



Employee **BENEFITS** GUIDE

2026 PLAN YEAR

2026 OPEN ENROLLMENT

Dear CMHA Employees:

Welcome to 2026 Open Enrollment! We have some exciting announcements for this Open Enrollment period.

- Open Enrollment will be held from November 24th through December 5th. All changes will go into effect January 1, 2026.
- No changes to your medical or pharmacy plans in 2026.
- Premium contributions for the PPO and CleCare plans will see a slight increase.
- MetLife will continue to be the dental carrier for the 2026 benefit year. The vision carrier will continue to be NVA.
- CMHA will continue to offer Life Insurance and Accidental Death and Dismemberment for full-time employees of \$30,000. Life insurance will continue to be administrated by MedMutual Life for 2026.

Sincerely,

HR Benefits

ID Cards:

New medical ID Cards will only be sent to new members.

Please note, if you are enrolling in the MMO PPO plan you'll receive two ID cards: one for medical and one for the pharmacy.

If you need to access services prior to receiving your ID card, please contact HR Benefits at 216-348-5030 for a temporary ID Card.



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DISCLAIMER:

The information in this benefit guide is presented for illustrative purposes only. The benefit guide is intended to provide a summary of the benefits available, and describe eligibility requirements and enrollment procedures. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While the benefit guide is a tool to answer most of your questions, it is not intended to be a complete description of the terms and conditions of the insurance benefit plans offered by CMHA. In the event of any discrepancy between the benefit guide and the actual plan documents, the actual plan documents will prevail. CMHA reserves the right to modify, amend, suspend, or terminate any plan at any time, and for any reason without prior notification.

BENEFITS ELIGIBILITY

CMHA provides quality, affordable and competitive benefits to eligible employees. Great care has been taken to select plan providers to ensure you receive quality benefits at a competitive rate.

CMHA employees who are eligible may enroll in benefits described in this guide. The following family members are eligible as your dependents for medical, dental and vision coverage: Spouse, children, or other qualified dependents.

Children are covered until the end of the month in which they turn 26 except in the case of physical or intellectual disability. Additional forms are required. See the Forms & Documents Library for the applicable form.

Dependent children who reach age 26 that are no longer eligible for health benefits through our plan may continue lost coverage through COBRA. Please look for an election notice from Discovery Benefits. NOTE: It will be mailed to your dependent.

More information is available on the Employee Self-Service (ESS) portal, www.paycom.com, in the Forms & Documents Library. It is your responsibility to notify Human Resources/Benefits when your spouse or other dependents are no longer eligible for benefits.

CHANGE IN STATUS

Changes to benefit elections can only be made during Open Enrollment unless you have a qualifying event.

Throughout the plan year, if you have a qualifying event, you may make changes to your benefit elections. Qualifying events include: marriage; divorce; legal separation; birth or adoption of a child; death of spouse, or other covered dependent, commencement or termination of adoption proceedings; change in spouse's benefits or employment status; a covered dependent becoming eligible for Medicare, Medicaid; an adult dependent child becoming eligible for his or her own employer's benefits; or your own loss of other coverage.

If you wish to make a benefits change due to one of these qualifying events during the balance of the plan year, you must notify Human Resources/Employee Benefits, complete a Life Event change online via the Employee Self Service (ESS) and submit supporting documentation within 30 days of your change in status date. Please refer to the Forms & Documents Library in the ESS for the required documentation to be submitted to Benefits.

HOW TO GET SUPPORT

Should you have questions or a technical issue with registration, please do not hesitate to contact HR/Benefits at 216-348-5030.

| Location | HR Representative | Email | Phone |
|----------|--------------------|--|--------------|
| Campus | Lonnie Singer | singerl@cmha.net | 216-271-2858 |
| Campus | Hillary Workman | workmanh@cmha.net | 216-271-2793 |
| Campus | Annette Abranovich | abranovicha@cmha.net | 216-271-2727 |

