



# Noble

# 2026

## Employee Benefits Enrollment Guide



# Welcome to Open Enrollment for your 2026 Benefits!

Elections made during open enrollment will become effective January 1, 2026. Noble offers you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

For those of you who are eligible for benefits, the annual open enrollment opens, 12/01/2025 through 12/12/2025. Open Enrollment will take place within Paylocity! This enrollment is passive which means if you have no changes to last year's elections, you do not need to do anything. It is advised you review beneficiary elections. The enrollment window will close at midnight on 12/12/2025.



## Am I eligible?

- All regular full-time employees working continuously throughout the year on a schedule of at least 30 hours per week.
- All staff paid per visit who continuously have at least 15 billable client visits per week throughout the year.

## How to Enroll

- Complete the online enrollment process. Print your confirmation page once you are confident you have made the right choices for you and any dependents.



## When to Enroll

- Open Enrollment will be December 1 through December 12, 2025.

## How to Make Changes

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. Qualified changes in status include marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, commencement or termination of adoption proceedings, or change in spouse's benefits or employment status.

**\*\* Review your paycheck! If you notice errors in your payroll regarding benefit deductions notify Jan Bowman, [j.bowman@mynoblelife.org](mailto:j.bowman@mynoblelife.org) .\*\***



# Benefit Overview: Carrier, Contributions, Taxes, & Eligibility

At Noble, we work hard to offer you a competitive and comprehensive benefits package as part of your total rewards. Our hope is that these benefits will help you and your family fully realize your health, finance, and work-life balance goals.

See below for a quick glance at your benefit options. Pre-tax benefits are not subject to Social Security withholding, federal, most state and local income taxes. This helps save you money!

Benefit	Carrier	Company Contribution	Tax Treatment	Date of Eligibility
Medical/Prescription Coverage	United Healthcare	You & Noble share the cost	Pre-Tax	First of the month following one month of employment
Dental Coverage	United Healthcare	You pay 100%	Pre-Tax	First of the month following one month of employment
Vision Coverage	United Healthcare	You pay 100%	Pre-Tax	First of the month following one month of employment
Basic Term Life and AD&D	United Healthcare	Noble pays 100%	Not Applicable	First of the month following one month of employment
Short Term Disability	United Healthcare	You pay 100%	Post-Tax	First of the month following one month of employment
Long Term Disability	United Healthcare	Noble pays 100%	Not Applicable	After one year of service
Optional Life Insurance and AD&D	United Healthcare	You pay 100%	Post-Tax	First of the month following one month of employment
Medical Flexible Spending Account*	Paylocity	You pay 100%	Pre-Tax	First of the month following one month of employment
Dependent Care Flexible Spending Account	Paylocity	You pay 100%	Pre-Tax	First of the month following one month of employment
Limited Purpose Flexible Spending Account	Paylocity	You pay 100%	Pre-Tax	First of the month following one month of employment
Health Savings Account**	Paylocity	You pay 100%	Pre-Tax	First of the month following one month of employment
Employee Assistance Program	United Healthcare	Noble pays 100%	Not Applicable	First of the month following one month of employment

\*Cannot be enrolled in the HDHP plan for this account

\*\*Must be enrolled in the HDHP plan to qualify for this account

# Medical & Prescription Drug Plans

Noble of IN provides two plan options to you through United Healthcare. Details of the plans are as follows. These descriptions are only a summary. For full details, please refer to your plan documents. If discrepancies exist, plan documents prevail.

UHC High Deductible Health Plan Choice (Open Access HSA) Network		
Services	In-Network	Out-of-Network
<b>Deductible</b> - Individual - Family	Embedded \$3,500 \$7,000	Not Applicable
<b>Out-of-Pocket Max</b> - Individual - Family	\$3,500 \$7,000	Not Applicable
<b>Preventive Care</b>	No Cost Share	Not Covered
<b>Physician Visit</b> PCP / Specialist	Deductible / 0%	Not Covered
<b>Virtual Visits</b>	Deductible / 0%	Not Covered
<b>Hospitalization</b>	Deductible / 0%	Not Covered
<b>Urgent Care</b>	Deductible / 0%	Deductible / 0%
<b>Emergency Room</b>	Deductible / 0% Non-emergent use of the ER is not covered	Deductible / 0% Non-emergent use of the ER is not covered
<b>Labs, X-Rays, Major Diagnostic Imaging</b>	Deductible / 0%	Not Covered
<b>Mental &amp; Behavioral Health</b> - Inpatient - Outpatient	Deductible / 0%	Not Covered
<b>Rehabilitative / Habilitative Services</b>	Deductible / 0%	Not Covered
Prescription Drugs		
<b>Retail</b>	Deductible / 0% Deductible / 0% Deductible / 0%	Not Covered
- Generic		
- Brand		
- Specialty		
<b>Mail Order (90 Days)</b>	Deductible / 0% Deductible / 0% Deductible / 0%	Not Covered
- Generic		
- Brand		
- Specialty		

## Your Medical Plan Cost in 2026

EMPLOYEE BI-WEEKLY DEDUCTIONS (24 PAYS/YEAR)				
HDHP	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
<b>Your Contribution</b>	\$45.46	\$248.66	\$158.75	\$411.13
<b>Noble's Contribution</b>	\$434.92	\$799.75	\$665.36	\$1,048.20

