



LITCHFIELD PARK 2026-27 OPEN ENROLLMENT



Litchfield Park

DISCOVER THE PARK

2026-27 Open Enrollment

- Benefits Effective July 01, 2026
- Open Enrollment
 - April 27 through May 08, 2026
 - Add, change or delete current elections (including changing plans, adding or dropping dependents, etc.)
 - Annual election unless Qualified Family Status change during plan year
 - Changes to eligibility must be made within 31 days of the event; if not, must wait until the next annual open enrollment period



2026-27 Benefit Changes



- Medical
 - Increase In-Network HDHP Deductible and Maximum Out-of-Pocket from \$3,300/\$6,600 to \$3,400/\$6,800
 - Add BlueCard Program through BlueCross BlueShield of AZ
 - Adds National Access to In-Network Care through BlueCross BlueShield Providers
 - Changes Telemedicine from Teladoc to AZBlue Telehealth
 - **WILL REQUIRE NEW ID CARDS FOR ALL MEMBERS**
 - Add Leap Health Infusion Program
 - Ability to move infusion care from hospital to in-home
 - Lower cost medications
 - Add Maternal Health Program
- Prescription
 - New Pharmacy Benefit Manager (PBM) - SmithRx
 - Requires Member Engagement!
- Supplemental Life Insurance
 - One-Time OE Opportunity

Medical Plans

- Litchfield Park will continue to offer 3 plans for members to choose from:
 - PPO - Services available in-and out-of-network
 - PPO Buy-Up - Benefits the same as PPO except lower deductibles and max out-of-pockets
 - High Deductible Health Plan (HDHP)
- No benefit changes to PPO or PPO Buy-Up
- Slight increase to deductible/max out-of-pocket to the HDHP to comply with IRS regulations

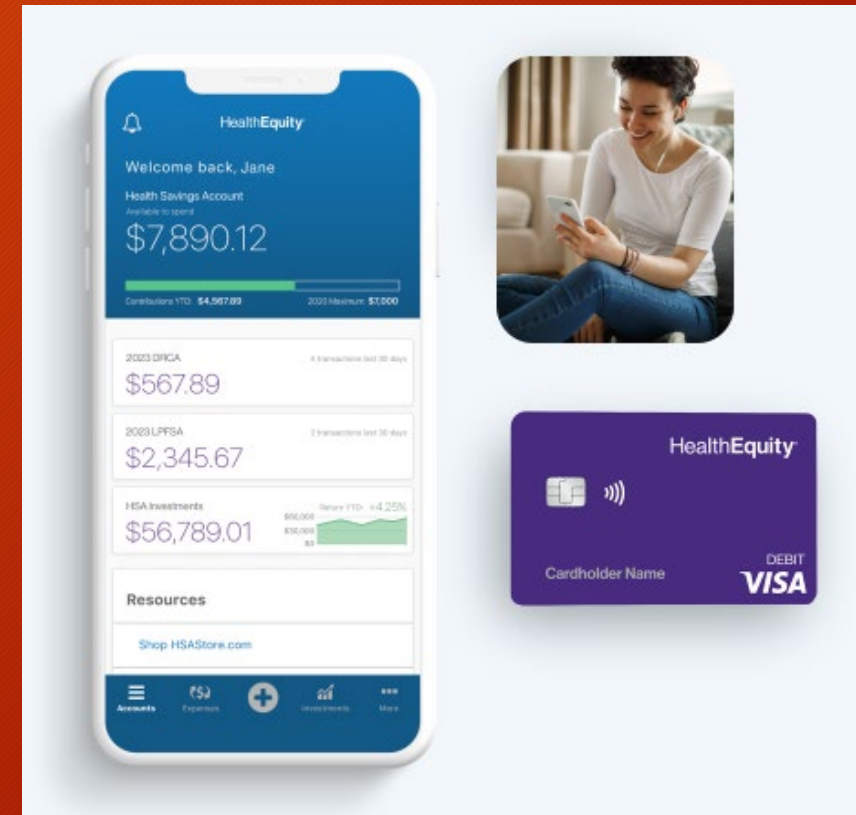
Flexible Spending Accounts (FSA)

- **MUST ENROLL EVERY YEAR!**
 - \$3,400 Maximum Contribution - Medical FSA
 - \$7,500 Maximum Contribution - Dependent Care FSA (\$3,750 for Single Filers)
 - USE IT OR LOSE IT!



Health Savings Account (HSA)

- Only available with enrollment in the HDHP
- Maximum Contributions
 - 2026 = \$4,400 / \$8,750 (\$1,000 Catch-Up 55+)
- Funds Roll Over Year-to-Year (No Use / Lose)



Leap Health Infusion Program

- Makes infusion care simpler, more affordable and easier to manage
- Changes site of care from hospital to home (or other) settings
 - Less expensive
 - More comfortable
- Lower cost medications

Infusion therapies are breakthrough treatments for a wide range of chronic and acute conditions



Specialty Infusions commonly used to treat:

Rheumatoid arthritis
(Prolia, Orencia)

Oncology
(Keytruda, Mvasi)

Osteoarthritis and osteoporosis
(Reclast, Actemra)

Crohn's disease
(Remicade, Entyvio, Avsola)

Lupus
(Benlysta, Rituxan)

Ulcerative colitis
(Stelara, Remicade, Entyvio)

Psoriasis
(Infliximab, Skyrizi)

MS
(Ocrevus)

More...

