

# 2026 Benefit Review

Benefit Review & Enrollment Process for Oak Harbor Employees





# What is Enrollment?

Your opportunity to enroll in or opt out of benefits and elect coverage for your qualified dependents.

- Please provide the required back up (marriage and/or birth certificates) if adding dependents to your health plan.
- Legally Married Spouses and Child(ren) are eligible for RGA benefits. Child(ren) up to age 26.

Enrollment is completed online through Dayforce at [www.dayforcehcm.com](http://www.dayforcehcm.com).

Enrollment must be completed by the end of your 2<sup>nd</sup> month of employment.

Visit [www.oakharborbenefits.com](http://www.oakharborbenefits.com) for more information.

For questions, call the Human Resources Department at:  
(206) 865-0167 or email at [benefits@oakh.com](mailto:benefits@oakh.com)



# Life Event Plan Changes

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You are only able to add or drop coverage or make election changes during the plan year, if you have a qualifying life event such as:

- Change in marital status
- Change in number of dependents
- Change in employment status
- Change in eligibility status

Documentation is required for all life event changes.

Enrollment is completed online through Dayforce at [www.dayforcehcm.com](http://www.dayforcehcm.com).

Enrollment must be completed by within 2 months of the date of the life event.

For questions, call the Human Resources Department at:  
(206) 865-0167 or email at [benefits@oakh.com](mailto:benefits@oakh.com)



# Benefit Partners – 2026

|                                                                            |                                    |
|----------------------------------------------------------------------------|------------------------------------|
| Medical, Dental and Vision                                                 | RGA – Regence Group Administrators |
| Prescription Drug                                                          | OptumRx                            |
| Health Savings Account (HSA)                                               | HSA Bank                           |
| Life, AD&D, Short Term Disability, Accident, Critical Illness and Hospital | Unum                               |
| Employee Assistance and Life Balance Program                               | Canopy                             |
| Flexible Spending Accounts                                                 | Navia Benefit Solutions            |
| 401(k) Financial Advisor                                                   | RBC Wealth Management              |
| 401(k) Investment Options/Loans                                            | NWPS                               |



# Who is Eligible for Benefits?

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- Employee
  - Full-Time working a minimum of 80 hours per month.
  - Part-Time for RGA benefits – if eligible under the ACA (Affordable Care Act) guidelines.
- Spouse
  - Legally married Spouse.
- Child(ren)
  - Covered up to age 26 regardless of marital, student or dependent status.



# Common Health Care Benefits Definitions

## What is a deductible?

The amount you have to pay for certain benefits before your plan begins paying a portion of the costs, for eligible services.

## What is a copay?

A set fee you are required to pay at the time of service, such as at the pharmacy or for an office visit on the PPO or HDPPO plan.

## What does out-of-pocket mean?

This is the amount you pay out of your pocket for health care services during the calendar year. It includes the deductible, copays and coinsurance

## What is coinsurance?

This is the percentage of health care costs covered by your plan and you after your deductible has been met.

# Cost of Coverage – Medical, Dental & Vision



|                              | Plan 1 - PPO | Plan 2 - High Deductible PPO | Plan 3 - Qualified High Deductible Health Plan with HSA |
|------------------------------|--------------|------------------------------|---------------------------------------------------------|
| Employee Only                | 2%           | 1%                           | 0%                                                      |
| Employee + Spouse            | 3%           | 2%                           | 1%                                                      |
| Employee + Children          | 3%           | 2%                           | 1%                                                      |
| Employee + Spouse + Children | 4%           | 2%                           | 1%                                                      |

| Cost Per Paycheck       | Dental Only | Vision Only | Dental and Vision Only |
|-------------------------|-------------|-------------|------------------------|
| Employee Only           | \$10        | \$2.50      | \$12.50                |
| Employee + Dependent(s) | \$20        | \$5         | \$25.00                |

% of Gross Wages, contributed each paycheck. DOES NOT include applicable Spousal Surcharge



# Spousal Surcharge

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- You will be charged a \$200/month (\$100 each regular paycheck) spousal surcharge if:
  - Your spouse has group coverage available with their employer but are not enrolled.
  - Your spouse is enrolled in group coverage with their employer and want to be on your plan.
- You can waive this surcharge if...
  - Your spouse's employer does not offer group coverage.
  - Your spouse is on federal benefits such as Medicare or Medicaid.
  - Your spouse is not employed and/or not on federal benefits.
- \$100 per regular paycheck surcharge will apply.
- Does not apply for Dental or Vision Only coverage, only if you are on a Medical Plan with RGA.
- Does not apply if both Employee and Spouse work for Oak Harbor.



