

Comprehensive Guide

Your complete resource for the Integrity Health Plan

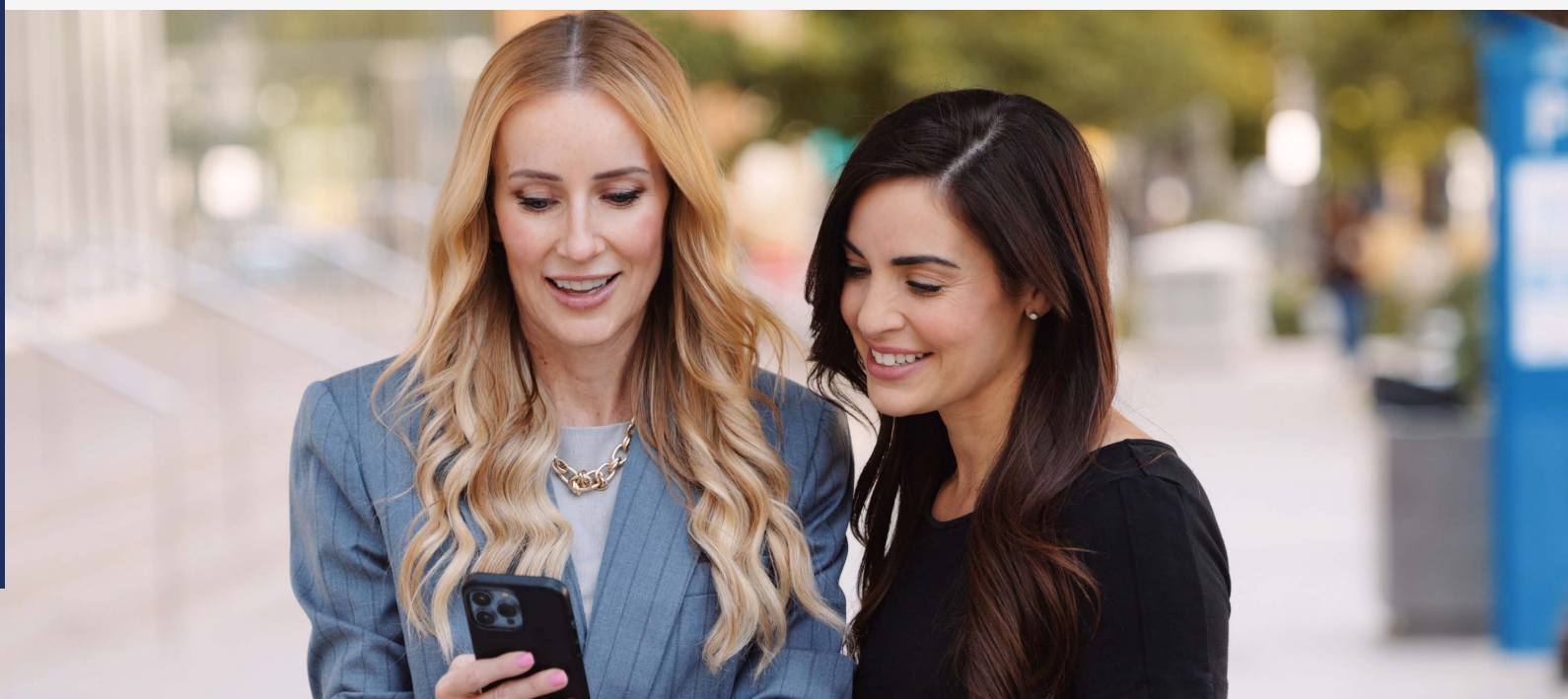


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The Story Behind the Plan

“For years, agents have been asking for this. No one has been able to deliver — until now.”

Everything Starts With Our Why

At Integrity, everything starts with our purpose: We help families plan for the good days ahead. When a family has to use the solutions that agents provide, it's often on one of the hardest days of their lives, whether it's a lost loved one, a health crisis, or a moment of need. It's because of what our agents do that these families can plan for the good days ahead.

