



National Association of
Police Organizations



2025 Benefits Guide



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If you have a question that was not answered in this guide, please contact us at
(800) 511-9065 or NAPO@pgagencies.com.

Please do NOT call NAPO with questions about the plans detailed in this guide.
They will be unable to help you.



Benefits Available Exclusively for National Association of Police Organization Members

The National Association of Police Organizations (NAPO) is a coalition of police unions and associations from across the United States and was organized for the purpose of advancing the interests of America's law enforcement officers through legislative advocacy, political action and education.

NAPO members have access to many exclusive benefits. One extremely popular membership benefit is group insurance. This year's plans include a dental PPO plan with a \$1,500 annual benefit maximum, dental HMO plan with a large nationwide dental network, a vision plan that covers exams, lenses, and frames, and many others.

NAPO does not endorse, provide or administer benefits, but makes these voluntary programs available as a benefit of membership. The plans detailed in this Benefits Guide are offered and administered by Pacific Group Agencies and are independent of those offered by other employers. Enrollment eligibility is dependent on your current benefit Annual Election Period with your current employer/retirement system. *Please provide proof of the current Open Enrollment Period to avoid waiting periods on benefits.*

To take advantage of these plans, you must be an active member of NAPO.

Enrollment in NAPO membership can be completed by visiting

<https://www.napo.org/membership/join/>

If you have questions about any plans offered in this guide, please contact Pacific Group Agencies, at (800) 511-9065 or NAPO@pgagencies.com. **Please do NOT call NAPO directly with questions about the plans discussed in this Benefit Guide, they will be unable to assist you.**

We look forward to serving you.

How To Enroll

To enroll in **Dental, Vision, Legal Shield, ID Shield, and Personal Accident** plans:

Online: An online form is available at www.pgagencies.com/NAPO which is submitted to us automatically upon completion.

Fax: Fax the completed form to **(800) 549-0059**.

Email: Email a scanned copy of your enrollment form to NAPO@pgagencies.com.

To enroll in **Pet plans:**

Call the carrier direct or visit their website. If calling, *remember to mention that you are a NAPO member for special discounted rates.*

Nationwide Pet Insurance (Premiums are Credit Card Billed)
Call **(877) 872-7874**.

United Pet Care
Visit www.unitedpetcare.com/napo or call **(877) 872-8800**.

Travel Guard: Plans should be purchased within two weeks of booking your trip and is on a per-trip basis. To purchase coverage visit www.tiny.one/napotravel. (Plans are Credit Card Billed)

Emergency Assistance Plus: Plans are purchased on an annual basis.
To purchase coverage visit www.myeaplus.com/pedit or call **(877) 883-1935**.
(Plans are Credit Card Billed)

Term Life is medically underwritten. Check the box for life insurance on the enrollment form and a Life Insurance Application will be sent to you via email.

Amplifon Hearing is a FREE benefit to members and their family. No need to enroll. Just call Amplifon at (877) 846-7075 and let them know you're a NAPO member with PGA, and they will explain the process.

Selecting the Right Dental Plan: PPO vs. HMO

When deciding between a PPO and an HMO plan, many members assume that one must be better than the other. The truth is that neither one is better than the other. They just work differently.

Both plans we offer are comprehensive and cover procedures from routine cleanings and X-rays to major issues like crowns and dentures. So why pick one plan over the other? Freedom and cost are the two main deciding factors for most members.

PPO Plans allow you to use any dentist. While PPO plans have dentist networks, you are not required to use a dentist in the network and may use a non-network dentist. However, there are significant cost savings if you do use a network dentist, as network dentists have agreed to charge significantly reduced rates.

Your savings with a network dentist work like this: You need a crown, and the normal cost is \$1,200:

- Your dentist **is** a network dentist: Your dentist has agreed with the insurance carrier to reduced fees. Instead of **\$1,200**, they agree to charge only **\$700**. Crowns fall under the Major Services category, so cost is split **70/30** between the insurance / you. Your out-of-pocket cost is **\$260** after annual deductible is applied.
- Your dentist is not a network dentist: Your dentist charges their standard **\$1,200** rate. Insurance pays its portion based on the average local rate, around **\$750**. Insurance pays **70%** of the **\$750**, and you will be responsible for the remaining balance. Your out-of-pocket cost is **\$625** after deductible.

We recommend selecting the PPO plan if your current dentist is an Ameritas network dentist, does not accept the Cigna HMO plan, and you're not willing to change dentists. If your dentist does accept the Cigna HMO plan or you are willing to change dentists, the HMO plan is likely the better plan for you.

HMO Plans use a network of highly qualified and pre-screened dentists. You must use one of these dentists. A referral to specialists is required and will be provided by your primary dentist.

You are never locked into a dental office. You may switch dental offices as often as you like by calling the insurance company and letting them know you wish to change.

HMO plans have set co-pays for all covered procedures. Therefore, you will know beforehand what your out-of-pocket cost will be. Your dentist is never allowed to charge more than the agreed upon co-pays.

The Fine Print: All plans have exclusions and limitations, and they can vary greatly between insurance companies and plan types. They can vary between annual number of cleanings, waiting periods, and annual benefit maximums. These issues should be taken into consideration when choosing a plan.