Introducing *Leap*

A transparent infusion benefit delivering measurable savings while creating a seamless member experience



What Leap Does

- + Proactively identifies eligible members through medical claims and prior authorization files
- + Coordinates infusion care end to end
- + Integrates directly within the medical benefit and existing carrier workflow. Works fully within the medical benefit



What This Means for Your Members

- + Dedicated Care Guide support from referral through follow up
- + Infusion at home when clinically appropriate, reducing unnecessary travel
- + Clear communication and coordinated scheduling



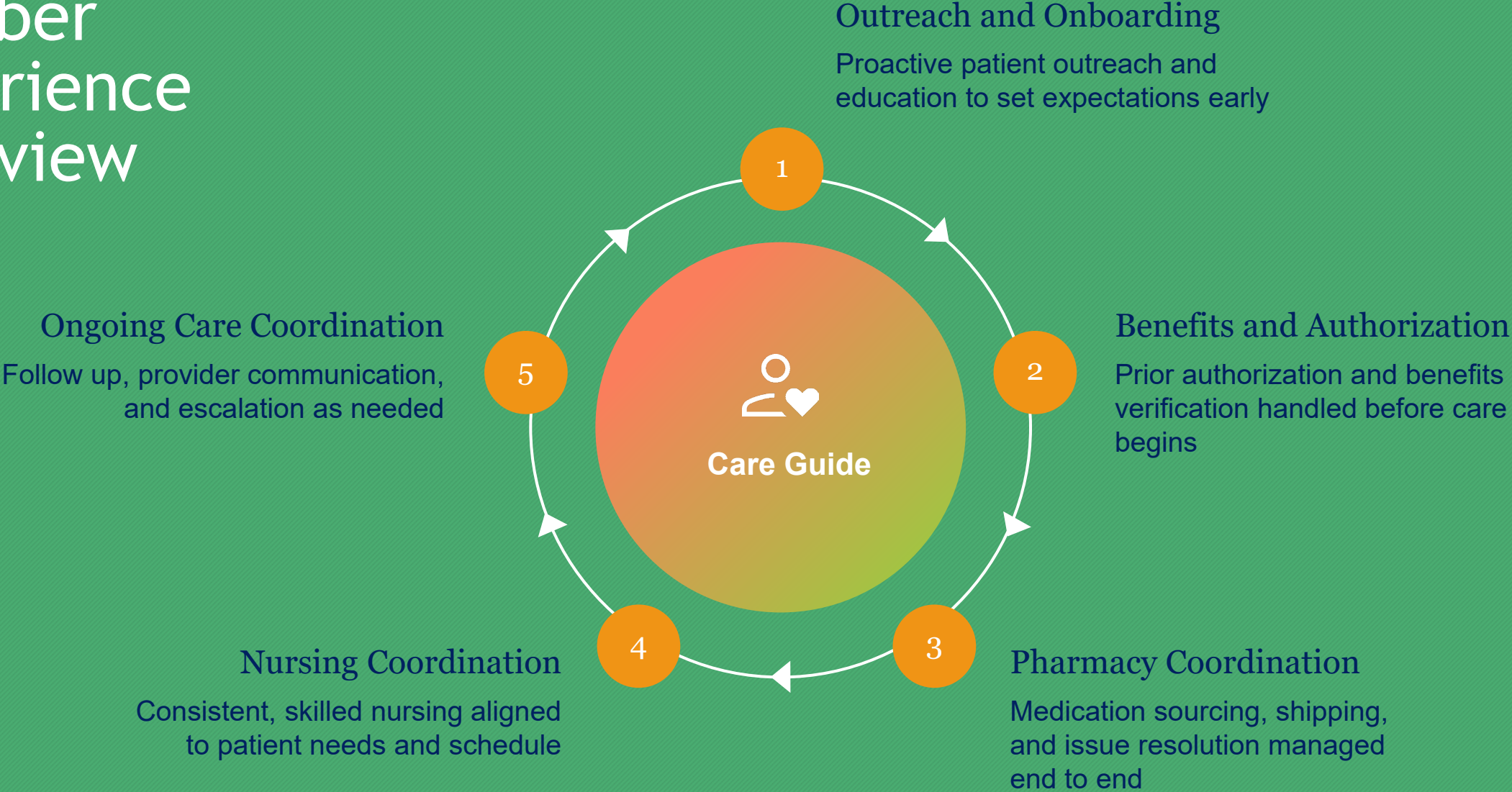
What This Means for You

- + A seamless member experience employees value
- + Meaningful medical savings without benefit redesign
- + Coordinated clinical integration with minimal administrative lift during and after implementation



Hard dollar medical savings with a *simple, coordinated member experience*

Member Experience Overview



Leap optimizes the patient experience

Jack (patient) learns that he will need recurring Ocrevus infusions. His health benefit offers Leap as the preferred infusion provider.

Phases



Identification

Proactive outreach

Leap identifies Jack as eligible through claims and prior authorization files, and reaches out by email and phone. Jack speaks with a Leap Care Guide and consents to care coordination.



Care Coordination

Seamless coordination

Jack's Care Guide coordinates with his provider to obtain his prescription, verifies his benefits eligibility, manages prior authorizations, and works with his pharmacy on medication fulfillment.



Savings

No out-of-pocket expenses

Jack's at-home infusions have passed prior authorization and his copay has been waived. His Leap benefit will be provided at no cost to him.



Scheduling

Scheduling around patient availability

Jack's Care Guide schedules his infusion at a time that works best for him (including evenings and weekends). Medications are delivered promptly to his home.



Treatment

Convenient care at home or in nearby clinic

Jack's infusion treatment with his licensed infusion nurse only takes 2 hours, in the comfort of his own home. His nurse schedules his next treatment on the spot.



Continuity of Care

Post-care coordination

Jack's Care Guide follows up on his experience and shares his nurse's visit notes with his prescribing provider.

2026-27 Medical/Rx Premiums

TBA!

BlueCard Program

- Provides access to national BlueCard PPO network
- AmeriBen continues to process claims
- Includes telehealth (AZBlue Telehealth)
 - General Medical
 - Counseling
 - Psychiatry
- New ID cards required

Understanding your health plan



The four key elements to your health plan:

1. **Third party administrator – AmeriBen**

AmeriBen handles and processes your health insurance claims. After reviewing services, claims are sent to AmeriBen for processing and payment, based on the plan language

2. **Utilization management – AmeriBen Medical Management**

Some health services require precertification. Utilization management reviews if services will be covered but doesn't guarantee benefits or eligibility. Failure to pre-certify may lead to covering the full cost of care.