# Medical & Prescription Drug Plans Continued

UHC PPO Plan Choice (Open Access) Network		
Services	In-Network	Out-of-Network
<b>Deductible</b> - Individual - Family	Embedded \$2,000 \$4,000	Not Applicable
<b>Out-of-Pocket Max</b> - Individual - Family	\$4,000 \$8,000	Not Applicable
<b>Preventive Care</b>	No Cost Share	Not Covered
<b>Physician Visit</b> PCP / Specialist	\$20 Copay \$40 Copay	Not Covered
<b>Virtual Visit</b>	\$20 Copay \$40 Copay	Not Covered
<b>Hospitalization</b> - Inpatient - Outpatient	Deductible / 20%	Not Covered
<b>Urgent Care</b>	\$75 Copay	\$75 Copay
<b>Emergency Room</b>	\$350 Copay then 20% Non-emergent use of the ER is not covered	\$350 Copay then 20% Non-emergent use of the ER is not covered
<b>Labs, X-Rays, Major Diagnostic Imaging</b>	Deductible / 20%	Not Covered
<b>Mental &amp; Behavioral Health</b> - Inpatient - Outpatient	Deductible / 20% \$20 Copay	Not Covered
<b>Rehabilitative / Habilitative Services</b>	Deductible / 20%	Not Covered
Prescription Drugs		
<b>Retail</b>	\$10 Copay \$30 Copay \$60 Copay	Not Covered
- Generic		
- Brand		
- Specialty		
<b>Mail Order (90 Days)</b>	\$25 Copay \$75 Copay \$150 Copay	Not Covered
- Generic		
- Brand		
- Specialty		

## Your Medical Plan Cost in 2026

EMPLOYEE BI-WEEKLY DEDUCTIONS (24 PAYS/YEAR)				
PPO	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
<b>Your Contribution</b>	\$138.38	\$439.20	\$295.47	\$699.47
<b>Noble's Contribution</b>	\$404.31	\$745.21	\$635.55	\$949.17

## United Healthcare Network Search

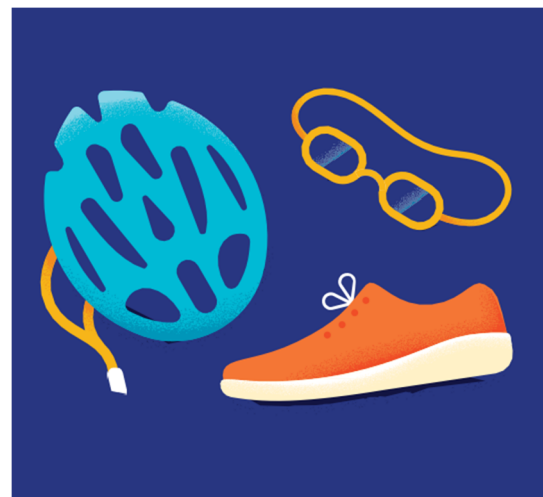
### Locate a Provider:

To search for a provider participating in the UHC Plans Network, please access the following link: [www.myuhc.com](http://www.myuhc.com). Click the "Find a doctor or facility" link near the bottom of the page.

# Rediscover your passion for health

With One Pass Select™, we're on a mission to make fitness engaging for everyone. One Pass Select can help you reach your fitness goals, while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan

As of January 1, 2026 you and your eligible family members (18+) can get started with One Pass Select when you activate UnitedHealthcare Rewards. Plus, you can use your earnings to help pay for your One Pass Select membership.



## Find your fit with One Pass Select



### At the gym

Choose from our large nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



### At home

Work out at home with live or on-demand online fitness classes. Try our workout builder to get routines created just for you based on your fitness level and interests.

**\$34/mo**

#### Classic

12,000+ gym locations

**\$69/mo**

#### Standard

14,000+ gym and premium locations

**\$109/mo**

#### Premium

16,000+ gym and premium locations

**\$159/mo**

#### Elite

20,000+ gym and premium locations



### To get started:

1. Scan this code to download the **UnitedHealthcare® app**
2. Sign in or register
3. Select **UHC Rewards**
4. Select **Redeem rewards** to access One Pass Select

**An enrollment fee may apply.**

**Or get started with a digital-only plan for \$10/mo.**

**All tiers Classic or above include the digital tier, grocery delivery and additional benefits — at no extra cost.**

The grocery delivery service component of the program is not available in TX and is pending regulatory approval in CA, NY, and VA.

One Pass Select is a voluntary program that features a subscription-based nationwide gym network, digital fitness and grocery delivery service. For self-funded participants, there are no state restrictions. For fully insured participants, program availability varies by state: (i) the program is NOT available to members of accounts situated in HI, KS, VT and Puerto Rico; (ii) the grocery delivery service component of the program is not available in TX and is pending regulatory approval in CA, NY, and VA for select groups and lines of business – discuss with your UnitedHealthcare representative for details. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable. One Pass Select is a program offered by Optum. Subscription costs are payable to Optum.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates.

UnitedHealthcare Rewards is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you. Receiving an activity tracker, certain credits and/or rewards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico nor available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.



**QUIT FOR LIFE**

# The path to quitting starts here

If you use tobacco or nicotine and have thought about quitting, Quit For Life® may be able to help. Get tools and online resources designed to help you quit — and stay quit — at no additional cost.

**Make this quit attempt your last with 24/7 support**



## Get coach support

Connect with a coach who will help create a personalized Quit Plan and guide you at every step



## Access anytime, anywhere

Manage triggers with help from coach-led group sessions, trackers, text support, and more, all at your fingertips



## View quit recommendations

Get real-life tips and plan your path to quit with recommended daily goals, articles, and videos



Learn more at [quitnow.net](https://quitnow.net) or scan the QR code.