For example, the Ameritas PPO plan requires a crown be 10 years old before replacement, while the Cigna HMO plan only requires 5 years.

It's also important to remember that insurance is designed to cover potential future events, not events that have already happened. Therefore, if you have already started work or have a tooth that was missing before the date this insurance started, the insurance most likely will not provide coverage for these issues.

Dental PPO

Freedom to Use Any Dentist - No Network Restrictions

Ameritas Dental Monthly Premium	
Member Only	\$49
Member + One (Spouse/Domestic Partner <u>or</u> Child)	\$98
Member + Family	\$136

This easy to understand, comprehensive plan covers 70% of over 360 covered procedures, from routine preventative to major, including crowns, and dentures. There is even added coverage for implants.

Each covered member and dependent receives a generous **\$1,500 annual network benefit**. This plan will pay 70% of the cost of your covered procedures, whether it is a routine cleaning or something more major like a crown or denture. This plan will also cover up to \$500 for the surgical portion and components of an implant. Related components like the crown are covered under their respective category at 70%.

This plan may be used as a standalone plan or in coordination with another PPO dental plan. If used in coordination with another plan you should have little-to-no out-of-pocket costs for covered dental procedures, even expensive procedures like crowns, dentures, and implants.

Use any dentist, but using an Ameritas Network Dentist will provide you quality care at deeply discounted prices. Additionally, many Ameritas providers extend deep discounts on non-covered procedures such as teeth whitening. Finding a network provider is easy, as Ameritas has the largest dental network with over 325,000 providers.

Search for Network providers in your area at:

<https://dentalnetwork.ameritas.com/>

Coverage is available for the member, and you may also insure your spouse/domestic partner, and/or your dependent children up to age 26. Children aged 26 and older are eligible if they are permanently disabled and the member lists them as a dependent on their tax return. Grandchildren are only eligible if you have full legal custody.

Dental PPO Benefits

Description	Benefit
<p>Calendar Year Benefit Maximum – All Services</p> <p><i>This is the maximum amount the insurance carrier will pay out for your services during the calendar year.</i></p>	\$1,500
<p>Calendar Year Deductible (<i>Waived for Preventative</i>)</p>	\$50
Preventative Services	
<p>Cleaning, Oral Exam, Bitewings</p>	70%
Basic Services	
<p>Periodontal Maintenance, Filling, Simple Extraction, Emergency Pain Relief, Panoramic X-Ray, Denture Repair & Reline, Recement, and Biopsy.</p>	70%
<p>Major Services</p> <p><i>12-month waiting period applies unless you had other dental insurance for all of the previous year. If so, please include proof of current coverage with the enrollment form.</i></p>	
<p>Crown, Periodontic, Endodontic, Root Canal, Bridge, Denture, Complex Extraction, Anesthesia, Bone Augmentation, Inlay Restoration, Onlay Restoration, Crown Repair, Bridge Repair, Space Maintainer, Teeth Whitening.</p>	70%
Surgical Implant Services	
<p>Implant and related implant services.</p> <p>Note: Abutment supported crowns fall under the Major Services Category.</p>	\$500

**Benefits for non-network dentists are based on the average rate a dentist in their zip code charges.*

Dental HMO by Cigna

Large Nationwide Network of Providers!

Monthly Premium	
Member Only	\$32
Member + Spouse / Domestic Partner <u>or</u> Child	\$64
Member + Family	\$116

Comprehensive coverage. Low copay for all covered procedures. Nationwide network of dentists to choose from. What more could you ask for?

This low copay Cigna HMO dental plan has comprehensive coverage, covering 380+ procedures, from routine preventative (cleanings, x-rays) to major (crowns, dentures, extractions, implants, and orthodontics), all at very low copays.

There is no calendar year maximum dollar benefit. There is no waiting period for any covered service. Whether it's a cleaning or a crown, all services are available to the enrollee on day one.

There are no surprises as the copay for every covered procedure is listed upfront. Your dentist may never charge you more than the listed for any of the covered services. Also, many Cigna providers extend discounts on non-covered procedures, such as teeth whitening.

This Cigna plan uses the expanded Cigna Dental Care Access Plus network, which has thousands of dentists to choose from nationwide. All Cigna network dentists and specialists are highly qualified and have been pre-screened and thoroughly evaluated prior to their acceptance. As with all HMO plans, you must select a dentist from the Cigna network. However, you may change dentists at any time by calling Cigna.

Coverage is available for the member, and you may also insure your spouse/domestic partner, and/or your dependent children up to age 26. Children aged 26 and older are eligible if they are permanently disabled and the member lists them as a dependent on their tax return. Grandchildren are only eligible if you have full legal custody.

Member Copays for Common Dental Procedures

With 380+ covered dental procedures, it would be too numerous to list them all in this booklet. The following list is of the most common procedures covered by this plan and the member copay. A listing of all covered procedures will be mailed to you prior to your coverage becoming effective.