# Medical – In-Network (Preferred) Highlights



| <b>RGA Preferred Network</b><br><b>www.accessrga.com</b>                       | <b>Plan 1 - PPO</b>                                                       | <b>Plan 2 - High Deductible PPO</b>                                       | <b>Plan 3 - Qualified High Deductible Health Plan with HSA</b> |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------------|
| <b>Calendar Year Deductible</b>                                                | \$1,000 per individual<br>\$2,000 per family                              | \$2,500 per individual<br>\$5,000 per family                              | \$2,500 per individual<br>\$5,000 aggregate per family*        |
| <b>Calendar Year Out-of-Pocket Maximum</b>                                     | \$4,000 per individual<br>\$8,000 per family                              | \$5,500 per individual<br>\$11,000 per family                             | \$5,500 per individual<br>\$11,000 aggregate per family*       |
| <b>Plan Coinsurance</b>                                                        | 80%                                                                       | 80%                                                                       | 80%                                                            |
| <b>Office Visits incl. telemedicine visits</b>                                 | Primary Care: \$25 copay<br>Specialist: \$40 copay<br>(deductible waived) | Primary Care: \$35 copay<br>Specialist: \$50 copay<br>(deductible waived) | 80%                                                            |
| <b>Physical, Occupational, Speech and Massage Therapy (visit limits apply)</b> | 80%                                                                       | 80%                                                                       | 80%                                                            |
| <b>Emergency Room</b>                                                          | \$150 copay, then 80%                                                     | \$250 copay, then 80%                                                     | 80%                                                            |

\*Aggregate If more than one person is covered on the Qualified High Deductible Health Plan with HSA, the family deductible will need to be satisfied before services are covered for any family member. In addition, the family out-of-pocket maximum will apply for services obtained by any family member; however, the maximum out-of-pocket for any individual in a family is \$8,500.

Percentages listed are what is paid by the plan. Deductible applies unless indicated as deductible waived



# Medical – Preventive Care

**PREVENTIVE CARE** – Covered at 100% on all three medical plan options when using Preferred providers.

Know what services are covered at 100% by RGA prior to your preventive care visit -

<https://www.healthcare.gov/coverage/preventive-care-benefits/>

## **Routine preventive for Children (birth to age 18)**

Appropriate screenings based on gender and age

- Newborn visits
- Tuberculosis testing
- Anemia testing
- Lead exposure
- Pelvic exam and pap test
- Development and behavior
- Lipid profile
- Depression
- Obesity and counseling
- Nutrition counseling

## **Routine preventive for Adults**

Appropriate screenings based on gender and age

- Lipid profile
- Diabetes
- Pelvic exam and pap testing
- Breast exam and mammogram
- PSA testing
- Bone density testing
- Colonoscopy
- Aortic aneurysm





# Medical – Know Where to Go for Care

## Primary Care Provider

|                                                                                                           |                                                                                                          |                                                                                               |                                                                                                                    |                                                                                                                  |                                                                                                            |
|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
|  Mild Fever              |  Cough                  |  Migraines |  Sore Throat                    |  Nausea, Vomiting, & Diarrhea |  Animal or Insect Bites |
|  Urinary Tract Infection |  Cold, Flu, & Allergies |  Pink Eye  |  Rashes & Other Skin Conditions |  Earache                      |  Mental Health          |

## Urgent Care

|                                                                                                 |                                                                                                  |                                                                                                 |                                                                                                           |                                                                                                 |                                                                                                       |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
|  Fever No Rash |  Abdominal Pain |  Dehydration |  Minor Cuts & Stitches |  Minor Burns |  Sprains & Strains |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|

