Employee FAQ

Can't find the answer you're looking for? Explore our most common queries below or reach out to our team for personalized guidance on optimizing your business's financial health.

1. Will this program reduce my take-home pay?

No. Your net take-home pay typically stays the same. In many cases, employees may see a small increase in their take-home pay due to the way the program is structured.

2. Does this replace my current health insurance?

No. This program does not replace major medical insurance. It provides additional healthcare benefits that complement any coverage you may already have.

3. Will this affect my current insurance?

No. Your current insurance coverage does not change.

4. Do I need to have insurance to enroll?

No. Employees do not need existing insurance to participate. The program includes Minimum Essential Coverage (MEC) to satisfy ACA preventive care requirements.

5. What if I'm on Medicaid?

Employees on Medicaid cannot participate through pre-tax payroll deductions. If this applies to you, please notify your employer so your enrollment can be handled appropriately.

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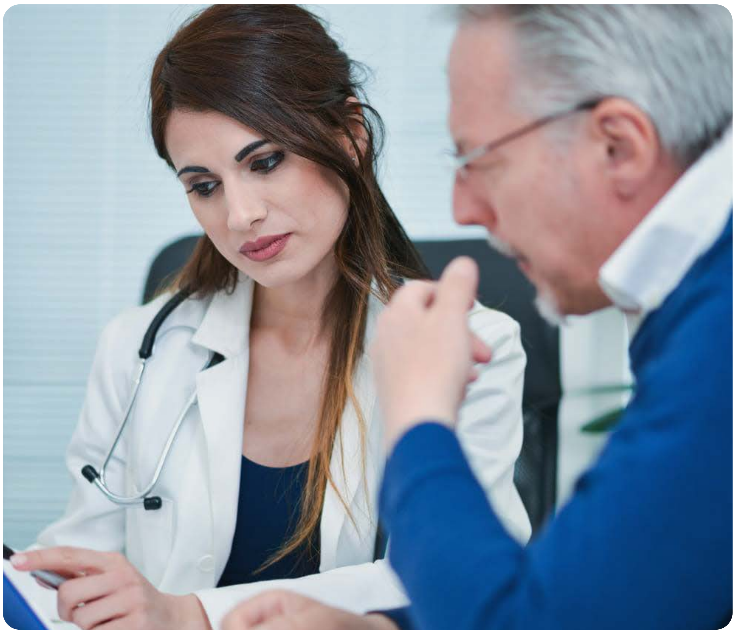

7. Are there any out-of-pocket expenses that get reimbursed?

No reimbursement claims are required. The program provides direct access to healthcare services, rather than reimbursement payments.

8. How are these benefits provided at no cost to me?

The program uses a tax-efficient structure under federal benefit rules that allows employees to receive valuable healthcare benefits without increasing their out-of-pocket costs.

9. Where do I access the benefits?

You will receive login credentials to access the online healthcare platform. Credentials are typically sent 2–3 weeks after your employer's program go-live date.

10. When can I start using the benefits?

As soon as you receive your login credentials, you can begin using your benefits immediately.

11. Are my dependents covered right away?

Yes. Once dependents are enrolled, they can begin using the virtual care benefits immediately.

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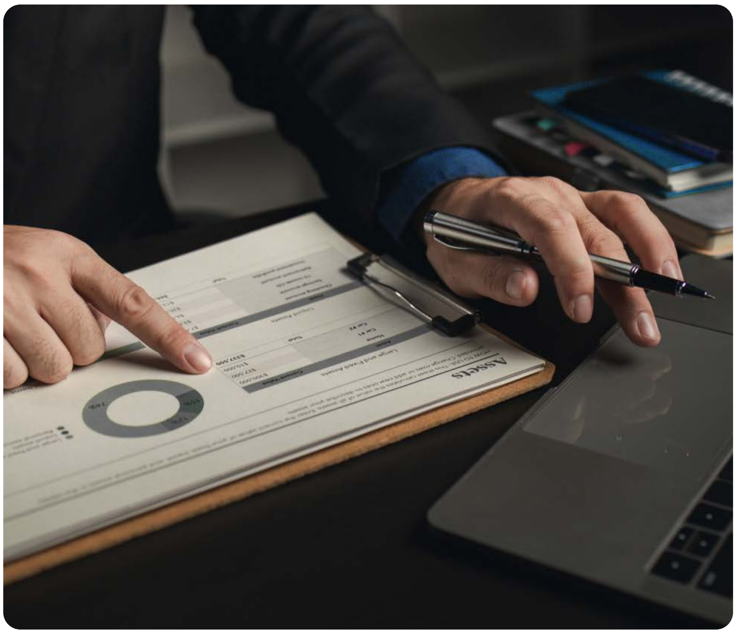

12. How many family members can I add?

You may enroll up to 7 additional family members, for a total of 8 covered individuals including yourself.