Procedure Type*	Member Copay
Oral Exam and Cleaning	\$0
X-Ray	\$0
Resin Filling	\$0
Root Canal (Anterior)	\$30
Extraction of Erupted Tooth	\$0
Periodontal Maintenance	\$15
Scaling and Root Planing	\$15
Porcelain Crown	\$50
Porcelain Inlay / Onlay	\$50
Post & Core	\$25
Denture (Bridge)	\$100
Denture Repair	\$10
Anesthesia	\$0
Post & Core	\$25
Surgical Placement of Transosteal Implant	\$850
Gingivectomy	\$35
Bone Graft	\$135
Tissue Graft	\$60
Removal of Lesion or Cyst and Biopsy	\$0
Abutment	\$355
Desensitizing Medication	\$15

***Note:** Procedures have been modified into “plain English” and multiple procedures grouped under a single type. Your specific procedure may have a different copay than the one listed above.

Cigna HMO General Dentist Directory

Picking a facility is only for those enrolling in the Cigna HMO dental plan.

Note: If enrolling in the Ameritas PPO plan, ignore these instructions as it pertains only to the Cigna HMO plan.

HMO Plans use a network of highly qualified and pre-screened dentists. You must use one of these dentists. A referral to specialists is required and will be provided by your primary dentist.

You are never locked into a dental office. You may switch dental offices as often as you like by calling the insurance company and letting them know you wish to change.

HMO plans have set co-pays for all covered procedures. Therefore, you will know beforehand what your out-of-pocket cost will be. Your dentist is never allowed to charge more than the agreed upon co-pays.

When enrolling in the Cigna HMO dental plan, you must select a General Dental facility at time of enrollment. However, you may change dentists at any time by calling Cigna at (800) 244-6224.

For a list of dentists, please visit: **www.cigna.com** and:

- 1) Select Menu
- 2) Find A Doctor
- 3) How are you enrolled (Employer or School)
- 4) Enter your zip and click on Doctor by Type (General Dentist)
- 5) Select Guest (Login or Guest)
- 6) Continue
- 7) Select Cigna Dental Care Access Plus

Vision

VSP Vision Monthly Premium	
Member Only	\$10.50
Member + One (Spouse / Domestic Partner <u>or</u> Child)	\$21
Member + Family	\$29

Eyecare is vital to your overall wellbeing. Eye exams not only can detect signs of potentially blinding conditions like glaucoma, diabetic eye disease, and macular degeneration, but they can also detect signs of cardiovascular disease, hypertension, diabetes, and high cholesterol that may go unnoticed.

This VSP PPO vision plan allows you to use any eye care provider, but choosing a VSP Choice Network provider provides you the highest benefits and lowest out-of-pocket costs. **Local VSP “Choice Network” providers can be found at: www.VSP.com**

Benefit	VSP Choice Provider	Non-Network Provider
Eye Exam	Covered in Full	\$45
Lenses		
Single Vision	Covered in Full	\$30
Bifocal	Covered in Full	\$50
Trifocal	Covered in Full	\$65
Lenticular	Covered in Full	\$100
Progressive (Standard)	Covered in Full	N/A
Contacts		
Fit & Follow-Up Exam	\$60 Co-Pay	Not Covered
Elective	\$200	\$105
Frames	\$200	\$70
Deductible	Exam: \$10 / Material: \$25	
Frequency (Months)	Exam: 12 / Lens: 12 / Frame: 24	

Lens Options at VSP Providers	Member Co-Pay
Progressive Lenses (<i>Premium & Custom</i>)	\$40
Polycarbonate (<i>Standard</i>)	Child: \$0 / Adult: \$33
Dye (Plastic Gradient / Solid Plastic)	\$15 - \$17
Photochromatic Lenses	\$31 - \$82
Scratch Resistant Coating	\$17 - \$33
Anti-Reflective Coating	\$43 - \$85
Ultraviolet Coating	\$16

Personal Accident

All Benefit Levels Include Secure Travel Rider

Benefit Levels	Member Monthly Premium	Member & Family Monthly Premium
\$100,000	\$4.90	\$6.60
\$200,000	\$9.80	\$13.20
\$300,000	\$14.70	\$19.80
\$400,000	\$19.60	\$26.40
\$500,000	\$24.50	\$33.00

Spouse / Domestic Partner benefit is 50% of member benefit (40% if child is covered). Child benefit is 10% of member benefit, max \$30,000. Age reduction applies: Age 70: 65%; Age 75: 45%; Age 80: 30%

This low-cost policy protects you and your loved ones in case of serious injury or death in an accident. Coverage is guaranteed - no medical questions and all ages are covered! Coverage is also available for your spouse/domestic partner and your child(ren) up to age 26.

The Personal Accident portion of this plan is a **cash benefit**. If you or your covered loved one is seriously injured or killed in an accident, a cash benefit will be paid out. Member benefit levels range from \$100,000 to \$500,000.

Additional benefits included at no additional cost are:

- ✓ Up to an additional \$25,000 for home alteration & vehicle modification.
- ✓ Up to an additional \$10,000 for rehabilitation expenses.
- ✓ Up to an additional \$37,500 for wearing a seatbelt & having a functioning airbag.

The **Secure Travel** rider is included with all benefit levels. It provides special benefits any time you travel more than 100 miles from your home. Use of these benefits does not reduce payment level you have selected for Personal Accident. These benefits are completely independent.

