

SERMA Frequently Asked Questions

What is a SERMA?

When you retire from Intel as a U.S. employee, if eligible, Intel establishes a Sheltered Employee Retirement Account (SERMA) account for you. You may use your SERMA credits to reimburse yourself for either Intel Retiree Medical Plan premiums and non-Intel sponsored health care premiums or COBRA paid for you, your spouse or Domestic Partner, and your eligible children. Eligible reimbursements may include premium payments for:

- Intel Retiree Medical Plan (IRMP)*
- Individual health insurance
- Other employer retiree group plans
- COBRA
- Medicare & Medigap
- Long-term care

**IRMP premiums can be automatically processed and do not require you to submit for reimbursement if automatically processed.*

What are the SERMA eligible expenses?

A list of eligible expenses is available in a separate attachment. Here is a sample list below of eligible expenses:

- COBRA
- IRMP
- Long Term Care*
- Medicare A, B, D
- Medicare Advantage (Medicare C)
- Medigap Premiums
- Premiums for other health insurance (i.e. dental, vision, wellness)
- Medical Insurance Premiums

**Special requirements exist for claiming Long Term Care premiums. See "Can I submit Long Term Care Premiums" on page 5.*

Some common expenses which are not eligible include any type of health care services, life or AD&D insurance, income replacement policies, active-employment healthcare premiums, or group share programs.

What makes me eligible for SERMA?

If you were hired before January 1, 2014, a SERMA will be established upon your retirement from Intel if you are a US employee at the time you retire and meet any of Intel's retirement eligibility rules.

If you were hired on or after January 1, 2014, if you separate from Intel or transfer from an Intel SERMA participating entity to a non-participating subsidiary or entity, your past years of service for the purpose of calculating SERMA will be forfeited.

For more details, please refer to www.intel.com/go/myben and click on the "Intel Retiree" tab. You will then click on the current year Intel Retiree Medical Plan (IRMP) and Sheltered Employee Medical Account (SERMA) Summary Plan Description.

Can I be enrolled in IRMP and use my SERMA to purchase other insurance as well?

Yes, if you enroll or are enrolled in IRMP, you may also use your SERMA toward other eligible health care insurance premiums for you, your spouse, domestic partner or eligible children.

I am not enrolled in the IRMP and would like to use my SERMA for other health insurance premiums. How do I do that? If you have available SERMA credits, a reimbursement account will automatically be set up for you with MyChoice Accounts. You may use MyChoice Accounts to reimburse yourself for health care premium costs that you incur.

Can I use SERMA to purchase coverage for my spouse or dependent children?

Yes, you can use your SERMA to purchase individual insurance for yourself, your spouse and your eligible dependent children. Note, you may not purchase IRMP coverage for your spouse or dependents if you are not enrolled in IRMP

If I want to remain enrolled in IRMP, may I use SERMA to purchase other coverage for my family? Yes.

My spouse is actively working, and I am enrolled in my spouse's employer group medical plan. Can I use SERMA to pay the premium?

No, you may not use SERMA to reimburse yourself for another company's active employee group coverage. A list of eligible coverage types is available in a separate attachment as well as on the Eligible Expense list on the My Health Benefits website.

I participate in a group cost share ministry through my church, can I claim my costs?

No, a group share program does not provide insurance. It's a pool of money used to help pay the health expenses of the members.

I am currently enrolled in the IRMP, how will I be reimbursed?

You may use your Sheltered Employment Retiree Medical Account (SERMA) credits to offset your monthly IRMP premiums until you exhaust your SERMA credits. When enrolling for the IRMP you will have the option to pay 25%, 50%, 75%, or 100% of your IRMP premiums with SERMA credits. Your SERMA balance will automatically be depleted each month for the portion of the IRMP cost you choose. Your remaining balance is available online for your review anytime. You can also view your balance on the MyChoice® Mobile App or sign up online to receive text messages with your current balance.

Am I eligible for a federal subsidy on the any of the "Exchanges" (Health Care Marketplace)? Can I use SERMA?

For non-Medicare retirees, access to your SERMA funds makes you ineligible for Federal Government subsidies through the health care marketplace ("The Exchanges"). However, you can "Opt Out" of SERMA to become eligible. See question and answer below for more information about Opting Out of SERMA.