3. **Preferred network – BlueCross BlueShield of Arizona**

Choose in-network providers to minimize costs. Out-of-network care costs more. Using network providers reduces expenses for both you and your employer.

4. **Pharmacy benefit manager (PBM) – SmithRx**

For prescription coverage, pharmacy benefit manager (PBM) provider provides lower fees for medications. Contact PBM Provider using information on your ID card.



MyAmeriBen.com – Member Portal



Check Claims

See the status of claims 24/7.
View general summaries and details of reports.



Share ID Card Digitally

Never lose your card again. It's easy to download and send straight to providers.



Chat with Support

Contact online support specialists in real time or submit a question to be answered via email or chat.



Access Benefit Information

View information including your plan documents, benefit information, and provider networks.



Upload Documents

Use your smartphone's camera to instantly upload claims documents.

Need Help? Contact Us.

Call the AmeriBen number on the back of your ID card for more information.



Nationwide & around the world- you're covered with AZ Blue

What is changing?

- National provider access- members will no longer be limited to Arizona providers..
- New ID cards (example)
- AmeriBen will continue to handle member inquiries.
- New provider search link:
www.azblue.com/ja-network2
- Access to BlueCross BlueShield of Arizona telemedicine services Telehealth by AZ Blue

BlueCross BlueShield of Arizona

Sample, John
Member ID: 123456789

Plan: HDHP
Group No.: [Redacted]
Plan Code: [Redacted]
RXBIN: [Redacted]
RXPCN: [Redacted]
RXGRP: [Redacted]

Ind Ded INN/OON \$ [Redacted]
Ind OOP INN/OON \$ [Redacted]

Medical/Rx Identification Card

PPO

BlueCross BlueShield of Arizona

Members: Please see your benefit booklet for covered services.

Possession of this card does not guarantee eligibility for benefits.

Hospital or physicians: file claims with your local BlueCross and/or BlueShield Plan.

BlueCross BlueShield of Arizona provides administrative and claims payment services only and does not assume any financial risk or obligation with respect to claims.

BlueCross BlueShield of Arizona
P.O. Box 2924
Phoenix, AZ 85062-2924
An Independent Licensee of the BlueCross and BlueShield Association

*Pharmacy benefit manager,
Contracts directly with group



Telehealth from AZ Blue

What services are offered?



Medical Care 24/7

Get treated for minor injuries and illnesses and non-emergency health issues like cold and flu symptoms, fevers, rashes, and stomach bugs. Doctors can also prescribe medications from your pharmacy of choice, if needed.



Counseling

You can get the benefits of an in-person counseling session online. Schedule an appointment with a board-certified counselor or psychologist to get help for depression and anxiety, as well as stress caused by grief, divorce, parenting challenges, job loss, and other major life changes.



Psychiatry

A board-certified psychiatrist is available by appointment. Experienced psychiatrists can help you address common mental health challenges, and provide assessments and treatments, as well as assist with medication management.

Care is available now!

Visit AZBlueTelehealth.com to start a visit.

Customer service line: 1-844-606-1612



AmeriBen Maternal Health

- Personalized support to assist in maintaining health and avoiding complications during and after pregnancy

Pharmacy Benefits Manager (PBM)

- Moving to SmithRx
- No change to copays, etc.
- Expanded network access - CVS
- Change in mail order and specialty pharmacies
 - AzMT will provide refill transfer files to automatically transfer open prescriptions
- Different philosophy - focused on lowest net cost for both member and Trust
- **Member engagement is required!**



Pharmacy Benefits Open Enrollment Info

Our mission is to reduce the cost and complexity of prescription drugs with radical transparency.



What is a PBM and how do I get my medications?

Pharmacy Benefit Managers (PBM) coordinate the interaction between your employer, physician and pharmacy.

How does the PBM help my pharmacy experience?

- Making sure you're charged the correct copay at the pharmacy.
- Setting up your medications to be covered according to your plan design.
- Managing clinical requirements related to your prescriptions.

How do I get coverage?

You're automatically covered when you enroll in your health plan.



Will my pharmacy experience change?

For most plan members, there will be little to no change.
Go to your usual pharmacy and get your medications.



Member ID Card

Remember to present your new card at the pharmacy.



Medication Coverage

You can find your formulary and benefits resources in our [Member Portal](#).



Member Support

Our dedicated Member Support team is available via 844.454.5201

6 am - 7 pm (MT) Mon-Fri

9 am - 2 pm (MT) Sat



Recommended Resource: Member Portal

Discover easy Rx benefits management in the Member Portal: smithrx.com/portal

Member ID Card

Access your Member ID Card and forms

Plan Usage Tracker

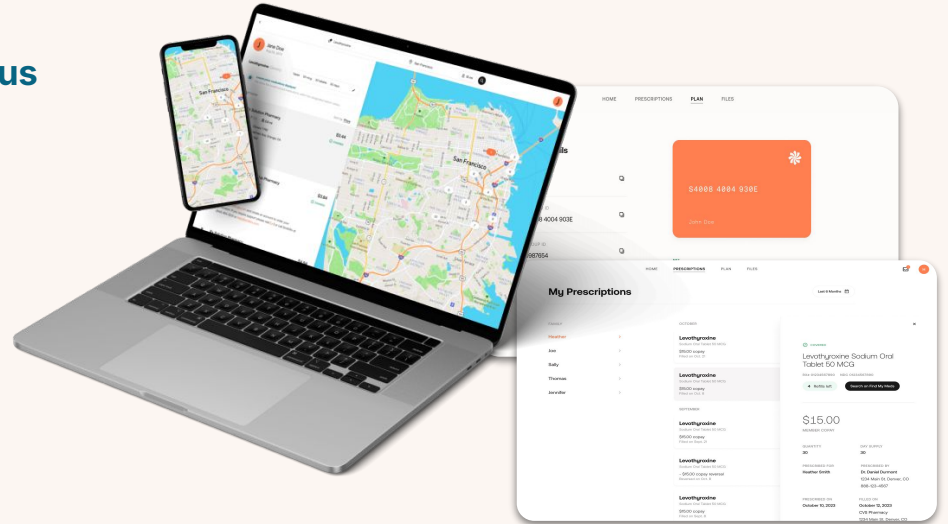
Track total spends against your plan deductible and out-of-pocket limits and the total spend breakdown