MEDICAL



Coverage period: 01/01/2026-12/31/2026

| Services | PPO | | CleCare HMO | |
|--|--|--|---|--|
| | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Primary Care Physician Office Visit | \$25 copay, then 100% | 40% coinsurance 60% after deductible | \$25 copay, then 100% | Not Covered |
| Specialist Office Visit | \$50 copay, then 100% | 40% coinsurance 60% after deductible | \$50 copay, then 100% | Not Covered |
| Independent Lab / X-Ray | 100% (at Physician) | 40% coinsurance 60% after deductible | 100% | Not Covered |
| Deductible (Individual/Family) | \$1,000 / \$2,000 | \$2,000 / \$4,000 | \$1,000 / \$2,000 | N/A |
| Inpatient Hospitalization | 20% coinsurance 80% after deductible | 40% coinsurance 60% after deductible | 20% coinsurance | Not Covered |
| Outpatient Services | 20% coinsurance 80% after deductible | 40% coinsurance 60% after deductible | 20% coinsurance | Not Covered |
| Preventative Care | 100% | 40% coinsurance 60% after deductible | 100% | Not Covered |
| Emergency ER Use | \$250 copay, then 100% (copay is waived if admitted) | \$250 copay, then 100% (copay is waived if admitted) | \$250 copay, then 100% (copay is waived if admitted) | \$250 copay, then 100% (copay is waived if admitted) |
| Urgent Care | \$60 copay, then 100% | 40% coinsurance 60% after deductible | \$60 copay, then 100% <i>MetroExpress Locations Only</i> | Not Covered |
| Co-Insurance (Individual/Family) | \$3,500 / \$7,000 | \$7,000 / \$14,000 | \$2,500 / \$5,000 | N/A |
| Out of Pocket Max (Individual/Family) <i>Includes deductibles, copays & coinsurance</i> | \$6,600 / \$13,200 | Unlimited | \$6,600 / \$13,200 | N/A |
| Prescription Drugs Retail (30 Days) | | | | |
| | Administered by CVS | | MetroHealth Pharmacies | MMO Pharmacies |
| Generic | \$8 | N/A | \$8* | \$16** |
| Preferred | \$30 | | \$30* | \$60** |
| Non-Preferred | \$50 | | \$50* | \$100** |
| Specialty | 50% up to \$150 Maximum | | 50% up to \$150 Maximum* | N/A |
| Mail Order (90 Days) | | | | |
| Generic | \$16 | N/A | \$16* | N/A |
| Preferred | \$60 | | \$60* | |
| Non-Preferred | \$100 | | \$100* | |

Under the PPO plan, you are required to fill 90 day supplies of maintenance medications at mail order or through a CVS retail pharmacy.

| Monthly Employee Contributions | PPO | CleCare HMO |
|--------------------------------|----------|-------------|
| Employee | \$96.73 | \$72.55 |
| Family | \$310.03 | \$232.52 |

*MetroHealth Pharmacy Only
** All Other Pharmacies

PRESCRIPTION

PPO PLAN ONLY



Medications When You Need Them

CVS Caremark is the prescription plan carrier for the PPO plan. Your prescription drug program allows you to obtain medications via mail or your in-network, local retail pharmacy. If you take certain medications on an ongoing basis, you must have those drugs filled for a 90-day supply through the CVS Caremark Mail Service or a CVS Pharmacy. Be sure to ask your doctor for a 90-day supply of your maintenance drugs.

If you are on the PPO Medical Plan, your prescription drug benefits are separate from your medical benefits. You have a separate CVS Caremark ID card that should be used at the pharmacy when filling prescriptions.

| Benefit | Retail (30 Day Supply) | Mail Order (90 Day Supply) |
|-----------------|-------------------------|----------------------------|
| Generic | \$8 copay | \$16 copay |
| Preferred Brand | \$30 copay | \$60 copay |
| Non-Preferred | \$50 copay | \$100 copay |
| Specialty | 50% up to \$150 Maximum | N/A |

Mail Order

It is easy to enroll in the Mail Order prescription program. Employees must complete the Mail Order Form and submit it with a 90-day prescription from their physician. Mail order forms are available on cmhabenefits.com. When filling a maintenance drug, you'll pay 2 months of a copays but receive 3 months' worth of medication.

CLECARE PLAN

The pharmacy plan for CleCare participants is administered by Medical Mutual of Ohio. The copays below reflect the price of a medication if filled at a MetroHealth Pharmacy only.

| Benefit | Retail (30 Day Supply) | Mail Order (90 Day Supply) |
|-----------------|-------------------------|----------------------------|
| Generic | \$8 copay | \$16 copay |
| Preferred Brand | \$30 copay | \$60 copay |
| Non-Preferred | \$50 copay | \$100 copay |
| Specialty | 50% up to \$150 Maximum | N/A |



MARATHON HEALTH

MARATHON HEALTH (FORMERLY EVERSIDE HEALTH)

Marathon Health offers **NO-COST** primary care services and medications. Providers are dedicated to your healthcare virtually or in-person at a convenient location near your home or work. Marathon Health provides easy-to-schedule appointments with significantly shorter wait times, more time face-to-face with your provider and 24/7 after hours phone access for urgent needs.