Most Intel retirees will exceed the income limitations for Federal Government subsidies through The Exchanges. Here are a few things that impact your eligibility for a federal subsidy:

- Your age
- Your income (income must be between 100% and 400% of federal poverty)
- Your family size
- Where you live
- Access to a Health Reimbursement Account (HRA) such as SERMA disqualifies you from eligibility regardless if you meet other requirements
- If you are enrolled in Medicare, you're ineligible for Federal subsidies

You can get more information at the Healthcare Market Subsidy Program website: <https://www.obamacareusa.org/subsidy-eligibility>

Can I opt out of SERMA in order to be eligible for Federal subsidies?

Intel has created a SERMA "Opt Out" program for those retirees who are eligible for and want to take advantage of Federal subsidies through The Exchange. By opting out of your SERMA benefits, your balance is suspended and you, your spouse and your eligible dependents will be unable to receive reimbursement for any eligible health care premiums for that year. If you choose to waive your access to your SERMA funds, you cannot change that decision until the following year during Intel's health care Annual Enrollment period.

You will be given the option each year during Annual Enrollment to decide if you want to "Opt Out" or "Opt In" to SERMA for the upcoming year. Look for more information regarding timing and actions required in your Intel Retiree Health Annual Enrollment Guide.

You will have the opportunity to "Opt Out" of SERMA for the upcoming year by contacting the Intel Health Benefits Center, and selecting the MyChoice Accounts option. You must call to "Opt Out" as it cannot be completed online.

How does the SERMA "Opt Out" timing work?

For All Non-Medicare Retirees: You will be given the option each year during Intel's Annual Enrollment season to decide if you want to "Opt-Out" or "Opt-In" to SERMA for the upcoming year. If you want to "Opt Out" of SERMA for the upcoming plan year, you must notify MyChoice Accounts no later than December 15. Your "Opt Out" election will carry over from year to year unless you "Opt In" again during the next Annual Enrollment.

NEW Non-Medicare Retirees: For those retiring during the year, you will have 31 days from the date of your retirement to notify the Intel Health Benefits Center, MyChoice Accounts that you want to “Opt Out” of SERMA so that you may qualify for the Federal subsidies. If you take no action, the default is to opt in to SERMA. Your “Opt Out” election will carry over from year to year unless you “Opt In” again during the next Annual Enrollment.

NOTE: If you initially decide to opt out of your SERMA benefits for the following year and you change your mind, you have until the end of the current year to notify the Intel Health Benefits Center to cancel the change and opt back in. You need to carefully consider your situation each year and notify MyChoice Accounts of any changes.

Is there anything important that I need to know before opting out of SERMA?

Yes, consider the SERMA “Opt Out” option carefully. Eligibility for The Exchange subsidies is determined based on your total income claimed when you file your taxes with the IRS. Your total income is determined on from all your income sources. We strongly encourage you to speak with your financial advisor or tax professional to determine if you’re eligible for Federal subsidies through The Exchange and to carefully consider your decision to opt out of access to your SERMA funds. If you “Opt Out” of your SERMA for a given year, this will prevent reimbursements for you, your spouse and your eligible dependents from your SERMA account for the year. If your situation changes during the year, you cannot change your “Opt Out” election.

If later you discover you do not qualify for Federal subsidies, you cannot reverse your SERMA “Opt Out” decision. If you choose to “Opt Out” of SERMA, you will not be able to change that decision later and you will be unable to receive reimbursement for any of your eligible health care premiums. Once you’ve chosen to waive your access to your SERMA funds, the election cannot be changed until the following year. It is also important to note that SERMA reimbursements are based on when you are covered, not when you pay the premium. For example, if you “Opt Out” of SERMA for 2022 and pay all or part of your 2022 premiums in 2021, they will not be eligible for reimbursement since the coverage period is in 2022.

If you have questions about the option to “Opt Out” of your SERMA, or you wish to “Opt Out”, please contact the Intel Health Benefits Center by calling 1-877-GoMyBen (466-9236). You must call to “Opt Out” as it cannot be completed online.