1-866-QUIT-4-LIFE (866-784-8454)





# Healthier habits, healthier lifestyle

Take small steps for lasting change with Real Appeal®, an online weight management support program.



## Get healthier, at no additional cost to you

Real Appeal on Rally Coach™ is a proven weight management program designed to help you get healthier and stay healthier. It's available to you and eligible family members at no additional cost as part of your benefits.

### Take small steps toward healthier habits

Set achievable nutrition, exercise and weight management goals that keep you motivated to create lasting change. Track your progress from your daily dashboard, too.

### Support and community along the way

Feel supported with personalized messages, online group sessions led by coaches and a caring community of members.

Join today at [enroll.realappeal.com](https://enroll.realappeal.com) or scan this code



**Get a Success Kit delivered right to your door.**

Make the most of tools and resources like weight and food scales, a portion plate and more. Your Success Kit is delivered after you attend your first live group session.

United  
Healthcare

Real  
Appeal®





# A wellness program built for personalization

Get support to help you make sustainable changes at your own pace

## Your Wellos journey starts now



### Tracking to help you learn

Personalized suggestions based on your real-life data



### Coaching that comes to you

Online coaches and behavior change lessons by your side as you build sustainable habits



### Personalized support

Challenges designed to help keep you excited about the changes you're making

## Enroll today

Join Wellos at no cost to you!



Download the app or go to [wellos.com/member](https://wellos.com/member) to get started today!

Wellos is a voluntary digital wellness program for fully insured business. A buy-up option, which includes 1:1 live coaching, is available for purchase for certain groups (buy up option not available in NM and pending approval in CA, HI and MT). The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult with an appropriate health care professional to determine what may be right for you. Insurance coverage provided through UnitedHealthcare Insurance Company or its affiliates.

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United  
Healthcare<sup>®</sup>

# Dental Plan

Noble's Dental plan is offered through United Healthcare. Please visit [www.myuhcdental.com](http://www.myuhcdental.com) for a provider search function. Search for providers in the Options PPO 30 Network.

Services	In-Network	Out-of-Network
<b>Deductible</b>	Applies to Basic and Major Services only \$50 Ind. \$150 Max. for Family	
<b>Annual Maximum</b>	\$1,250	
<b>Preventive Services</b>	100%	90%
	Cleanings, Exams, X-Rays, Fluoride, Sealants, Space Maintainers	
<b>Basic Services</b>	80%	70%
	Fillings, Emergency Palliative Treatment, Oral Surgery, Endodontics, Periodontics	
<b>Major Services</b>	50%	40%
	Crowns, Dentures, Bridges (Implants are not covered)	
<b>Orthodontic Services</b>	For Children to age 19 - 50%	
<b>Orthodontic Lifetime Maximum</b>	\$1,000	
<b>Waiting Periods</b>	None	

## Your Dental Plan Cost for 2026

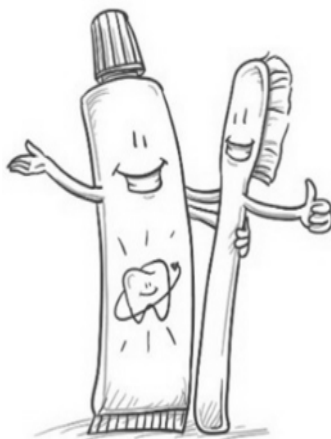
EMPLOYEE BI-WEEKLY DEDUCTIONS (24 PAYS/YEAR)			
	Employee Only	Employee + 1	Employee + 2 (or more)
<b>Your Contribution</b>	\$18.52	\$36.69	\$64.36

### Some Procedures Might Be Excluded/Limited:

\*See Certificate for full list of limitations and exclusions.

Please note that cosmetic procedures are NOT covered under this dental plan. Additionally, the following procedures are limited by a specific number of visits/age group:

- Oral Exams/Cleanings: 2 per consecutive 12 months
- Full Mouth X-rays: once every 3 years
- Bitewing X-rays (adult): 1 per calendar year
- Sealants (child to age 16): 1 per tooth per three-year period (permanent molar)



### Don't see a Dental Insurance Card?

**UHC does not distribute a member specific ID card.** If you go to your dentist and provide your name, your SSN and UHC's name, your dentist should be able to look you up in the system.

# Vision Plan

Noble's Vision plan is offered through United Healthcare. This program offers comprehensive vision coverage at affordable rates. Coverage includes exams, frames, lenses, and contact lenses. UHC's Vision network includes both retail and independent vision providers. To search for a provider, visit [www.myuhcvision.com](http://www.myuhcvision.com).

Plan Features – V1679	In-Network	Non-Network
<b>Exam with Dilation as Necessary</b>	\$10 Copay	Up to \$40
<b>Frames</b>	\$130 allowance Plus 30% off balance	Up to \$45
<b>Standard Plastic Lenses</b> <ul style="list-style-type: none"> <li>• Single Vision</li> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Standard Progressive Lens</li> <li>• Premium Progressive</li> <li>• Lenticular</li> </ul>	\$25 Copay \$25 Copay \$25 Copay \$70 Copay \$150 Copay \$25 Copay	Up to \$40 Up to \$60 Up to \$80 N/A N/A Up to \$80
<b>Contact Lenses</b> <ul style="list-style-type: none"> <li>• Covered Formulary Contacts</li> <li>• Non-Formulary Contacts</li> <li>• Medically Necessary</li> </ul>	Up to 4 boxes Up to \$130 100%	Up to \$130 Up to \$130 Up to \$210
<b>Frequency</b> <ul style="list-style-type: none"> <li>• Examination</li> <li>• Lenses or Contacts</li> <li>• Frames</li> </ul>	<b>*Each year you can purchase new lenses for glasses OR contact lenses (you cannot access coverage for both lens type in one year)</b> Once every 12 months Once every 12 months Once every 24 months	

## Your Vision Plan Cost for 2026

EMPLOYEE BI-WEEKLY DEDUCTIONS (24 PAYS/YEAR)				
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
<b>Your Contribution</b>	\$4.68	\$8.88	\$9.34	\$13.75



### Don't "See" a Vision Insurance Card?

This time, it's not a trick of your eye. **UHC does not distribute a member specific ID card.** If you go to your eye doctor and provide your name, your SSN and UHC's name, your doctor should be able to look you up in the system.