Agents are the heart of everything we do. We have an obligation to support them — not just the families they serve, but agents themselves and their families too.

The Problem: Our Agents Have Faced

For years, independent agents and advisors working as 1099 professionals have faced a very real challenge: finding health coverage. Rising costs. Limited networks. Unpredictable out-of-pocket expenses. Alternative plans that are simply out of reach for many.

Think about what that means for an agent who's building a business. They're entrepreneurs. They're buying their own office supplies, flying across the country for meetings, running their own operations — and then on top of all that, they're trying to figure out health insurance alone. For many, it's been one of the biggest barriers to going full-time.

So many talented, part-time agents are staying at their day jobs not because they want to — but because they can't afford to lose their health coverage. They have families. They have kids. They can't burn the boats without a safety net.

The Answer: Protect What Matters Most

Here's an analogy that puts it perfectly: when cabin pressure is lost on a plane, flight attendants tell you to put your mask on before helping anyone else. We've always said agents should protect their families first before going out to protect other families. And, now we have a way to make that happen.

For the first time in the industry, Integrity is launching an exclusive health insurance plan for independent, 1099 agents and advisors — and their families. This is a benefit built on the size and scale of Integrity that no one else in the market can offer.

Why This Is a Game Changer for Your Agents

Freedom to Go Full-Time

One of the most powerful things about the Integrity Health Plan is what it unlocks for your agents. When you build your own business, there's a lot of freedom — freedom over your time, your schedule, your future. But there's one thing many part-time agents have never had freedom from: the fear of losing their health coverage.

Now you can look a part-time agent in the eye and say: "I know you've been wanting to go full-time. You've been worried about your benefits. Being part of Integrity, we can now provide you an option for that." That is a game changer!

A Recruiting Advantage Like No Other

This plan is exclusive to Integrity agents and advisors. No one else can offer it. That gives you a powerful, unique answer to the question every potential recruit asks: "Why Integrity?"

Not only are you offering something that no one outside of Integrity can access — it's something they can take advantage of right away. No waiting for open enrollment. If they work with Integrity, they can enroll today.

It's For the Whole Family

This isn't just for individual agents. If an agent is married, it can cover their spouse. If they have children, it can cover the whole family. Real coverage. Real peace of mind.

They're In Business *For* Themselves — But Not *By* Themselves

One of the most common phrases in our world is that you're "in business for yourself, but not by yourself." That's exactly what this plan represents. Agents no longer need to navigate health insurance alone. A dedicated support team is there to answer every question — about coverage, about finding doctors, about understanding their benefits.

Whether it's making sure a preferred specialist is in-network, navigating billing issues, or getting a second opinion on a serious diagnosis, agents have a team in their corner.

Key Differentiators at a Glance

- Exclusive to Integrity agents and advisors — no one else can offer this
- No open enrollment periods — agents can enroll at any time
- Individual and family coverage options available
- 100% coverage after deductible — no coinsurance
- Preventive services covered at 100%
- Nationwide PPO network
- HSA-eligible options with \$2,500 and \$5,000 deductibles
- Competitively priced — often less expensive than alternatives
- Accessible through IntegrityCONNECT or at Integrity.com/HealthPlan

Talking Points: How to Share This News

Below are proven talking points designed to help you have confident, compelling conversations with your agents and advisors. These cover the full arc — from opening the conversation to handling questions and closing strong. Use them in meetings, on calls, at events or one-on-one.

INTRODUCTORY STATEMENTS

- “I’m excited to share something truly groundbreaking that Integrity has created exclusively for agents and advisors like you.”
- Integrity has launched the **Integrity Health Plan** — the first health plan in the industry designed specifically for independent, 1099 professionals.
- This plan gives you **group-style access** to health benefits while allowing you to remain fully independent.
- And best of all, it’s easily accessible through the IntegrityCONNECT Association.

WHY INTEGRITY CREATED THIS PLAN

- Integrity knows how hard you work to protect your clients and their families.
- But for years, agents like you have struggled to find health coverage that’s truly competitive.
- Rising costs, limited networks, and unpredictable out-of-pocket expenses have made finding good coverage a real challenge.
- Integrity listened — and built a solution designed specifically around your needs.
- Think of it like this: we always say agents should protect their families before going out to protect other families. We’ve finally built a way to make that happen.
- The Integrity Health Plan is that answer.