- ✓ Emergency Medical Evacuation
- ✓ Repatriation of remains
- ✓ Prescription refill services
- ✓ Assistance with lost or stolen items
- ✓ Translation and interpretation services
- ✓ Emergency Cash Advance - Up to \$1,500
- ✓ Pre-trip planning services
- ✓ Emergency message relay
- ✓ Medical / Dental referrals
- ✓ Legal, Embassy, & Consulate referrals
- ✓ If traveling alone, transportation for a loved one if you're going to be hospitalized for 10+ days.
- ✓ Return travel for companion who is delayed due to your emergency.
- ✓ Return travel for dependent child (<16) who is left unattended because of your emergency.
- ✓ Up to \$10,000 upfront guarantee of payment for needed medical expenses so you can get the necessary care you need. You are responsible for repaying these funds to Secure Travel.

United Pet Care

United Pet Care is the affordable pet health savings plan that works for all pets

For less than \$20/month per pet, **save 20-50% on every visit to an in-network primary care vet**, without the red-tape that comes with the other pet insurance providers (like higher rates as your pet ages, mandatory deductibles, or exclusions on pre-existing conditions, breed, or age).

To learn more, visit unitedpetcare.com/members and enroll to save **for the lifetime of your pet**, not just while you're with your group!

What's Included

When you become a UPC member, you'll gain lifetime access to:

- 20-50% savings at an in-network primary care veterinarian
- Free 24/7 virtual care for off-hour questions and concerns
- Up to 87% savings on prescriptions with a human equivalent
- Savings on mobile care, testing kits, training, and more!

UPC Monthly Rates	
First Pet	\$17.50
Each Additional Pet	\$16.50

Enroll Today!

To start saving on your pet's healthcare, follow these 5 simple steps:

1. **Enter your information** at unitedpetcare.com/enroll
2. **Check "Yes"** when asked if you're enrolling through a benefits plan and **select your employer/group**.
3. **Review** your plan rates and select your Primary Care Vet using the search tool.
4. **Finalize your information** and add your pet information in your UPC member portal.
5. **Save your ID card from the portal** and show it at your selected vet to start saving!



Visit unitedpetcare.com/enroll to enroll today!

Questions? Email info@unitedpetcare.com, call 877-872-8800, or visit unitedpetcare.com/members.

Pet Insurance by Nationwide

Available for Dogs, Cats, Birds, & Exotic Animals

Our cuddly companions are part of the family, and we strive to provide them with the best care, but sometimes costs make decisions difficult. Pet insurance removes costs from the decision process and allows you to focus on the best course of treatment for your loved ones.

Nationwide Pet Insurance offers multiple plans to meet your needs. They offer both defined benefit plans that pay a set dollar amount for each covered procedure. They also offer percentage reimbursement style plans that pay a percentage (50% and 70% levels available) of the procedure cost.

All plans allow you to use any vet, including specialty and ER, of your choosing. Plans may include coverages for:

- Veterinary Exams
- Wellness Exams
- Vaccinations
- Prescription Medicine
- Hospitalization
- Surgeries
- Injuries
- Illnesses
- Cancer
- Specialty Vets
- Emergency Vets
- Hereditary Condition
- Chronic Condition
- X-Ray, MRI, CT Scan, Ultrasound
- Prescribed Therapeutic Diets
- Prescribed Nutritional Supplements
- Dental Diseases
- Congenital Conditions
- Blood Disorders
- Eye Disorders
- Musculoskeletal Disorders
- Respiratory Conditions
- Behavioral Exam & Treatment
- Flea & Heartworm Prevention
- Blood Work
- Urinalysis
- Diagnostic Testing
- 24/7 *vethelpline*

Monthly Premiums (Paid Directly to Nationwide)

Premiums vary based on your desired coverage level and factors such as pet type, breed, and age.

For a quote, to enroll, or for more information
call Nationwide at (877) 738-7874 and mention NAPO for the special discounted rates.

Emergency Assistance Plus

Emergency Assistance Plus <u>Annual</u> Premium	
Member Only	\$129
Member + Family*	\$169
*Family coverage includes Spouse and Dependent Children <ul style="list-style-type: none">• Through age 18• Through age 22, if unmarried and a full-time student• Adult children or grandchildren who are solely dependent on the member for support due to mental or physical disabilities.	
To enroll: www.myeaplus.com/pedit or call: (877) 883-1935.	

Emergency Assistance Plus (EA+) is a crucial safety net that protects you when you travel. Whether you're traveling across the state or across the world, this annual membership program protects you.

If facing a medical emergency, EA+ automatically steps in to help you with more than 20 emergency and medical services, so you can focus on your recovery and not on the costs. You'll feel confident knowing that if the hospital you're admitted to can't properly treat your condition, EA+ will transport you to the nearest appropriate hospital. Once you're stable, EA+ will arrange your transportation home.

EA+ services include:

Medical Evacuation

- Emergency medical monitoring by an EA+ medical expert.
- Air ambulance or emergency medical evacuation from an inadequate facility to the nearest appropriate facility.
- A medical specialist is sent to you to assist in determining your medical condition and travel suitability.
- Continuous updates to your designated family member or physician.