# **Basic Life and AD&D / Supplemental Life and AD&D**

## **Basic Life / Accidental Death & Dismemberment**

Noble provides full-time employees (refer to page 1 “Am I Eligible”) with group life through United Healthcare and pays the full cost of this benefit. To update your beneficiary please go to the benefit page in Paylocity. The amount of this benefit is 1X annual salary to a maximum of \$250,000. The guaranteed issue amount is \$250,000. Eligible 1<sup>st</sup> of the month after one month of employment.

## **Supplemental Life/AD&D Insurance/Dependent Life**

Employees who want to supplement their group life insurance benefits may purchase additional coverage on self, spouse and children. When you enroll yourself and/or your dependents in this benefit, you pay the full cost through bi-weekly payroll deductions.

Eligible for an additional 1x annual salary (guarantee issue is a maximum of \$250,000) for the employee, up to a maximum of \$10,000 for the spouse (spousal rate is calculated by the employee's age at time of enrollment), and a flat amount of \$5,000 for dependent children.

**During enrollment** employees may elect to participate in this program. However, **any supplemental coverage elected outside of the initial enrollment period will be subject to Evidence of Insurability.** The employee will complete a medical questionnaire that will be submitted to the insurance company; they will investigate your medical history and possibly send a paramedic to your home to do a physical. Once this is complete, they will send a notification to both you and Human Resources as to whether you are approved.

### **SUPPLEMENTAL LIFE INSURANCE PREMIUM**

<b>Age of Employee</b>	<b>Monthly rate per \$1,000 of coverage</b>
< 30	\$0.06
30 - 34	\$0.08
35 - 39	\$0.10
40 - 44	\$0.14
45 - 49	\$0.23
50 - 54	\$0.35
55 - 59	\$0.60
60 - 64	\$0.90
65 – 69 At age 65, supplemental life insurance is reduced by 35%	\$1.50
70 – 74 At age 70, supplemental life insurance is reduced by 55%	\$2.33
75 - 79 At age 75, supplemental life insurance is reduced by 70%	\$3.51
80 - 84 At age 80, supplemental life insurance is reduced by 80%	\$5.66
Premium for each child enrolled	\$0.070 x 5 per enrolled child

# Short & Long Term Disability

Noble offers short and long-term disability income benefits for full-time (refer to page 1 “Am I Eligible”) employees through United Healthcare Services. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income.

**Short-Term Disability** is available for newly eligible staff by filling out the application and does not need to be approved by United Healthcare Service. Please note that employees will be responsible for paying the premiums through payroll deduction to participate in this benefit.

\* If you did not enroll when first eligible, UHC will allow you to enroll one time **only** during Open Enrollment. \*

\* You will not need to complete an application at this time \*

**Long-Term Disability** will continue to be a company-funded benefit offered at no cost to the employee. Please see benefit details below.

Short-term Disability	
<b>Benefits Begin</b>	On the first of the month after one month of full-time employment
<b>Benefits Payable</b>	Following a 7-day benefit waiting period; accumulated sick leave is treated as an offset in the policy
<b>Percentage of Income Replaced</b>	60% of weekly earnings
<b>Benefit Duration</b>	Up to 25 weeks

Age of Employee	Rate per \$10 of Weekly Covered Benefit
20 - 54	\$0.445
55 - 59	\$0.494
60 - 64	\$0.576
65 - 99	\$0.632

Long-term Disability	
<b>Benefits Begin</b>	First of the month following 12 months of continuous employment
<b>Benefits Payable</b>	Following a 180 Day Elimination Period
<b>Percentage of Income Replaced</b>	60% of base pay
<b>Maximum Benefit</b>	A maximum of \$6,000 per month
<b>Benefit Duration</b>	Up to SSNRA = Social Security Normal Retirement Age

# **Health Savings Account (HSA)**

Noble provides you with the opportunity to pay for out-of-pocket medical, dental, and vision expenses with pre-tax dollars through a Health Savings Account (HSA).

**You must enroll/re-enroll in the plan to participate for the plan year January 1 – December 31, 2026.**

An HSA is like a flexible spending account in that you are eligible to pay for health care expenses with pre-tax dollars, but an HSA has some additional advantages:

- Money in an HSA can be used for future medical expenses on a tax-free basis.
- Unused money in an HSA is not forfeited at the end of the year; it is carried forward.
- Your HSA is yours to keep, which means that you can take it with you if you change jobs or retire. If you have any money remaining in your HSA after your retirement, you may withdraw the money as cash.

The maximum amount that you can contribute to an HSA in 2026 is \$4,400 for individual coverage and \$8,750 for family coverage. Additionally, if you are age 55 or older, you may make an additional “catch-up” contribution of \$1,000 annually.

Expenses paid from the HSA remain tax free if they are considered eligible “qualifying medical expenses” under IRS guidelines: Section 213(d). For further details on these eligibility requirements, go to [www.treasury.gov](http://www.treasury.gov).