13. What benefits are included?

Employees and enrolled dependents have access to:

VIRTUAL PRIMARY CARE
Unlimited visits

VIRTUAL URGENT CARE
Unlimited visits available 24/7

MENTAL HEALTH COUNSELING
Unlimited counseling sessions available 24/7

PRESCRIPTION PROGRAM
- Over 1,000 common generic medications available at no cost
- Unlimited use when prescribed through the platform

MINIMUM ESSENTIAL COVERAGE (DIRECT EMPLOYEE ONLY)
The MEC plan provides additional benefits for the employee, including:

- 3 in-person primary care visits per year
- 3,500 additional prescription medications
- Hospital bill eraser benefit

Call 866-725-0777 to access your benefits.
These MEC benefits apply only to the enrolled employee and do not extend to family members.

GROUP WHOLE LIFE INSURANCE
Employees, if eligible, are also provided a permanent life insurance policy with:

- Death benefit up to $150,000
- Average dividend of approximately 6.5% annually on the policy's cash accumulation value
- Portable coverage that can continue even if you leave your employer

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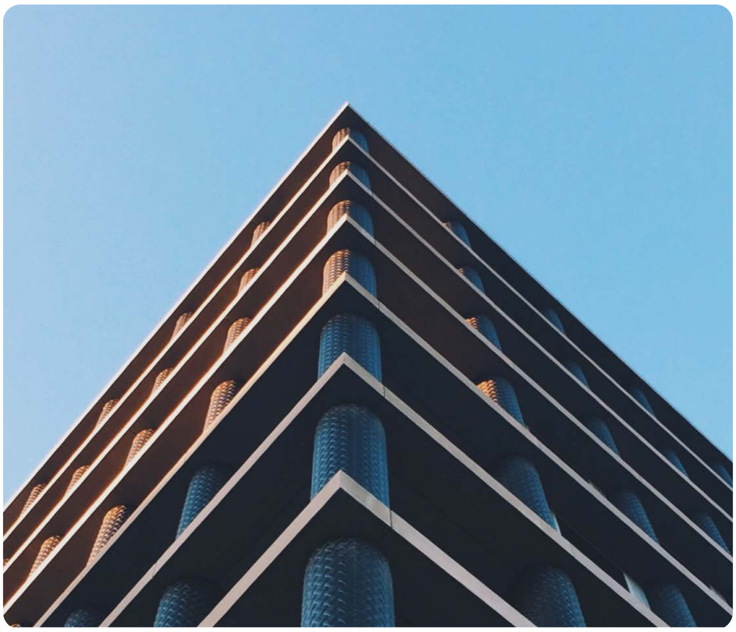

14. What prescriptions are included?

More than 1,000 common generic medications are available at no cost when prescribed through the platform. Additional medications may be available through the MEC prescription benefit.

15. Do I need to fill out forms to get started?

No complicated paperwork is required. Most employees are automatically enrolled by their employer.

16. Will I receive an insurance card?

No insurance card is required for virtual services. Benefits are accessed through the online platform or by phone. You will receive a MEC card by email, if eligible.

17. Can I use these benefits if I move to another state?

Yes. Virtual healthcare services are available nationwide.

18. Am I required to participate?

Yes. The program requires at least one form of benefit utilization each year. This can be from you or any enrolled family member.

EXAMPLES OF ACCEPTABLE UTILIZATION INCLUDE:

- Filling a prescription
- Completing a virtual primary care visit
- Using a mental health counseling session
- Using a virtual urgent care visit

GENERAL PROGRAM QUESTIONS

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19. Was this approved by my employer?

Yes. Your employer chose to offer this program to provide additional healthcare and financial protection benefits to employees and their families.

20. Do the benefits expire at the end of the year?

No. Benefits remain active as long as you remain enrolled and your employer maintains the program.

21. What happens if I leave the company?

Your participation in the program will end when your employment ends.

22. Can I continue my life insurance policy if I leave the company?

Yes. You typically have three options:

- Continue paying the premiums yourself
- Have a future employer continue the policy
- Surrender the policy and receive the available cash value

23. Do I have to use certain doctors or providers?

Virtual healthcare services are available nationwide through the platform. If additional care is needed, the provider will guide you on the appropriate next steps.

