



2026 BENEFIT GUIDE

POWER

MEDICAL INSURANCE

MERITAIN HEALTH

Power offers two medical plans administered by Meritain Health to help you pay for your health care services. Meritain Health uses the Aetna network, one of the largest provider networks in the country. The chart below compares the two plans. To determine if your current provider is associated with Aetna's network, click [here](#). Enter your zip code and select "Aetna Choice POS II (Open Access)." From there, you can search your current providers or find one that is in-network!

IN-NETWORK BENEFITS (Administered by Meritain Health)	COMFORT PLAN	FREEDOM PLAN*
Annual Deductible (Individual/Family)	\$500 / \$1,000	\$1,700 / \$3,400
Maximum Out-Of-Pocket (Individual/Family)	\$1,500 / \$2,500	\$2,500 / \$5,000
*If enrolled as a family, the individual deductible does not apply, and one member can satisfy the full deductible		
PREVENTITIVE CARE		
	\$0	\$0
TREATMENT OF ILLNESS/INJURY		
Primary Care	\$30 Copay	\$30 Copay, After Deductible
Specialist	\$50 Copay	\$30 Copay, After Deductible
Urgent Care	\$50 Copay	\$0 After Deductible
HOSPITAL CARE		
Emergency Room	\$200 Copay	\$0 After Deductible
Ambulance	\$0 After Deductible	\$0 After Deductible
Inpatient Hospital	\$0 After Deductible	\$0 After Deductible
Outpatient Surgery	\$0 After Deductible	\$0 After Deductible
REHABILITATIVE THERAPY		
Physical/Occupational/Speech/Chiropractic	\$20 Copay	\$20 Copay, After Deductible
Home Health Care	\$0 After Deductible	\$0 After Deductible
INFERTILITY & MATERNITY		
Infertility Treatment	\$25,000 Per Lifetime	\$25,000 Per Lifetime
Initial Prenatal Visit	\$30 Copay	\$30 Copay, After Deductible
Delivery: Professional & Facility Services	\$0 After Deductible	\$0 After Deductible
BEHAVIORAL HEALTH & SUBSTANCE USE		
Outpatient Services	\$20 Copay (Office Visit) \$0 After Deductible (All other Outpatient)	\$20 Copay, After Deductible (Office Visit) \$0 After Deductible (All other Outpatient)
Inpatient Services	\$0 After Deductible	\$0 After Deductible

*Those enrolled in the Freedom plan are eligible to participate in a Health Savings Account (HSA)

PRESCRIPTION DRUG

SMITHRX

Members enrolled in a Power medical plan have prescription drug coverage administered by SmithRx. Prescriptions are subject to the deductible and coinsurance until you reach the out-of-pocket maximum.

DRUG CLASS	COMFORT PLAN		FREEDOM PLAN	
	30 DAY SUPPLY	90 DAY SUPPLY	30 DAY SUPPLY	90 DAY SUPPLY
Preventative Drug	\$0		\$0	
Maintenance Medications	\$5 Copay	\$12.50 Copay	\$5 Copay	\$12.50 Copay
Tier 1 (Generic)	\$20 Copay	\$50 Copay	\$20 Copay, After Deductible	\$50 Copay, After Deductible
Tier 2 (Preferred Brand)	\$40 Copay	\$100 Copay	\$40 Copay, After Deductible	\$100 Copay, After Deductible
Tier 3 (Non-Preferred Brand)	\$60 Copay	\$150 Copay	\$60 Copay, After Deductible	\$150 Copay, After Deductible
Specialty Drugs	20% Copay Up to \$1,000 Maximum		20% Copay up to \$1,000 Maximum, After Deductible	

SMITHRX CONNECT

Local retail pharmacies may not always be the lowest cost option for prescription drugs. The SmithRx Connect team is dedicated to connecting you with the tools and resources you need to lower your out-of-pocket costs for medications. SmithRx Connect is a no-cost program that helps you navigate the pharmacy system and works by maximizing the monthly benefit on manufacturer coupons, allowing you to have a lower or zero dollar copay on your prescriptions.



FAMILY PLANNING

FERTILITY, ADOPTION, & SURROGACY

The road to parenthood can be challenging. Our flexible family benefits are designed to help you grow your family in a way that works for you. We offer inclusive fertility benefits for all paths to parenthood - adoption, fertility treatments, pregnancy and more.

Members enrolled in a Power Medical Plan have a \$25,000 lifetime maximum fertility benefit, including drug therapy.

For those pursuing adoption, surrogacy, or independently expanding their families, Power offers financial support of up to \$15,000.



SPECIALIZED SUPPORT

TELEMEDICINE

Members enrolled in a Power Medical Plan have access to telemedicine services with Teladoc. You can contact board-certified, licensed doctors via phone or online video, 24 hours a day! Through Teladoc, doctors can diagnose and treat many non-emergency medical conditions including but not limited to:

- Allergies
- Anxiety, Depression, and PTSD
- Bladder infection
- Bronchitis, Sore throat, Fever, Stomach Aches, Seasonal Flu
- Migraines, Headaches
- Pink eye
- Sinus problems



CASE MANAGEMENT SERVICES

When unexpected illness or injury occurs in your life, the last thing you want to think about is having to navigate your health benefits. Meritain Health offers case management, a free and confidential program supporting you and your family through a difficult experience.