Medical Assistance

- Transferring your insurance information to medical providers to ensure your medical care is not delayed or denied.
- Cash advance for medical payments against a valid credit card.
- Prescription replacement assistance.
- Worldwide 24-hour doctor/ER/dentist/attorney locator.

Transportation Home

- Transportation home after hospitalization.
- A nurse escort during your trip home, if deemed necessary.
- Return of deceased remains.
- Vehicle returned home.

Assistance for Companions

- One round-trip economy-class airline ticket to bring a loved one to your hospital bedside if you're traveling alone.
- Airfare home for dependent children or grandchildren who are left unattended due to your hospitalization.
- Emergency message forwarding assistance.
- Pet care and return home assistance.
- Ticket home for a traveling companion if you are evacuated, transported home or pass away while away from home.

Vital Travel Assistance

- Intelligence regarding weather, travel, health, inoculations, travel restrictions, & special events.
- Real-time security intelligence on political unrest, social instability, weather, & health hazards.
- Emergency cash transfer assistance against a valid credit card.
- Lost luggage assistance.
- Document replacement assistance.
- Language interpretation assistance.
- Assistance in making flight arrangements, securing visas, and with other logistics if you need to leave a threatening situation.

EA+ has been exclusively offered by Worldwide Rescue & Security (WRS) for over 20 years. WRS is a leading provider of emergency travel, rescue and security products to members of affinity clubs, loyalty groups, alumni associations, professional organizations, auto clubs and airline loyalty programs. WRS partners with top medical assistance companies to provide emergency related services to members.

With EA+, you will have access to:

- Customized medical, security and travel assistance 24 x 7, 365 days a year,
- Access to a network of 32 medical assistance companies located over 5 continents,
- 53 response centers throughout the world,
- Access to over 1500 air ambulances worldwide,
- Medical teams responsible for continual monitoring of travelers around the world receiving medical attention,
- Expert staff fluent in 70+ languages and in-depth knowledge of local cultures and procedures,

ID Shield

ID Shield offers the most comprehensive security and the best value.

Monthly Premium	
<i>Note: An email address is <u>required</u> for ID Shield coverage.</i>	
Member Only	\$8.45
Member + Family (<i>Children up to age 18</i>)	\$15.95

No one needs to tell you how bad identity theft has become. In the US alone, 33% of citizens have experienced identity theft, \$56 billion in annual losses, 15 million victims, 2.5 million identities stolen, and it goes on. And it's all kinds of fraud. The most common fraud is for government benefits, followed by credit card, bank fraud, and utility fraud.

ID Shield members have both protection and peace of mind. Protection through numerous layers of monitoring and peace of mind that if something does happen, ID Shield's dedicated team of licensed private investigators will assist in protecting and restoring your identity – no matter how long it takes.

With its proprietary High-Risk Application and Transaction Monitoring, ID Shield checks to confirm details connected to your identity are safe. If changes are noted, you'll receive immediate notification.

Credit Bureaus are monitored. You're alerted to suspicious activity, credit checks, new accounts, cards reported lost/stolen/over limit, liens/judgements, you incorrectly listed as deceased, derogatory remarks, charge offs, bankruptcy filings, address changes, and addresses associated with your name.

Dark web scanning is performed on global black-market sites, chat rooms, file sharing networks, and social feeds. Scanning is done looking for a member's Personally Identifiable Information, matches of name, birthday, SSN, email address, Driver's License, Passport, Medical ID, and phone number.

Social Media Monitoring checks for over 20 different sources of fraud and identity theft. You may not have a Facebook, Twitter, LinkedIn, or Instagram account, but someone impersonating you may!

Court Records Monitoring detects criminal activity associated with your information due to potential ID theft. Hundreds of millions of records are searched using court records from county courts, Department of Corrections, Administration of the Courts, and other legal agencies.

ID Shield is pro-active in monitoring breaches. If one occurs, members have unlimited access to identity consultation services. If theft occurs, an investigator will advise you on best practices tailored to the specific situation and can open a case for restoration. ID Shield will do whatever it takes, for as long as it takes, to restore your identity to its pre-theft status.

Armadillo Home Warranty

Monthly Premium	
Appliances Plan	\$27.30
Essentials Plus Plan	\$49.99

Armadillo provides affordable protection when home appliances and systems break down. Whether it's kitchen, laundry, heating/cooling, plumbing, or electric, Armadillo covers the cost of repairs or replacements, coordinates service appointments, and ensures it's all done swiftly and hassle-free.

What makes Armadillo different from other home warranty companies?

- Transparency - The simplest 2-page home warranty plan out there.
- Less Fine Print - We removed over 80% of typical home warranty exclusions.
- Qualified and Reputable - We use only qualified and reputable service technicians.
- Flexibility - If you prefer, you may use your own trusted providers and we'll reimburse you.
- Faster than Fast - Request service in less than 2 minutes at any time.

Plans are available for your primary residence, vacation home, rental property, and your family members' homes. With three plans to choose from, it's easy to get the right level of protection.