How do I submit a claim to my SERMA account?

See page 7 of this document for a walk through of the claim submission process. You can also access the SERMA claim form that includes methods for submission on **My Health Benefits**. Simply login to My Health Benefits and navigate to the Reference Center by clicking the link at the top right of the page. In the Forms folder, you will find the SERMA claim form. Please note: If you don’t have access to the internet or prefer to complete a paper form, please call us at 1-877-GoMyBen (466-9236). We will mail you a paper claim form.

Can I submit claims for future services?

No, you can’t submit a SERMA claim for future services. Remember that your claims are reimbursed based on the date when the service occurred (the month in which the insurance company provided you coverage), not the date you paid your bill. For example, if you paid for your January premium in December, we’ll pay your claim based on the coverage period which begins January 1 st. We cannot process your claim in December as you’ve not yet being provided the coverage.

The SERMA plan year runs from January 1 st through December 31 st of each year. You may submit for premiums incurred during these dates as long as you file your claim after your coverage began, before the run-out period ends (May 31 st of the year following), and you were eligible for a SERMA reimbursement on the date the coverage began.

You’re allowed to submit SERMA claims for the prior year during the run-out period (January 1st to May31st), as long as the premiums occurred while you were eligible under the plan. For example, if you’re claiming for June 2020 premiums, you have until May 31, 2021 to file your claim. The run-out period provides you extra time to submit your claims. If you do not submit your claims with complete supporting documentation by May 31st, we will be unable to approve your claim.

How do I know what documents to submit with my claim?

The Internal Revenue Service (IRS) requires that you provide itemized receipts or other documentation to prove that expenses are eligible under the plan. Be sure your documentation validates who is covered, how much you’re paying for the coverage, the dates of the coverage, the company or carrier who is extending the coverage and most importantly a detailed, itemized description of the coverage being provided.

To get reimbursed as quickly as possible, create your claim and upload your receipts directly on the www.intel.com/go/myben website. For efficiency and the fastest results, you can upload your receipts and other documentation directly and securely. This will help us respond to your requests sooner. See page 7 of this document for a walk through of the claim submission process, and page 8 for a sample receipt.

How long should I expect to wait to receive reimbursement after submitting my claim?

Claims will typically be processed within three to five business days after receipt; however, complete claims submitted digitally via My Health Benefits or the MyChoice Mobile App can be processed more quickly.

Direct Deposit: Money will be deposited in your account in 2 to 3 business days from when we process your claim. This is the fastest way to receive your money. If you haven't enrolled in direct deposit, go to Your Profile > Financial Institutions on benefits website.

Check Mailed to You: A check will be mailed within 2 business days after your claim is processed (please allow time for postal delivery).

How am I notified when my claim has been processed?

The fastest way to know the outcome of your claim is to use the MyChoice Mobile app, or be sure you have a valid email address on file with us. We will notify you electronically the day your claim is processed. If we don't have an email address on file for you, we'll send the outcome of your claim by US Mail; please allow sufficient time to receive the Explanation Of Benefits (EOB) from us.

Can I track my submitted claims to see their progress once they have been submitted?

If you've submitted your claim online, you can track your claim status on My Health Benefits after your claim and receipts have been received. Claim statuses will update as receipts and other documentation are received, and when a decision is made on your claim.

Do I need to submit claims if I am enrolled in IRMP?

No, if you've enrolled in the IRMP, there is no need to submit your claims to us for processing. You can have your claims automatically sent to MyChoice Accounts. MyChoice will receive the amount (based on percentage SERMA you've chosen to use to pay your IRMP). Each month we will draw down your SERMA balance by that amount. At some point should you decide to have a portion of your IRMP bill not previously automatically paid from your SERMA, you may create a new claim and submit the Intel Health Benefits Center Billing Notice to us with your claim.

How do I submit my claims if I have enrolled in coverage the Aon Retiree Exchange?

Many insurance carriers available through the Aon Retiree Exchange offer the convenience of automatic reimbursement, eliminating the need for you to file SERMA claims. If your insurance provider offers this convenience, the carrier will send your monthly premium amount to MyChoice Accounts and we'll automatically issue reimbursement from your SERMA. For complete details on this program, which carriers participate in the program and how to sign up – ask your Retiree Exchange agent.