## Emergency Room

|                                                                                                                                   |                                                                                                                                 |                                                                                                                       |                                                                                                                     |                                                                                                                                |                                                                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
|  High Fever                                    |  Head Injuries                               |  Chest Pain or Trouble Breathing |  Poisoning or Drug Overdose    |  Severe Burns                             |  Major Traumas                         |
|  Open Wounds & Bleeding that cannot be Stopped |  Confusion or Sudden Changes in Mental State |  Severe Stomach Pain             |  Coughing up or Vomiting Blood |  Pregnancy Problems & Infants with Fevers |  Sudden Numbness Weakness or Paralysis |



# Prescription Drug – In-Network (Preferred) Highlights

| In -Network                               | Plan 1 - PPO   | Plan 2 - High Deductible PPO | Plan 3 - Qualified High Deductible Health Plan with HSA |
|-------------------------------------------|----------------|------------------------------|---------------------------------------------------------|
| Medical Deductible                        | Does Not Apply | Does Not Apply               | Subject to Deductible*                                  |
| Retail Prescription Drugs (up to 30 days) |                |                              |                                                         |
| Generic                                   | \$10 copay     | \$20 copay                   | 20%                                                     |
| Preferred Brand                           | \$35 copay     | \$45 copay                   | 20%                                                     |
| Non-Preferred Brand                       | 30%            | 30%                          | 20%                                                     |
| Specialty                                 | 20%            | 20%                          | 20%                                                     |
| Mail-Order Prescriptions (up to 90 days)  |                |                              |                                                         |
| Mandatory for Maintenance**?              | Yes            | Yes                          | Yes                                                     |
| Generic                                   | \$20 copay     | \$40 copay                   | 20%                                                     |
| Preferred Brand                           | \$70 copay     | \$90 copay                   | 20%                                                     |
| Non-Preferred Brand                       | 30%            | 30%                          | 20%                                                     |

- Copays and percentages listed are what you pay

\* Deductible is waived for preventive medications on OptumRx's Prescription Drug List

\*\* Maintenance medications are prescription drugs taken daily or monthly on a consistent basis

Mandatory Generic Program: All plans requires the pharmacist to fill the prescription with a generic product whenever available unless requested by your provider. If the prescription is filled with a brand prescription at the request of either you or your pharmacy, then the copay plus the difference between ingredient cost of the generic drug and the brand name drug will be charged.





# Dental – Benefit Highlights

| RGA Network <a href="http://www.accessrga.com">www.accessrga.com</a> |                                        |
|----------------------------------------------------------------------|----------------------------------------|
| Calendar Year Deductible                                             | \$25 per individual<br>\$75 per family |
| Calendar Year Benefit Maximum                                        | \$2,000 per individual                 |
| Deductible Waived for Preventive Care and Orthodontia                | Yes                                    |
| Preventive – Oral Exam, Cleanings, X-Rays                            | 100%                                   |
| Basic – Fillings, Oral Surgery, Endodontic and Periodontal Treatment | 80%                                    |
| Major – Crowns, Bridges, Dentures, Implants                          | 50%                                    |
| Orthodontia Services – Children up to Age 19                         | 50% to \$1,000 lifetime maximum        |



# Vision – Benefit Highlights

**RGA Network** [www.accessrga.com](http://www.accessrga.com)

**Routine Eye Exam – Every Calendar Year**

Covered up to \$60

**Lenses and Frames – Every Calendar Year**

Covered up to \$150

**Contact Lenses (in lieu of lenses and frame)  
– Every Calendar Year**

Covered up to \$150

# RGA Network



- Largest healthcare provider network in the Pacific Northwest
- RGA Network located in WA, Idaho, Oregon and Utah
- Let your providers know that you are part of the Regence Group Administrators Network
- Direct providers to verify coverage using your ID card



- Members who live or are traveling outside WA, Idaho, Oregon and Utah can access the BlueCard Program
- Coverage is provided by the local Blue in your area
- Ensure your provider looks at coverage and claim information on the back of your member ID card to verify coverage

Find providers at [www.accessrga.com](http://www.accessrga.com)



# RGA Member Portal

Quickly and easily access your benefits and services in one place using RGA's secure member portal.

## Connect to Your Health Plan

- Access claims, deductibles, and spending for the whole family
- Find in-network doctors or hospitals in your area
- Connect to your prescription drug plan
- View, print, or share your Member ID card
- Verify your coverage for services
- Explore exclusive discounts and more

## Access the member portal



Scan Here

Log in to the member portal using your email address and password.