INTRODUCING THE PLAN

- The Integrity Health Plan offers **industry-leading, high-quality coverage**.
- It uses the power and scale of Integrity to deliver benefits you want and need.
- Provides plan options for individual and family coverage — including spouse and children.
- It’s health coverage designed to give you confidence, security, and peace of mind.
- The Integrity Health Plan is one more reason that being part of Integrity means more.

KEY PLAN BENEFITS TO HIGHLIGHT

- Preventive services covered at **100%**
- Comprehensive coverage through a **nationwide provider network**
- No coinsurance — the plan pays **100% of eligible expenses after the deductible**
- Coverage for hospitalizations, surgeries, emergencies, and more
- HSA-eligible options with **\$2,500 and \$5,000 deductibles**
- Concierge support to help with billing issues, finding doctors, and navigating care
- Access to a dedicated team for enrollment and claims assistance

THE FREEDOM CONVERSATION — FOR RECRUITING

Use this angle when talking to part-time agents or new recruits who are hesitant to go full time:

- “I know you’ve been wanting to go full-time. You’ve been worried about what happens to your health coverage if you leave your day job. Being part of Integrity, we can now provide you an option for that.”
- Many agents stay part-time not because they want to — but because they can’t afford to lose their employer-sponsored health benefits. This plan changes that equation entirely.
- No open enrollment windows. No waiting. If they’re ready to make the move, this benefit is ready for them now.

HOW TO ACCESS THE PLAN

- The Integrity Health Plan is an **Exclusive Integrity Benefit** available through **IntegrityCONNECT**.
- Simply join the IntegrityCONNECT Association — membership is **free** and gives you access to this plan and thousands of other exclusive benefits.
- Enrollment is handled directly through **MyBenefits in IntegrityCONNECT** — it’s simple and takes just a few minutes.
- Not in IntegrityCONNECT? Visit **Integrity.com/HealthPlan** to get started today.

CLOSING TALKING POINTS

- The Integrity Health Plan is a true game changer for independent agents and advisors.
- This is yet another example of the value that comes from being part of the Integrity family.
- With this plan, you can spend less time worrying about health coverage — and more time enjoying life and serving clients.
- Let’s take a look at how easy it is to get started and see if the Integrity Health Plan is right for you.

Need Support Materials?

A full suite of marketing resources has been developed for you — including emails, overview brochures, getting started flyers, presentation slides, social media assets, and more. Reach out to your marketing team or email integrityhealthplan@integrity.com to access what you need.

Plan Details & Benefits at a Glance

Three Plan Options. One Simple Design.

The Integrity Health Plan keeps things straightforward. There are three plan options, differentiated only by deductible level. Once you meet your deductible, eligible claims are paid at 100% — with the exception of Pharmacy Tier 2 and above, which carry copays.

Plan Option 1 \$2,500 Deductible HSA Eligible ✓	Plan Option 2 \$5,000 Deductible HSA Eligible ✓	Plan Option 3 \$10,000 Deductible Not HSA Eligible
100% coverage after deductible	100% coverage after deductible	100% coverage after deductible

The deductible is also your out-of-pocket maximum — once you reach it, eligible claims are paid at 100%. There is no coinsurance. There are no annual or lifetime benefit limits.

How Pricing Works

Pricing follows a straightforward inverse relationship: the lower the deductible, the higher the monthly premium — and vice versa. Monthly premiums are competitive and, in many cases, less expensive than other individual market alternatives.

- Monthly fees are guaranteed through the end of each calendar year.
- Any changes to fees or plan designs take effect on January 1 of each new plan year.
- Plans must be renewed in early November for the following calendar year.
- All premiums are paid via ACH deduction, generally between the 25th and the last day of the prior month.