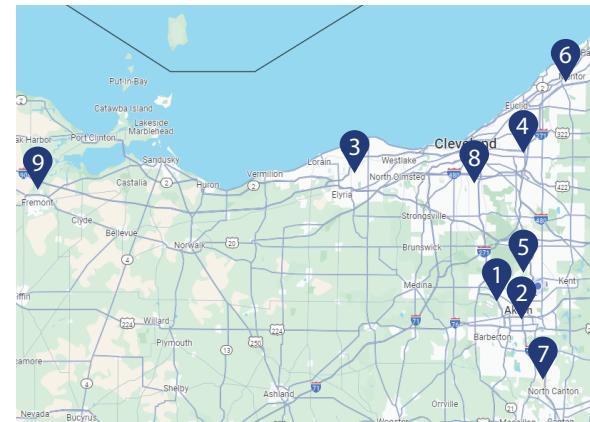
MARATHON HEALTH SERVICES

- Complete Primary Care
- Urgent Care
- Chronic Condition Management
- Well-child exams
- Annual Physicals
- Low-cost on-site Lab services
- Low-cost Medications
- Mobile App

Marathon Health covers up to 90% of your comprehensive primary care needs with no out-of-pocket costs. CMHA employees and their dependents can access Marathon Health at one of the 9 convenient Ohio locations.

Marathon Health Locations:

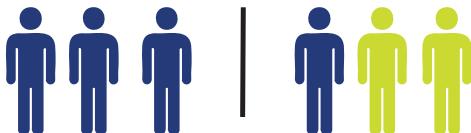
1. Akron White Pond Drive
2. Avon Sheffield Detroit Ave.
3. Mentor Great Lakes Plaza
4. Seven Hills Lombardo Center
5. North Canton Lauby Rd.
6. Beachwood Science Park Drive
7. Akron S. Main
8. Cuyahoga Falls
9. Fremont



What's Different About Marathon Health?

Marathon Health doctors see 70% fewer patients compared to a typical primary care doctors.

Traditional Primary Care
Health



Schedule your appointment today
at **866-808-6005**

DENTAL



MetLife

Coverage period: 01/01/2026-12/31/2026



| Services | Base Plan | |
|---|-----------------|------------------------------|
| | In-Network | Non-Network |
| Diagnostic and Preventative Services – exams, cleanings, fluoride, and space maintainers | 100% | 100% |
| Emergency Palliative Treatment – to temporarily relieve pain | 100% | 100% |
| Sealants – to prevent decay of permanent teeth | 100% | 100% |
| Brush Biopsy – to detect oral cancer | 100% | 100% |
| Radiographs – X-rays | 100% | 100% |
| Minor Restorative Services – fillings and crown repair | 80% | 80% |
| Endodontic Services – root canals | 80% | 80% |
| Periodontic Services – to treat gum disease | 80% | 80% |
| Oral Surgery Services – extractions and dental surgery | 80% | 80% |
| Major Restorative Services – crowns | 80% | 80% |
| Other Basic Services – misc. services | 80% | 80% |
| Relines and Repairs – to bridges, implants, and dentures | 80% | 80% |
| TMD Treatment treatment of the disorder of the temporomandibular joint | 80% | 80% |
| Prosthodontic Services – bridges, implants, and dentures | 80% | 80% |
| Orthodontic Services – braces | 60% | 60% |
| Orthodontic Age Limit | No Age Limit | |
| Orthodontic Lifetime Benefit Maximum (per eligible person) | \$1,500 | \$1,500 |
| Plan Year Max | \$2,500 | \$2,500 |
| Base | MetLife Dentist | Non-Network Dentist |
| Non-Network Usual and Customary (UCR): | N/A | Maximum Allowable Cost (MAC) |

| Monthly Employee Contributions | Base Plan |
|--------------------------------|-----------|
| Employee | \$0 |
| Family | \$0 |