Please note that you, not Noble, Inc, are accountable to the IRS for making sure you use these funds appropriately, so make sure to save your receipts!

## **How does an HSA work?**

### Part 1: Qualifying High Deductible Health Insurance Plan



*Provides health care benefits after the deductible has been met.*

### Part 2: Health Savings Account



A health savings account can be funded with your tax-exempt dollars, by your employer, by a family member or by anyone else on your behalf.

## **Who is eligible for an HSA?**

Anyone who is:

- Covered by a high-deductible health plan (HDHP)
- Not covered under another medical plan that is not an HDHP
- Not enrolled in Medicare or
- You cannot be claimed as a dependent on someone else's 2026 tax return



# Flexible Spending Account (FSA)

Noble provides you with the opportunity to pay for out-of-pocket medical, dental, vision and dependent care expenses with pre-tax dollars through the Flexible Spending Accounts.

**You must enroll/re-enroll in the plan to participate for the plan year January 1 – December 31, 2026.**

A Health Care **FSA** is used to reimburse out-of-pocket medical expenses incurred by you and your dependents. A **Dependent Care FSA** is used to reimburse expenses related to the care of eligible dependents while you and your spouse work. FSA funds are available on January 1, 2026. If you are enrolled in the HDHP plan you may open a **Limited Purpose FSA** in addition to the HSA account that is limited to dental and vision expenses.

Contributions to your FSA come out of your paycheck before any taxes are taken out. This means that you don't pay federal income tax, Social Security taxes, and state and local income taxes on the portion of your paycheck you contribute to your FSA. You should contribute the amount of money you expect to pay out of pocket for eligible expenses for the plan period. If you do not use your entire Health Care FSA election amount by the end of the plan year, you can now **carryover up to \$680 of unused funds** into the next plan year and use it for expenses incurred during the first 90days.

Any amount more than \$680 remaining at the end of the year will not be refunded to you or carried forward to a future plan year. This is known as the use-it-or-lose-it rule.

The maximum that you can contribute to the **Health Care Flexible Spending Account** is **\$3,400**.

The maximum that you can contribute to the **Dependent Care Flexible Spending Account** is **\$7,500 for single individuals and those married filing jointly. The max for married filing separate tax status is \$3,750.**

- All FSA participants will receive a debit card, allowing for immediate electronic access to FSA funds.

The following example shows how you can save money with a flexible spending account.

*Bob and Jane's combined gross income is \$30,000. They have two children and file their income taxes jointly. Since Bob and Jane expect to spend \$2,000 in adult orthodontia and \$3,300 for day care next plan year, they decide to direct a total of \$5,300 into their FSAs.*

	Without FSAs	With FSAs
Gross income:	\$30,000	\$30,000
FSA contributions:	\$0	-5,300
Gross income:	\$30,000	\$24,700
Estimated taxes:		
Federal	-2,550*	-1,755*
State	-900**	-741**
FICA	-2,295	-1,890
After-tax earnings:	24,255	20,314
Eligible out-of-pocket		
Medical and dependent care expenses:	-5,300	\$0
Remaining spendable income:	\$18,955	\$20,314
Spendable income increase:		\$1,359

\*Assumes standard deductions and four exemptions.

\*\*Varies, assume 3%.

The example above is for illustrative purposes only. Every situation varies and we recommend that you consult a tax advisor for all tax advice.



## **Additional Benefit Offerings**

**As a Noble employee, you also receive the following benefits**

### **Employee Assistance Program**

The Employee Assistance Program is a voluntary program offered to all Noble employees and members of their household. Noble offers an EAP benefit through United Healthcare.

This is a completely confidential counseling program that covers issues such as marital and family concerns, depression, substance abuse, grief and loss, financial entanglements, and other personal stressors.

#### ***United Healthcare Plans EAP***

The UHC Plan EAP is designed to help you, and your family stay psychologically and emotionally healthy. Every EAP counselor has a wide range of experience and is state licensed with multiple years of experience.

This EAP program also offers person-to-person phone access, 24 hours a day, 7 days a week, 365 days a year. There are also multiple locations for face-to-face appointments, as well as emergency appointments available.

Visit [www.myuhc.com](http://www.myuhc.com) to learn more or call 1-888-887-4114.

### **Retirement Plan**

The Noble Retirement Plan includes a 401(k) and Roth plan through AUL/OneAmerica (Voya effective January 1, 2025), with a \$1-for-\$1 employer match up to 5% of your salary. Employees can defer 1<sup>st</sup> of the month following one (1) month of employment and are automatically enrolled at 3%, with options to adjust or opt out. Contributions increase by 1% annually on January 1, up to 15%, unless changed.

Deferral changes take effect the 1st of the following month. Employees qualify for the employer match after 1 year of continuous employment and 1,000 hours of service.

If you have any questions regarding Noble's Retirement Plan, please contact Jan Bowman at [j.bowman@mynoblelife.org](mailto:j.bowman@mynoblelife.org).

## **The time off benefits below are excluded from the per-visit employees.**

### **Paid Time Off (PTO)**

Noble provides the opportunity for paid time away from work, for vacations, illness, and other personal reasons for full-time employees on the 1<sup>st</sup> of the month following one month of employment. Time off accrues month-to-month, with the amount based on years of service. Please refer to Noble Personnel Procedure #5.3: Paid Time Off/Sick Time, for further details.

### **Holidays**

Noble recognizes the following eight (8) Holidays, and full-time staff will receive an equivalent bank of Holiday benefit time: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Thanksgiving Friday, Christmas Eve and Christmas Day. Please refer to Noble Personnel Procedure #5.4: Holidays, for further details.

