCross
BlueShield

INCLUDED WITH ICUBA'S MEDICAL PLAN

BEHAVIORAL HEALTH

Mental Health, Substance Use Benefits and Applied Behavioral Analysis (ABA) are provided by BlueCross BlueShield. These services are available to all members who are enrolled in the BlueCross BlueShield Medical Plan.

	Preferred PPO Plan	High Deductible PPO Plan
	In-Network ¹	In-Network ¹
Employee Pays		
Inpatient²		
Mental Health/Substance Use Hospital Admission²	20% after deductible	30% after deductible
Residential² Focus on evaluating to learn effective ways to cope with the symptoms and impact of the illness.	20% after deductible	30% after deductible
Inpatient Detoxification² 24-hour treatment in a residential or hospital setting for patients who are abusing alcohol or other addictive drugs.	20% after deductible	30% after deductible
Outpatient		
Professional Counseling Sessions Talk with a licensed clinician regarding anxiety, ADHD, depression, mood disorders, trauma, etc.	\$15 copay	\$15 copay
Psychiatric Medication Evaluation	\$15 copay	\$15 copay
Applied Behavioral Analysis Therapy² Behavioral health services related to Autism Spectrum Disorder (ASD) diagnosis.	\$15 copay	\$15 copay
Partial Hospitalization (PHP)² Physician and nursing services, group, individual, family or multi-family group and other services.	\$15 copay	\$15 copay
Outpatient Detoxification Monitor withdrawal from alcohol or another substance of abuse.	\$15 copay	\$15 copay
Intensive Outpatient Sessions (IOP)² Planned and structured programs may include group, individual, family and other services.	\$15 copay	\$15 copay

1. Out-of-network services are covered at a reduced benefit. The Preferred PPO Plan will cover all eligible services at 60% after the deductible is satisfied; the High Deductible PPO Plan will cover all eligible services at 50% after the deductible is satisfied.

2. Services require prior-authorization.



Meru Health

Meet with licensed therapist for treatment of anxiety and depression via web-based, videoconferencing or by phone for a 12-week therapy program. Daily lessons including topics such as psychotherapy, self-regulatory skills, and lifestyle science. There is a \$0 copay for both plans in-network.

Note: Meru Health is not available out of network.

To learn more about
these benefits,
please call

855-258-9029



**BlueCross
BlueShield**

ICUBA PRESCRIPTION PLAN

INCLUDED WITH ICUBA'S MEDICAL PLAN

Prescription–Fill Copays by Drug Tier	Retail	90-day at Retail Program	Mail
	Up to a 30-day supply	Up to a 90-day supply	Up to a 90-day supply
Generic drugs to treat Chronic Conditions	\$0	\$0	\$0
Preferred generics at other network pharmacies	\$5	\$10	\$10
Non-Preferred generics	\$10	\$20	\$20
Preferred brands: brand-name medications on the Preferred Medication List (PML)	\$55	\$110	\$110
Non-Preferred brands: brand-name medications not on the Preferred Medication List	\$95	\$190	\$190
Preferred specialty at BCBS Specialty Pharmacy*	20% (max. of \$500 per prescription)	N/A	N/A
Non-Preferred specialty at BCBS Specialty Pharmacy	20% (max. of \$500 per prescription)	N/A	N/A

*Preferred Specialty medications are eligible for copay card usage.

Pharmacy Out-of-Pocket Maximum

In-Network Rx copays will be applied toward an individual maximum out-of-pocket of \$2,000/single and \$4,000/family. Once you reach your out-of-pocket maximum, your prescriptions will be paid for at 100% by the plan and no cost to you (\$0 copay). If you have a question about your pharmacy benefit, call the BlueCross BlueShield customer service number at **855-258-9029** or you can download the BCBS MyRxToolkit mobile app which is the same username and password you use for your BCBS MyHealthToolkit.

Free Over the Counter Items and Diabetic Supplies

With a prescription from your provider you can receive FREE prescribed diabetic supplies including meters, lancing devices, lancets, test strips, control solution, needles, and syringes. Other items include prescribed aspirin for adults, prescribed generic folic acid, and generic prenatal vitamins for pregnancy. Simply take the prescription to the pharmacy counter and your local pharmacist can assist you.

Tobacco Cessation Benefit

Tobacco cessation medications are covered—up to two cycles each year— **\$0 copay** when you participate in coaching or counseling options through local Area Health Education Centers, BCBS telephonic coaching or Resources for Living counseling.

To get started with the mail order program, call **855-811-2218** or go to **<http://MyHealthToolKitFL.com>** and click Prescription Drugs > Mail Service.

Please be aware there are some prescriptions that require Prior Authorizations, have Quantity Limits or require a Step Therapy Program. If you should have any issues with one of these programs, please contact ICUBAcares Pharmacist Advocate Program at **877-286-3967** for assistance.



INCLUDED WITH ICUBA'S MEDICAL PLAN



ICUBACARES PHARMACIST ADVOCATE PROGRAM

Real Pharmacists. Real Advocates. Real Solutions.

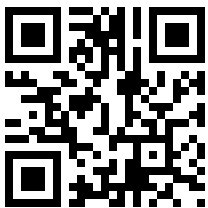
ICUBAcares is your liaison between your doctor, the pharmacy, and the insurance company – taking the burden off you. Call ICUBAcares if you need assistance with a prior authorization, navigating the formulary, or with questions about one of your medications. Pharmacists are available Monday through Friday from 9AM to 5PM to help you get the right care at the right time.

Learn More

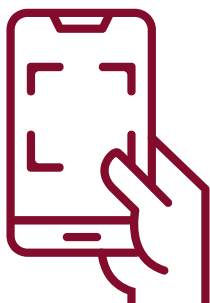
To learn more about how ICUBAcares can help save you time, money, and energy, visit ICUBAcares at <http://ICUBAcares.org>.

