



2026

Enrollment Guide

North American Holdings, Inc.



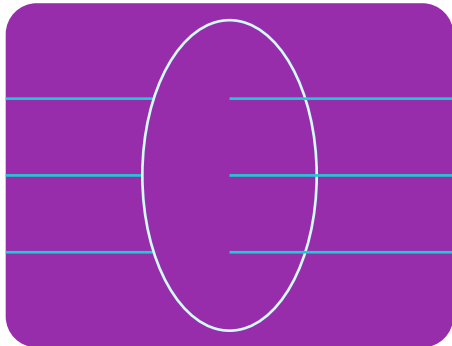
The health plan you'll be **happy** to see

Take control of your healthcare journey with a plan that gives you access to top-quality providers and offers price certainty for every medical service. With SimplePay, experience healthcare without the complications.

Clear and supportive healthcare

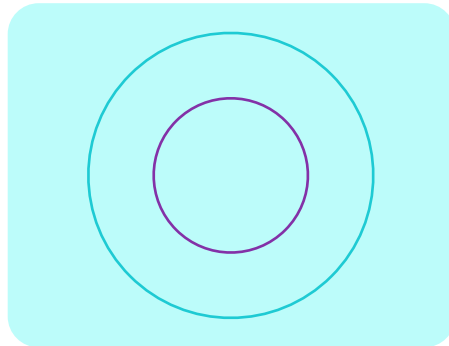
Price certainty

Know the price of every medical service ahead of time. Focus on your health, without worrying about add-ons or unexpected bills.



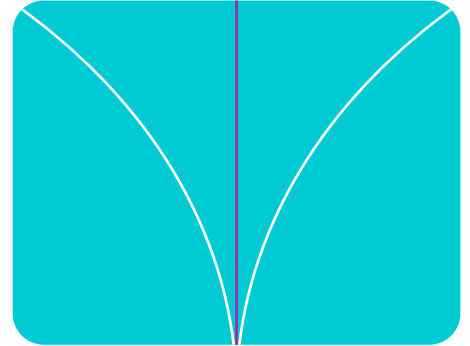
Great care and value

Find top-quality providers offering all services at fixed, predetermined costs — from routine checkups to advanced procedures. High-quality providers cost you less.



Simple user experience

Access your health plan from anywhere with the straightforward and intuitive SimplePay member portal.



Health Valet service

Work alongside a SimplePay Health Valet to confidently navigate your healthcare journey. Health Valets can assist with:

- + Finding a high-quality provider
- + Answering questions about billing or coverage
- + Helping you understand different care options and more



Contact the Health Valet team:

1-800-606-3564

healthvalet@simplepayhealth.com

Monday-Friday

8:00 a.m. - 8:00 p.m. Central

Price certainty

Going for care is easygoing when you know the cost ahead of time.

What to expect:

1.

Look up a service and know exactly what you'll owe.



2.

Go to the doctor and receive great care.



3.

Receive an Explanation of Benefits.



Use the SimplePay member portal to find the best provider based on cost and quality rankings.

See your provider and feel confident knowing their quality of care.

Pay the exact cost you saw in your member portal.