DENTAL



Coverage period: 01/01/2026-12/31/2026

| Services | Buy Up Plan | |
|---|-----------------|---------------------|
| | In-Network | Non-Network |
| Diagnostic and Preventative Services – exams, cleanings, fluoride, and space maintainers | 100% | 100% |
| Emergency Palliative Treatment – to temporarily relieve pain | 100% | 100% |
| Sealants – to prevent decay of permanent teeth | 100% | 100% |
| Brush Biopsy – to detect oral cancer | 100% | 100% |
| Radiographs – X-rays | 100% | 100% |
| Minor Restorative Services – fillings and crown repair | 80% | 80% |
| Endodontic Services – root canals | 80% | 80% |
| Periodontic Services – to treat gum disease | 80% | 80% |
| Oral Surgery Services – extractions and dental surgery | 80% | 80% |
| Major Restorative Services – crowns | 80% | 80% |
| Other Basic Services – misc. services | 80% | 80% |
| Relines and Repairs – to bridges, implants, and dentures | 80% | 80% |
| TMD Treatment treatment of the disorder of the temporomandibular joint | 80% | 80% |
| Prosthodontic Services – bridges, implants, and dentures | 80% | 80% |
| Orthodontic Services – braces | 60% | 60% |
| Orthodontic Age Limit | No Age Limit | |
| Orthodontic Lifetime Benefit Maximum (per eligible person) | \$1,500 | \$1,500 |
| Plan Year Max | \$2,500 | \$2,500 |
| Buy-Up | MetLife Dentist | Non-Network Dentist |
| Non-Network Usual and Customary (UCR): | N/A | 80th percentile |

| Monthly Employee Contributions | Buy Up Plan |
|--------------------------------|-------------|
| Employee | \$10.34 |
| Family | \$27.29 |

VISION



Coverage period: 01/01/2026-12/31/2026

National Vision Administrators, L.L.C.

| Services | In-Network | Out-of-Network |
|---|---|--|
| Examination Once Every Plan Year | Covered 100% | (Reimbursement Amounts) Up to \$35 |
| Lenses Once Every Plan Year | Standard Glass or Plastic Covered 100% | Single Vision Up to \$25 Bi-focal Up to \$45 Tri-focal Up to \$75 Lenticular Up to \$75 |
| Frame Once Every Plan Year | Covered up to \$85 Retail Allowance ³ (20% discount off remaining balance over \$85 allowance) ⁴ | Up to \$45 |
| Contact Lenses Once Every Plan Year | (In lieu of Lenses/Frames) | (In lieu of Lenses/Frames) |
| Elective | Covered up to \$60 Retail Allowance ⁵ (15% discount (Conventional) or 10% discount (Disposable) off remaining balance over \$60) ⁶ | Up to \$45 |
| Fit & Follow-Up¹ | | |
| Standard Daily Wear | Covered 100% | Daily Wear: \$20 |
| Standard Extended Wear | Covered 100% | Extended Wear: \$30 |
| Specialty Wear | Covered 100% after \$10 Copay | Specialty: \$50 |
| Medically Necessary² | Covered 100% | \$120 |

1. Covered only if member chooses Contact Lenses.

2. Prior Authorization required from NVA. Includes fitting & follow-up.

3. Includes frames up to \$32 Every Day Low Price-price point at Walmart/Sam's Club locations (if included in network).

4. Discount does not apply at Walmart/Sam's Club locations or for certain proprietary frame brands or where prohibited by law.

5. \$42 Every Day Low Price-price point for contact lenses at Walmart/Sam's Club locations (if included in the network).

6. Discount does not apply at Walmart/Sam's Club locations, Cole corporate locations (if applicable) or Contact Fill. Prohibited by some manufacturers or where prohibited by law.

NOTE: If covered participants choose extra options, they are responsible for the additional cost of the options paid directly to the ECP



LIFE & AD&D

MedMutual Life is the carrier for the Life Insurance and Accidental Death and Dismemberment (AD&D) plan.