The ICUBAcares team can
review your prescriptions
and answer questions.

Call for a free prescription
check-up at
877-286-3967.



Scan here to
get started!





BlueCross
BlueShield

INCLUDED WITH ICUBA'S MEDICAL PLAN

CARE MANAGEMENT FOR COVERED ICUBA MEMBERS

About Care Management

This free program connects you with a care manager who knows about your situation and health concerns. Care managers are registered nurses, so they have insight and knowledge about a range of medical conditions. If you have questions about your condition and the treatments you are receiving, they can help you get answers. Also, as you deal with an illness or injury, you might need special equipment, transportation to medical appointments, or groceries from a local food bank.

Is Care Management for You?

Care management can be especially helpful for covered members who experience:

- An illness such as end-stage renal disease (ESRD that requires intensive, costly dialysis treatment or a kidney transplant).
- Frequent hospitalization.
- Long-term or life-threatening illnesses such as: diabetes, asthma, musculoskeletal, and obesity.
- Extensive home health care.
- Effects of traumatic injury.

An Advocate Who's on Your Side

When a person is dealing with serious illness or injury, it can be stressful for the whole family. You might be uncertain about which health goals are realistic for you now, or how to make the most of your health insurance benefits. Care managers have experience connecting patients with the resources and information they need.

Do you think you might benefit
from care management services?

You don't have to go through
these challenging times alone.

Call a care manager at
855-263-0675, ext 40471





INCLUDED WITH ICUBA'S MEDICAL PLAN

EMBOLD PREFERRED PROVIDERS

Taking the guesswork out of finding top-quality doctors. Embold is a program offered by your employer that identifies top-performing providers in your area.

What's Different about Embold Doctors?

Doctors recognized as Embold Preferred Providers have been thoroughly evaluated based on appropriateness of care, effectiveness and cost.

Who Should Use an Embold Preferred Provider?

Anyone can choose an Embold Preferred Provider. Embold providers are available for Primary Care, Pediatrics, Cardiology, Dermatology, Endocrinology, Joint Care (Orthopedic), Gastroenterology, Neurology, Obstetrics and Gynecology, Podiatry, Pulmonology, and Spine Care (Orthopedic/Neurosurgical).

How Does Using an Embold Preferred Provider Benefit You?

- When you choose an Embold Health designated provider, you're seeing a top-rated provider that consistently delivers quality care.
- Seeing an Embold Preferred Provider can save you money and ensure that you receive top quality care, experience better health outcomes and potentially avoid unnecessary treatments or procedures.



How to Find Embold Preferred Providers

- Log in to My Health Toolkit at **<http://myhealthtoolkitfl.com>** and select the Providers & Services tab.
- Choose Find a Doctor or Hospital and select **Find a Preferred Provider**.
- Next, select a location and provider type to instantly see Embold Health designated providers.

Look for the Embold Health designation to find high-performing Providers to ensure you and your family have access to the best possible care.



**Scan here to
get started →**

<http://icuba.emboldhealth.com>





INCLUDED WITH ICUBA'S MEDICAL PLAN

TELADOC

Teladoc gives you 24/7/365 access to US board-certified doctors through the convenience of phone or video consults. It's an affordable alternative to costly urgent care and ER visits when you need care now! With your consent, Teladoc can provide information about your Teladoc consult to your primary care physician.

The Teladoc benefit is included with your election in an ICUBA Medical Plan.



TALK TO
A DOCTOR
ANYTIME!

\$5
COPAY

When can I use Teladoc?

- Teladoc does not replace your primary care physician. It is a convenient and affordable option for quality care.
- When you need care now.
- If you're considering the ER or urgent care for a non-emergency issue.
- On vacation, on a business trip, or away from home.
- For short-term prescription refills.

Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & Flu symptoms.
- Allergies.
- Bronchitis.
- Urinary tract infection.
- Respiratory Infection.
- Sinus Problems.
- And more!

Members must establish an account at www.teladoc.com prior to seeking treatment. For first time registration with Teladoc there is a single sign-on feature through BCBS MyHealthToolkit or dependents may visit www.teladoc.com directly. If you need further assistance, call **800-Teladoc**, and a customer representative can walk you through the account setup.



**Scan here to set up
your account →**
www.teladoc.com





INCLUDED WITH ICUBA'S MEDICAL PLAN

LANTERN

Lighting Your Path to the Right Surgical Care

What is Lantern?

Lantern can help you get the best care when you need planned, nonemergency surgery. This money-saving benefit is available at no additional cost to you as part of your benefits.

The best part is that Lantern is one of your medical benefits, so it is available whenever you need it.

The Care You Need: Lantern covers more than 1,500 planned, non-emergency surgeries. If you need a procedure, we can assist you with finding an excellent surgeon.

The Best Surgeons for You: Lantern surgeons are individually vetted and among the best in their field. Your Care Advocate will work to match you with a first-rate surgeon in the Lantern network.

Care Close to Home: Whenever possible, your Care Advocate will match you with a surgeon that's close to your home.

Here's What's Covered

We cover the most expensive costs associated with surgery, so you'll pay less for your procedure when you use your Lantern benefit. Your coverage includes:*

- Dedicated support and guidance
- Personalized matching with the best surgeon for your unique needs
- Consults and appointments with your Lantern surgeon
- Anesthesia, procedure and facility (hospital) fees

** Testing, scans, imaging, durable medical equipment, and physical therapy expenses may not be included. However, coverage may be available through your medical plan.*



Call Lantern to learn more:

855-200-2119

<https://my.lanterncare.com>

Let Us Guide You Back to Health! 3 Steps to the Best Care:



STEP 1

Call a Care Advocate to get started. They'll share more information about your benefits and ask about the care you're looking for.



