Benefit Summary



Benefit Summary Generated On 10/27/2022 At 04:52:07 CDT

our Information		
Name	MATTHEW SNYDER	
Address	613 NAYSMITH STREET NORTH VERSAILLES, PA 15137 US	
Date of Birth	08/11/1996	
Gender	Male	
Cell Phone	412-477-1776	
Dependents - 0		

Future as of 01/01/2023

My Health

Health Fee - Health Fee	\$68.23 Bi-Weekly
Health Fee Covered Members	
Members	Covered
MATTHEW SNYDER Effective Date: 01/01/2023	Yes
Health Fee Cost Breakdown	
Employee Cost Your employer will be paying \$215.47 for this benefit.	\$68.23 Bi-Weekly

Medical - Highmark PPO Standard Plan	\$0.00 Bi-Weekly
Medical Covered Members	
Members	Covered
MATTHEW SNYDER Effective Date: 01/01/2023	Yes

Dental - UCCI PPO Dental Plan	\$1.46 Bi-Weekly
Dental Covered Members	
Members	Covered
MATTHEW SNYDER Effective Date: 01/01/2023	Yes

\$0.00 Bi-Weekly
Covered
Yes









My Savings



Flexible Spending Account (Healthcare) - Coverage Waived



Flexible Spending Account (Dependent Care) - Coverage Waived

My Security

Basic Life - The Standard Basic Life and ADD		\$0.00 Bi-Weekly
Effective Date Basic Life Coverage Am	ount	09/01/2022
Coverage Amount		\$10,000.00
Employee Cost Your employer will be paying \$0.43 for this benefit.		\$0.00 Bi-Weekly
Basic Life Beneficiaries		
Name	Beneficiary Type	Allocation
Emanual Snyder	Primary	100.00%



Voluntary Life and Contributory AD&D - Coverage Waived



The Standard Voluntary Additional Employee Life - Coverage Waived



Optional AD&D - Coverage Waived



Voluntary Spouse Life - Coverage Waived



Voluntary Child Life - Coverage Waived



Short-Term Disability - Coverage Waived



LTD - Coverage Waived



MetLife Legal - Coverage Waived



Allstate Identity Protection - Coverage Waived

This online benefit summary is reflective of benefits information contained within the Businessolver, Inc. database on the date this information is being displayed. This information is not intended to be an all inclusive or exhaustive list of benefit enrollment information. Modifications, deletions, and additions to coverage are not immediately effective upon submission. Please contact your Benefits Administrator with questions.

Important Note: The insurance carriers make the final determination regarding the payable benefit amount and the designated beneficiaries. The information shared reflects the current enrollment system data, but the ultimate benefit recipient or benefit amount to be paid may change based on plan rules, Evidence of Insurability and approvals, and other factors.

Every effort has been made to report information accurately, but the possibility of error exists. In case of any conflict between your benefits election confirmation and an official plan document, the plan document will be the final authority. Please note, some insurance coverage elections only become effective upon approval of your evidence of insurability (EOI) by the carrier.

* -Any personal or dependent information that appears in red font indicates a change that is currently pending approval.