

National Title Group LLC

2025-2026 Employee Benefits Guide

An overview of the wide array of benefits provided by National Title Group LLC to help you enjoy increased well-being and financial security.



Introduction

Dear Team Member,

At National Title Group LLC, we believe that enjoying your work and making meaningful contributions to our business go hand in hand. Your health, satisfaction, and financial security—and that of your family—are essential to your overall well-being and to the continued success of our organization.

For the 2025–2026 plan year, National Title Group LLC is proud to offer a comprehensive and competitive Total Rewards package that includes a wide range of valuable benefits. These programs reflect our ongoing commitment to supporting our employees and promoting health, balance, and peace of mind.

We understand that every individual's needs are unique. That's why our benefits package is designed to be flexible—allowing you to tailor your coverage to best support your personal and family situation.

To make the most of your healthcare options, we encourage you to begin your care journey with Telemedicine services whenever appropriate. This option provides convenient, cost-effective care for many non-emergency health concerns. Please refer to the flyer in your benefits booklet for additional details.

Remember, your BCBS plan includes valuable wellness resources—such as stress management, weight loss support, tobacco cessation, and other complimentary programs—to help you stay healthy and thrive.

This Benefits Booklet provides a summary of the benefit plans offered by National Title Group LLC. In the event of any discrepancy between this summary and the official plan documents, the plan documents will govern. Please note that this booklet and the included summaries do not constitute an employment contract.

We hope this information, along with our additional communication and decision-making tools, will help you make confident, informed choices about your health and benefits.

Thank you for being an important part of the National Title Group family.



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- Justin Scott, President
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Carrier Name:	Phone Number:	Website Address:
BlueCross BlueShield of Texas	800-521-2227	www.bcbstx.com
Delta Dental	800-521-2651	www.deltadental.com
EyeMed	855-400-3641	www.eyemed.com
Unum	800-858-6843	www.unum.com
Alight	800-513-1667	https://member.alight.com
Cariloop	972-325-5836	www.cariloop.com

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Medical plan info



Annual Deductible

The amount you have to pay each year before the plan starts paying a portion of medical expenses. All family members' expenses that count toward a health plan deductible accumulate together in the aggregate; however, each person also has a limit on their own individual accumulated expenses (the amount varies by plan).



Out-of-Pocket Maximum

This is the total amount you can pay out of pocket each calendar year before the plan pays 100 percent of covered expenses for the rest of the calendar year. Most expenses that meet provider network requirements count toward the annual out-of-pocket maximum, including expenses paid to the annual deductible*, copays and coinsurance. *Except for Grandfathered medical plans



Copays and Coinsurance

These expenses are your share of cost paid for covered health care services. Copays are a fixed dollar amount, and are usually due at the time you receive care. Coinsurance is your share of the allowed amount charged for a service, and is generally billed to you after the health insurance company reconciles the bill with the provider.



Plan Types

- EPO/PPO – A network of doctors, hospitals and other health care providers
- HMO - A network that requires you to select a Primary Care Physician (PCP) who coordinates your health care.
- POS - Combines aspects of a PPO and HMO
- HDHP - A plan that has higher annual deductibles in exchange for lower premiums

HDHP - BCBS MTBCP007H



Summary of Coverage

	In Network	Out Of Network
Individual Deductible	\$5,000	\$10,000
Family Deductible	\$10,000	\$20,000
Individual Max Out of Pocket	\$5,000	\$10,000
Family Max Out of Pocket	\$10,000	\$20,000
Co-Insurance	100%	100%
Primary Care Office Visit	0% after deductible	0% after deductible
Specialist Office Visit	0% after deductible	0% after deductible
Urgent Care	0% after deductible	0% after deductible
Emergency Room	0% after deductible	0% after deductible
Inpatient Services	0% after deductible	0% after deductible
Outpatient Services	0% after deductible	0% after deductible
Prescription Drugs	0% after deductible	0% after deductible

	Per Pay Period Pricing
Employee	\$151.50
Employee & Spouse	\$645.66
Employee & Child(ren)	\$517.35
Employee & Family	\$1,011.56