Annual Coverage Details	Appliances Plan	Essentials Plus Plan
Level of protection	\$7,500	\$7,500
Service Fee per Claim	\$100	\$100
Kitchen Appliances	\$2,000	\$1,000
Laundry Appliances	\$2,000	\$1,000
Plumbing Systems	Not Covered	\$3,000
Electric Systems	Not Covered	\$3,000
Air Conditioning & Heating	Not Covered	\$2,000
Water Heater	Not Covered	\$1,000

*See additional details, terms, & conditions at www.pgagencies.com/napo/home/

Legal Shield

Legal issues can be costly. We've leveled the playing field for about 50¢ a Day!

Monthly Premium is \$15.95

Note: An email address is required for Legal Shield coverage.

Spouse / Domestic Partner coverage is automatically included.

Child coverage is included if the child meets one of the following criteria:

- 1) Under 18.
- 2) Under 21 (23 if full-time student) and they live at home and have never been married.
- 3) Any age, mentally or physically disabled, and a dependent of the member.

Have you ever needed a Will prepared or updated? Signed a contract and not known exactly what you were agreeing to? Received a traffic ticket? Had an insurance claim denied? Wouldn't it be nice to say, "I'll have my attorney handle this" and actually mean it? With Legal Shield, you can say it and mean it.

For more than 40 years, Legal Shield has provided members direct access to attorneys, available 24/7 for covered emergency situations. Legal Shield's nationwide network of affiliate lawyers have an average of 19 years of experience. When you need help, you won't have to talk to a rookie, a paralegal, or a law clerk, but rather you will deal directly with highly experienced lawyers.

No one ever plans on legal trouble, but the unpredictability of life often throws you a curveball. Instead of trying to navigate the legal system alone, Legal Shield can help you. Whether it's as simple as writing a letter or having an attorney make a call on your behalf, or a more serious issue that leads to time in court, you can breathe easy with Legal Shield on your side.

All legal consultations start off with a call to the main provider law firm in your state. For California, the law firm of Parker Stanbury has been retained. Parker Stanbury is a full-service law firm with specialists in many areas of the law. With over 40 attorneys on staff, with a combined 700+ years of legal experience, Parker Stanbury can help with your legal issues.

Many experienced lawyers charge \$400 an hour or more. With Legal Shield, you'll experience the safety and security that over 4,000,000 members enjoy, all for around 50¢ a day. Access to convenient quality no-cost legal help will only be a toll-free phone call away. Your dedicated law firm is paid by Legal Shield, so their sole focus is on serving you, not billing you.

Benefits of Legal Shield membership include:

Advice - Your attorney may provide unlimited legal advice on a wide range of legal topics, both personal and professional.

Standard Will Preparation with Annual Reviews/Updates - Having an up-to-date Will is part of being a responsible adult. However, 68% of Americans don't have one and the numbers are even higher for minorities. Legal Shield members may receive a Will with annual updates/reviews at no cost. Spouses and covered children may have a Will drafted for just \$20.

Wills can help protect your assets from probate and intestacy laws and significantly reduce the time spent in costly probate court. They provide control of gifting assets to the specific people you choose. You also receive peace of mind, knowing that your assets are protected, and your loved ones cared for.

Living Wills and Healthcare Power of Attorneys are also available. For members requiring a significantly higher level of estate planning, **Trust** preparation is available with a 25% discount.

Letters and Phone Calls on Your Behalf - Attorneys will write letters or make phone calls on your behalf at no cost to you. Whether it's a person or company that has taken advantage of you, refused to do as promised, didn't honor a return, or did a poor job, once the other party sees that you have legal representation, they know you are serious and will work to get the situation resolved.

Legal Document Review - Attorneys will review contracts and legal documents up to 10 pages each. They will explain in "plain English" any legal terms and will suggest any changes they deem necessary. If the other party has acted improperly, the attorney can contact them on your behalf to resolve the issue.

Whether signing a cell phone contract, booking a hotel, or wanting to ensure you get your full security deposit back, legal document review can save you thousands of dollars and countless headaches.

Motor Vehicle Services - Attorneys will help you navigate the twisting roads of moving violations, accidents, defense for charges of manslaughter, involuntary manslaughter, negligent homicide, or vehicular homicide, damage recovery, driver's license issues and personal legal injury assistance.

IRS Audit Legal Services – The prospect of an audit is terrifying. Even worse, the IRS conducts audits of all tax brackets, not just the rich. With Legal Shield, if audited, your attorneys will provide consultation or assistance and you may receive up to 50 hours of attorney's time to help defend the audit.

Trial Defense - If you or your spouse are named as a defendant in a covered civil or criminal action, your Legal Shield attorney will provide up to 60 hours of defense at no additional cost to you.

Other Issues - Your law firm may provide coverage for issues not covered by this plan. These services are offered at a negotiated rate, which is **at least 25% below standard rates**. These issues may include DUI, drug matters, hit-and-run, bankruptcy, divorce and related matters, garnishments, charges of tax fraud/evasion, business tax returns, and suits filed due to conditions that were foreseeable prior to enrollment.