If your carrier doesn't offer automatic reimbursement of premiums, you'll need to provide the acceptable receipts and documentation for your claim.

How do submit a claim if I purchased health insurance directly from an insurance agent or company?

Review the information on page 7 on how to submit a claim. Your claim's documentation needs to include the dates of coverage, a description of the coverage provided, who is covered, and the amount you're paying for the coverage. We're unable to accept canceled checks or bank statements to approve your claim.

What if I am covered by retiree coverage through an employer other than Intel?

If you have health insurance coverage through an employer other than Intel, it must be retiree coverage. If you or your spouse are actively working and you're covered under that benefit plan, the premiums are not eligible for reimbursement from your SERMA. As a reminder, premiums' paid with pre-tax dollars are not eligible for reimbursement. We accept pension statements showing the coverage and amounts withheld; or direct billing statements. We'll also accept confirmations of enrollment. If we cannot clearly determine the coverage provided was purchased with after-tax funds or isn't labeled "retiree coverage" along with who is covered, we are unable to approve your claim.

How do I submit a claim if I am covered by Intel sponsored COBRA insurance?

Create your claim online at www.intel.com/go/myben and submit the Intel Health Benefits Center COBRA Billing Notice to us with your claim. You can find the COBRA Billing notice in your documents, which are accessible by logging into **My Health Benefits**, clicking on your name at the top right of the page, and then clicking Personal Documents.

Can I submit a claim for Long Term Care Premiums?

Yes, your SERMA plan allows you to submit premiums for Long Term Care (LTC). The request cannot be for future dated premiums or premiums for bundled plans that may include AD&D, life insurance, income replacement or healthcare services. Plans cannot include any refundability clauses. There are limits to the maximum we can reimburse each month based on your age. Please refer to current year IRS Publication 502 for a full description of eligible Long-Term Care Premiums and limitations. SERMA doesn't cover actual long-term health care costs such as doctor visits, medications, hospitalization, or assisted living expenses. When submitting your claim for Long Term Care premiums, be sure your receipts or other documentation include the dates of coverage, a description of the coverage provided, who is covered, and the amount you're paying for the coverage.

Can I submit claims for Medicare Premiums?

Yes, Medicare premiums (all parts - including Medicare Advantage and Medicare Part D) are eligible for reimbursement from your SERMA plan. When submitting a claim for Medicare premiums, be sure your receipts or other documentation include the dates of coverage, a description of the coverage provided, who is covered, and the amount you're paying for the coverage. For Medicare Parts A & B your Social Security Administration Award letter indicating your current monthly Medicare premiums may also be used. If you're responsible for IRMAA penalties, please include a copy of the payment invoice sent to you.

Where can I find details regarding why my SERMA claim was denied?

You will be sent an Explanation of Benefits (EOB) after a determination has been made for the claims you submit.

On that notice, we provide you with a brief explanation of why your claim was denied. If you have further questions you can contact the MyChoice Accounts Service Center and a representative can review with you the reason why the claim was denied.

What is SERMA Auto-Pay?

This feature can only be used for those who regularly pay premiums on a monthly basis. This feature is found to be much easier and quicker. Once this feature is established, you will automatically be repaid for your premiums each month.

Note: If you pay your premium on another frequency (i.e. weekly, quarterly, annually), then you will need to manually submit a claim form each time you incur a claim to receive reimbursement.

How do I set up SERMA Auto-Pay?

Go online to www.intel.com/go/myben. If you haven't yet set up a login, select Intel U.S. Retiree Information. Create your account by following the prompts to create your username, password and security questions. The company key is Intel.

Once logged in, scroll down and click on the "**Make a Payment**" button, then enter your preferred bank account information. At the bottom of the page, you will see the option to mark this payment information as primary and for Auto-Pay. You must select "**Yes**" for both of these options to set up your auto-payments. Be sure to click the "**Pay**" button to finalize these changes.

When will I receive my monthly reimbursement?

Recurring Claims are processed on the 5th of each month. Payments are generated on the first business day after the 5th. Once your payment is generated, you will receive your reimbursement within 2-3 business days if you have direct deposit or 7-10 business days if you are reimbursed by check.