### **Birthday**

After five (5) years of service, employees will be given their birthday off with pay each year. Please refer to the Noble Personnel Procedure #5.12: Birthday Day, for further details.

### **Jury Duty**

Paid time off permitted for Jury and Witness Duty with appropriate documentation from the court, per Noble Personnel Procedure #5.11: Jury and Witness Duty. Any compensation from the court will be deducted from the benefit amount.

### **Bereavement**

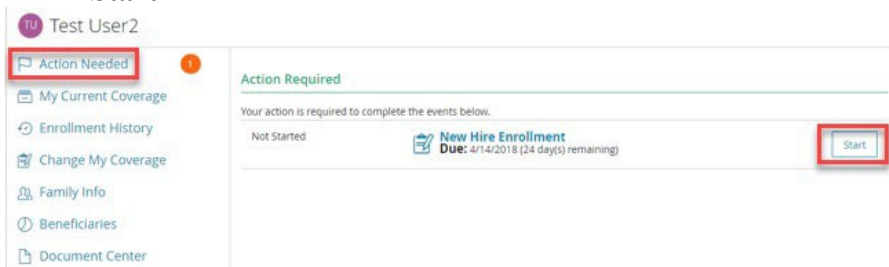
Employees are allowed up to three (3) days off from regularly scheduled duty with regular pay in the event of the death of the employee's spouse, domestic partner, child, stepchild, parent, stepparent, father-in-law, mother, mother-in-law, son-in-law, daughter-in-law, brother, sister, stepbrother, stepsister, brother-in-law, sister-in-law, aunt, uncle, grandparent, grandchild, or spouse's grandparent or an adult who stood in loco parentis to the employee during childhood. brother-in-law, sister-in-law, aunt, uncle, grandparent, grandchild, or spouse's grandparent. Please refer to Noble Personnel Procedure #5.13: Bereavement Leave, for further details.

***Noble, Inc. reserves the right to modify, suspend, or terminate any benefits program at any time. Each employee will be notified of any changes in the benefits program prior to the effective date of the change.***

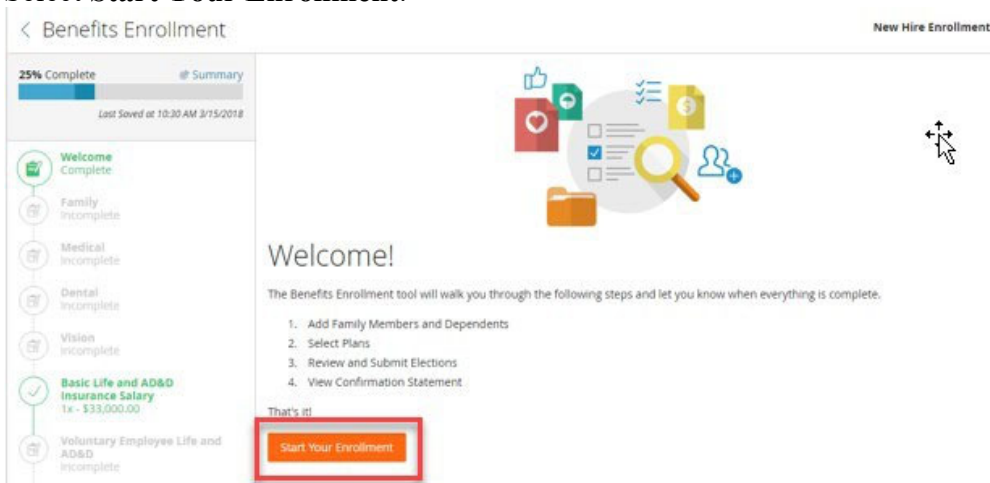
# How to enroll through Paylocity

## PCTY – 69007: Complete an Enrollment Event in Benefits Enhanced

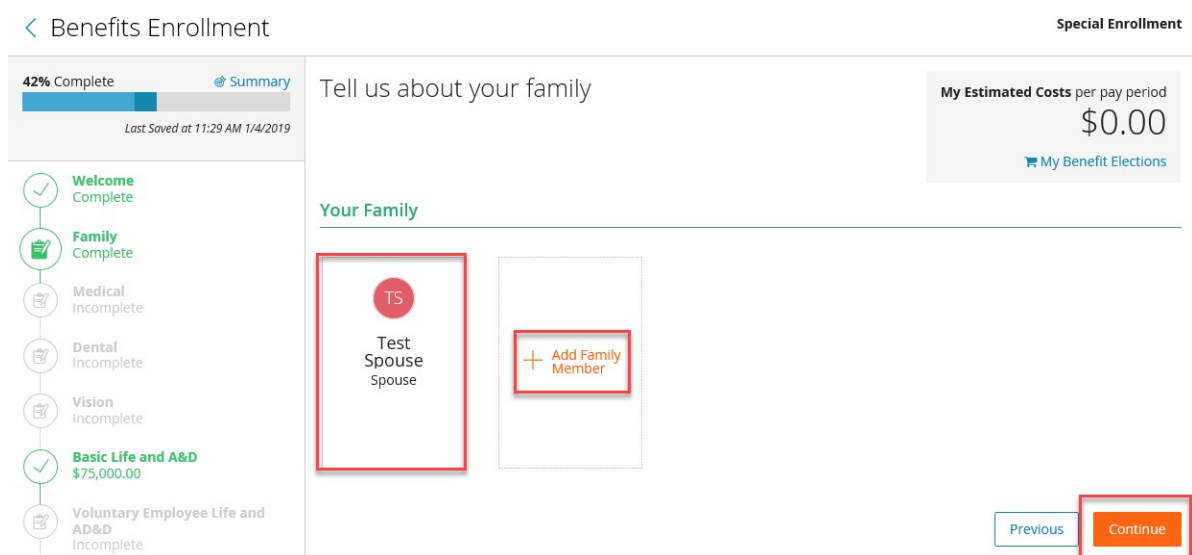
1. Access Benefits Enhanced.
2. Select **Action Needed** in the sidebar menu. This option only appears if an enrollment event is available.
3. Select **Start**.