STEP 2

Based on your needs, your Care Advocate will match you with a hand-picked list of excellent surgeons.



STEP 3

After you choose a surgeon, your Care Advocate will help set up appointments and guide you through every step of the experience.

Note some services may not be covered. Contact a Care Advocate to learn more.



INCLUDED WITH ICUBA'S MEDICAL PLAN

HINGE HEALTH

Virtual Physical Therapy

We provide members with personalized, expert-developed exercise therapy plans for lasting pain relief. Whether a new injury or ongoing aches, Hinge Health is for anyone living with joint or muscle pain.

What does my program include?

- Unlimited access to your personalized exercises and stretches developed by physical therapists.
- Convenient exercise sessions you can do anytime, anywhere with the Hinge Health app.
- Dedicated 1-on-1 support from a physical therapist and qualified health coach.
- **NEW** If you're considering surgery, you can also receive an expert medical opinion from Hinge Health's medical team to determine if surgery is the best course of action for you.

Specialized Care, Personalized For You

Reduce everyday joint and muscle aches. Recover from an injury.
Relieve pelvic pain and discomfort.

- A care plan designed for your everyday activities and long-term goals — and to treat multiple areas of your body at once.
- Access exercise therapy sessions you can do in as little as 15 minutes — anytime, anywhere with the Hinge Health app.
- Get 1-on-1 support from a physical therapist or health coach to tailor your sessions as needed and help you reach your goals.
- Access to Hinge Health Enso® a non-addictive, FDA-cleared wearable device to calm and soothe pain flare-ups in minutes to review their treatment plan to improve health literacy and make better informed decisions.

INTRODUCING MENOPAUSE CARE

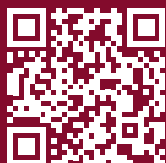
Take control of your menopause symptoms

Joint pain, bone density changes, hot flashes, embarrassing leaks. Menopause symptoms are often overwhelming and unexpected.

As a benefit covered by ICUBA, Hinge Health can help you manage these symptoms at no additional cost to you.

What does menopause care include?

- A virtual care plan that features personalized exercises, guided breathing, and educational articles.
- Expert guidance from a physical therapist trained in menopause care.
- A convenient app where you can access all of the above — anytime, anywhere.



For questions, call Hinge Health at **855-902-2777** or send an email to hello@hingehealth.com.

➔ Get started today at <http://hinge.health/icuba-join>.



INCLUDED WITH ICUBA'S MEDICAL PLAN

MY HEALTH NOVEL

BlueCross BlueShield continues to support My Health Novel, designed to match you with helpful resources and tools based on your specific health needs. **These services are available to all members who are enrolled in the BCBS Medical Plan following completion of the My Health Novel assessment to determine the appropriate matching to the program.**

Programs Available	Description
Weight Management	The Weight Management program offers solutions tailored to those who are at higher risk of developing Type 2 Diabetes or need to improve their diet and achieve clinically meaningful weight loss. Additionally, this program also provides resources, and apps, even for those who are at a healthy weight and are interested in improving their lifestyle habits.
Women's Health	This program offers support and solutions for the health challenges women face at various stages of life. Members can choose to focus on specific issues such as pelvic pain, fertility, breastfeeding, and menopause.
Digestive Health	The Digestive Health program connects you with Health coaches and Registered Dietitians to provide solutions for common GI symptoms to more severe chronic GI symptoms
Behavioral Health	The Behavioral Health program connects you with digital resources and mental health providers, that can help you with anything from mindfulness, everyday stressors, to anxiety and depression.

Access health management mobile apps at no cost to you.

Whether you're interested in starting new healthy habits or maintaining your weight, My Health Novel gives you access to the best nutrition, physical activity and weight management tools, programs and apps available.

When you qualify and sign up, you'll get access to health coaching, nutrition guidance, digital tools, group support and more to keep you on track.

Enjoy access to in-person and virtual programs and specialists who can help you answer questions and support you on your health journey.

How it works:

1. Log in to **My Health Toolkit**.®
2. Select **Benefits**, then **My Health Novel**.
3. Take a quick, one-minute assessment.
4. You'll receive your recommended program and resources available to you.

Log in to your **My Health Toolkit** today to take your assessment and get matched with the best programs for you.



For more information on My Health Novel, log in to your My Health Toolkit account at <http://MyHealthToolkitFL.com>.





INCLUDED WITH ICUBA'S MEDICAL PLAN

PERSONIFY HEALTH

EARN UP TO **\$385** IN
REWARDS CASH

BUILD A BETTER YOU

Personify Health helps you live better and achieve your health goals with a fun and engaging experience that delivers powerful resources right to your fingertips.



Who is Eligible to Participate?

Employees and spouses enrolled in the ICUBA medical plan.

How to Get Started

- Log in to your My Health Toolkit® account and select **Wellness**, then **Personify Health** to enroll in your account.
- If you are a new user, once you have registered your account, you will automatically **earn \$25 in Rewards Cash**.
- Be sure to download the Personify Health mobile app by searching “**Personify Health**” in the App Store or Google Play.

Personal Health Assessment

Once you are registered and signed in, begin by completing program activities such as the Personal Health Assessment, which asks questions about your current health status and well-being habits. Once completed, **you will automatically earn \$10 Rewards Cash** and your responses will be analyzed to generate a health score, show your health risk, and provide practical tips to help you improve. Complete the survey by visiting Personal Health Assessment under the Health Tab.

Additional Activities

Prioritize and personalize your experience by engaging in resources to help improve your well-being:

Daily Cards: Get helpful tips that are relevant to your current interests and goals.