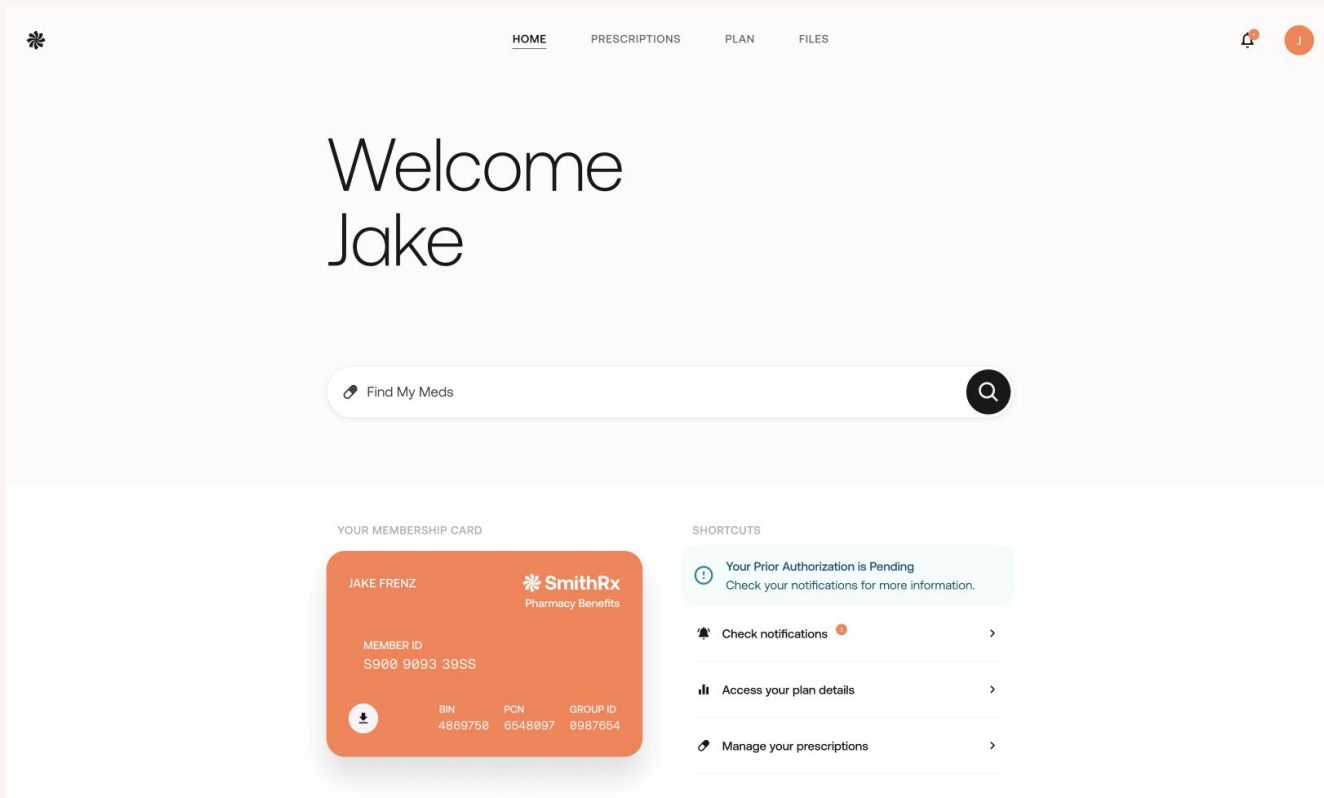
View Claims, PA status

View prescription claims. Get Prior Authorization Status Notifications

Find My Meds

Search for the lowest cost pharmacy near you with the Find My Meds tool





The screenshot shows a user dashboard for Jake Frenz. At the top, there is a navigation bar with a logo on the left and menu items: HOME, PRESCRIPTIONS, PLAN, and FILES. On the right of the navigation bar are a notification bell icon and a profile circle containing the letter 'J'. The main content area features a large 'Welcome Jake' greeting. Below this is a search bar with the placeholder text 'Find My Meds' and a magnifying glass icon. The dashboard is divided into two columns. The left column, titled 'YOUR MEMBERSHIP CARD', displays a digital membership card for Jake Frenz. The card includes the name 'JAKE FRENZ', the SmithRx logo, and the text 'Pharmacy Benefits'. It also lists the 'MEMBER ID' as 'S900 9093 39SS'. At the bottom of the card, there is a download icon and a table of identifiers: BIN (4869750), PCN (6548097), and GROUP ID (0987654). The right column, titled 'SHORTCUTS', contains a light blue notification box stating 'Your Prior Authorization is Pending' with a sub-message 'Check your notifications for more information.' Below this are three shortcut items: 'Check notifications' with a bell icon and a red notification dot, 'Access your plan details' with a bar chart icon, and 'Manage your prescriptions' with a pill icon. Each shortcut item has a right-pointing chevron.


HOME PRESCRIPTIONS PLAN FILES

🔔 J


Welcome Jake

🔍 Find My Meds


YOUR MEMBERSHIP CARD




JAKE FRENZ  Pharmacy Benefits

MEMBER ID
S900 9093 39SS

 BIN PCN GROUP ID
4869750 6548097 0987654

SHORTCUTS

 Your Prior Authorization is Pending
Check your notifications for more information.