Getting a Quote and Enrolling

The enrollment process is quick, simple, and can be completed in minutes:

- Enter date of birth, zip code, and coverage type (individual, spouse, or family).
- Answer a short health questionnaire (prescriptions, conditions, height/weight). No individual medical underwriting — answers determine eligibility only. Responses are never shared with any other entity.
- Immediately receive eligibility results — no waiting period.
- Review three plan options and pricing, select a plan, sign contracts, and provide banking information for ACH payment.

Where to Start:

IntegrityCONNECT Users: Log in → MyBenefits tab → Integrity Health Plan

Not on IntegrityCONNECT yet: Visit Integrity.com/HealthPlan to complete the Agent and Advisor form and become a member of the IntegrityCONNECT Association.

Medical Benefits Schedule

This schedule is a snapshot of the medical benefits portion of the plan. All benefits are subject to applicable exclusions and maximum eligible expense provisions. Please refer to plan policy documents for complete details.

How It Works: Your deductible and your out-of-pocket maximum are the same number. Once you hit your deductible (\$2,500, \$5,000, or \$10,000), all eligible claims are paid at 100%. No coinsurance. No surprise bills.

Type of Service / Limitations	Benefit / Coverage
Acupuncture	Not covered
Allergy injections	100% after deductible
Allergy testing / serums	100% after deductible
Ambulance service	100% after deductible
Ambulatory surgical center	100% after deductible
Anesthesia	100% after deductible
Audiological services (ages 0-18)	100% after deductible
Bariatric surgery	Not covered
Biofeedback	Not covered
Birthing center	100% after deductible
Brachytherapy	100% after deductible
Cardiac rehabilitation – outpatient	100% after deductible
Chemotherapy – outpatient*	100% after deductible
Chiropractic care	100% after deductible
Colonoscopy – diagnostic	100% after deductible
Colonoscopy – routine (1 every 10 years, age 45+)	100% – deductible waived
Contraceptives (devices)	100% after deductible
Cosmetic surgery	Not covered
Dental services (accidental injury only)	100% after deductible
Diabetic education	100% after deductible
Diagnostic tests – outpatient	100% after deductible
Dialysis treatments – outpatient	100% after deductible
Durable medical equipment	100% after deductible
Education	Not covered
Eyeglasses	Not covered
Experimental services	Not covered
Hearing aids	100% after deductible
Home health care	100% after deductible
Hospice care (1 benefit period/year – 6 months max)	100% after deductible
Hospital services*	100% after deductible
Infertility treatment	Not covered
Infusion services / IV therapy – outpatient	100% after deductible
Injections	100% after deductible
Long-term care	Not covered
Laboratory	100% after deductible
Mammogram – diagnostic	100% after deductible
Mammogram – routine (1/year, age 40+)	100% – deductible waived
Maternity services (during pregnancy)	100% after deductible

Medical supplies	100% after deductible
Mental health – office visits and inpatient facility	100% after deductible
Non-emergency care outside the US	Not covered
Occupational therapy – outpatient	100% after deductible
Orthopedic devices	100% after deductible
Orthotics	Not covered
Physical therapy – outpatient	100% after deductible
Physician services	100% after deductible
Preventive care (as defined at healthcare.gov)	100% – deductible waived
Private duty nursing	Not covered
Prosthetic appliances	100% after deductible
Radiation therapy – outpatient*	100% after deductible
Radiology / imaging (X-ray, MRI, CT, PET, etc.)	100% after deductible
Respiratory therapy – outpatient	100% after deductible
Skilled nursing facility	Not covered
Sleep studies	Not covered
Speech therapy – outpatient	100% after deductible
Sterilization procedures	100% after deductible
Substance abuse – office visits and inpatient facility	100% after deductible
Surgery – office	100% after deductible
Surgery – inpatient / outpatient*	100% after deductible
TMJ / jaw disorders	Not covered
Transplant services*	100% after deductible
Urgent care services	100% after deductible
Vision exams (accidental injury only)	100% after deductible
Vision therapy	Not covered
Weight loss programs	Not covered

* Preauthorization is required on some services and are subject to plan preauthorization processes.