Basic Life Insurance

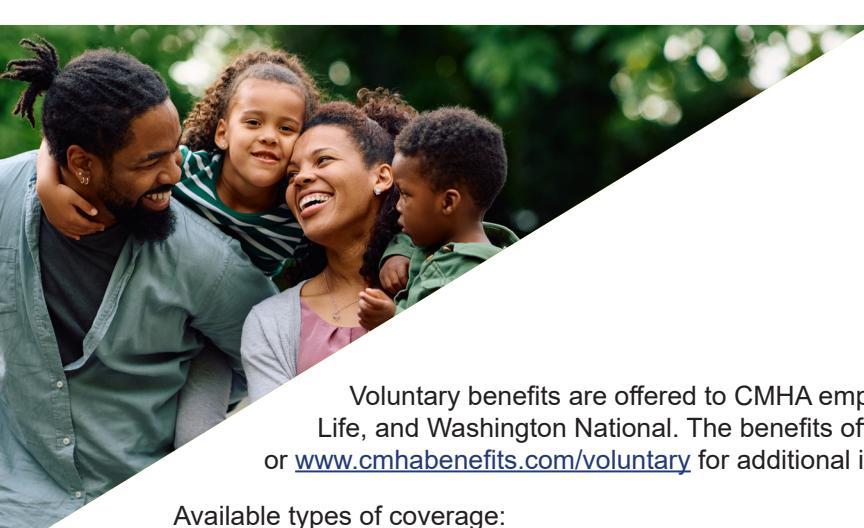
CMHA provides all permanent, full-time, active employees with \$30,000 of Basic Life and Accidental Death & Dismemberment (AD&D) at no cost to the employee.

Optional Life Insurance

You may enroll in Optional Life Insurance through MedMutual Life in \$10,000 increments not to exceed \$300,000.

Contact Information

- Website: medmutuallife.com
- Customer Service Phone Number: 866-925-2542
- Please refer to the Summary Tabs and Registration Flyer found on the CMHA website: www.cmhabenefits.com/life



VOLUNTARY

Voluntary benefits are offered to CMHA employees through Aflac, Colonial Life Insurance, New York Life, and Washington National. The benefits offered by each carrier differ; please see plan documents or www.cmhabenefits.com/voluntary for additional information.

Available types of coverage:

- Accident
- Cancer
- Short-Term Disability
- Critical Illness
- Hospital Indemnity
- Term Life
- Whole Life
- Adult Universal Life
- Heart and Stroke Protection

Employees may enroll in Voluntary benefits at any time on a after tax basis.

During the Voluntary open enrollment, in May of each year, employees will have the opportunity to change their payroll deductions to pre-tax.

OSWALD FINANCIAL MONEY COACH SERVICES

Achieving Financial Freedom

We focus on retirement readiness, and we tailor our strategy to meet the needs of individual employees. Our money coaches sit down with each participant one-on-one to get the full picture of each employee's situation and goals, so we can guide them through every stage of life's journey.

We deliver education that makes a difference, and in a way that is convenient for them. We offer in-person seminars, pre-recorded and live webinars, as well as engaging, animated videos and guides. Our goal is to alleviate the pressure and intimidation of money management by making the process easy.

Our Services

Our team offers a range of planning resources and services to help employees reach their goals:

- Comprehensive portfolio management
- Ongoing investment monitoring
- Periodic reviews
- Financial planning
- Wealth management
- Income distribution
- Retirement planning
- Investment strategies
- Coordination with other professionals
- Insurance solutions
- Estate planning
- Cash-flow & tax planning

Using our strict 12-point scoring methodology, we consistently monitor the portfolios we manage.

We can create a comprehensive side-by-side analysis of the current portfolio versus our other managed portfolios. This analysis takes into account asset-weighted returns for year-to-date, and over one, five, and ten-year periods. We detail risk metrics and the upsides and downsides of the portfolio.