Journeys®: Make simple changes to improve your health, one step at a time.

Challenges: Team up or go head to head to challenge your coworkers and track healthy habits.

Social Groups: Discuss your favorite hobbies and find a like-minded community to support your healthy changes.

Healthy Habits: Select healthy habits to work toward, and track your progress every day.



Priority Activities to Complete	Incentives
Register your Personify Account (New Users Only)	\$25 Rewards Cash
Personal Health Assessment	\$10 Rewards Cash-Required to earn incentives
Biometric Screening	\$100 Rewards Cash
Health Check-Up	\$50 Rewards Cash
Onsite/Campus Events & Activities (10 total)	\$100 Rewards Cash (\$10 each)
Incentive Total	\$285 Rewards Cash

Earn up to \$100 more in rewards!

You can participate in additional healthy activities throughout the year to earn points, move through the levels and earn Rewards Cash as you level up. Simply complete your priority activities to unlock these rewards.

	Level 1	Level 2	Level 3	Level 4	Additional rewards max
Points	7,000	26,000	40,000	60,000	
Rewards Cash	\$10	\$20	\$30	\$40	\$100
					+285 Total Rewards = \$385 Rewards Cash Annual Max

Examples of how you can earn points throughout the year:	Earnings
Complete Daily cards for ICUBA Resources (up to 4 cards)	4,000 points (1,000 points each)
Complete a Journey	Up to 450 points
Sync a device or tracker	200 points
Complete an ICUBA company-wide Challenge	10,000 points

How do I get credit for completing my biometrics in Personify Health?

You can complete your biometric screenings with your regular blood work at your annual wellness exam with a PCP or at an on-site screening event (if offered by your institution). The *Physician Results Form* allows ICUBA Medical Plan members and covered spouses to earn credit for biometrics in Personify Health by completing it as a part of your annual wellness visit. Screenings will include total cholesterol, HDL/LDL, triglycerides, blood sugar, blood pressure, and A1c.

- Employees and spouses enrolled in the ICUBA Medical Plan can visit your individual portal at **<http://My.QuestForHealth.com>** and download the *Physician Results Form*.
- If you have never registered before, please use:
 - Registration Key: **ICUBA**
 - Unique ID: **Your BCBS ICI#**
- The *Physician Results Form* contains a bar code specific to the employee or spouse and cannot be shared – it is unique to you!
- Pro Tip: If you have an established relationship with your physician, request your blood work ahead of your annual wellness exam to save time and check this off your list with one visit.
- When you visit your PCP for your annual physical, remember to take the form with you. It is important that both you and your doctor sign the Quest Physician Results Form; then, your doctor's office can fax it to the number found on the form.
- You are encouraged to request a copy for your records, and if necessary, upload/fax the form to your Quest portal.
- Members should allow at least 30 days after the form is uploaded/faxed to see credit in Personify Health.
- Remember, the final deadline for submission to Quest is no later than February 28, 2027.

Need help registering, downloading/uploading forms, etc.?
Contact Quest Customer Service at 855-623-9355.





SPENDING ACCOUNTS

Understanding Your Spending Accounts

The HRA is attached to medical and funded by your employer!

HCFSA Healthcare Flexible Spending Account	DCFSA Dependent Care Flexible Spending Account	HRA Healthcare Reimbursement Account
Funded by benefit eligible employees Note: A medical insurance election is not required to enroll in flex spending.		Funded and contributed by your employer; provided when you enroll in an ICUBA Medical Plan
Deducted pre-tax throughout the year	Deducted pre-tax throughout the year	No deductions; funded by employer
Available for immediate use on day one of the plan year	Deposited each pay period	Available at the end of each month
Can be used for healthcare expenses for you and eligible dependents	Can be used for the care of dependents under the age of 13	Can be used for eligible healthcare expenses for participants enrolled in an ICUBA medical plan
If enrolled in an ICUBA medical plan: HCFSA funds are used before HRA	Covered expenses include, but are not limited to: day care, after care, gap camps, household services where applicable, etc.	If you elect an HCFSA the Flex funds are used before the HRA funds
IRS annual individual limit: \$3,400	IRS calendar year household limit: \$7,500	Funds rollover every year; after 36 continuous months of enrollment in an ICUBA medical plan with HRA, you are considered vested and the funds remain available for your use
Use-it-or-lose-it, no annual carry over. Please plan wisely.		



Remember: Each time you use your Health Reimbursement Account (HRA) or Flexible Spending Account (FSA) debit card, you should keep your receipts. Each request for reimbursement must be substantiated either through receipts or EOB (Explanation of Benefits) before it can be reimbursed.

IMPORTANT NOTE: Healthcare and Dependent Care Flexible Spending Accounts require new elections every plan year and are subject to the "use-it-or-lose-it" rules set by the IRS.



To access your account, scan here or visit the employee Ameriflex portal at <https://participant.myameriflex.com/#/login>.



SPENDING ACCOUNTS

Understanding Your Spending Accounts

	FSA Healthcare Flexible Spending Account	HRA Healthcare Reimbursement Account
Funding Contribution	Funded by employee pre-tax dollars. The maximum amount you can contribute to the Healthcare Spending Account is \$3,400. The maximum amount you can contribute to the Dependent Care Spending Account is \$7,500. Flexible spending amounts are subject to discrimination testing. Highly compensated employees may be asked to adjust flexible spending dollars based on results.	Funded by your employer.
Tax Benefits for Employees	Employee contributions are exempt from federal and FICA tax as well as most state and local tax. Reimbursements are tax-free.	Reimbursements are tax-free.
Rollover of Funds	Have to spend funds by June 15 and claim by June 30 of the following plan year (Use-it-or-lose-it).	Funds roll over at the end of each plan year indefinitely.
Medical Plan Enrollment	Enrollment in medical plan not required.	Must be enrolled in ICUBA medical plan to be eligible.
Dependent Eligibility	All qualified dependents are eligible, even if not enrolled in medical plan.	Only if covered on medical plan.
Availability of Funds	Annual election amount available the 1st business day of the plan year for Healthcare Flex Spending Account; the amount available for the Dependent Care Spending Account is the balance of the account as it accumulates through payroll deduction throughout the year.	Can withdraw up to what has been deposited.
Portability	Available for remainder of plan year through COBRA.	Can continue after 36 months of continuous participation in an ICUBA medical plan. An administrative fee applies each month.