Pharmacy Benefits Schedule

Prescription coverage is administered through FairosRx. The covered individual is responsible for 100% of the cost of prescription drugs until the deductible is met, after which copays apply depending on the tier. Tier 1 (preventive drugs) are always \$0 — before and after the deductible.

Tier	Retail Copayment (max 30-day supply)	Mail Order Copayment (max 90-day supply)
Tier 1: Preventive drugs	\$0.00 (prior to and after meeting the deductible)	\$0.00 (prior to and after meeting the deductible)
Tier 2: Preferred generics	100% prior to deductible. \$15.00 copay after deductible.	100% prior to deductible. \$30.00 copay after deductible.
Tier 3: Preferred brand and non-preferred generics	100% prior to deductible. \$50.00 copay after deductible.	100% prior to deductible. \$100.00 copay after deductible.
Tier 4: Non-preferred brand	100% prior to deductible. \$100.00 copay after deductible.	100% prior to deductible. \$200.00 copay after deductible.
Tier 5: Specialty drugs	Not covered – defined as any drug that costs more than \$1,000 per script fill.	Not covered – defined as any drug that costs more than \$1,000 per script fill.
Tier 6: Non-formulary and excluded drugs	Not covered	Not covered

Pharmacy Contact:

FairosRx | Phone: 833-464-9600 | Email: ContactUs@FairosRX.com

Web: FairosRX.com

Frequently Asked Questions

Health insurance can be complex. These answers are designed to prepare you for the most common questions agents and advisors ask — so you're always ready.

PLAN DETAILS AND BENEFITS

Why should I choose the Integrity Health Plan?

- The Integrity Health Plan offers self-employed business owners several important advantages:
 - No open enrollment periods — enroll any time of year
 - Three major medical plan design options
 - Two HSA-eligible plan options
 - Comprehensive coverage through a nationwide network of top-tier providers
 - Concierge support for billing issues, finding doctors, and more

What plan design options are there?

- There are three plan designs with deductibles of \$2,500, \$5,000, and \$10,000.
- The deductible is also the out-of-pocket maximum — once met, all eligible services are covered at 100% (with the exception of Tier 2+ pharmacy copays).

Can I change my plan design selection mid-year?

- Once contracts are signed, you must wait until renewal to select a different plan design.

How much do I pay before I meet my deductible?

- The annual out-of-pocket maximum is the same as the deductible and varies by tier.
- Once you meet your deductible, all qualified benefit services are covered at 100% — except pharmacy copays for Tier 2 and above.

Which health plans are HSA eligible?

- The \$2,500 and \$5,000 deductible plan options are HSA-qualified. You can set up your own HSA account through your bank, credit union, or an online HSA provider.

Are premiums tax deductible?

- Premiums are generally tax-deductible for agents who are not eligible for an employer-sponsored group plan. Consult a tax professional for guidance specific to your situation.

Does the plan offer access to a broad network?

- Yes — you have access to the PHCS Physician nationwide PPO network, one of the largest in the U.S.
- Always compare your explanation of benefits to the provider's bill and contact the plan's claims administrator if discrepancies arise.

What medical provider network do I use?

- Start by searching the PHCS network at Multiplan.com/webcenter/portal/ProviderSearch — select the MultiPlan Limited Benefit Network.
- If your preferred provider is not in the PHCS network, you may use any doctor except HMO providers.

- Provide your medical ID card to your physician's office and ask them to contact the claims team to coordinate payment. Do not pay for healthcare services upfront.

Are there preferred hospitals? How is payment determined?

- Contact the FairOS Care Navigation Team at 855-426-1100 to find the best facilities based on quality and cost. This team can identify a provider based on cost, quality, location, and prior utilization.

Is preventive care covered?

- Yes, all qualified preventive services are not subject to the deductible and are covered at 100%.

Are there caps on coverage?

- No, there are no annual or lifetime limits on benefits. This is NOT a limited medical or short-term medical plan.

What prescriptions are covered?

- See the Pharmacy Benefits Schedule in Section 6 of this guide for full tier details. The full prescription formulary is available on the Integrity Health Plan website.