| Large Value | | | | | | | | | | | | |
|--------------------------------------|----------------|-------------------------|-----------------------|-----------------------|------------------------|-------------------|-----------------------|---------------------|------------------------|-----------------|------------------|----------------------|
| Fund Name | YTD Return (%) | 1 year Total Return (%) | 3 year annualized (%) | 5 year annualized (%) | 10 year annualized (%) | 12 month % change | 12 month % volatility | 12 month % drawdown | 12 month % correlation | 12 month % beta | 12 month % alpha | 12 month % R-squared |
| ABC Fund | 12.02 | 10.26 | 11.71 | 8.09 | 8.85 | 1.27 | 10.44 | -1.06 | 0.95 | 0.70 | 0.75 | 0.71 |
| XYZ Fund | 4.12 | 10.40 | -10.11 | -1.26 | 8.73 | - | 10.24 | -10.09 | - | -0.08 | 0.04 | 0.45 |
| Adviser Selected Fund | 5.10 | 10.49 | -10.04 | -1.00 | 8.76 | -0.01 | 10.31 | -10.26 | 0.00 | -0.01 | 0.00 | 0.43 |
| Peer-Group Median (200th Percentile) | 5.08 | 10.61 | -10.70 | -1.38 | 8.28 | 0.17 | 10.27 | -10.00 | 0.00 | 0.00 | 0.00 | - |
| Russell 1000 Value TR USD | - | 10.60 | -10.27 | -12.58 | 8.00 | 1.67 | 10.02 | -10.75 | -0.00 | 0.00 | 0.00 | - |
| Large Blend | | | | | | | | | | | | |
| Fund Name | YTD Return (%) | 1 year Total Return (%) | 3 year annualized (%) | 5 year annualized (%) | 10 year annualized (%) | 12 month % change | 12 month % volatility | 12 month % drawdown | 12 month % correlation | 12 month % beta | 12 month % alpha | 12 month % R-squared |
| ABC Fund | 1.04 | 10.46 | -0.06 | 5.05 | 5.95 | -0.01 | 10.36 | 0.01 | 0.95 | 0.70 | 0.75 | 0.71 |
| XYZ Fund | 0.00 | 10.40 | -10.11 | 8.40 | 8.00 | 0.26 | 10.26 | -10.09 | 0.01 | 0.01 | 0.00 | - |
| Peer-Group Median (200th Percentile) | 0.00 | 10.47 | -10.17 | 8.40 | 8.00 | 0.26 | 10.26 | -10.09 | 0.01 | 0.01 | 0.00 | - |
| SPDR S&P 500 TR USD | - | 10.60 | -10.27 | -12.58 | 8.00 | 1.67 | 10.02 | -10.75 | 0.00 | 0.00 | 0.00 | - |
| Large Growth | | | | | | | | | | | | |
| Fund Name | YTD Return (%) | 1 year Total Return (%) | 3 year annualized (%) | 5 year annualized (%) | 10 year annualized (%) | 12 month % change | 12 month % volatility | 12 month % drawdown | 12 month % correlation | 12 month % beta | 12 month % alpha | 12 month % R-squared |
| ABC Fund | 0.08 | 10.25 | 0.00 | 11.36 | 11.12 | 0.00 | 10.34 | 0.00 | 0.95 | 0.70 | 0.75 | 0.71 |
| XYZ Fund | 4.14 | 10.29 | 0.00 | 10.07 | 10.41 | -0.01 | 10.31 | 0.00 | 0.95 | 0.70 | 0.75 | 0.71 |
| Adviser Selected Fund | 5.10 | 10.49 | -10.04 | -1.00 | 8.76 | 0.17 | 10.24 | -10.09 | 0.00 | 0.00 | 0.00 | - |
| Peer-Group Median (200th Percentile) | 0.00 | 10.17 | -0.01 | 9.43 | 9.19 | 0.24 | 10.12 | 0.00 | 0.95 | 0.70 | 0.75 | - |
| Russell 1000 Growth TR USD | - | 10.60 | -10.27 | -12.58 | 8.00 | 1.67 | 10.02 | -10.75 | 0.00 | 0.00 | 0.00 | - |

Communication is Key

- info@oswaldfinancial.com
- 833.224.5660

We meet regularly with individuals to review their plans, and we provide ongoing education opportunities and an informative client communications that includes timely tips to manage their portfolio. Have a question or concern? Contact our participant hotline any time.

Contact Us

Let our money coaches help your employees make the right plays to live life the way they want. We'll give them the financial confidence to say; "Put me in, Coach!" OswaldFinancial.com/MoneyCoach



DEFERRED COMPENSATION

Deferred compensation refers to a tax-deferred supplemental retirement strategy an employee pays into while working and collects after retirement. The purpose of deferred compensation is to provide employees with a convenient way to save on a regular and long-term basis, thereby providing for their retirement. For employees who are members of a pension plan, deferred compensation offers savings to supplement their pension.

Under a deferred compensation plan, a flat dollar amount or percentage, that you determine, is deducted from your paycheck on a pre-tax basis. The amount of income that can be tax deferred is subject to IRS limitations.