## Creating an account for the first time?

Before you start, you will need your Employee ID number located on your Member ID card

Visit [accessrga.com](https://accessrga.com) and choose Washington. Select the button "RGA Member Login" at the top of your screen.

On the log in page, click "Create an Account Now" and follow the directions by entering your full name, Employee ID, and date of birth.

Confirm your email address using the verification code that was sent to you.

**You're ready to use the member portal!**







# Health Savings Account – What is it?

- Use the HSA funds to help pay for deductibles, out of pocket expenses, prescription costs, etc. for yourself or family members while also providing tax advantages as the funds are deducted from you pre-taxed.
  - You can take the account with you if you leave or retire.
  - Cannot be used to pay for Daycare expenses, or if you are enrolled in Medicare.
- Oak Harbor contributes the amounts below into the HSA, annually on your behalf. These amounts are spread out to be deducted each pay period. They are not front loaded. Each pay period \$33.33 or \$66.67 will be added to your HSA to use.

|                                  |            | Annual  | Per pay Period |
|----------------------------------|------------|---------|----------------|
| Annual Employer HSA Contribution | Individual | \$800   | \$33.33        |
|                                  | Family     | \$1,600 | \$66.67        |

- All funds contributed by OHFL and yourself, will roll over each year. There is no maximum on the amount you can have in your account, but there are limits to what can be contributed yearly.
- You can choose to contribute on top of the OHFL contributions if you'd like, but it's not required. Employee contributions are limited to \$3,600 for individuals and \$7,150 for families. This is an annual limit.
- Total limits for 2026 (total of OHFL and your contributions) are \$4,400 for individual and \$8,750 for family. If you are age 55 and older, you can contribute an additional \$1,000 as a catch-up contribution.

## Employee Only Coverage

$$\boxed{\$800} + \boxed{\$3,600} = \boxed{\$4,400}$$

## Family Coverage

$$\boxed{\$1,600} + \boxed{\$7,150} = \boxed{\$8,750}$$

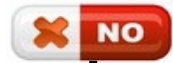


# Are You Eligible for an HSA?

Are you covered on Plan 3 - Qualified High Deductible Health Plan?



Have you been enrolled on Medicare, Tricare? Have you received non-preventive Medical/Rx plan through the VA or IHS within the last 3 months?



Are you claimed as a dependent on another person's tax return?



Do you (OR YOUR SPOUSE) have a Flexible Spending Account (FSA)?



Is it a Limited Purpose FSA?



**CONGRATULATIONS! It appears you may be eligible to make pre-tax contributions into a Health Savings Account!**

## **SORRY!**

Unfortunately, you are not eligible for a Health Savings Account.

An HSA is a tax benefit that is heavily regulated by the IRS. There are certain requirements to be considered qualified to contribute pre-tax dollars.

You are still eligible to participate in the Qualified High Deductible Health Plan, but you are not eligible to fund an HSA to pay for out-of-pocket expenses.

\*VA = Veterans Affairs

\*\* IHS = Indian Health Service



# HSA Banking Partner – HSA Bank

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Oak Harbor Freight Lines will open your Health Savings Account with HSA bank upon your enrollment on the Qualified High Deductible Health Plan with Health Savings Account.

You can choose to make contributions to your HSA. You do NOT have to also contribute to receive OHFL's contributions, this is automatically done on your behalf.

Your HSA payment card will be mailed to your home address.

You must activate your account to use the funds.

## Payment Card:

- Money comes directly out of your account
- No need to pay upfront and wait for reimbursement
- Use at the pharmacy to purchase medications





# Medicare Eligibility

## Turning 65?

Employees with a Health Savings Account (HSA), who will turn 65, have important rules to understand before enrolling in Medicare.

### Key Points:

- Employees cannot contribute to the HSA, once enrolled in any part of Medicare.
- Employees can still enroll in Plan #3 Qualified High-Deductible Health Plan, but it will be without the HSA.
- Medicare Part A may be applied retroactively up to 6 months.
  - This 'lookback' can make recent HSA contributions ineligible. If so, Employees may need to:
    - Remove any HSA contributions from HSA Bank
    - Remove any earnings (interest)
    - Potentially pay taxes and penalties
- General information can be found at [www.medicare.gov](http://www.medicare.gov). Look for the "Medicare and You 2026" guide.