What happens of my premium changes?

You will need to submit a new claim and documentation showing the amount of your new monthly premium. Once your claim is processed, you will receive your new amount with 2-3 business days if you have direct deposit or 7-10 business days if you are paid by check.

What happens if the request amount exceeds my account balance?

You will be reimbursed only up to the amount available in your account when the payment is generated. If your account balance changes in the future, an additional payment may be created when the balance changes.

How do I manage Auto-Pay once I have established the feature I would like to use?

Go online to www.intel.com/go/myben. Once logged in to My Health Benefits, click your name at the top right of the page, and choose **Consumer Accounts**. From there, you can manage your premium auto-pay including viewing all premium auto-pay amounts and reducing and turning off monthly premium amounts.

How do I update, change or cancel my Premium Auto-Reimbursement?

Once logged in to My Health Benefits, click your name at the top right of the page, and choose **Consumer Accounts**. From there, you can manage your account including viewing all premium amounts and making changes.

T-Bill Application

When your SERMA account is created, Intel makes a one-time credit to your SERMA account. The only additional contributions to your account will be payments of interest earned on your account each year following your retirement. Your SERMA account will be credited once each year, usually in late February, with interest based on the average 12-month T-Bill rate for the preceding calendar year. If you retire in the middle of the year, interest will be pro-rated for the partial year. T-Bill interest is calculated based on your December 31st account balance. If you are actively working for Intel on December 31st, you are ineligible to receive T-Bill interest for that year; even if you worked only part of the year. T-Bill confirmation statements are sent after the T-Bill interest amount is applied to your account.

What is the Intel Catastrophic Rx Health Reimbursement Account (HRA)?

This Catastrophic HRA benefit is available to Medicare eligible Intel Retirees and their eligible dependents who are enrolled in a Medicare Part D Plan and not enrolled in an IRMP with Rx coverage medical option to provide more financial protection for prescription expenses. No enrollment or election is necessary for this benefit, but you must be enrolled in a Medicare Part D Plan to use the Catastrophic Rx HRA. You must however notify MyChoice Accounts when you're ready to use this benefit.

If you are enrolled in Medicare Part D Plan for prescription coverage, you may limit your Medicare Part D annual out of pocket maximum by participating in the Catastrophic Rx HRA. Medicare Part D plans cover a broad range of medications at a cost share that changes as your prescription costs increase during the year. With Medicare Part D alone, you continue to pay 5% coinsurance for drugs, even after you reach the annual "Donut Hole" maximum. Intel's Catastrophic Rx HRA will reimburse all Intel Retirees for that 5% coinsurance.

Retirees and your spouse/domestic partner and eligible dependents do not need to enroll or elect the Catastrophic Rx. For more information, visit My Health Benefits or call 1-877-GoMyBen (466-9236).

How do I take advantage of the Catastrophic Rx HRA and submit claims?

You will need to call the Intel Health Benefit Center at 1-877-GoMyBen (466-9236) and select the "MyChoice Accounts" option to notify the team that you have exceeded the Medicare Part D "Donut Hole." The MyChoice Account representative will walk you through what you need to do to submit claims for reimbursement.

Is there a deadline to submit claims?

You are allowed to submit claims for reimbursement of eligible prescription expenses for the prior year (January 1 through December 31) until the runout period ends on May 31st of the following year. For example, a claim for July 2021 can be submitted until May 31, 2022.

The runout period provides you extra time to submit your claims. If you do not submit your claims with completed supporting documentation by May 31st, your claims will be denied.

Questions?
Call the Intel Health Benefits Center at
1-877-GoMyBen (466-9236)

mychoice
Accounts

How to Submit a Claim

Consumer Accounts

MyChoice Accounts - Manage - Activity

Retiree Medical Account

Election Amount	10,000.00
Contributions YTD	10,000.00
Total Claims Paid	0.00
Balance	10,000.00

Account Activity

Trans ID	Transaction Date	Type	Provider	Status	Amount	Actions
#ACC0006211690	07/28/2021	Employer		Posted	10000.00	

Pay Provider | Request Payment

Step 1: Login to My Health Benefits

Login to the new **My Health Benefits** platform at www.intel.com/go/myben.