-  Check notifications ● >
-  Access your plan details >
-  Manage your prescriptions >



Notifications



Test



Update: Access - Traditional (A-T) Program enrollment is Closed & Transitioned 10/1/2024

Prescription: Test



Update: Access Plus (AP) Program enrollment is Closed & Transitioned 9/27/2024

Prescription: Test



Action required! Savings for Test 9/28/2024

Access Plus (AP) Renewal Reference Number - Potential savings for Test



You may qualify for Access Plus (AP) Program 9/19/2024

Prescription: Test



You may qualify for International Sourcing (INT) Program 9/18/2024

Prescription: Test Drug Name



You may qualify for Access Plus - Med Pharm (AP-MP) Program 9/17/2024

Prescription: test



Hi TEST COPAYTEST-50!

Your enrollment for the Access - Traditional (A-T) Program is now Closed and you are now enrolled into the Access - Traditional (A-T) Program.

Your Reference Number is: 00753216 and was initiated on Oct 1st.

For any questions regarding your pharmacy benefits, **send us a chat**, or to speak with a Patient Access Specialist call us at **(844) 385-7612**.

Thank you.

Today, 10:36 AM



Hi TEST COPAYTEST-50!

The SmithRx Connect Team has attempted to reach you regarding the Access - Traditional (A-T) Program, which may help you save on Test.

If you have not yet connected with a SmithRx representative please **send us a chat** or give us call at **(844) 385-7612** to learn more and determine your eligibility.

We'll send you updates as your case moves forward. You may actively check the status of your case here in the SmithRx Member Portal as well. Your Reference Number is: 00753216

Thank you.

Today, 10:34 AM

Our Nationwide Pharmacy Network

65,000+ retail locations and growing

Retail Network

Mail Network

Specialty Pharmacy



Connect 360: Opportunities for more Rx savings

How our cost savings program works
to get help you achieve \$0 copay

1

If you're taking a qualifying drug, you may hear from SmithRx about additional cost savings programs

2

The SmithRx representative will help you navigate the savings program enrollment

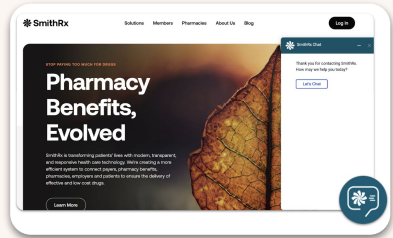
3

Ensure your HR team has your contact information on file so we can reach you and guide you through the easy cost-savings process



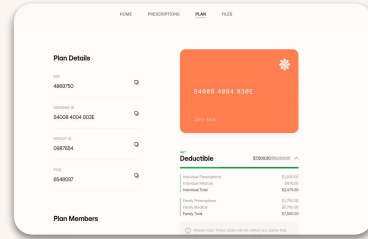
SmithRx Member Services

We make it easy and convenient for you to access your medications and Rx benefits.



Live Chat

Just click the chat icon on the bottom-right of the web page to start.



Member Portal

Create an account on our Member Portal at smithrx.com/portal. Access answers to FAQs.



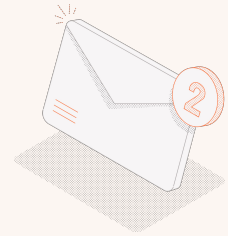
Phone

(844) 454-5201

Member Specialists are available:

6 am - 7 pm (MT) Mon-Fri

9 am - 2 pm (MT) Sat

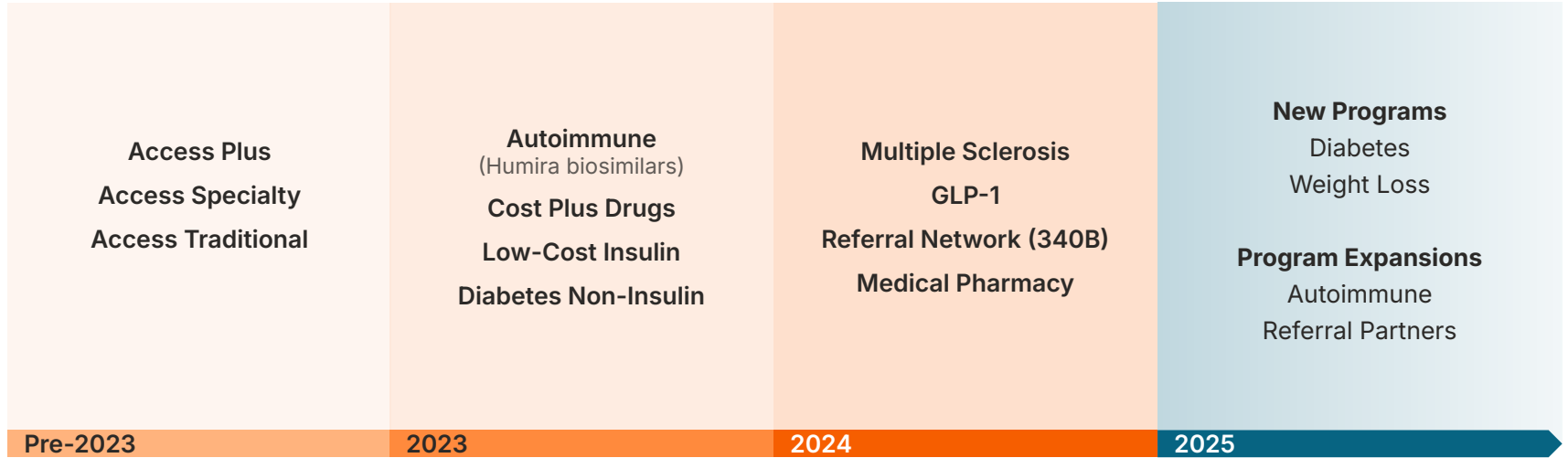


Email

Email: help@smithrx.com



Cost Savings Programs Adapted to Market Needs



Connect 360: Opportunities for Rx Savings

What are the Connect 360 Programs?