Both federal and state income taxes are deferred on your deposits and interest/accumulation until you withdraw funds from your retirement account. Once distribution begins, the distributed monies are fully taxable as ordinary income for federal and state tax purposes. However, at retirement, most people will not have as much taxable income, so the tax rate is often less than the tax rate while the employee is working.

Employees of CMHA may enroll into the Deferred Compensation Plan at anytime. To enroll in Deferred Compensation today, call 877-644-6457 or visit Ohio457.org.



FLEXIBLE SPENDING ACCOUNT

A Flexible Savings Account (FSA) allows you to save for qualifying medical, dental, vision and dependent care expenses on a tax free basis. When you elect this benefit, the money you designate to your FSA account is deducted on a pre-tax benefit, thus reducing your taxable income. Once you enroll, you will receive a debit card to pay for eligible expenses incurred during the plan year.

If you do not have Medical Mutual health insurance:

- Go to MedMutual.com/myspendingaccounts
- Click Register and complete the registration process
- Log into your account

Access your FSA, along with educational information, forms and savings estimators

For additional information, you can visit www.medmutual.com and log in to the My Health Plan account and under Claims & Balances choose "My Spending Accounts" and you will be directed to the FSA portal. Or you can call 800-525-9252.

HEALTHY LIVING WELLNESS PROGRAM

Program Purpose

The purpose of the CMHA Healthy Living Wellness Program is to encourage and empower employees in making healthier lifestyle changes to live healthier, happier and more productive lives.



Program Objective

The Healthy Living Wellness Program is committed to creating and supporting a culture of wellness that encourages employees to change unhealthy behaviors. Employees that participate in the wellness program will have the opportunity to earn points and incentives for getting healthy and achieving results.

Program Participation

All regular fulltime employees can participate in the Healthy Living Wellness Program. Participation is completely voluntary and employees that participate in the program are required to submit a participation agreement to be enrolled in the program period of January 1, 2026 through December 31, 2026.

Program Measurement Period

Program participation and measurement period will begin January 1st through December 31st. Employees that enroll in the program can begin tracking their activities to earn points effective January 1, 2026.

EMPLOYEE ASSISTANCE PROGRAM

We're here to help

Your employer provides you and your family with an Employee Support Program that can help you live the life you want. Anytime, any day, you have free, confidential access to professional consultants and online resources to assist you with these and other topics:



- Dealing with financial issues
- Anger and aggression
- Handling daily life stressors
- Helping with an elderly parent
- Relaxation techniques
- Understanding and managing depression
- Healthy eating and nutrition
- Wellness goal-setting
- Coping with health and medical challenges
- Child being bullied at school
- Suicidal thoughts
- Grief counseling
- Stress
- Anxiety
- Improving family relationships
- Coping with crisis
- Mental health assessment
- Substance use assessment, treatment
- Parenting skills
- Conflict management tools
- Handling difficult people and situations
- Improving communication

Ask your HR or Benefits Manager about additional programs available to you and your family.

The Family and Medical Leave Act (FMLA) is a federal law that guarantees certain employees up to 12 work weeks of unpaid leave without the fear of losing your job.

Only eligible employees are entitled to take FMLA leave. An eligible employee is one who:

- Works for a covered employer;
- Has worked for the employer for at least 12 months; and
- Has at least 1,250 hours of service for the employer during the 12 month period immediately preceding the leave.

FMLASource provides employees with quick access to experts who will answer questions, review guidelines and provide information regarding a job protected medical or family leave of absence. Please contact FMLASource at 877-462-3652 or fmlasource.com for information and forms required for your leave.



FREQUENTLY ASKED QUESTIONS



Question: Can I Access Paycom From Home?

Answer: You can access it from anywhere that Internet service is available

Question: Can I Access Paycom From My Mobile Phone?

Answer: Yes, access the Internet service on your mobile phone and enter the link <https://www.paycomonline.net/v4/ee/web.php/app/login>.

Question: What Happens If I Forget My Paycom User Name? How Can It Be Reset?

Answer: Usernames are not reset. If you have forgotten your user name, select the Forgot Your Username option on the login page.

Question: What Happens If I Forget My Paycom Password? Who Can Reset It For Me And How Long Will It Take?

Answer: If you have forgotten your password, select the Forgot Your Password option on the login page.

Question: What Happens If I Lock Myself Out Of the System?