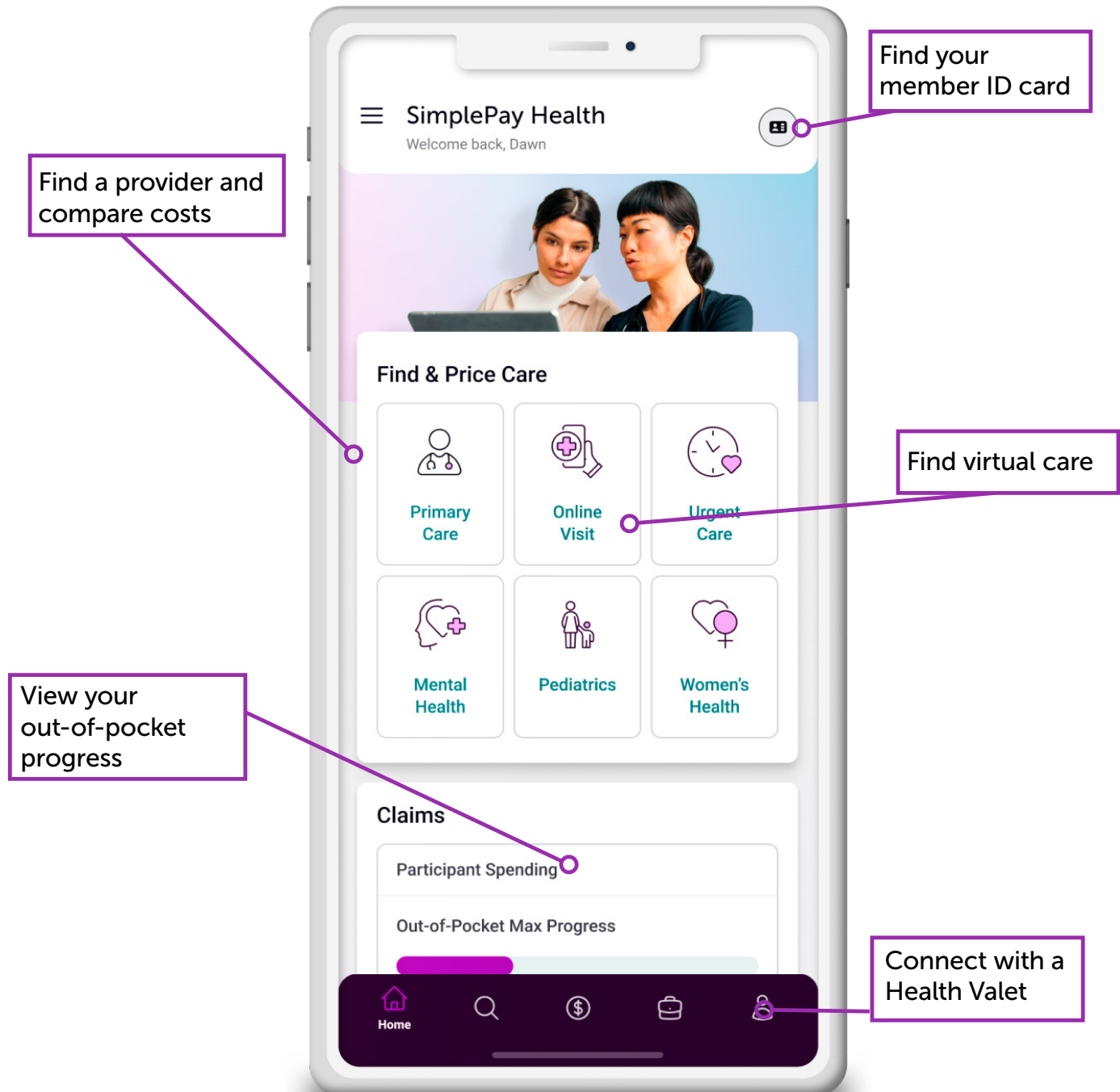


For questions, contact the Health Valet team or visit

<https://employers.simplepayhealth.com/NAH-NF-HDHP>

Member portal




Explore the member portal anytime from your mobile app or desktop. It's your one-stop hub for all your benefit information.



Quality you can trust

SimplePay is designed to help you find **high-quality**, low-cost providers so you can prioritize your health and your bank account.

With SimplePay, providers are categorized into three copay rankings based on the following criteria:

-  Tier 1 provider
-  Tier 2 provider
-  Tier 3 provider

Quality

Providers renowned for their best-in-class training, certifications, and commitment to delivering excellent care outcomes.

Relationship

Providers that are associated with top-quality service lines at their facility, ensuring great care with every visit.

Experience

Providers that consistently deliver positive patient experiences and outcomes.

Efficiency

Providers that offer the best results for their patients, delivering just the right amount of care to ensure health needs are met.

Provider Ranking Legend



Meets all standards above



Meets most standards above



Meets some standards above

Pharmacy



SimplePay Health pharmacy plans are provided by MedOne Pharmacy Benefit Solutions.