From the homepage, click "**Consumer Accounts**" under Manage Your SERMA on the top-left of the page. Then, click on MyChoice Accounts and select SERMA from the dropdown.

Next, on the account detail screen, select the '**Pay Provider**' button.

Step 2: Select the appropriate category

Use the 'Category' dropdown menu to select the appropriate option that you are submitting a reimbursement for.

Step 3: Complete the other required information

Select the appropriate payment type, provider and amount in the applicable files. Finally, upload any supporting documentation by clicking the 'Upload File' button or drag and dropping the file onto the screen (see page 3 for documentation requirements).

Step 4: Click 'Submit'

Don't forget to click the 'Submit' button to complete your reimbursement request.

Resources

Visit My Health Benefits at www.intel.com/go/myben at any time via your computer or on your mobile device via the **MyChoice® Mobile App** to view the status of submitted requests for reimbursements, Catastrophic RX HRA claims or any other account activity. Please review the important dates section for more information and details regarding deadlines and resources.

Pay Provider

* Indicates Required Field

Start Date * 07/01/2021
End Date * 07/01/2021
(MM/DD/YYYY) (MM/DD/YYYY)

Category *
Please Select One
Vision
Retiree Medical
Medical
Dental

Payment Amount *
\$

Upload File Or Drop

Pay Provider

* Indicates Required Field

Start Date * 07/01/2021
End Date * 07/01/2021
(MM/DD/YYYY) (MM/DD/YYYY)

Category *
Vision

Payment Type *
Vision Premiums

Payment Provider *
Please Select One

Payment Amount *
\$

Upload File Or Drop File Here To Upload

Cancel Submit

Required Receipts and Documentation

To get reimbursed as quickly as possible, upload your itemized receipts or invoices. Make sure that your documents include all the items specified.

Valid Receipts for SERMA Claims

A valid receipt contains the following:

1. Insurance company name
2. Insured person's name
3. Coverage period (start and end dates)
4. Premium description and premium type (for example, medical or dental)
5. Premium amount

Expenses Incurred Outside of the United States

To submit a claim for services received or products purchased outside of the United States, provide:

- Receipts and other documentation in English
- Expenses in U.S. dollars

If receipts and documentation are not in English, they must be translated. You, the service provider, or someone else can do the translation. The translation can appear on the receipts and documentation, or in a separate document.

SERMA & Catastrophic Rx Claim Forms

To expedite processing of your SERMA or Catastrophic Rx Claim, you can use the forms available on My Health Benefits. Simply login to My Health Benefits and navigate to the Reference Center by clicking the link at the top right of the page. In the Forms folder, you can find claim forms for SERMA and Catastrophic Rx. These forms can be included with your receipt or invoice to help you ensure that all required information is submitted with your claim.

1 Healthcare Provider of Texas
1 Main Street, Anytown, TX 00000
1-800-555-1234

2 SMITH, MARY
1 SCHOOL STREET
ANYTOWN, TX 00000

3 ID Number: 1234567
Coverage From: 01/01/2017
Coverage Through: 01/31/2017
Date Billed: 12/14/2016
Payment Due By: 01/15/2017

NOTICE OF PREMIUM DUE

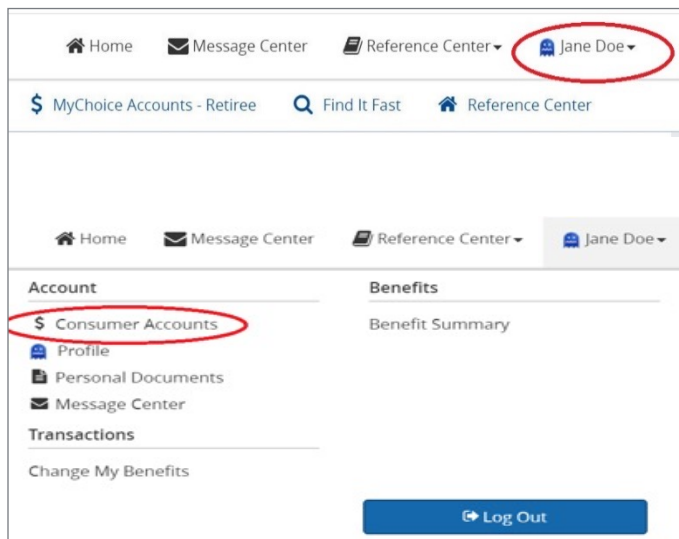
To ensure continuous coverage, please pay your premium before the due date.