### Want to speak to an expert?

Employees can call Leigh Bennett with IMA. Leigh is a dedicated Medicare Advisory Specialist. Contact Leigh by email at [leigh.bennett@imacorp.com](mailto:leigh.bennett@imacorp.com) or call 877-991-3656.





# Flexible Spending Account

- **3 options:** Healthcare, Day Care/Dependent Care and Limited Purpose Accounts
  - **Healthcare FSA:**
    - Use Pre-Tax funds to pay for medical, prescription drug, dental and vision expenses such as copays, prescriptions, many over the counter items, etc. for you and your eligible dependents. 2026 limit is \$3,400. Funds are front loaded each year, and employee contributions are deducted each paycheck. This account is also available to employees who are not enrolled on our medical plan.
  - **Day Care/Dependent Care FSA:**
    - Use Pre-Tax funds to pay for eligible day care / dependent care expenses such as before/after school care, day care, preschool, day camps and elderly care. 2026 limit per household is \$7,500. Funds are available only as they are deducted from your paychecks.
    - Dependents must live with you and be under 13 years old, unless they cannot physically or mentally care for themselves.
  - **Limited Purpose Healthcare FSA (If enrolled on the Qualified High Deductible Health Plan with HSA):**
    - Use Pre-Tax funds to pay for predictable out of pocket dental, vision and preventative care expenses. Use with the Health Savings Account to maximize your benefits. 2026 limit is \$3,400.
    - Funds are front loaded each year, and employee contributions are deducted each paycheck. Unlike the HSA...where you have funds added each paycheck.
- 
- ✓ Plan accordingly, use your funds before you lose it
  - ✓ Does not roll over each year.
  - ✓ You must enroll each year to use the benefit.





# FSA vs HSA...At a Glance Comparison

| Feature                                                   | FSA | HSA |
|-----------------------------------------------------------|-----|-----|
| Must be enrolled in Qualified High Deductible Health Plan |     | X   |
| Pre-Tax Contributions                                     | X   | X   |
| 'Use it or Lose it' Funds                                 | X   |     |
| Can invest unused funds                                   |     | X   |
| Funds roll over to the next year, if not used             |     | X   |
| Take it with you if you leave Oak Harbor                  |     | X   |
| Oak Harbor contributes into the account                   |     | X   |
| Use to pay for daycare expenses, pre taxed                | X   |     |
| Can use if enrolled in Medicare                           | X   |     |
| Issued a 'debit card' to use for expenses                 | X   | X   |



# Company Paid Life and AD&D Insurance

|                          |                                                     |
|--------------------------|-----------------------------------------------------|
| Who Pays                 | Oak Harbor Freight Lines pays 100%                  |
| Employee Life Benefit    | \$15,000                                            |
| Accidental Death Benefit | Double the life benefit in the event of an accident |

AD&D – Accidental Death and Dismemberment

Remember to designate a beneficiary. You can update your beneficiary at anytime during the year in Dayforce



# Unum – Voluntary Benefits

- You can enroll in or make changes to the Unum Supplemental benefits that include; Life, AD&D, Short Term Disability, Accident, Hospital & Critical Illness.
- There are no rate changes for 2026, unless you are enrolled in an age banded plan and move into a new rate category as of January 1<sup>st</sup>.
- Dependents are eligible for all plans, except Short Term Disability.
- Age limits apply on Life and AD&D for children.
  - Can enroll up to age 26. You'll have to remove your dependent if they age out, this is not automatically done.
- A Medical Questionnaire (called an Evidence of Insurability) will be required:
  - If enrolling for the first time in Short Term Disability or Life unless you are a new hire.
  - If increasing coverage over the guaranteed amounts for Life:
    - \$150,000 Employee, \$25,000 Spouse, and \$10,000 Children.
  - If this applies, you can complete your EOI using the links provided in the Dayforce Employee HUB - Benefits page.







# Employee Assistance Program (EAP)

An EAP is short-term counseling and referral service for you and your family members at no additional cost.