MedOne is a nationally recognized pharmacy benefit manager that contracts with almost all licensed U.S. pharmacies. On a SimplePay plan, you can see your out-of-pocket cost for prescriptions in the SimplePay member portal. Your copay will vary based on the pharmacy you choose.

What to expect when visiting the pharmacy:

1.

Visit the SimplePay member portal to find a pharmacy and your prescription cost.

2.

Visit the pharmacy and present your member ID card.

3.

Pay the pharmacy the cost you saw upfront in your drug cost search.



For more information on pharmacy benefits and to do a prescription drug lookup, visit

<https://employers.simplepayhealth.com/NAH-NF-HDHP>



SimplePay Benefits Summary

North American Holdings: HDHP Plan (Non-Financing)

Plan Year: January 1, 2026 – December 31, 2026

Medical Benefits				
Medical Services		In-Network		Out-of-Network
Calendar Year Deductible(Deductible must be met before copays)				
Single		\$1,700		None
Family		\$3,400		None
Out-of-Pocket Maximum				
Single		\$4,300		Unlimited
Family		\$8,600		Unlimited
OOP Max applies to in-network services only; Out-of-Network OOP Max is unlimited				
Medical Services	Tier 1	Tier 2	Tier 3	Out-of-Network
Physician Services: You must meet your deductible before copays apply				
Primary Care Visit	\$15	\$20	\$30	\$40
Specialist Visit	\$30	\$40	\$65	\$80
Emergency Services/Urgent Care				
Emergency Services/Emergency Room		\$250		
Urgent Care Facility		\$30		
Hospital Expenses or Long-Term Acute Care Facility/Hospital: You must meet your deductible before copays apply				
Inpatient Hospital	\$1,425	\$1,900	\$2,600	\$3,150
Outpatient Hospital	\$465	\$615	\$1,030	\$1,236
Infertility Treatment	See plan document for specific coverages and exclusions			
Skilled Nursing Facility/Rehabilitation Facility(100 visit limit)	\$1,255	\$1,675	\$2,600	\$3,150
Ambulance Services		\$250		
Ambulatory Surgical Center	\$465	\$615	\$1,030	\$1,236
Home Health Care (120 visits per plan year)	\$30	\$40	\$65	\$80
Hospice Care	\$155	\$205	\$345	\$420
Laboratory Services: You must meet your deductible before copays apply				
Routine Labs	\$10	\$15	\$20	\$30
Diagnostic Labs	\$40	\$55	\$90	\$110
Maternity: You must meet your deductible before copays apply				
Initial Office Visit	\$30	\$40	\$65	\$80
Preventive & Ongoing Prenatal Care		No Charge (Included in global delivery copay)		
Delivery & Postnatal Care	\$1,425	\$1,900	\$2,600	\$3,150

Mental Disorders & Substance Use Disorders: You must meet your deductible before copays apply

Office Visit	\$15	\$20	\$30	\$40
Inpatient	\$1,425	\$1,900	\$2,600	\$3,150
Outpatient	\$465	\$615	\$1,030	\$1,236

Virtual Care Services: No deductible needs to be met

Teledoc	\$0 (No deductible) **When your doctor is not available visit www.teladoc.com to see a physician about your health questions and treatment options			N/A
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Preventive Services & Routine Care: No deductible needs to be met.

Well-Child Care (Including exams and immunizations)	No Charge
Adult Physical Examination (Including routine GYN visit)	No Charge
Breast Cancer Screening (any age)	No Charge
Pap Test	No Charge
Prostate Cancer Screening	No Charge
Colorectal Cancer Screening	No Charge

Radiology Services: You must meet your deductible before copays apply

Diagnostic X-Rays	\$40	\$55	\$90	\$110
Advanced Imaging (MRI, MRA, CAT & PET Scans)	\$140	\$190	\$315	\$400

Therapy Services: You must meet your deductible before copays apply

Chiropractic Care/Spinal Manipulation (15 visits per plan year)	\$30	\$40	\$65	\$80
Outpatient Therapies (PT, OT, ST) (20 visits per plan year)	\$30	\$40	\$65	\$80

Durable Medical Equipment: Radiology Services: You must meet your deductible before copays apply