4. Select **Start Your Enrollment**.



5. Review **Family Information**.
  - o Select **Add Family Member** to enter a new dependent.
  - o Select an existing dependent to change the dependent's demographic information.
  - o Select **Continue**.



## How to enroll through Paylocity

6. Answer any questions, if applicable.

< Benefits Enrollment Open Enrollment

54% Complete [@ Summary](#)  
Last Saved at 8:33 AM

Wellcome Complete  
Family Complete  
Questionnaire Complete  
Medical Blue Cross Blue Shield HDHP  
Health Care Savings Account (HSA) \$1,130.00

Tell us about yourself

My Estimated Costs per pay period  
**\$61.76**  
[My Benefit Elections](#)

Questions

Do you or any family members use tobacco products? Check all that apply

☒ SA Employee (Myself)

Is your Spouse or Domestic Partner offered Medical/Health insurance through their employer?

☒ Yes ☐ No

[Previous](#) [Continue](#)

7. Enter Benefit Elections.

- Medical, Dental, Vision Plans

1. Select the dependents to cover. The system will calculate a coverage tier and cost based on the dependents selected.
2. Select the **checkmark** next to the appropriate **Plan** or **Waive** option.
3. Select **Continue**.

Who do you want to cover on this plan?

☒ TU Test User1 (Myself) Employee ☐ TS Test Spouse Spouse ☐ CU Child User1 Child

Choose a Plan

<input checked="" type="checkbox"/>	HSA Open Access Plus Choice ^	Employee Only <b>\$67.46</b>
	Provider Cigna	My Estimated Costs per pay period Employee Contribution \$67.46 Employer Contribution \$101.78
<input type="checkbox"/>	Open Access Plus Choice v	Employee Only <b>\$81.01</b>
<input type="checkbox"/>	Waive Medical	

[Previous](#) [Continue](#)

- Health Savings Accounts (HSAs) and Flexible Spending Accounts (FSAs)
  1. Select the **checkmark** next to the appropriate **Plan** or **Waive** option.
  2. Enter the appropriate **Employee Per Pay Period** or **Total Annual Contribution** amount.
    - Employees must enroll in the HSA to receive any applicable employer contribution, if enrolled in a qualified medical plan.

## How to enroll though Paylocity

- Enter a **\$0 Employee Per Pay Period** amount to receive the employer contribution without an employee contribution.
  - The amount that employees can contribute to the account gets limited by any contribution that the employer makes as well as the IRS annual limit.
3. Select **Continue**.

### Contribute to a Health Care Savings Account (HSA)?

☒ HSA ^

Total Annual Contribution | \$1,108.33

**\$100.00**

Contribution Amount	
Employee Paid to Date	--
Employee Per Pay Period	<input type="text" value="\$100.00"/>
Remaining Pay Periods	9
<hr/>	
Employee Annual Contribution	\$900.00
Employer Annual Contribution ⓘ	\$208.33
<hr/>	
Total Annual Contribution ⓘ	<input type="text" value="\$1,108.33"/>

**Total Contribution To Date**

Employee Contribution Amount	--
Employer Contribution Amount	--
<hr/>	
Total Contributions To Date	--

Annual Limits	
Min Annual Contribution Amount	--
Max Annual Contribution Amount	<b>\$3,550.00</b>

**Provider** United Healthcare

### Contribute to a Flexible Spending Account (FSA)?

☒ FSA ^

Total Annual Contribution | \$900.00

**\$100.00**

Contribution Amount	
Employee Paid to Date	--
Employee Per Pay Period	<input type="text" value="\$100.00"/>
Remaining Pay Periods	9
<hr/>	
Employee Annual Contribution	\$900.00
Employer Annual Contribution ⓘ	--
<hr/>	
Total Annual Contribution ⓘ	<input type="text" value="\$900.00"/>

**Total Contribution To Date**

Employee Contribution Amount	--
Employer Contribution Amount	--
<hr/>	
Total Contributions To Date	--

Annual Limits	
Min Annual Contribution Amount	<b>\$1.00</b>
Max Annual Contribution Amount	<b>\$2,750.00</b>

**Provider** Ameriflex

☐ Waive Medical FSA

## How to enroll though Paylocity

- Voluntary Employee, Spouse, Domestic Partner, or Child Life and AD&D plans
  1. Select the **checkmark** next to the appropriate **Plan** or **Waive** option.
  2. Select the appropriate **Coverage Amount** in the dropdown menu, if electing coverage.
  3. Select **Continue**.

☒ Voluntary Employee Life ^

Coverage Amount  
-- Select --

Provider Cigna

My Estimated Costs per pay period

Employee Contribution	--
Employer Contribution	--

☐ Waive Voluntary Employee Life

Waive Coverage  
**\$0.00**

Previous Continue

- Voluntary Disability
  1. Select the **checkmark** next to the appropriate **Plan** or **Waive** option.
  2. Select the appropriate **Coverage Amount** in the dropdown menu, if electing coverage.
  3. Select **Continue**.