Legal Shield Gun Owners Supplement

Get Firearm Legal Protection from an Experienced Gun Rights Attorney

Legal Shield with Gun Owner Supplement

LS + Gun Owner Supplement

\$28.80

24/7 Emergency Access - 24/7 toll-free access to a provider lawyer for consultation in the event of a covered firearm incident

Advice and Consultation for Gun Owners - Phone consultations and advice from your law firm concerning the use and carrying of a firearm.

- Gun owner rights
- Carry and license requirements
- Advice on where carrying your concealed firearm is allowed
- Advice on where carrying your firearm is openly allowed
- Recent changes in gun laws

NFA Gun Trust Services - The Member may have one NFA Gun Trust prepared by the Provider Law Firm per Membership Year, if a NFA Gun Trust is available in the Member's primary state of residence, for a flat fee of \$250. A NFA Gun Trust is defined as a gun trust solely for weapons and devices as defined by the National Firearms Act. This Service is subject to a separate Lawyer-Client contract, any required retainers and costs. Any other accompanying documents will be provided under the Preferred Member Discount. Execution and storage of the Gun Trust shall be the sole duty of the Member. Any other type of Gun Trust or a second NFA Gun Trust during the Membership Year will be provided under the Preferred Member Discount.

Trial Defense Services - If the Member is the named defendant in a Covered Lawsuit the Member may receive 60 total hours of trial defense for any Covered Lawsuits filed during that Membership Year. A Covered Lawsuit is a criminal or civil lawsuit filed in a state or federal district court arising from a Firearm Incident involving a Member in good standing, if the Member is in a place where he/she is legally permitted to possess and carry (concealed or open) his/her firearm. These 60 hours consist of up to 20 hours of Pre-Trial Time and 40 hours of Trial Time.

25% Discount - A 25% discount off the provider lawyer's standard hourly rate for additional trial defense services and/or grand jury investigations, related to a covered firearm incident.

Term Life Insurance

High Benefit Amounts - Low Costs

Term life insurance allows you to protect your loved ones from outstanding debts such as a mortgage, credit cards, or hospital bills, or covering an obligation you made, such as college tuition for a grandchild. Minimum amount of coverage is \$100,000. *This benefit is only available to those under the age of 76.*

Term refers to a set amount of time during which the policy is active. Premiums never change and the benefit amount stays the same. Your beneficiary will receive the full benefit upon your passing. Term policies do not accrue cash value and you may cancel them at any time.

Rates are medically underwritten. A free and fast in-home health check by a nurse is required. This typically lasts around 20 minutes.

Applications are available by request via email. All plans are medically underwritten, and rates are specific to the individual applicant. Call (800) 511-9065 for questions.

***Note:** People with diabetes, heart disease, high cholesterol, or high blood pressure may not qualify. Those who do will have premium rates approximately 100% higher.*

People actively taking medication for or treated within the last two years for cancer, depression, heart attack, or stroke will not qualify for coverage.

Non-smoker means no tobacco use in 24 months. Tobacco user premiums are approximately 150% higher.

Travel Guard

Individual Trip Insurance

Vacations should mean leaving your worries behind. Unfortunately, life isn't that kind and unforeseen issues can arise. A sudden illness of a traveling companion or family member back home, a worldwide pandemic, a natural disaster, inhospitable weather, or unfriendly political situations can alter your plans and all the money paid for a vacation is gone. Travel Guard protects you and provides peace of mind.

Several plans are available and customizable to meet your needs. Comprehensive policies include coverage for the cost of trip cancellation or interruption, coverage for missed connections, trip delays, lost or delayed baggage, and medical coverage.

Policies may also include coverage for travel inconveniences such as closed attractions, transportation delays, rental vehicle breakdown, and transportation diversions. Upgrades that will cover cancellation for any reason, rental car damage, pet care, adventure sports coverage, security evacuation, and wedding cancellation are available.

Specialized policies are available, including medical for those needing medical coverage (Medicare does not cover you outside the US). And for frequent travelers, a more basic annual policy is available.

Coverage for pre-existing medical conditions is excluded *unless you purchase coverage within 15 days of your initial trip payment*. Coverage for losses due to COVID-19 are not covered as these losses are not considered an "unforeseen event".

Travel Guard Insurance

Coverage is purchased on a per-trip basis. Rates are based on several factors including the age of the traveler, the cost of the trip, the length of the trip, and coverage options desired.

For a quote, visit: **www.tiny.one/travelguard**

You may also email **travel@pgagencies.com** for a quote. Please include the following information: Name; Date of Birth; Departing and Arrival cities; Exact dates of your trip; Dates of trip deposit and final payment due; Airline/cruise name; and total costs you wish to insure. If insuring your traveling companion, please also provide the above information for them.

If you do not have internet access, call with all the above information: **(800) 511-9065**.

Amplifon Hearing

Increase the quality of your life!

Hearing loss is a natural part of life, and while there may be no cure, a hearing aid usually helps most people. Whether the hearing loss is age-related or caused by other factors including damage by loud noises, viral infections (mumps, measles, chickenpox, rubella), drugs (aspirin and quinine), or various antibiotics, a hearing aid can help.

Amplifon Hearing Health Care, the longest-serving provider of hearing benefit solutions in the US, has partnered with NAPO to offer members a FREE hearing aid discount program.