Access (CA-S & CA-T): Capture manufacturer coupon savings on traditional and specialty medications. Members have a low or \$0 copay on prescriptions while also helping employers save on pharmacy benefit costs.

Access Plus: Leverages advocacy foundations and grant programs to reduce cost when a high-cost specialty medication is not covered under the pharmacy benefit. We assist members in navigating and applying to these different programs.

Autoimmune: Through this program, SmithRx members can now access low cost, FDA-approved biosimilars such as Yusimry, a biosimilar for Humira, and Otulfi, a biosimilar for Stelara, through Cost Plus Drugs and Costco Specialty Pharmacy. FDA-approved biosimilars have no clinically meaningful differences in terms of safety and effectiveness from their brand-name counterparts, while offering a more affordable option for members with autoimmune conditions.

Low-Cost Insulin (LCI): This program helps reduce insulin costs at the pharmacy by transitioning to generic and biosimilar insulin products.

Diabetes Non-Insulin (DNI): Through our partnership with Cost Plus Drugs, we are offering Brenzavvy, an SGLT2 inhibitor, as the lowest cost option for members with type 2 diabetes.

Cost Plus Drugs : Cost Plus Drugs is building an innovative pharmacy model that delivers medications at cost, plus a straightforward 15% markup, along with a \$5 dispensing fee and shipping. Cost Plus Drugs carries over 1,000 medications and is continuing to expand their drug list weekly.

Multiple Sclerosis (MS) (at Cost Plus Drugs) The lowest-cost Multiple Sclerosis products on the market through Cost Plus Drugs. Generics offer substantial upfront savings.

Referral Partner Program (340B) Provides members with lower net costs for eligible program medications. By providing access to discounted medications, the 340B program helps eligible healthcare organizations stretch their resources further, enhance patient care, and improve health outcomes.



Thank you!

Thank you for being a valued member of our plan.





**Patient (Member)
Support**

**Toll-free
Phone Number**
(844) 454 - 5201

Email
help@smithrx.com

Hours of Operation
Monday – Friday
8 a.m. – 9 p.m EST

Saturday
11 a.m. – 4 p.m EST



**Pharmacy /
Provider Line**

**Toll-free
Phone Number**
(844) 512 - 3030

Toll-free Fax Number
(866) 642 - 5620

Email
provider@smithrx.com



**Connect
Patient Support**

**Toll-free
Phone Number**
(844) 385 - 7612

Toll-free Fax Number
(866) 642 - 5620

Connect Access Plus
(844) 385 - 4565

**Connect Access
Specialty & Traditional**
(844) 385 - 7612

Email
connect@smithrx.com

Hours of Operation
Monday – Friday
8 a.m. – 8 p.m. EST



Corporate

**Toll-free
Phone Number**
(844) 454 - 0123

Toll-free Fax Number
(866) 642 - 5620

Email
info@smithrx.com

Address
P.O. Box 77864
San Francisco, CA
94107

**Find self-serve tools
and resources in the
SmithRx Member Portal**

*SMS text and emails apply if SmithRx has the updated member contact information. You can update your contact information in the member portal - simply click your profile to add your email and phone number.





Delta Dental of AZ

2026-27 Plan Changes and Monthly Premiums

- No Plan, Benefit or Premium Changes

	Total Premium	City Contribution	Employee Contribution	Per Pay Period
\$2,000 Base Plan (Dependents to Age 19)				
EE - Single	\$40.96	\$40.96	\$0.00	\$0.00
EE + Spouse	\$78.86	\$78.86	\$0.00	\$0.00
EE + Child(ren)	\$88.27	\$88.27	\$0.00	\$0.00
EE + Family	\$130.16	\$130.16	\$0.00	\$0.00
\$4,000 Buy-Up Plan (Dependents to Age 26)				
EE - Single	\$42.41	\$40.96	\$1.45	\$0.73
EE + Spouse	\$81.80	\$78.86	\$2.94	\$1.47
EE + Child(ren)	\$96.07	\$88.27	\$7.80	\$3.90
EE + Family	\$141.80	\$130.16	\$11.64	\$5.82

Please Note: If you elect the Basic Plan and you have a dependent who will reach Age 19 during the 2025-26 plan year, that is NOT considered a qualifying event and you will not be able to elect the Buy-Up Plan mid-year.



VSP Vision Plan

2026-27 Vision Plan Changes & Monthly Premiums

- No Plan or Benefit Changes
- Premiums TBA!



Employee Assistance Program (EAP)

CuraLinc

- 6 Free Visits per “Issue” per Year
- Family Assist
- Legal Assist
- Safe Ride
- Website: www.supportlinc.com
 - User Name - azmt



securian
FINANCIAL

Life Insurance

2026-27 Life Insurance Changes

- One-Time Open Enrollment Opportunity for Employees
 - \$10,000 Supplemental Life with No Medical Questions
 - Resulting Amount of Insurance Can't Exceed \$300,000
- Update your Beneficiary
- Please contact HR with questions!





Disability Benefits

Short-Term Disability (STD)

- Paycheck protection for short-term illness or injury that requires time off
- Employer paid - Coverage through Mutual of Omaha
- 14-Day Elimination Period
- Provides 60% of Salary up to \$1,900/Week up to 24 Weeks

VOLUNTARY BENEFITS

GALLAGHER MARKETPLACE

- Access to Gallagher Marketplace
- Additional Discounted Benefits
 - Home and Auto Insurance
 - Boat, RV or Renters Insurance
 - Pet Insurance
 - And more...
- Enroll Anytime
- Simple Enrollment Process with Payment Options
- Easily Compare Rates from Multiple Carriers

GALLAGHER MARKETPLACE

How it works



All programs are portable so you can keep the coverage no matter where life takes you

Visit [Gallagher Marketplace](#) to get started.