Case managers are registered nurses and licensed social workers who assess your health and help you develop a suitable and affordable treatment plan.

DENTAL INSURANCE

DELTA DENTAL

Power offers two PPO dental plans through Delta Dental. Both dental plans pay for services obtained through any in-network or out-of-network providers. In order to find an in-network provider, please click [here](#), select the type of Dentist you are searching for, then choose to search by current location or zip code.

In-Network PPO Dentists	FREEDOM PLAN	COMFORT PLAN
ANNUAL MAXIMUM		
Per covered person	\$1,000	\$2,000
DEDUCTIBLE		
Waived for diagnostic/preventative services	Single \$50 Family \$150	Single \$50 Family \$150
DIAGNOSTIC & PREVENTITIVE SERVICES		
Examinations, Cleanings, X-Rays, Fluoride Treatment, Sealants	Covered at 100% of Allowable (3 Cleanings per Year)	Covered at 100% of Allowable (3 Cleanings per Year)
BASIC SERVICES		
Fillings, Simple Extractions	80% of Allowable after Deductible	80% of Allowable after Deductible
MAJOR SERVICES		
Crowns, Inlays, Onlays, Implants	50% of Allowable after Deductible	50% of Allowable after Deductible
ORTHODONTIA		
Lifetime Maximum Per Member	No Coverage	\$1,500

VISION INSURANCE

VBA

Members enrolled in a VBA Vision plan may go to any licensed vision provider and receive coverage. Just remember, your benefit dollars go further when you stay in-network!

In order to find a provider in-network, click [here](#). From there, you will enter your zip code and preferred radius. Then, a list of in-network vision providers will populate.

BENEFIT	COST	FREQUENCY
Eye Exam	\$0 Copay	Every 12 Months
Prescription Coverage		
Frames	\$200 Allowance	Every 12 Months
Lenses	Covered in Full	Every 12 Months
Lense Enhancements	Covered in Full <i>Limited to Out of Pocket Amount</i>	Every 12 Months
Contact Lenses	\$70 Retail Allowance \$200 Allowance Covered in Full	Every 12 Months

LGBTQ+ INCLUSIVE BENEFITS

ABOUT US

At Power Home Remodeling Group, LLC, we are committed to providing comprehensive benefit coverage for all. Below, you will find a highlight of our benefits and services for our LGBTQ+ Employees and their dependents.

STANDARD BENEFITS

Our Medical Plans are available to same-sex spouses and domestic partnerships:

- Medical Benefit
 - Including Gender Affirming Care for Employees and their Dependents
- Dental Benefits
- Vision Benefits



ADDITIONAL SERVICES

Our additional benefits provided to our Employees and their Dependents include:

- Family Formation
 - Surrogacy Reimbursement
 - Adoption Assistance
 - IVF/IVR
- HIV Treatment
- Gender Affirmations Benefits



OTHER BENEFITS

These Benefits are mentioned in more detail throughout the Guide:

- Employee Assistance Program (EAP) Services
- TOOTRiS Subsidized Childcare

CONTACT US!

We would love to hear your thoughts, opinions, questions, and suggestions!

We encourage you to reach out to the Benefits team by emailing benefits@powerhrg.com





SOME EXTRAS

LIFE & AD&D INSURANCE

Administered by Mutual of Omaha, Life insurance is an employer-paid benefits that provides financial protection to your loved ones in the event you were to pass suddenly. Similar to Life Insurance and administered by Mutual of Omaha, Accidental Death & Dismemberment (AD&D). Insurance provides financial support in the event you suffer an accidental injury or death. The benefit is equal to 100% of your base pay, up to a maximum of \$100,000

SHORT-TERM DISABILITY

Administered by Mutual of Omaha, Short-Term Disability is an employer-paid benefit program which provides financial support to replace lost income while you take time off work to recover from an injury or illness.

There is a 14-calendar day elimination period which begins on the date of disability. Employees will receive payment from Mutual of Omaha for 60% of weekly base pay up to a maximum of \$1,000 per week, for up to 11 weeks.

ACCIDENT INSURANCE

A supplemental accident insurance plan administered through Mutual of Omaha helps protect your finances if an accident were to occur on or off the job causing you or your covered dependent unexpected injury. Even if your health insurance covers the medical costs, accident insurance may help fill the gap for additional expenses while you recover from your injuries.

LEGAL INSURANCE

U.S. Legal Services offers legal benefits that provides a safe-guard for unexpected legal events. There are 3 comprehensive legal benefit plan options available to all Power employees.

- Family Defender Plan: Real Estate Transactions, Elder Law, Divorce, Child Support & Custody, Traffic Violations, Estate Planning
- Identity Defender Plan: Change of address monitoring, Credit & Debit Monitoring, Fraud-Alert Reminders, Smart SSN Tracking
- Combination Plan: Includes Both of the above plans for a reduced rate!