Members have access to Amplifon's expansive nationwide network of over 5,600 locations and can choose from more than 1,700 hearing aid models, from leading brands such as Miracle-Ear, Oticon, Phonak, and Starkey.

No cost benefits also include a low-price guarantee; a three-year warranty including coverage for repairs, loss or damage; one-year free follow-up care; 2-years of free batteries mailed directly to your home; and a 60-day no-risk trial period. The Amplifon program provides average savings of 62% off manufacturers' suggested retail prices.

Amplifon Hearing Health Care

**The Benefit is FREE to
All NAPO Members & Their Family**

To take advantage of this benefit, simply call Amplifon at **877-846-7075** and let them know you're a NAPO member. A Patient Care Advocate will assist you.

Frequently Asked Questions

When does the Open Enrollment period end?

As a new NAPO member, you are eligible to enroll within 60 days of your membership beginning. For existing NAPO members, dental and vision benefits are available to enroll within 60 days of your employer/retirement system Annual Election Period (AEP).

When do the coverages begin?

Coverages will begin on the 1st of the month. We need your form back from the 5th of the month to begin coverages for the following month.

Can I add my spouse/domestic partner or dependent child to my coverage?

Yes. To add a dependent to your coverages, complete the enrollment form and select the appropriate Member + box. Please make sure to provide all the dependent information.

How do I cancel a benefit I'm currently enrolled in?

You may not cancel the dental or vision plans during the first 12 months. You may cancel any other plan at any time. You may send an email to cancel@pgagencies.com stating your name, date of birth, and which benefit plan you wish to cancel. Please note, we cannot cancel your membership with NAPO. You must contact NAPO directly for membership changes.

Who do I contact with questions?

With regards to *any benefit plan listed in this booklet*, please contact Pacific Group Agencies, the Benefit Plans Administrator, at 800-511-9065 or NAPO@pgagencies.com.

Do NOT contact NAPO directly about these plans. They will be unable to help you.

I have other coverages; do I have to cancel their plan if I enroll in yours?

Enrolling in these plans will not affect your enrollment in other plans. If you wish to cancel your active employee plan or retiree benefit plans, you must contact them directly.

Disclaimer & Member Requirements

In promoting the health, well-being, happiness, and continuing productivity of its members, NAPO members have access to voluntary benefits offered through Pacific Group Agencies (PGA). NAPO itself does not endorse, provide, or administer these benefits, but rather makes them available to members.

This guide contains summaries and highlights. Certain wording has been shortened or changed into “plain English”. Exclusions, limitations, and eligibility requirements may apply. While every effort has been made to ensure this information is accurate and fairly represents the coverage offered, mistakes can occur. This is not a Certificate of Insurance (COI) and nothing written or implied will change the COI terms.

An individual cannot assume they have effective coverage, even if they submitted an enrollment form, until the carrier has sent the proposed insured verification of coverage including effective date.

Insurance carriers have the right at any time to change: the rules, regulations, terms of coverage, availability, guidelines placed on the application, policies, enrollment, rates, and offering of products. While infrequent, without warning providers may discontinue their affiliation with an insurance company. There is no guarantee that a provider will remain affiliated with an insurance company.

Some plans have a minimum commitment. Should you cancel coverage by any action, including stopping payment, before the commitment is up, PGA, at its sole discretion, reserves the right to retroactively cancel your insurance to the original effective date and refund your premiums paid. You acknowledge responsibility for any outstanding or paid claims and discounts received by utilizing a network provider.

Coverage may be terminated without warning should payment stop for any reason or your NAPO membership lapses.

Cancelations:

- Cancelations must be received by the 5th of the month for processing for the next following month.
- **We do not accept phone cancelations.** Cancelations must be in writing to PGA, by email (cancel@pgagencies.com), mail, or fax (800-549-0059). Cancelations sent to the insurance carrier, your employer benefits office, retiree system, or NAPO, may not be processed and under no circumstance is PGA liable to refund premiums taken due to us not receiving proper or timely notice. PGA may adjust your cancellation date to match deductions received.
- Payment cancellation may result in monies being owed to PGA for premiums advanced. You agree to reimburse PGA all monies owed, and costs associated with collection of these monies.
- Retroactive cancellation requests will not be honored.

It is the responsibility of the member to:

- Report to PGA changes that affect insurability or eligibility of dependents, including children becoming over- age. We do not track the age of your children. Notifying the NAPO or other benefits administrators will not suffice as privacy laws prevent the relay of this information. Premiums are considered earned and cannot be refunded should you fail to notify us.
- Confirm you are enrolled in the correct and suitable plan.
- Maintain NAPO membership while enrolled in the benefits.
- Provide address changes to PGA.

For questions on the plans or the enrollment process, please contact the plan administrator, Pacific Group Agencies, CA License 0078489, at: (800) 511-9065 or NAPO@pgagencies.com

Notes



PACIFIC GROUP AGENCIES, INC.

Tel: (800) 511-9065 • Fax: (800) 549-0059 • NAPo@pgagencies.com

M-Th: 9 AM · 4 PM, F: 9 AM · 3 PM