When prompted to enter your employer's name, please use AzMT.

VOLUNTARY BENEFITS

- Group Accident Plan

- The Group Accident Plan is available through Securian and provides coverage for covered injuries and services.



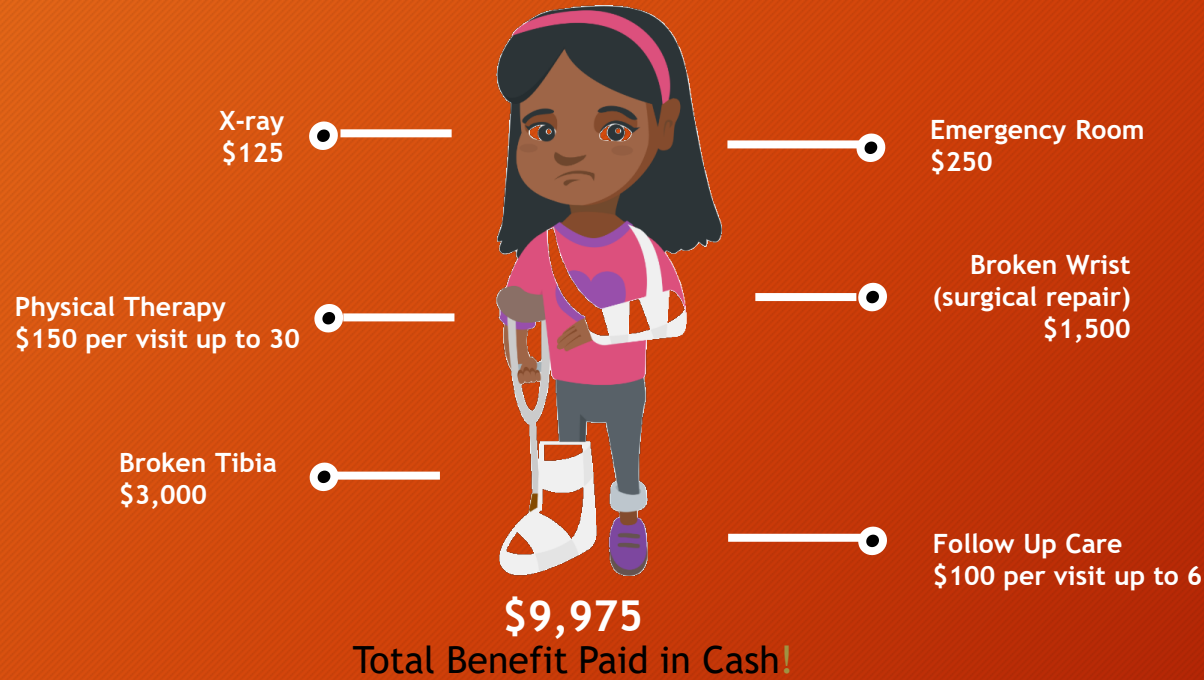
Incident	Payout
Emergency Room	\$250
Ambulance Benefit (Ground/Air)	\$400/\$1,500
Hospital Admission (General/ICU)	\$1,000/\$2,000
Daily Hospital Confinement	Up to \$200/day
Intensive Care Unit	Up to \$400/day
Follow Up Treatment by Physician	\$100 (Up to 6 Visits)
Urgent Care Treatment	\$200
Physical Therapy	\$150 Per Visit (Up to 30 Days)
Fracture/Dislocation	Up to \$9,000/ Up to \$6,000
Wellness	\$50 Per Insured Per Calendar Year

	EE Only	EE + Spouse	EE + Child	EE + Family
Cost Per Month	\$9.14	\$14.97	\$20.29	\$29.08
Wellness	\$50	\$100	\$100 +	\$150 +
Net Cost Monthly	\$4.98	\$6.64	\$11.96	\$16.58

How Your Accident Plan Works With Your Medical Insurance



Injury Example



Medical Plan	Deductible / Out of Pocket Maximum	Insurance Claim Expense	Accident Claim Amount	Out of Pocket Expense
PPO	\$750 individual (\$3,500 Out of Packet Max)	\$20,000	\$9,975	\$0 with \$6,475 for other expenses
HDHP	\$3,300 individual and Out of Pocket Max	\$20,000	\$9,975	\$0 with \$6,675 for other expenses

This is not intended to show the exact pay out on every broken leg. Payouts may be higher or lower depending on your situation. Please refer to your actual policy.

Group Critical Illness Plan



The Group Critical Illness Plan is available through Securian. This plan provides coverage in a lump-sum benefit if you are diagnosed with an illness below, amongst others. You can choose a benefit between \$10k, \$20k, and \$30k. Your spouse can elect 100% of your coverage and children are eligible for 50%.

Incident	Payout
Heart Attack	100%
Stroke	100%
Invasive Cancer	100%
Non-Invasive Cancer (Carcinoma In Situ)	25%
Major Organ Failure	100%
ALS	100%
Alzheimer's Disease	100%
Benign Brain Tumor	100%
MS	100%
Parkinson's Disease	100%
Coronary Artery Bypass	25%
End Stage Renal Failure	100%
Wellness	\$50 Per Calendar Year
Recurrence (1 Month Separation)	Up to 100%

Rates will vary based on age and amount of coverage elected.

How Your Critical Illness Plan Works With Your Medical Plan



Example \$20,000 Policy

Cancer Diagnosis
\$20,000



Medical Plan	Deductible / Out of Pocket Maximum	Insurance Claim Expense	Accident Claim Amount	Out of Pocket Expense
PPO	\$750 individual (\$3,500 Out of Packet Max)	\$50,000	\$20,000	\$0 with \$16,500 for other expenses
HDHP	\$3,300 individual and Out of Pocket Max (\$4,000 Out of Packet Max)	\$50,000	\$20,000	\$0 with \$16,700 for other expenses

This is not intended to show the exact pay out on every cancer diagnosis. Payouts may be higher or lower depending on your situation. Please refer to your actual policy.