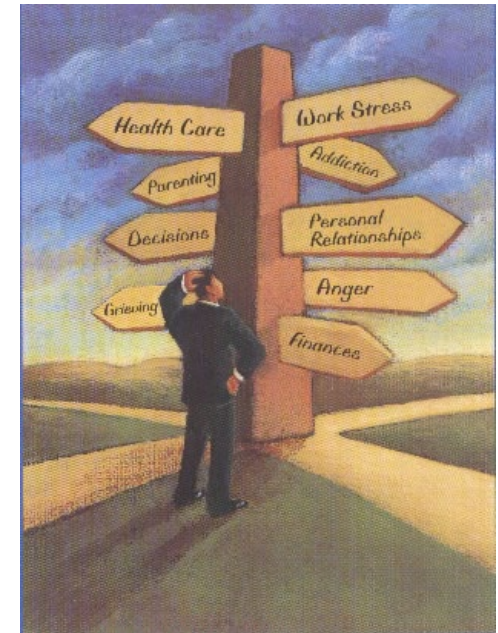
- 100% CONFIDENTIAL
- 24/7/365 Toll-Free Hot Line
- 3 face to face or virtual counseling sessions per incident, per year
- 3 phone or video sessions with a Coach to support goal setting, healthy habits and personal development



canopy

Available Services

- Family & Personal relationships
- Grief / Depression
- Stress & Work Issues
- Gambling Addiction
- Compulsive Behavior
- Parenting / School Issues
- Childcare referrals
- Elder care referrals
- Financial advice
- Legal advice



Canopy is available 24 /7 / 365. Call: (800) 433-2320; Text: (503) 850-7721

Website: [my.canopywell.com](https://my.canopywell.com)

Create your own account by using **Oak Harbor Freight Lines** in the “Company Name” field