Silver PPO - BCBS MTBCB526



Summary of Coverage

	In Network	Out Of Network
Individual Deductible	\$3,000	\$6,000
Family Deductible	\$9,000	\$18,000
Individual Max Out of Pocket	\$9,000	Unlimited
Family Max Out of Pocket	\$18,000	Unlimited
Co-Insurance	70%	50%
Primary Care Office Visit	\$55	50% after deductible
Specialist Office Visit	\$110	50% after deductible
Urgent Care	\$75	50% after deductible
Emergency Room	\$500, then 30%	\$500, then 30%
Inpatient Services	Deductible & 30%	Deductible & 40%
Outpatient Services	Deductible & 30%	Deductible & 40%
Prescription Drugs	\$0/\$10/\$50/\$100	\$10/\$20/\$50/\$100

	Per Pay Period Pricing
Employee	\$210.18
Employee & Spouse	\$768.56
Employee & Child(ren)	\$623.57
Employee & Family	\$1,182.00

Gold PPO - BCBS MTBCB514



Summary of Coverage

	In Network	Out Of Network
Individual Deductible	\$1,500	\$3,000
Family Deductible	\$4,500	\$9,000
Individual Max Out of Pocket	\$6,000	Unlimited
Family Max Out of Pocket	\$18,000	Unlimited
Co-Insurance	80%	60%
Primary Care Office Visit	\$40	40% after deductible
Specialist Office Visit	\$80	40% after deductible
Urgent Care	\$75	40% after deductible
Emergency Room	\$500, then 20%	\$500, then 20%
Inpatient Services	Deductible & 20%	Deductible & 40%
Outpatient Services	Deductible & 20%	Deductible & 40%
Prescription Drugs	\$0/\$10/\$50/\$100	\$10/\$20/\$50/\$100

	Per Pay Period Pricing
Employee	\$293.28
Employee & Spouse	\$942.62
Employee & Child(ren)	\$774.01
Employee & Family	\$1,423.41



Health Savings Account (HSA) - only with HDHP - MTBCP007H

This is how an HSA works:

A health savings account (HSA) is a health care account and savings account in one. The main purpose of this account is to offset the cost of a qualifying high deductible health plan (HDHP) and provide savings for your out-of-pocket eligible health care expenses - those you and your tax dependents may have now, in the future and during your retirement.

After you set up your account, it's yours to keep, even if you change jobs or retire.

Once your HSA is established, money is contributed to your account by you, National Title Group LLC or friends and family; and you can then use your HSA dollars tax-free to pay for eligible health care expenses. You save money on expenses you're already paying for, like doctors' office visits, prescription drugs and much more. Best of all, you decided how and when to use your HSA dollars.

Why is it a good idea to have an HSA?

HSAs benefit everyone who is eligible to have this account, including single individuals, families and soon-to-be retirees. You save money on taxes in three ways:

- Tax-free deposits - The money you contribute to your HSA isn't taxed (up to the IRS annual limit).
- Tax-free earnings - Your interest and any investment earnings grow tax-free.
- Tax-free withdrawals - The money used toward eligible health care expenses isn't taxed - now or in the future.

Setting aside pre-tax dollars into your HSA means you pay fewer taxes and increase your take-home pay by your tax savings. You save money on eligible expenses that you are paying for out of your pocket. The amount you save depends on your tax bracket. For example, if you are in the 30% tax bracket, you can save \$30 on every \$100 spent on eligible health care expenses.

HSA funds roll over from year to year and accumulate in your account. There is no "use-it-or-lose-it" rule with HSAs, and you decide how and when to use your HSA funds, which can be used for eligible expenses you have now, in the future or during retirement. And when you have a certain balance in your HSA, investment opportunities are available.

****Please Note: National Title contributes \$500 annually to this account. 2026 IRS Individual annual limit \$4,400; Family limit \$8,750.**



Flexible Spending Account (FSA)

This is how an FSA works:

- You set aside money for your FSA from your paycheck before taxes are taken out.
- You then use your pre-tax FSA funds throughout the plan year to pay for eligible health care or dependent care expenses.
- You save money on expenses you're already paying for.

You may also be able to carry over up to \$500 of unused funds to the following year. Refer to your FSA documentation for more details.