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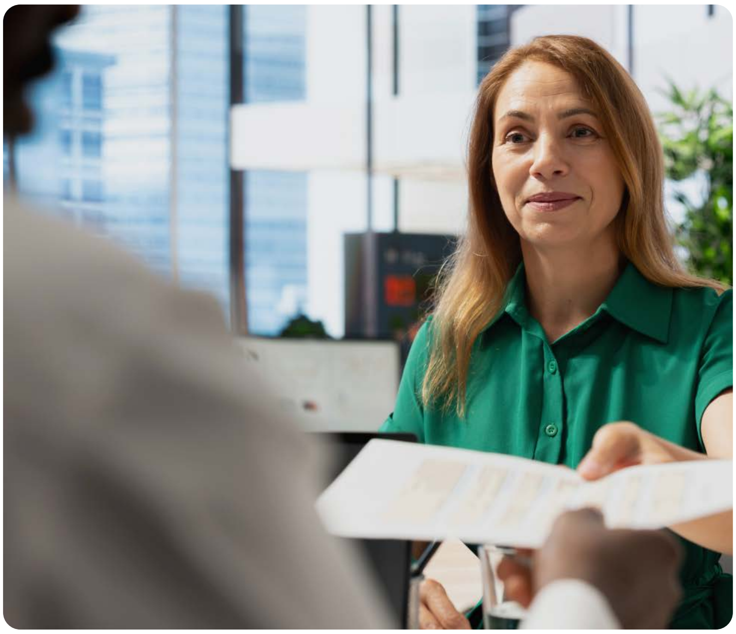

24. Does this affect my eligibility for HSA or FSA accounts?

No. This program works alongside FSA accounts and generally does not interfere with FSA usage. Employees with HSAs should follow their employer's enrollment guidance.

25. Will my personal health information be shared with my employer?

No. Your medical information is protected under HIPAA privacy laws. Your employer only receives general participation data, not personal health records.

26. Do I need internet access to use the benefits?

Virtual visits require either internet access or a phone connection.

27. Can I change my dependents during the year?

Yes. Dependents can be added or updated during open enrollment or after a qualifying life event such as marriage, birth, or adoption.

28. Can I use these benefits while traveling?

Yes. Virtual care services and prescription support are available anywhere within the United States and outlying territories.

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29. How will this affect my W-2 at the end of the year?

You do not need to fill out any extra paperwork or check any extra boxes. All that is happening is that your gross taxable wages are being reduced, which likely results in you paying less tax at tax time.

30. Will participation in this program impact how income is reported on my W-2 or affect how I file my taxes?

The program reduces the taxable wages reported on your W-2 due to how the benefits are structured under your employer's benefit plan. Most employees do not need to do anything different when filing their taxes and can file normally using the W-2 provided by their employer.

31. Does this program affect the wages reported to the Social Security Administration?

Because part of your compensation is allocated toward qualified employee benefits, the wages reported for Social Security and Medicare tax purposes may be slightly lower than they otherwise would have been. This treatment is common for many employer-sponsored pre-tax benefit programs.

32. Will participation impact my future Social Security retirement benefits?

For most employees, the difference in Social Security wages is very small and typically does not meaningfully impact future retirement benefits. Social Security benefits are calculated using lifetime earnings, so small changes in a single year generally have minimal effect.

Employees also typically receive higher take-home pay during the year, and when factoring in long-term inflation, there is almost no realistic chance of experiencing a negative real impact at retirement.

For employees who receive the included life insurance policy, the long-term financial protection and potential cash value accumulation provide an additional layer of financial security, meaning participants should not experience a negative financial outcome at retirement due to participating in the program.

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33. What happens if I am enrolled in a Health Insurance Marketplace plan or Medicare?

Employees who are enrolled in Medicare are not affected by this program, and participation does not change Medicare eligibility or benefits. Employees who receive subsidized coverage through the Health Insurance Marketplace may want to review their eligibility requirements. Because Marketplace subsidies are based on household income, changes to taxable income could potentially affect subsidy calculations.

34. If I currently have subsidized coverage through the Health Insurance Marketplace or another group health plan, can I still participate?

In many cases, employees can still participate. However, employees receiving income-based Marketplace subsidies should be aware that subsidy eligibility depends on household income. Participation in this program does not replace or interfere with any existing major medical coverage you may have.

35. Who should I contact if I have questions about the program?

If you have questions about your benefits or how the program works, you can contact the benefits support team:

IronGate Benefits Support
Email: benefits@igbusinessadvisors.com
Phone: 844-431-0089

If you wish to opt-out of the program, click the Opt-Out link in the newsletter email to complete the required survey.

36. Free Quest lab testing for CBC and CMP after 90 days being on the plan?

Yes. Free Quest lab testing for CBC and CMP is available to members after completing 90 days on the plan.