Durable Medical Equipment (DME) / item	\$65	\$85	\$140	\$170
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Other Healthcare Facilities/Services: Radiology Services: You must meet your deductible before copays apply

Temporomandibular Joint Dysfunction	\$465	\$615	\$1,030	\$1,236
Allergy Injections, Serum & Testing	\$30	\$40	\$65	\$80
Acupuncture(15 visit limit)	\$30	\$40	\$65	\$80
Weight Control/Bariatric Surgery	\$465	\$615	\$1,030	\$1,236
Hearing Aids	\$65	\$85	\$140	\$170
Transplants (Aetna IOE Program)* (Travel/lodging \$10,000 per transplant)	\$465	\$615	\$1,030	\$1,236

*Please refer to the Aetna Institute of Excellence (IOE) Program section of this plan for a more detailed description of this benefit, including travel and lodging maximums. No charge for travel and lodging.

*Diabetic equipment and supplies provided by Livongo are covered at \$0. All other Diabetic Supplies that are provided by an in-network preferred provider will be paid according to the applicable category of this Medical Schedule of Benefits, such as Durable Medical Equipment (DME).

Medical Network: Aetna Open Choice POS II Network

How to Find a Provider: Log into your member portal at www.simplepayhealth.com and click on "Find a Doctor and Compare Costs" under the "Benefits" tab.

For questions about your SimplePay Health Plan, please contact your SimplePay Health Valet:

Email: healthvalet@simplepayhealth.com

Phone: 800-606-3564

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an  **aetna** company

Pharmacy Benefits

NOTE: There is no coverage under the plan for prescription drugs obtained from a Non-Participating Provider.

<p>Single Family</p>	<p>If you reach your out-of-pocket maximum, SimplePay Health will pay 100% of the applicable allowed benefit for most covered services for the remainder of the year. All copays and other eligible out-of-pocket costs count toward your out-of-pocket maximum, except balance billed amounts.</p>
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Pharmacy Plan Feature	In-Network Pharmacies & CVS	Walgreens	Description
Retail Pharmacy: You must meet your deductible before copays (except for preventive medications)			
Generic Drugs (Tier 1) (Up to a 31-day supply)	\$5	\$10	Generic drugs are covered at this copay level.
Preferred Brand Drugs (Tier 2) (Up to a 31-day supply)	\$10	\$15	All preferred brand drugs are covered at this copay level.
Non-Preferred Brand Drugs (Tier 3)	\$15	\$20	All non-preferred brand drugs on this copay level are not on the Preferred Drug List. *Discuss using alternatives with your physician or pharmacist.
Specialty Drugs (Tier 4) (Up to a 31-day supply)		\$10	Specialty medications are required to be filled through Mail Order
Mail Order Pharmacy (90-day supply): You must meet your deductible before copays (except for preventive medications)			
Generic Drugs (Tier 1)		\$15	Maintenance drugs of up to a 90-day supply is available for 1.5 the copay through Mail Service Pharmacy.
Preferred Brand Drugs (Tier 2)		\$25	
Non-Preferred Brand Drugs (Tier 3)		\$30	

Pharmacy Drug Vendor: MedOne Rx

How to Find a Drug: Look up the cost of your medications in the SimplePay member portal on the “Benefits” tab under the card that says, “Find Drug Prices.” Please refer to the “MedOne Preventative Drug List 2021” found on the Employer Benefits page within the SimplePay Health Member Portal for all preventative medications covered at 100% with a \$0 cost to you.

Visit www.simplepayhealth.com for the most up-to-date drug lists, including the prescription guidelines. Prescription guidelines indicate drugs that require your doctor to obtain prior authorization from SimplePay Health before they can be filled and drugs that can be filled in limited quantities.

This plan summary is for comparison purposes only and does not create right not given through the benefit plan.



Find a happier way to healthcare

Access your SimplePay Health Valet:

1-800-606-3564
healthvalet@simplepayhealth.com

Monday - Friday
8:00 a.m. - 8:00 p.m. Central

For questions regarding provider and pharmacy information, visit your company's microsite or reach out to your Health Valet.

[Learn More](#)

Connect with SimplePay

simplepayhealth.com