Health FSA Eligible Expenses - Max contribution for 2026 - \$3,400

- Medical expenses: copays, coinsurance and deductibles
- Dental expenses: exams, cleanings, X-rays and braces
- Vision expenses: exams, contact lenses, eyeglasses and laser eye surgery
- Professional services: physical therapy, chiropractic and acupuncture
- Prescription drugs and insulin
- Over-the-counter health care items such as bandages, pregnancy test kits and blood pressure monitors

Dependent Care FSA Eligible Expenses - Max contribution \$7,500

- Care for your child who is under the age of 13
- Before- and after-school care
- Babysitting and nanny expenses
- Day care, nursery school and preschool
- Summer day camp
- Care for a relative who is physically or mentally incapable of self-care and lives in your home

Please Note: National Title contributes \$500 annually to this account.



Preventative Care

Wellness and Health Management

Understanding the full value of covered benefits allows you to take responsibility for maintaining good health and incorporating healthy habits into your lifestyle. Some examples include getting regular physical examinations, mammograms and immunizations. Through the plans offered by National Title Group LLC, all covered individuals and family members are **eligible to receive routine wellness services , at no cost; all copays, coinsurance, and deductibles are waived.**

Which preventative care services are covered?

The US Preventive Services Task Force maintains a regular list of recommended services that all Affordable Care Act (i.e. Health Care Reform) compliant insurance plans should cover at 100% for in-network providers. Below is a list of common services that are included in the plans offered this year:

- Routine physical exam
- Well baby and child care
- Well women visits
- Immunizations
- Routine bone density test
- Routine breast exam
- Routine gynecological exam
- Screening for Gestational diabetes
- Obesity screening and counseling
- Routine digital rectal exam
- Routine colonoscopy
- Routine colorectal cancer screening
- Routine prostate test
- Routine lab procedures
- Routine mammograms
- Routine pap smear
- Smoking cessation
- Health education/counseling services
- Health counseling for STDs and HIV
- Testing for HPV and HIV
- Screening and counseling for domestic violence



Care When and
Where You Need It
Just Got Easier

Virtual Visits

Convenient health care
at your fingertips



Getting sick is never convenient, and finding time to get to the doctor can be hard. Blue Cross and Blue Shield of Texas (BCBSTX) provides you and your covered dependents access to care for non-emergency medical issues and behavioral health needs through MDLIVE.

Whether you're at home or traveling, access to an independently contracted board-certified doctor is available 24 hours a day, seven days a week. You can speak to a doctor immediately or schedule an appointment based on your availability. Virtual visits can also be a better alternative than going to the emergency room or urgent care center.

MDLIVE doctors or therapists can help treat the following conditions and more:

General Health

- Allergies
- Asthma
- Nausea
- Sinus infections

Pediatric Care

- Cold
- Flu
- Ear problems
- Pinkeye

Behavioral Health

- Anxiety/depression
- Child behavior/learning issues
- Marriage problems



Connect

Computer, smartphone,
tablet or telephone



Interact

Real-time consultation with a
board-certified doctor or therapist



Diagnose

Prescriptions sent electronically
to a pharmacy of your choice
(when appropriate)



Website:

Visit the website

MDLIVE.com/BCBSTX

- Choose a doctor
- Video chat with the doctor
- You can also access through Blue Access for MembersSM



Mobile app:

- Download the MDLIVE app from the Apple App StoreSM or Google PlayTM Store
- Open the app and choose an MDLIVE doctor
- Chat with the doctor from your mobile device



Telephone:

- Call MDLIVE **(888-680-8646)**
- Speak with a health service specialist
- Speak with a doctor

Get connected today!

**To register, you'll need to provide your first and last name,
date of birth and BCBSTX member ID number.**

Internet/Wi-Fi connection is needed for computer access. Data charges may apply. Check your cellular data or internet service provider's plan for details. Non-emergency medical service in Idaho, Montana and New Mexico is limited to interactive audio/video (video only), along with the ability to prescribe. Non-emergency medical service in Arkansas is limited to interactive audio/video (video only) for initial consultation, along with the ability to prescribe. Behavioral health service is limited to interactive audio/video (video only), along with the ability to prescribe in all states. Service availability depends on location at the time of consultation.