Reminder: Use your receipts and EOBs (Explanations of Benefits) to substantiate your charges.

FSA/HRA eligible items can be located on the Ameriflex website at <http://myameriflex.crunch.help/participants/eligible-expenses>.





DENTAL BENEFIT OPTIONS

Dental coverage is offered through Delta Dental. You can select from the Base PPO or Buy-Up PPO plan options. If you select one of the PPO Plans, you can visit any licensed dentist to receive treatment under your plan, but you'll maximize your savings by visiting a dentist in one of Delta's nationwide networks.

Both PPO plans offer two dental networks:

- **Delta Dental PPO** dentists generally offer the lowest contracted rates and greatest cost savings.
- **Delta Dental Premier** dentists are your next best option, with contracted rates that help you save.

	Base PPO			Buy-Up PPO		
	PPO Network	Premier-Network	Out-of-Network	PPO Network	Premier-Network	Out-of-Network
Plan Year Maximum	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000	\$2,000
Ortho Lifetime Maximum	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000	\$2,000
Providers	In- and Out-of-network providers			In- and Out-of-network providers		
Employee Pays						
Deductible - Individual	\$75	\$100	\$100	\$50	\$50	\$50
Deductible - Family	Not applicable; individual deductible applies to all covered members			\$150	\$150	\$150
Preventive Services	0%	50%	50%	0%	20%	20%
Basic Services	20% after ded	70% after ded	70% after ded	20% after ded	50% after ded	50% after ded
Major Services	70% after ded	80% after ded	80% after ded	50% after ded	70% after ded	70% after ded
Orthodontia	Child Only			Adult and/or Child		
Benefit Percentage	50%	50%	50%	50%	50%	50%

Frequency limitations may apply. Please refer to your summary plan description for full plan benefits. Services are based on maximum contract allowance.

Employee Monthly Dental Contributions

	Base PPO	Buy-Up PPO
Employee	\$23.80	\$41.69
Employee + 1	\$55.32	\$83.04
Employee + Family	\$91.59	\$139.65



Scan here for additional coverage details →
www.deltadentalins.com





VISION BENEFIT OPTION

ICUBA offers voluntary coverage through EyeMed. The Vision Plan allows you and your covered family members one routine exam every 12 months, plus lenses once every 12 months, and new frames every 24 months.

To view the entire provider network, please visit the EyeMed website at eyemed.com or contact the Vision Service Center at 866-800-5457. Please review the complete summary of benefits for full coverage details.

	Base Plan	
	In-Network	Out-of-Network Reimbursement
Exam Once every 12 months	\$5 copay	Up to \$35
Frames Base Plan Once every 24 months	\$0 copay; \$130 allowance; 20% off balance over \$130	Up to \$65
Single Vision Lenses (in lieu of Contacts) Once every 12 months	\$15 copay	Up to \$20
Contacts (in lieu of Lenses) Once every 12 months	\$0 copay; \$100 allowance; plus balance over \$100	Up to \$80

ContactsDirect: Save \$20 off your contacts (and free shipping) beyond your regular contact lens benefit! Just create an account at www.contactsdirect.com and an extra \$20 will be deducted at checkout.

Employee Monthly Vision Contributions

	Base Plan
Employee	\$4.98
Employee + Family	\$12.76



Download the EyeMed Members App

EyeMed gives you access to your benefit information on-the-go. Check your benefit details for eye exams, eyeglass frames, contacts, and lenses directly from your phone.



Scan here to
learn more →





For help, visit

www.resourcesforliving.com

(Username: ICUBA, Access Code: 8773985816)

EMPLOYEE ASSISTANCE PROGRAM (EAP)

EAP benefits from Resources for Living (RFL) are available to you, your family members, and anyone in your household including adult children up to the age of 26. Confidential services are available 24 hours a day, 7 days a week. The EAP includes eight free counseling sessions per issue per plan year.

Emotional Wellbeing Support

Visit with a counselor in person, virtually, or by phone for help with a wide variety of issues. If you need help emotional support, give the EAP a call for:

- Relationship & Family Issues
- Stress management
- Dealing with Grief, & Loss
- Depression & Anxiety
- Work/life balance, and more

Daily Life Assistance

Competing day-to-day needs can make it tough to know where to start. If you need help with anything from finding childcare resources to home repair and improvement, EAP can help. Call RFL for personalized guidance for any of life's issues – big or small!

Carekits are available at no cost for growing families, childcare, caregiving and more.

Legal Services

You can get a free 30-minute consultation with a participating attorney for a wide variety of legal issues. If you are having legal issues and have questions, give the EAP a call for:

- Criminal Law & General legal questions
- Family & Elder law
- Wills & Estate Planning
- Divorce & Mediation services
- Real estate transactions, and more

Financial Services

You can get a free 30-minute consultation for a wide variety of financial services. If you have financial questions and need guidance, give the EAP a call for:

- Budgeting & Financial Planning
- Mortgage & College Funding
- Credit & debt issues
- IRS issues & tax preparation
- Retirement planning, and more



Talkspace

Talkspace is an online therapy platform that makes it easy and convenient for you to connect with a network of 2,500+ licensed therapist — from anywhere, at any time. With Talkspace, you can send unlimited text, video, and audio messages to your dedicated therapist, via web browser or through the Talkspace mobile app.