EVEN MORE PERKS

EMPOWER 401(K)

Power’s 401(k) Savings Plan through **Empower** is here to assist you in meeting your long-term financial goals. This plan allows you to use pre-tax and/or post-tax dollars from your paycheck to save for your retirement. Employees are eligible to participate in the retirement plan after 90 days of service.

After one year of service, Power will match contributions for employees age 21 and older based on the contribution amounts below:

If the employee contributes:	Power will match:
1% of Employee Salary	1% of Employee Salary
2% of Employee Salary	2% of Employee Salary
3% of Employee Salary	3% of Employee Salary
4% of Employee Salary	3.5% of Employee Salary
5% of Employee Salary	4% of Employee Salary
>5% of Employee Salary	4% of Employee Salary

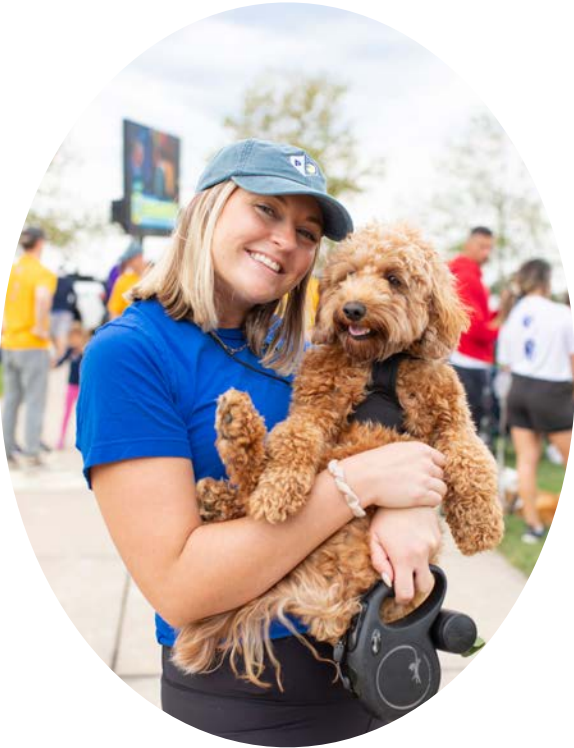
EMPLOYEE ASSISTANCE PROGRAM

ComPsych provides employees and their household members with a wealth of confidential, professional services to help with challenges to strengthen both your home life and professional career. ComPsych offers a wide array of counseling and life coaching services to support you and your dependents through the full spectrum of life events – including managing feelings of overwhelm, depression, anxiety, grief, experiencing substance misuse for yourself or a loved one, or for those seeking assistance with child or elder care concerns, legal or financial issues.

PET INSURANCE

Vet bills and medical treatments can be unpredictable and pricey. To avoid racking up major expenses, many pet parents choose to purchase pet insurance. Administered by **Figo**, pet insurance ensures your dog or cat will be covered in the event of an accident, emergency, or surprise illness.

- Pet insurance covers:
- Common Illnesses
 - Accidents and emergencies
 - Wellness and preventive care
 - Chronic conditions
 - Hereditary and congenital disorders
 - Cancer



WORKING PARENTS

PAID PARENTAL LEAVE

Power excitedly welcomes all new additions to your family and wants to provide work/life balance and financial support during the initial bonding time with new children.

AFTER 6 MONTHS OF EMPLOYMENT:

All parents are eligible for three weeks of 100% paid parental leave for babies born after they reach 6 months of tenure.

AFTER 12 MONTHS OF EMPLOYMENT:

For any babies born/adopted after 12 months of tenure:

- > *Adoptive parents* are eligible for an additional three weeks of parental leave, for a total of six weeks of 100% paid parental leave.
- > *Child-bearing parents* are eligible for an additional nine weeks of parental leave, for a total of twelve weeks of 100% paid parental leave.

Paid Parental Leave allows employees to take time off in multiple segments; leave segments must be taken in full work weeks. Eligible parents must use their Paid Parental Leave within twelve months from the date of birth or placement of the child.

CHILD CARE ASSISTANCE

TOOTRiS provides an easy way for you to access high-quality child care programs for infant, toddler, and school-aged children up to the age of 12.

The TOOTRiS platform allows you to search, vet, connect and enroll in programs in your area that fit your family's needs.

Power will subsidize up to 40% of eligible expenses up to \$416 monthly, not to exceed \$5,000 annually per eligible household, to help support working parents.



BENEFIT RATES

VALID JANUARY 1, 2026 - DECEMBER 31, 2026

The benefit premiums listed below are deducted via bi-weekly payroll.

	Employee Only	Employee + Children	Employee + Spouse	Employee + Family
MEDICAL				
Freedom	\$35.00	\$120.00	\$198.99	\$264.00
Comfort	\$71.50	\$207.00	\$308.50	\$380.00
DENTAL				
Freedom	\$8.00	\$23.00	\$17.00	\$32.00
Comfort	\$10.50	\$29.50	\$21.50	\$40.50
VISION				
VBA	\$1.95	\$3.80	\$3.70	\$5.07
ACCIDENT				
Base Only	\$2.74	\$3.02	\$4.49	\$4.47
Base + Enhanced	\$4.79	\$6.35	\$7.56	\$9.11