Group Hospital Plan



Securian Hospital Indemnity provides coverage if you are treated for an illness or injury. Pre-existing conditions are waived for all enrollees.

Incident	Payout
Hospitalization	\$1,000 (\$2,000 If ICU)
Daily Hospitalization / ICU Confinement	\$200 per day (up to 30 days) / \$400 ICU per day (up to 10 days)
Newborn Care Admission	\$200 (up to 3 days)
Inpatient Mental Health Disorder Stay	\$200 (up to 30 days)
Inpatient Substance Abuse Disorder Stay	\$200 (up to 30 days)
Outpatient Mental Health and Substance Abuse Disorder Diagnostic Screening	\$200 (up to 1 per year)
Wellness	\$50 Per Insured Per Year

Group Hospital Plan

Example 2-day maternity stay

Hospital Admission
\$1,000

New Born Benefit
\$200

Daily Benefit
\$200



\$1,800

Total Benefit Paid in Cash!

	EE Only	EE + Spouse	EE + Child	EE + Family
Cost Per Month	\$20.04	\$44.12	\$31.17	\$57.84
Wellness	\$50	\$100	\$100 +	\$150 +
Net Cost Monthly	\$15.88	\$35.79	\$22.84	\$45.34

How to Enroll

To enroll in these benefits visit the employee navigator site using the following instructions:

Link: <https://www.employeenavigator.com/benefits/Account/Register>

Enter your:

- First Name
- Last Name
- AZMT Company Identifier: AZTRUST
- PIN (Last 4 digits of your SSN)
- Date of Birth (mm/dd/yyyy)



2026-27 Wellness

AzMT L.I.V.E.

Early Detection Through Preventive Screenings

- Preventive and early detection screenings are brought onsite to provide members a convenient and timely way to protect their health. Preventive screenings and services brought onsite through the AzMT Wellness Program are covered at 100% for eligible AzMT medical plan members. On-site events include, but not limited to, the following:
 - Health Risk Assessment
 - Skin Cancer Screenings
 - Cardiac and Organ Screenings
 - Mammograms

* Preventive screenings and services are subject to change. Watch for emails and flyers with more details.

AzMT L.I.V.E.



Wellness Program Overview

AzMT offers a comprehensive Wellness Program, AzMT L.I.V.E. (Live. In. Vitality. Everyday.), to all members, which focuses on early detection, lifestyle modification, and disease management. Below is a brief overview of major program offerings available to AzMT medical benefit plan members.

EARLY DETECTION THROUGH PREVENTIVE SCREENINGS

Preventive and early detection screenings are brought onsite to provide members with a convenient and timely way to protect their health including, but not limited to, the following:

- Health Risk Assessment
- Skin Cancer Screenings
- Cardiac and Organ Screenings
- Mammograms



SWORD - DIGITAL PHYSICAL THERAPY

Thrive

Movement is medicine. Sword uses sensor technology to deliver a physical therapy program that can be done anywhere, anytime. All the movement data is then shared with your paired physical therapist, who adapts the program based on actual performance.

Bloom

Bloom is a new, digital pelvic-therapy solution that can help women who have suffered from urinary leaking, bowel disorders, pelvic pain, and more. Bloom can be for women in all stages of life including pregnancy, postpartum, menopause, and post-menopause.



WELLNESS PORTAL THROUGH PERSONIFY HEALTH!

Personify Health is a wellness portal designed to help you track your healthy habits, create new ones, learn about health topics that are important to you, and much more! By engaging in the portal, you earn points that can be redeemed for big rewards.

Members can earn up to \$100 in Personify Cash every year!



Use these rewards to shop in the Personify Health Store.
Sign up using the link:
<https://enroll.personifyhealth.com/#/enrollmentGroup/s/00923931-98ad-4352-934b-83cbf734750b/step/1>
or scan the QR code!



MONTHLY NEWSLETTER

Each month AzMT offers a free digital wellness newsletter that includes health information and upcoming events in the L.I.V.E. wellness program.

Opt-in to the newsletter by scanning the QR code or using the link below. Members can sign up with the email of their choice.



AzMT Wellness Newsletter Sign up link:
<https://jp.constantcontactpages.com/sl/U6vbW00/azmtnewsletter>

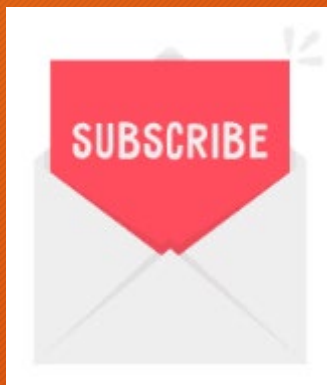
For questions, please reach out to HR.

Stay Informed

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Text Message Notifications

Text messages are sent out as reminders for upcoming on-site screenings and services. Text AzMTwellness to 844-539-1233 to opt in!



What's Next

- You only need to take action during this Open Enrollment if you want to make a change to your in-force coverage (except FSA)
- **You must enroll in the FSA annually**
- You are not required to re-enroll in the HSA, however, it is recommended that you review your contribution amounts to ensure they reflect your needs (HDHP Plan Only)
- NEW ID CARDS for ALL
- Revised Summary Plan Documents (SPDs) - Will be Mailed

**ENROLL OR MAKE CHANGES USING THE ENROLLMENT PROCESS AVAILABLE
THROUGH YOUR EMPLOYER BY 5:00PM ON
MAY 02, 2026. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT HUMAN RESOURCES
AT 623.935.5041.**

Questions?

- Contact Jaime Schulenberg, AzMT's Pool Administrator, at:
 - Jaime_Schulenberg@ajg.com
 - 928.391.2297
- Or any of the vendors who provide services to the Plan(s)!