4 Health Insurance Coverage – Medical Standard Plan F
Mary Smith

5 CURRENT PERIOD TOTAL: \$147.00
TOTAL AMOUNT DUE: \$147.00



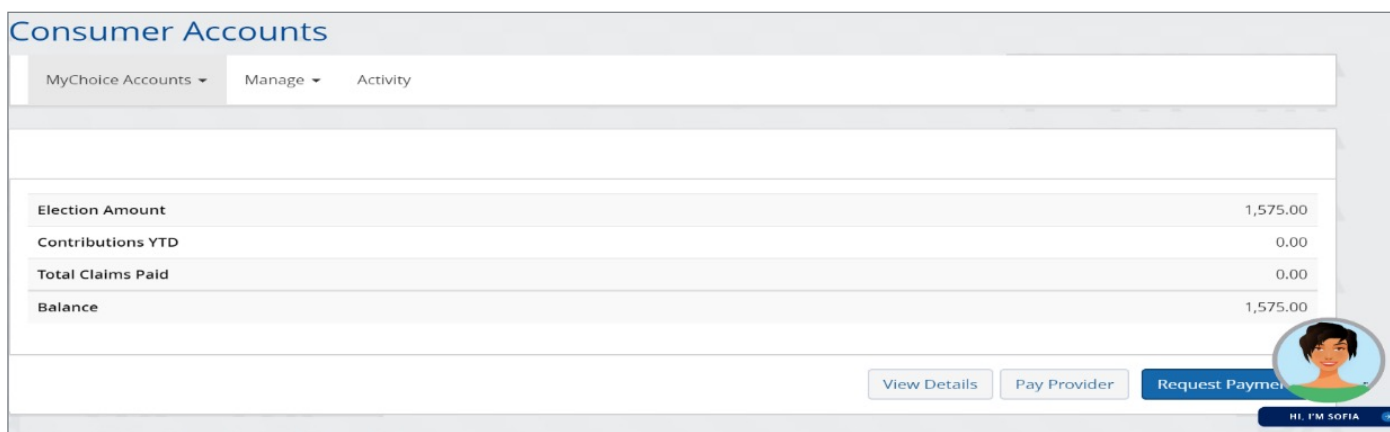
How to Access & Manage your SERMA



First, login to **My Health Benefits** at www.intel.com/go/myben. Look for your name at the top-right side of the home page and click on the down arrow.

Next, select **'Consumer Accounts.'** This will bring up an account overview screen.

Next, click on **'MyChoice Accounts,'** and choose the option to select your SERMA. You can then submit reimbursement requests or view claims status. The 'Manage' menu allows you to do things such as add a bank account for direct deposit for your reimbursement funds to go into, or directly pay a provider.



Expenses Eligible for Reimbursement

SERMA can be used to pay for:

- COBRA
- IRMP
- Long Term Care*
- Medicare A, B, D
- Medicare Advantage (Medicare C)
- Medigap Premiums
- Premiums for other health insurance (i.e. dental, vision, wellness)
- Medical Insurance Premiums

*Your SERMA plan allows you to submit premiums for Long Term Care (LTC). The request cannot be for future dated premiums or premiums for bundled plans that may include AD&D, life insurance, income replacement or healthcare services. Plans cannot include any refundability clauses. There are limits to the maximum we can reimburse each month based on your age. Please refer to current year IRS Publication 502 for a full description of eligible Long-Term Care Premiums and limitations. SERMA doesn't cover actual long-term health care costs such as doctor visits, medications, hospitalization, or assisted living expenses. When submitting your claim for Long Term Care premiums, be sure your receipts or other documentation include the dates of coverage, a description of the coverage provided, who is covered, and the amount you're paying for the coverage.