

# Open Enrollment 2025 Benefit Summary

Benefit Summary Generated On 12/26/2024 At 03:07:14 CST

## About You

### Your Information

Name	Vinutan Naik Sr
Address	53 Auburn Street Ext Apt 5 Framingham, MA 01701-4853 US
Date of Birth	04/01/1987
Marital Status	Married
Gender	Male
Preferred Phone	908-726-3784

## Dependents - 3

### Dependents

Name	Relationship	Gender	Date of Birth
Rekhashreet Vinutan Naik	Spouse	Female	02/16/1990
Hritesh Vinutan Naik	Child	Male	11/06/2020
Pratiksh Vinutan Naik	Child	Male	08/02/2022

# Future as of 01/01/2025

## My Health

Medical and Prescription Drug - APCN Plus Aetna	\$396.11 Semi-Monthly
<b>Medical and Prescription Drug Covered Members</b>	
<b>Members</b>	<b>Covered</b>
Vinutan Naik Sr Effective Date: 12/08/2024	Yes
Rekhashreet Vinutan Naik Effective Date: 12/08/2024	Yes
Hritesh Vinutan Naik Effective Date: 12/08/2024	Yes
Pratiksh Vinutan Naik Effective Date: 12/08/2024	Yes
<b>Medical and Prescription Drug Cost Breakdown</b>	
Base Cost	\$446.11
Credit Vinutan Naik Sr 2025 Spouse Nicotine Attestation Discount : Yes	- \$25.00
Credit Vinutan Naik Sr 2025 Spouse Biometric Health Screening Discount : Yes	- \$25.00
Employee Cost	\$396.11 Semi-Monthly

Dental - Metlife Dental Plan - Low	\$6.55 Semi-Monthly
<b>Dental Covered Members</b>	
<b>Members</b>	<b>Covered</b>
Vinutan Naik Sr Effective Date: 06/17/2024	Yes
Rekhashreet Vinutan Naik	No
Hritesh Vinutan Naik	No
Pratiksh Vinutan Naik	No

Vision - Coverage Terminated	
Effective Date	12/08/2024
Term Date	12/08/2024
<b>Vision Covered Members</b>	
<b>Members</b>	<b>Covered</b>

Members	Covered
<b>Vinutan Naik Sr</b> Effective Date: 12/08/2024 Term Date: 12/08/2024	No
<b>Rekhashreet Vinutan Naik</b> Effective Date: 12/08/2024 Term Date: 12/08/2024	No
<b>Hritesh Vinutan Naik</b>	No
<b>Pratiksh Vinutan Naik</b>	No

Group Critical Illness Insurance Plan - Coverage Waived

My Security

Voluntary Hospital Plan - Coverage Waived

Group Accident Insurance Plan - Group Accident Insurance Plan	\$2.55 Semi-Monthly
<b>Group Accident Insurance Plan Covered Members</b>	
Members	Covered
<b>Vinutan Naik Sr</b> Effective Date: 06/17/2024	Yes
<b>Rekhashreet Vinutan Naik</b>	No
<b>Hritesh Vinutan Naik</b>	No
<b>Pratiksh Vinutan Naik</b>	No

Basic Life and AD&D Insurance - Basic Life and AD&D		\$0.00 Semi-Monthly
Effective Date		08/13/2024
Basic Life and AD&D Insurance Coverage Amount		
Coverage Amount		2x Salary
Basic Life and AD&D Insurance Beneficiaries		
Name	Beneficiary Type	Allocation
Rekhashreet Vinutan Naik	Primary	100.00%
Rekhashreet Vinutan Naik	None	
Hritesh Vinutan Naik	None	
Pratiksh Vinutan Naik	None	

Associate Voluntary Life and AD&D Insurance - Associate Supplemental Life and AD&D Insurance		\$5.55 Semi-Monthly
Effective Date		06/17/2024
Associate Voluntary Life and AD&D Insurance Coverage Amount		
Coverage Amount		\$150,000.00
Associate Voluntary Life and AD&D Insurance Beneficiaries		
Name	Beneficiary Type	Allocation
Rekhashreet Vinutan Naik	Primary	100.00%
Rekhashreet Vinutan Naik	None	
Hritesh Vinutan Naik	None	
Pratiksh Vinutan Naik	None	

Voluntary Spouse Life - Coverage Waived

Child Voluntary Life and AD&D Insurance - Child Supplemental Life and AD&D - \$20,000	\$0.95 Semi-Monthly
Effective Date	12/08/2024

STD - Short Term Disability	\$0.00 Semi-Monthly
Effective Date	06/17/2024

LTD - Core Long Term Disability	\$0.00 Semi-Monthly
Effective Date	01/01/2025

Legal Plan - Coverage Waived

Identity Theft Protection - Coverage Waived

Other

## Transit Flexible Spending Account - Coverage Waived

Total Cost

**\$411.71**  
Semi-Monthly

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.