Answer: Contact HR Benefits at 216-348-5030.

Question: Is the Online System Secure?

Answer: Yes, the online HWSE benefits administration system is secure. CMHA is committed to ensuring your personal information remains confidential. We have taken steps to safeguard the integrity of our communications and computing infrastructure, including but not limited to: User ID and password authentication, monitoring, auditing, and encryption.

Question: If I Use The Online System, How Will I Know That You Received My Changes?

Answer: You will receive a confirmation number after completing your Online enrollment entries. Read the Summarypage beneath the Confirmation Number to be sure your Benefit Election choices and dependents' names are shown nextto each plan in which you intended to enroll them. If so, you have successfully completed your enrollment. If the word "waived" appears next to the benefits you elected, or if family members' names are not shown, your enrollment is not complete. Go back and read the instructions in this guide and take any steps you might have missed. If problems persist, contact the HR for assistance.

Question: Why Do I Receive An Email From HR-Benefits When I Have Not Made Any Changes?

Answer: Every employee with an email registered in HWSE will receive an automated email to notify you when an enrollment event begins and when the enrollment event closes, even if you have made no changes.

Question: What If I have Questions About How A Plan Works Or What Is Covered?

Answer: If you have any questions about how a plan works or what is covered, please refer to the Benefit Forms & Links section within the Paycom Platform. You may also contact the Department of Human Resources Benefits Helpline at 216-348-5030.

Question: Do I Need To Send Documentation To Enroll Or Remove Dependents?

Answer: Yes. You must always send the required documentation to the HR Department. Coverage is pended until the documentation is received.

Question: How Do I Submit The Documentation Required?

Answer: Hand-deliver documentation to the HR Department at 8120 Kinsman Road, Cleveland, Ohio 44104.

Question: How Do I Find Out If My Doctor Is In The Medical Mutual PPO Or CleCare Network?

Answer: There are two options to submit your documentation to the HR Department:

- Hand-deliver the documentation to the HR Department at 8120 Kinsman Road, Cleveland, OH 44104
- Upload the documentation into Paycom

Question: What If I Need Further Assistance With Resetting Any Of My Passwords?

Answer: Please contact HR Benefits at, 216-348-5030.

Question: How Do I Log Into Paycom To Access HWSE Online Benefits Administration System?

Answer: Once registered, you access Paycom using this link: <https://www.paycomonline.net/v4/ee/web.php/app/login>.

Question: Whom Do I Contact If I Have Issues With Paycom?

Answer: Please contact HR Benefits at 216-348-5030.

Question: What Do I Do If I Can't Find My Medical Insurance Card?

Answer: Call Medical Mutual at 877-328-6664 to request a new card.

CONTACT RESOURCES

| MEDICAL | Additional Information |
|--|--|
| Medical Mutual's Member Site: Overview of benefits, Claims information, "Find a provider", "Estimate your services" tool, Wellness program | MedMutual.com/member You will need the identification number (found on your ID card). |
| Customer Service | https://www.medmutual.com/ 1-800-382-5729 |
| PRESCRIPTION DRUG (PPO Plan Only) | Additional Information |
| CVS Customer Service | www.caremark.com 800.776.1355 |
| DENTAL | Additional Information |
| MetLife | 1-800-942-0854 www.metlife.com/dental |
| MARATHON HEALTH | Additional Information |
| Member Services | my.marathon.health 1-866-808-6005 |
| VISION | Additional Information |
| NVA's Member Service Department | 1-800-672-7723 Available 24/7 |
| Participating Dentist | www.e-nva.com |
| Contact Fill | 1-866-234-1393 www.contactfill.com |
| EMPLOYEE ASSISTANCE PROGRAM | Additional Information |
| Schedule an Appointment with a Counselor or for a Referral at MCMS | 1-216-404-1900 1-866-340-MCMS (6267) |
| Employee Support Website (for articles, tips, links, and tools) | www.MooreCounseling.com |
| MEDMUTUAL LIFE | Additional Information |
| Customer Service | medmutuallife.com 866-925-2542 |
| FMLA | Additional Information |
| FMLASource | 877-462-3652 fmlasource.com |
| Ohio Deferred Compensation | Additional Information |
| Ohio Public Employees Deferred Compensation Program | 877-644-6457 Ohio457.org |

Employee
BENEFITS GUIDE