To access, log onto the Resources for Living website with the credentials below:

■ Username: **ICUBA** • Access Code: **8773985816**

The *Connect to Therapy* widget or selecting the *Mental Well-Being* tab then selecting *Find Care* will lead you to the available counseling benefits. Or you can access Talkspace directly by going to **<http://talkspace.com/RFL>**.

Online Discount Center

The Discount Center offers a huge selection of savings for you and your family. Browse deals from national and local retailers from vacation packages to shopping, services and more. Simply log on today for discounts on:

- Computers and electronics
- Fitness centers
- Childcare discounts
- Travel, car rentals and hotels
- Shoes and clothes
- Theme parks
- Gifts and retail shopping
- Movie tickets and video rentals
- Auto maintenance
- Flowers
- Media and streaming services
- Restaurants and more

To access services

877-398-5816

www.resourcesforliving.com

Username: ICUBA

Password: 8773985816

Plan Year: April 1 through March 31



Scan here to access
Talkspace directly →

www.talkspace.com/RFL





INCOME PROTECTION

Basic Life Insurance and AD&D Plan

Employer Provided

Florida Tech provides group life insurance at no cost to all active full-time, benefit eligible employees. Employees receive one times their annual earnings. All amounts are rounded to the next higher multiple of \$1,000, if not already an exact multiple thereof. Age reductions may apply.

Short-Term Disability

Employer Provided

All benefit eligible employees are provided Short-Term Disability coverage at no cost. You will receive 66.67% of weekly earnings, to a maximum benefit of \$2,000 per week. The elimination period of this coverage is 14 calendar days for disability due to an injury or sickness. Short-Term Disability is provided for 11 weeks before an employee converts to Long-Term Disability.

Long-Term Disability

All benefit-eligible employees are provided salary continuance insurance. There are two options to choose from:

- **Option A: Base Level.** This plan provides a benefit of 60% of weekly earnings, to a maximum of \$2,000 per month, and is provided by Florida Tech at no cost to all benefit-eligible employees.
- **Option B: Buy-Up Level.** This plan provides a benefit of 67% of weekly earnings, to a maximum of \$14,000 per month. You and Florida Tech share the cost of this coverage. Benefit cost is based on your age and salary level.

Employee Voluntary Supplemental Life Insurance and AD&D Plan*

You may purchase this coverage in \$10,000 benefit increments up to 5 times your annual salary not to exceed \$500,000. Evidence of Insurability is required for amounts above \$150,000 and must be approved by Symetra. All amounts are rounded to the next higher multiple of \$10,000, if not already an exact multiple thereof. Age reductions apply at ages 65 and 70.

Dependent Voluntary Life Insurance and AD&D Plan*

In order to purchase life insurance for your spouse and/or child, you must purchase Supplemental Life coverage for yourself. The spouse value can be purchased up to 50% of employee amount in increments of \$5,000, not to exceed \$250,000. Evidence of Insurability is required for amounts above \$50,000 and requires approval by Symetra. Age reductions apply at ages 65 and 70. Child life insurance can be purchased at a flat \$10,000 amount if less than 50% of the employee coverage amount.

* Any election change amount after new hire enrollment does require an Evidence of Insurability and must be approved by Symetra.

This summary provides only a brief description of the coverage insured by Symetra Life Insurance Company. For a complete description, including all definitions, exclusions, limitations, and reductions in coverage, as well as information on termination of benefits, please refer to the Group Insurance Certificate you will receive when you become insured.



VOLUNTARY BENEFITS

The ICUBA BlueCross BlueShield medical plans provide great coverage for you and your family's general healthcare needs. Still, everyone's needs are slightly different. That's where the Aflac Voluntary Accident, Critical Illness and Hospital Indemnity options come in! These benefits are designed to protect your family's finances in case of an unforeseen injury or illness.

Accident Insurance

The Voluntary Accident Plan is designed to help cover the expenses associated with an accidental injury such as a medical plan deductible. The Voluntary Accident plan pays direct cash benefits for emergency treatment, hospitalizations, specific injury treatments, diagnostic exams and accidental death.

Accident Benefit Highlights

Plan Features	
Emergency Room	\$175
Accident follow-up with physician	\$50 per treatment, 6 per accident
X-ray	\$50
Dislocation and fractures	Up to \$6,000
Hospital Admission	\$1,000 per confinement, once per accident within 6 months after accident
Ground ambulance / Air	\$400 / \$1,200
Concussion	\$500 per accident, once per accident within 6 months after accident
Physical Therapy	\$50 per treatment, 10 per accident
Wellness / Health Screening Benefit (Employee and Spouse Only)*	\$50

* Qualifying routine tests include one of the tests performed each year: COVID-19 screening, annual physical exam, ultrasound, colonoscopy, mammogram, Pap Smear, and more.

Critical Illness Insurance

The Voluntary Critical Illness coverage is designed to pay cash in the event you or a covered family member is diagnosed with a critical illness such as cancer, heart attack, stroke, kidney failure, benign brain tumor, loss of hearing or sight due to a severe medical condition or Alzheimer's. The Critical Illness plan helps protect your income and personal assets when out of pocket expenses increase as a result of a specified critical illness.

Critical Illness Benefit Highlights

- \$10,000 – \$30,000 benefit (based on selected plan) for employees on a guaranteed issue basis.
- The ability to collect 100% of enrolled benefit amount for different diagnosed illnesses and recurrence of the same condition.
- Pays a lump sum benefit tax free regardless of any other insurance you may have.
- Employee, spouse and children up to the age of 26 are eligible for this plan.*
- Wellness / Health \$50 Screening Benefit (Employee and Spouse only) which includes one of the qualifying routine tests performed each year including: COVID-19 screening, annual physical exam, ultrasound, colonoscopy, mammogram, Pap Smear, and more.