Is assistance available for complex or serious medical conditions?

- Yes, a dedicated customer service team offers personalized support. Access to Edison Health Care is also available for second opinions and concierge medicine programs.

ELIGIBILITY AND ENROLLMENT REQUIREMENTS

Who is eligible for the Integrity Health Plan?

- Integrity agents and advisors and their families who operate as self-employed individuals with their own Federal Employer Identification Number (FEIN).

I'm an independent agent but don't have a FEIN yet. Can I still participate?

- A FEIN is required to participate. You can apply online through the IRS in minutes.
- For assistance: call (800) 399-0174. To verify a forgotten FEIN: call (855) 214-7520.

What is the health questionnaire in the enrollment process?

- While there is no individual medical underwriting, applicants complete a short health questionnaire to determine eligibility.
- Your responses will never be shared with or released to any other entity.

Why does the health questionnaire determine eligibility?

- Depending on the health conditions of you or your dependents, you may not be eligible for the plan at this time.
- The questionnaire structure helps keep the Integrity Health Plan sustainable and healthy for all members now and into the future.

Can I participate if I currently have health insurance through another provider?

- Yes — participating in the Integrity Health Plan is a qualifying life event. In most instances, you can switch at any time during the calendar year, with effective dates on the 1st of each month.

Is it worth switching now, or should I wait for my current plan year to end?

- That decision is yours to make. Comparing costs and considering where you are in your current deductible year can help guide the choice.

THE ENROLLMENT PROCESS AND GETTING COVERAGE

How do I get coverage?

- Enroll through IntegrityCONNECT (MyBenefits tab) or at <https://integrity.com/healthplan/>.
- Steps: Review plan options and premiums → Complete the health questionnaire → Select your plan → Sign contracts → Enter bank information for ACH payment. Done.

How long does it take?

- The full process — from viewing plan options to signing documents — can be completed in minutes.

Do I have to wait for questionnaire results?

- No waiting period. You will know immediately after completing the health questionnaire whether you are eligible.

How do I pay my monthly premiums?

- All monthly premiums are paid via ACH deduction from your checking account. Payments are typically drawn between the 25th and the last day of the prior month.
- Your first month's payment may be drawn earlier — generally between the 15th and the last day of the month you enroll.

Will my monthly premiums change?

- Monthly fees are guaranteed through the end of the calendar year. Any changes take effect on January 1.
- In early November, plans renew for the coming year. The 2026 plan year runs January 1–December 31, 2026.

When will I receive my medical ID card?

- If you establish and confirm your plan at least two weeks before your effective date, you should receive your ID cards by that date.
- After your first payment is processed, you'll receive an introductory email with instructions to create your member portal account — where you can access your virtual ID card(s), eligibility records, and claims information.

What will be listed on my ID card?

- Plan administrator: the plan's administrative team
- PPO network: PHCS Physician & Ancillary Network
- Pharmacy benefit manager: FairoRx

I've switched to the Integrity Health Plan. When should I cancel my existing coverage?

- Wait to cancel your existing coverage until after the 1st of the month in which your new Integrity Health Plan coverage is effective. You are responsible for proactively canceling your prior coverage.

CONTACT AND SUPPORT

Who is the carrier?

- The Integrity Health Plan is a private, self-funded plan that operates independently of traditional insurance carriers. It leverages the largest PPO network in the U.S. (MultiPlan PHCS) and is administered through a dedicated plan administration team. This structure provides greater flexibility and helps keep costs lower for agents.

Is Integrity involved in the program?

- Yes. The Integrity Health Plan is designed with Integrity's direct involvement and oversight, ensuring it empowers agents and their families with the coverage they need at competitive premiums.

How do I sign up for the member portal?

- After your first payment is processed, you'll receive an email with a link and instructions to create your account.
- Through the portal, you can access virtual ID cards, eligibility records, claims information, and plan documentation.

Benefits Welcome Packet

The following is the official Benefits Welcome Packet for the 2026 plan year. Your agents will receive this in the mail upon enrollment — it gives them everything they need to make the most of their coverage.