☒ Short Term Disability ^

Coverage Amount

-- Select --

-- Select --

Coverage Amount	Cost
0.6x - \$685.00	\$26.41

My Estimated Costs per pay period

Employee Contribution	--
Employer Contribution	--

Previous Continue

- Employer Provided Benefits: Employees do not need to make an election in these plans, as the employer provides these benefits at no cost to the employee.
- Information Only Plans:
  1. Employees will not enroll in these plans in the Benefits Enhanced system.
  2. These plans provide employees with the information necessary to enroll elsewhere.

Plan

Travel Assistance ^

Provider Mutual of Omaha

Documents [Travel Assistance](#)

Previous Continue

## How to enroll through Paylocity

### 7. Designate Beneficiaries.

- Any dependents already in the system show as possible beneficiaries.
- Select **Add Beneficiary** to enter additional beneficiaries.
- Enter a **Primary Beneficiary %** for all listed plans.
- Select **Continue**.

**Beneficiaries**

**Spouse Tester**  
Spouse (Family Member)

**Child Tester**  
Child (Family Member)

**Add Beneficiary**

**Beneficiary Designation**

Group Term Life and AD&D **Apply to All**

Name	Primary Beneficiary %	Secondary Beneficiary % (optional)
Spouse Tester	0.00	0.00
Child Tester	0.00	0.00
<b>Totals</b>	<b>0.000</b>	0.000

Previous
**Continue**

### 8. Review all enrollment information.

- Select **Expand All** to display the details of each election.
- Select a **Plan Type** in the Sidebar menu to make any necessary changes.

**93% Complete** [Summary](#)

Last Saved at 11:29 AM 1/4/2019

- ✓ **Welcome**  
Complete
- ✓ **Family**  
Complete
- ✓ **Medical**  
Medical HDHP
- ✓ **Health Care Savings Account (HSA)**  
\$2,400.00
- ✓ **Dental**  
Waive Dental
- ✓ **Vision**  
Waive Vision
- ✓ **Basic Life and A&D**  
\$75,000.00

**Enrollment Summary**

Please review your family information and benefit elections to make sure all information is correct. If not, you may make corrections at this time. You must **Submit Enrollment** at the bottom of the page to complete your benefits enrollment.

**My Family Information**

	Name	Tobacco	Full-Time Student
TU	<b>Test User3 (Myself)</b> Employee	No	N/A
TS	<b>Test Spouse</b> Spouse	No	N/A

**My Benefit Elections**

Please review your benefit elections below to make sure all information is correct.

**Expand All**

Medical	Employee + Spouse
Medical HDHP	<b>\$12.50</b>

**My Estimated Costs per pay period**

\$13.88

[My Benefit Elections](#)

Select **Submit** to complete the enrollment.

Enroll in benefits for the next plan year, if applicable.

- Select **I'll do this later** to complete the enrollment for the next plan year now.



One More Step...

Your enrollment has been submitted, but you also need to **enroll in benefits for the next plan year.**

To make that process easier, we're applying your current elections to that enrollment.

**Continue** I'll do this later

Select **View PDF** to view or print and save an Enrollment Confirmation Statement outlining the benefit elections made.

✓ Success: Your enrollment is 100% complete and is pending approval.

My coverage as of **6/1/2018** Viewing coverage as of 6/1/2018

⌚ The elections below are pending approval.

My Estimated Costs  
**\$193.92**

**View PDF**

Expand All

**Important Information:**

- Employees may need to submit an Evidence of Insurability form, if electing coverage over the Guaranteed Issue Amount, or if enrolling in coverage after the initial new hire enrollment period.
- For additional assistance, please reach out to Jan Bowman, Director of Human Resources  
Office 317-375-2701  
Email: [j.bowman@mynoblelife.org](mailto:j.bowman@mynoblelife.org)



# Noble

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## Customer Service Contacts

Vendor	Phone Number	Web Address
<b>United Healthcare</b> Medical & Prescription Drugs <i>Policy # 00920616</i>	1-888-901-4636	<a href="http://www.myuhc.com">www.myuhc.com</a>
<b>United Healthcare</b> Dental <i>Policy # 00920616</i>	1-800-896-4830	<a href="http://www.myuhcdental.com">www.myuhcdental.com</a>
<b>United Healthcare</b> Vision <i>Policy # 00920616</i>	1-800-638-3120	<a href="http://www.myuhcvision.com">www.myuhcvision.com</a>
<b>HSA</b> Health Savings Account	1-800-631-3539	<a href="mailto:batinfo@paylocity.com">batinfo@paylocity.com</a>
<b>FSA (DBS)</b> Flexible Spending Account	1-800-631-3539	<a href="mailto:batinfo@paylocity.com">batinfo@paylocity.com</a>
<b>United Healthcare</b> Life and AD&D Vol Life AD&D Short Term Disability Long Term Disability <i>Policy # 372737</i>	1-888-299-2070	<a href="http://www.myuhcfp.com">www.myuhcfp.com</a>
<b>United Healthcare</b> Employee Assistance Program	1-888-887-4114	<a href="http://www.myuhc.com">www.myuhc.com</a>
<b>One America</b> Retirement Plan <i>Group #G37571</i>	1-800-249-6269 M-F 8:00 a.m. – 8:00 p.m.	<a href="http://www.oneamerica.com/login">www.oneamerica.com/login</a>
<b>Noble HR</b> Jan Bowman - Director of HR	317-375-2701	<a href="mailto:j.bowman@mynoblelife.org">j.bowman@mynoblelife.org</a>

*The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was made to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources.*