* Children are automatically covered at 50%.

Coverage is available for you, your spouse and or child(ren). Your coverage is portable which means you can take the policy with you if you leave the institution.



Hospital Indemnity Insurance

An unexpected or even planned stay in the hospital can be expensive as you meet your deductible and out-of-pocket obligations under the medical plan. The Hospital Indemnity plan is designed to provide financial protection by paying you a direct benefit to meet out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to you based on the type of facility and number of days of confinement.

Benefit Highlights

- Guarantee issue (no medical questions).
- No pre-existing condition limitation.
- Portability is included.

Plan Features	Low	High
Hospital Confinement / Admission	\$500 per confinement \$100 per day up to 31 days	\$1,000 per confinement \$100 per day up to 31 days
Daily Confinement	\$100 per day, to a maximum of 31 days per calendar year	
Hospital Intensive Care Unit Confinement	\$100 per day up to 10 days	



How to File a Claim with Aflac

Aflac helps pay expenses the medical plan doesn't cover. If you're sick or hurt, follow these instructions to file a claim:

1. Visit www.aflacgroupinsurance.com and click on "Customer Service" and then "File a claim."
2. Choose from accident, hospital, critical illness or wellness and follow the instructions.
3. Complete and upload your HIPAA authorization, claim details and documents, and direct deposit information.



To learn more, visit
www.aflacgroupinsurance.com.

Employees should reference ICUBA
Independent Colleges and Universities
Benefits Association.



LegalShield™



IDShield™

LEGALSHIELD & IDSHIELD

Affordable legal and identity theft protection for you and your family

LegalShield Coverage Includes:*

- Advice and consultation
- Moving traffic violations, license reinstatement
- Family law – adoption, guardianship, juvenile matters, elder care, gender rights, immigration assistance, pet protection, reproductive assistance, and more
- Home ownership issues – deeds, home sales or purchases, easements, and more
- Bankruptcy, collection letters, billing disputes, tax audit and collection, personal property protection, consumer protection
- Wills, living wills, trusts, powers of attorney, and physician's directives

IDShield Coverage Includes:*

- Identity Consultation and Advice
- Dedicated Licensed Private Investigator
- Identity, Credit and Financial Account Monitoring
- Child Monitoring (Family Plan Only)
- Full-Service Identity Restoration
- Real-Time Alerts
- 24/7 Emergency Access
- Social Media Monitoring and Online Privacy Reputation Management

ON THE GO PROTECTION!

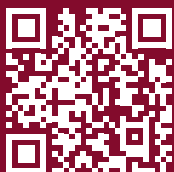
With the LegalShield and IDShield mobile apps, you have on-the-go access, 24/7!



* Exclusions and additional costs may apply. Certain services may be subject to the 25% discounted program.

Monthly Contributions

	LegalShield	IDShield	LegalShield & IDShield
Employee Plan	\$17.00	\$7.45	\$23.45
Family Plan		\$14.05	\$29.05



For more information, contact the member services line

888-807-0407 or visit

<https://shieldbenefits.com/icuba>





Nationwide®

ENROLL
ANYTIME!

PET INSURANCE

Pet-loving employees can fetch the best health coverage for their pets with My Pet Protection ChoiceSM, available only through workplace benefit programs. Nationwide offers two ready-made employee plans, plus the ability to customize a coverage plan for individual pets and their specific care needs.

Pet protection when it matters most

Nationwide's pet insurance plans cover:

- Accidents and injuries
- Common illnesses
- Serious illnesses
- Chronic illnesses
- Hereditary conditions
- Testing and diagnostics
- Procedures
- Holistic and alternative care
- And more!

Coverage includes emergency care and specialists. No networks, no pre-approval, no problem.

Easy to use, easy to understand

Using a Nationwide pet insurance plan is easy:

- Visit any vet, anywhere
- Submit a claim from any device
- Get reimbursed for eligible expenses once the deductible is met

What makes My Pet Protection different?

Every My Pet Protection ChoiceSM policy includes guaranteed issuance, plus additional benefits to support pet families:

- Emergency boarding and kenneling fees
- Lost pet due to theft or straying
- Lost pet advertising and reward
- Mortality benefit

vethelpline®

24/7 pet telehealth support

All Nationwide® pet insurance members enjoy unlimited access to VetHelpline® for round-the-clock telehealth with licensed veterinary professionals.

Nationwide
PetRxExpressSM

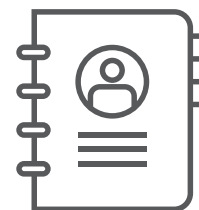
Discounted pet medications

Save time and money when filling pet prescriptions at participating pharmacies with Nationwide PetRxExpress®.



Visit: <https://benefits.petinsurance.com/icuba>
Or Call: 877-738-7874.

Did you know? Nationwide is the first provider with coverage plans for birds and exotic pets.