Welcome to Your Integrity Health Plan

Thank you for establishing your Integrity Health Plan. Access to this health plan is only available to Integrity agents and advisors. Your well-being is our top priority, and we are committed to providing you with comprehensive coverage and exceptional service.

Plan designs are simple. Your deductible and out-of-pocket maximums are the same — once you hit your deductible, eligible claims are paid at 100%, with the exception of Pharmacy Tier 2 and above.

To make the most of your health plan:

- Review your plan documents carefully to understand your benefits.
- Visit Integrity.com/healthplan or contact customer service for any questions.
- Utilize your network of healthcare providers for the lowest cost, quality care.

Member Portal Guide

The Member Portal is your go-to resource for managing your account and accessing important information. Through the portal, you have access to claim summaries, deductible information, ID cards, and other key documentation.

Registering as a New User

On your first visit, find 'First Time User?' on the landing page and select the 'Register' button. Follow the prompts to create your account.

Returning Users

Enter your credentials using the fields provided. Forgot your password? Select 'Forgot Your Password?' and follow the prompts.

How to Use Your Plan

Finding a Provider

Start by searching the PHCS Physician & Ancillary Network at Multiplan.com/webcenter/portal/ProviderSearch — select the 'MultiPlan Limited Benefit Network' filter. If your preferred provider isn't listed, you can use any doctor except HMO providers.

Using Your Coverage

Simply present your Integrity Health Plan ID card at your physician's office and ask them to contact the claims team to coordinate payment. Do not pay for healthcare services upfront. If a provider is resistant, insist — this is your right as a plan member.

For Complex Care or Second Opinions

Contact the Cares Network (listed in the Contact Directory in Section 9) for support with complex conditions, second opinions, and specialty provider navigation.

Telehealth

The plan includes access to Clever Health telehealth services. Download the Clever Health app or visit CleverHealth.ai for support.

Member Mobile App

The Benefits Hero mobile app (available at MembersHQ.com) gives you easy on-the-go access to your plan information. Contact Care@BenefitsHero.io for app support.

Your Medical ID Card

Your Integrity Health Plan medical ID card will arrive by your effective date if you enrolled at least two weeks prior. Your ID card will display:

- Plan administrator contact information
- PPO network: PHCS Physician & Ancillary Network
- Pharmacy benefit manager: FairoRx

After your first payment is processed, you will receive an introductory email with instructions to access your member portal, where your virtual ID card is also available immediately.

Contact & Support Directory

A dedicated network of teams is ready to support agents at every step — from enrollment to claims to complex care navigation. Use this directory to quickly find the right contact for any situation.

If you need help with...	Provider	Contact Information
Plan information, claims, eligibility, ID cards, provider networks, and member portal	Plan Administration Services	Phone: 877-958-2109 Email: IntegritySupport@AllThingsVault.com Claims: Claims@AllThingsVault.com Mon-Fri, 8:00 am – 5:00 pm CST
Prescriptions and medications	FairosRx	Phone: 833-464-9600 Email: ContactUs@FairosRX.com Web: FairosRX.com
Complex care, second opinions, specialty networks and providers	Care Navigation Network	Phone: 888-211-5760 Email: Cares@AllThingsVault.com Web: VaultCaresNetwork.com
PHCS network provider search	MultiPlan	Select the MultiPlan Limited Benefit Network. Web: Multiplan.com/webcenter/portal/ProviderSearch
Telehealth	Clever Health	Download the app for support. Web: CleverHealth.ai
Member mobile app	Benefits Hero	Email: Care@BenefitsHero.io Web: MembersHQ.com
Preferred hospital and facility navigation	Fairos Care Navigation	Phone: 855-426-1100 Use to find top-rated facilities based on quality, cost, and location.
Partner and marketer support for the Integrity Health Plan	Integrity Health Plan Team	Email: integrityhealthplan@integrity.com Web: Integrity.com/healthplan

For Partners, Managers & Marketers:

If you have questions about sharing this plan with your agents or need additional marketing resources, reach out to the Integrity Health Plan team at integrityhealthplan@integrity.com.