Virtual visits, powered by MDLIVE, may not be available on all plans. Virtual visits are subject to the terms and conditions of your benefit plan, including benefits, limitations, and exclusions. MDLIVE operates subject to state regulations and may not be available in certain states. MDLIVE is not an insurance product or a prescription fulfillment warehouse. MDLIVE does not guarantee that a prescription will be written. MDLIVE does not prescribe DEA-controlled substances, non-therapeutic drugs and certain other drugs that may be harmful because of their potential for abuse. MDLIVE physicians reserve the right to deny care for potential misuse of services.

MDLIVE, an independent company, operates and administers the virtual visit program and is solely responsible for its operations and that of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without written permission.

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Google Play Store is a trademark of Google Inc. ("Google").

Windows is a registered mark of MicrosoftTM



Dental plan info

Summary of coverage

Dental coverage is similar to regular medical insurance—you pay a premium and then your insurance will cover part or all of the cost for many dental services.

Preventative care

Professional dental care can diagnose or help prevent common dental problems, including toothaches, inflamed gums, tooth decay, bad breath and dry mouth. If conditions like these remain untreated, they can worsen into painful and expensive problems, such as gum disease or even tooth loss.

Diagnostic care

Additionally, dental health professionals are able to spot more serious health issues, including some types of cancer. That makes it even more important to see a dentist regularly.

Great for families

This coverage is also great for families. Since dental work can be very expensive, proactive dental care, such as routine cleanings, can help save children from costly issues as they age.

Specialized treatments

With dental insurance, you're investing in your smile and overall health. Beyond cleanings and routine care, dental coverage may also help pay for more specialized treatments, such as root canals or fillings.

Routine care

Dental coverage allows you to visit a dentist whenever you need to inexpensively receive preventive and diagnostic care.

See everything your plan covers by reviewing the benefits statement and overview. Reach out to HR with any questions.

Delta Dental



Summary of Coverage

	In Network
Maximum Annual Benefit	\$1,500
Annual Deductible Individual	\$50
Annual Deductible Family	\$150
Preventive Services	100% of U&C
Basic Services	80%
Major Services	50%
Orthodontics - dependent children	50%
Orthodontics Lifetime Maximum	\$1,500

	Per Pay Period Pricing
Employee	\$7.60
Employee & Spouse	\$29.20
Employee & Child(ren)	\$33.96
Employee & Family	\$56.92



Vision plan info

Summary of coverage

Similar to other forms of insurance, with vision care you pay a premium and the insurance company will cover part or all of your vision costs.

Preventative care

Vision coverage is important because an eye doctor can catch eye issues before they worsen. A visit with your eye doctor can determine whether you need corrective lenses and, if so, the correct prescription. Other eye concerns that will be addressed in an eye exam include checking for conditions or diseases—such as glaucoma and cataracts—which can lead to vision loss.

Plans

Vision plans typically cover things like eyeglass frames, lenses, contacts and annual eye exams. In most cases, plans have a set dollar amount that they will pay for certain items. For instance, a plan may pay up to \$110 for frames, and anything over that amount is covered by you. Although, your plan specifics may vary.

Coverage

Vision coverage does not usually cover surgeries or experimental vision services. However, vision insurance may help lower the costs of some procedures, such as laser eye surgery, even if it's not 100% covered. This will depend on the plan.

Diagnostic care

Eye doctors can even help detect some types of cancer, making regular visits even more important.

Review your benefits statement to see everything your vision plan covers. Reach out to HR with any questions.

Eye Med Vision



Summary of Coverage

	In Network
Exams (Every 12 months)	\$10 Co-pay
Materials Co-pay	\$25 Co-pay
Contact Lenses (in lieu of glasses)	\$110 allowance
Glass Lenses (Every 12 months)	\$15 Co-pay Single, Bifocal, Trifocal & Lenticular
Frames (Every 24 months)	\$110 allowance

	Per Pay Period Pricing
Employee	\$3.43
Employee & Spouse	\$6.52
Employee & Children	\$6.86
Employee & Family	\$10.08



Group Life Insurance - Unum

Summary of Coverage

Life insurance isn’t a fun thing to think about, but, if you have people who depend on you for financial support, then life insurance is really about protecting them in case something happens to you—your designated beneficiary would collect a financial benefit upon your death.