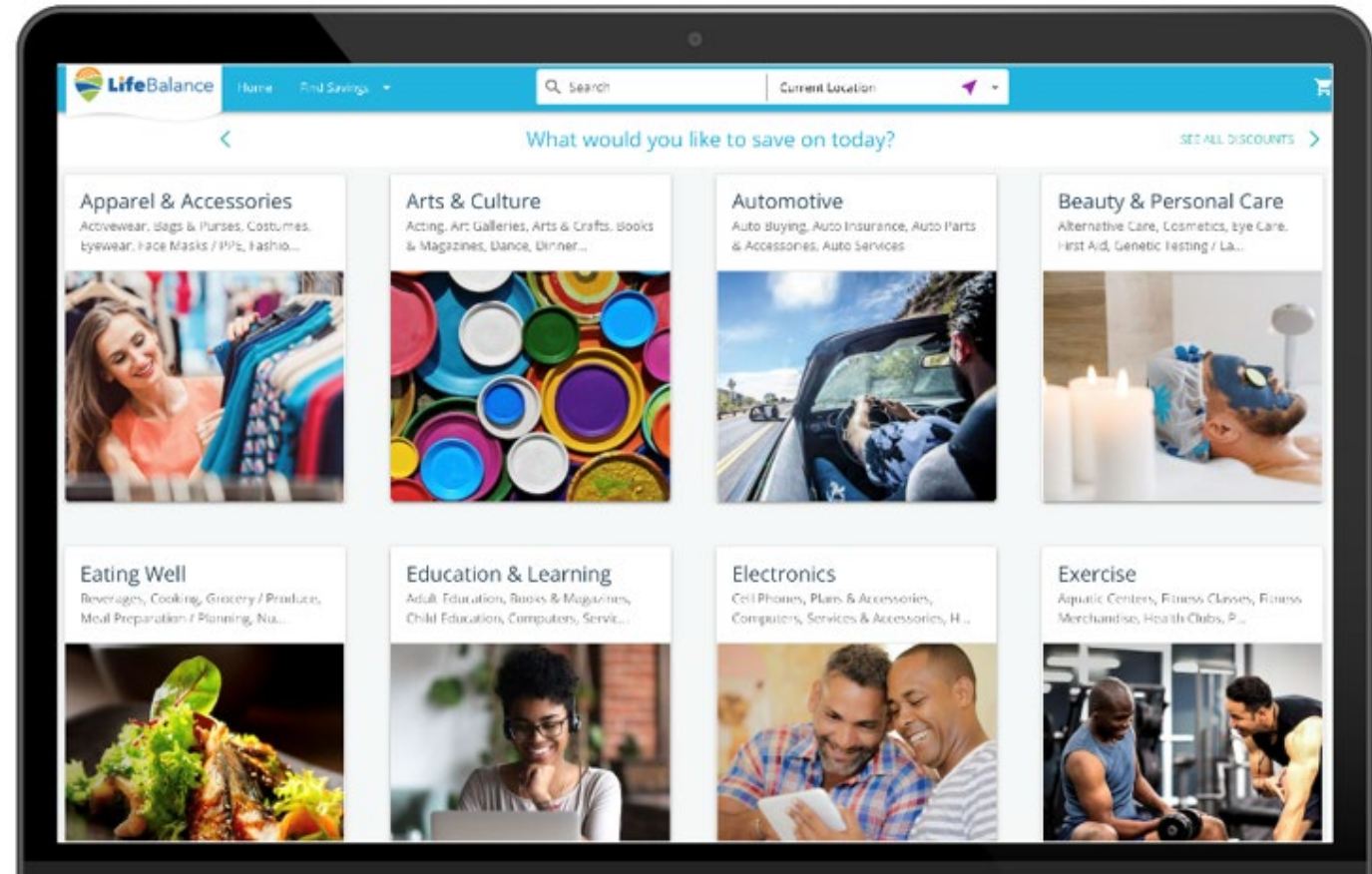
# EAP – LifeBalance Discount Network

You have access to discounts on outdoor adventures, travel, amusement, self-care, wellness resources and more.

To access, log onto the Member site go to: [my.canopywell.com](https://my.canopywell.com) or visit [canopy.lifebalanceprogram.com](https://canopy.lifebalanceprogram.com)



- Relaxation & Stress Management
- Home & Garden
- Exercise
- Eating Well



# Wellness Programs



## Reperio Health

- Provides at-home preventive care (annual exam and bloodwork) to Employees and Dependents 18 yrs of age and older.
- Free mail order kit shipped to your home, complete a 30 minutes test and review results with a Doctor via telemedicine.
- 100% free, all cost is covered under your RGA medical plan. Results are 100% confidential.

## \$50 Wellness Bonus

- Employee and Spouse (covered under your RGA plan) complete the Preventative Health Exam and Diagnostic Blood Exam by December 31<sup>st</sup>
- The physician signs off on the form, or mark as completed with Reperio. The form is found on benefits site [www.oakharborbenefits.com](http://www.oakharborbenefits.com), or the Dayforce Benefit HUB page.
- Submit the form in Dayforce and see your bonus on your next paycheck...\$50 for Employee and \$50 for your Spouse!

Contact the OAKH Benefits Team with questions at [benefits@oakh.com](mailto:benefits@oakh.com)

# 401 (k)



All employees are eligible to contribute to OHFL's 401k program

- Must be 18 years old to enroll
- Choose between Traditional (Pre-Tax) or Roth (Post-Tax) elections
- Make changes at any time during the year
- Match starts after 3 months of employment
- 2026 limits are \$23,000 and additional \$7,500 if over 50 yrs old for catch-up
- OHFL matches 100% of your contribution, up to a maximum of 5%
- 100% Vested...You keep your money if you leave OHFL

Match Example: If you contribute 10% of wages you will be matched 5%, providing a 15% contribution to your 401K account.

For questions or assistance with Employee 401(k) investment options, please reach out to RBC Wealth Management. They can be reached by calling 1-800-759-4029 or register your account at [www.rbcwealthmanagement.com/en-us/](http://www.rbcwealthmanagement.com/en-us/).

For questions about your 401(k) account(s), or to discuss a 401(k) loan, please contact NWPS by calling 888-700-0808 or log into your account at [www.yourplanaccess.net/nwps/](http://www.yourplanaccess.net/nwps/).





# Benefit Resource Center

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Contact the Benefit Resource Center (BRC) for free, confidential help!

- Benefit coverage levels
- Carrier information
- Claims assistance
- Billing issues

The Benefit Advocates are available Monday through Friday 8:00 AM to 5:00 PM (Pacific Time). Please email [OHFL-BenefitsAdvocacy@imacorp.com](mailto:OHFL-BenefitsAdvocacy@imacorp.com) and one of the Benefit Specialists will promptly return the call or e-mail message by the end of the following business day.



**Miranda Mitchell**  
**Senior Client Manager**  
**Direct: 425-709-3646**



**Laura McAtee**  
**Client Executive**  
**Direct: 425-709-3720**