CONTACTS

Benefit	Carrier	Phone Number	Website/Email Address
Medical	Blue Cross Blue Shield	Customer Service: 855-258-9029 24/7 Essential Advocate: 888-521-2583	www.myhealthtoolkitfl.com Group #: 716069435
Behavioral Health	Blue Cross Blue Shield	855-258-9029	www.myhealthtoolkitfl.com
Prescription	Blue Cross Blue Shield	855-811-2218	www.myhealthtoolkitfl.com
Pharmacist Advocate	ICUBACares	877-286-3967	www.ICUBAcares.org
Telemedicine / Virtual Visits	Teladoc	800-835-2362	www.teladoc.com
Surgical Care Advocate	Lantern	855-200-2119	https://my.lanterncare.com
Hinge Health	Hinge Health	855-902-2777	http://hinge.health/icuba-oe Email: hello@hingehealth.com
Spending Accounts	Ameriflex	888-868-3539 <i>(be sure to identify yourself as an ICUBA member)</i>	www.myameriflex.com Email: service@myameriflex.com
Dental	Delta Dental	800-521-2651	www.deltadentalins.com
Vision	Eyemed	866-800-5457	www.eyemed.com Network: Insight
Employee Assistance Program	Aetna	877-398-5816, Option 1	www.resourcesforliving.com Username: ICUBA Password: 8773985816
Income Protection	Symetra	877-377-6773	www.symetra.com Contact HR first to initiate a claim
Voluntary Benefits	Aflac	800-433-3036	www.aflacgroupinsurance.com Group #: 26710
Pet Insurance	Nationwide	877-738-7874	https://benefits.petinsurance.com/icuba
Legal Protection	LegalShield & IDShield	888-807-0407	www.shieldbenefits.com/icuba

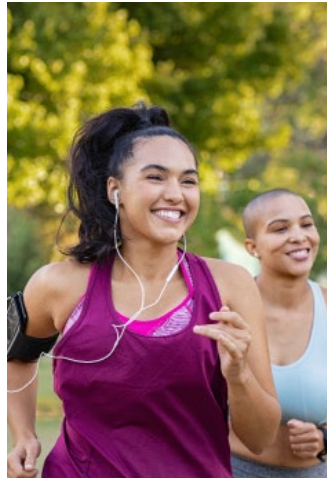
Visit <http://ICUBAbenefits.org> for a quick and easy Single Sign-On access to many of the Brand Partner websites listed above. After your initial set up, the SSO links will take you directly to each carrier with a connection.

ADDITIONAL RESOURCES

ICUBA members & their dependents have resources to help navigate every stage of their wellbeing journey. Scan the codes below to learn about specialty services designed specifically to support your individual health and wellness.



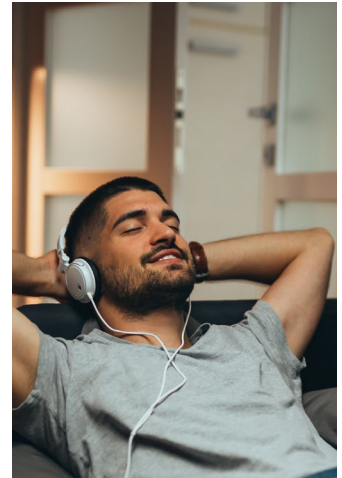
iHUB
(ICUBAbenefits.info)



**Weight
Management
Guide**



**Cancer
Journey**



**Mental
Matters Guide**



ADDITIONAL FLORIDA TECH BENEFIT OFFERINGS

Retirement Plan

All non-student full- and part-time employees are eligible to participate in Florida Tech's 403(b) Retirement Plan. Visit Florida Tech's **Employee Benefits** webpage under 403(b) Retirement Plan & Information for details.



Tuition Remission

Florida Tech provides educational opportunities for full-time faculty and staff who wish to gain knowledge to support their career goals. Tuition Remission is also available for legal dependents and spouses of Florida Tech's full-time employees. For more information, visit Florida Tech's **Employee Benefits** webpage under Tuition Remission.



Holiday Pay

Holiday pay is provided for all full and part-time employees. In 2026, there are 19 holidays celebrated by Florida Tech. Visit Florida Tech's Human Resources website for the **2026 Holiday Schedule**.



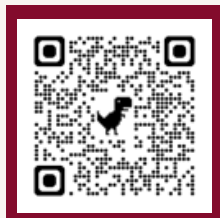
ADDITIONAL FLORIDA TECH BENEFIT OFFERINGS

Generous Paid Time Off

Florida Tech offers the following types of time-off to provide staff and faculty with the opportunity to take time away from work to rest, relax, or attend to personal affairs without loss of compensation.

Visit the **Human Resources Policy Page** on Attendance and Time-Off

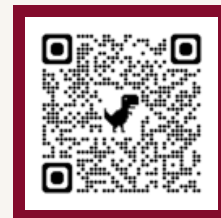
- Vacation days ranging from 10 to 20 days per year for full-time, 12-month employees
- Sick time for full, part-time employees. 12-month employees earn 12 sick days per year, and 9-month employees earn 9 sick days per year
- Paid Parental Leave for up to 4 weeks is available for qualified employees



Free Gym Membership for Full-Time Faculty and Staff

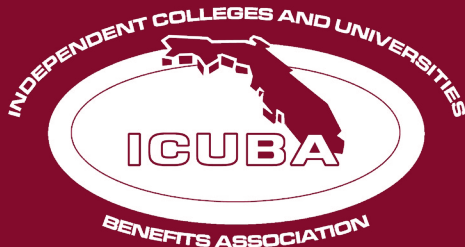
Clemente Gym offers a large fitness center, group fitness room, and a healthy café/eatery. The gym offers many options for strength training, cardio machines, and group fitness classes.

For more information, visit the **Clemente Center's website**.



To learn more about all of our benefits, visit

<http://ICUBAbenefits.org>



This summary of benefits does not create a contract between the Institute and any employee. Details of these plans can be found in official plan documents that govern the plans. In the event of a discrepancy between the plan documents and this document, the plan documents govern. While care has been taken to ensure the accuracy of this information, the plan documents and your employer policies will govern in all cases. Although it is our intention to continue the plans, we reserve the right to modify, amend or terminate the plans at any time. All rates are based on current participation and are subject to change.