Group life insurance coverage is a employer-sponsored safety net in case the worst happens, with no out-of-pocket costs to you. If you believe you need additional coverage, you may wish to enroll in voluntary life insurance as well.

Plan Features	Basic Life - Group
Employee benefit amount	\$50,000
Guarantee Issue amount	\$50,000
AD&D benefit	\$50,000
The following shows how much benefits are reduced at certain ages.	
Age band	Benefit reduction
65	65%
70+	50%

Group life is 100% covered by the employer with the option of employees adding voluntary life.

Employees must fill out an EOI form if they exceed the guaranteed issue amount.



Voluntary life insurance is similar to group life insurance, except it is paid for by you. It can provide additional financial security to your family in case the worst happens.

With voluntary life insurance, you pay a monthly premium and then your beneficiaries receive a guaranteed amount in the event of your death. Plans are typically flexible and allow you to set your contribution and payment amounts, allowing you more control.

While this type of insurance isn't fun to think about, it can be a vital lifeline for your family.

Summary of Coverage

Plan Features	Basic Life - Voluntary
Employee benefit amount	Increments of \$10,000 to a max of \$500,000. Can not exceed 5 times your annual salary.
Guarantee Issue amount	\$150,000
Spouse benefit	Increments of \$5,000 to a max of \$500,000 Can not exceed 1 times Employees amount.
Spouse Guarantee Issue amount	\$50,000
Dependent benefit	6 mos - 26 years - \$10,000
Accidental Death & Dismemberment	Included in Voluntary Life rates
The following shows how much benefits are reduced at certain ages.	
Age band	Benefit reduction
65	65%
70+	50%

Employees must fill out an EOI form if they exceed the guaranteed issue amount.

Employee rate is based on the age of the employee, and the amount selected.

- Spouse rate is based on **spouses age bracket**, and the amount selected for spouse.
- *Age 65+ benefit amounts will have reductions and may require EOI

Employee Supplemental Life and AD&D Insurance										
I am applying for Voluntary Life and AD&D insurance in the amount of:	Employee Life and AD&D Insurance - You may elect to purchase voluntary life and AD&D insurance, in \$10,000 increments, up to five (5) times your annual base salary, not to exceed \$500,000. If the requested amount is greater than \$150,000 you must complete an Evidence of Insurability form. Coverage will be limited to \$150,000 until approved. See certificate for details of coverage. See your plan administrator for plan and pricing details if your age is 65 or older.									
	<u>Semi-Monthly Payroll Cost</u>									
		Under 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
<input type="checkbox"/> \$10,000	\$0.32	\$0.38	\$0.49	\$0.69	\$0.96	\$1.38	\$1.95	\$2.65	\$3.25	\$4.62
<input type="checkbox"/> \$50,000	\$1.60	\$1.88	\$2.45	\$3.43	\$4.80	\$6.90	\$9.75	\$13.23	\$16.23	\$23.10
<input type="checkbox"/> \$100,000	\$3.20	\$3.75	\$4.90	\$6.85	\$9.60	\$13.80	\$19.50	\$26.45	\$32.45	\$46.20
<input type="checkbox"/> \$150,000	\$4.80	\$5.63	\$7.35	\$10.28	\$14.40	\$20.70	\$29.25	\$39.68	\$48.68	\$69.30
<input type="checkbox"/> Other	Must be in \$10,000 increment and less than five (5) times current annual salary									
<input type="checkbox"/> Other	Must be in \$10,000 increment and less than five (5) times current annual salary									
NOTE: Your rate will increase as you age and move to the next age band.										

Spouse Life and AD&D Insurance										
I am applying for Spouse Life and AD&D Insurance in the amount of:	Spouse Life and AD&D Insurance - You may elect to purchase life and AD&D insurance for your spouse if you purchase voluntary life and AD&D insurance for yourself. You may purchase any amount in increments of \$5,000 up to \$500,000; however, the amount you purchase may not exceed the amount of supplemental life insurance you have purchased above. Spouse life insurance will be limited to \$50,000 until approved. See certificate for details of coverage including the definition of spouse. See your plan administrator for plan and pricing details if your spouse is age 65 or older.									
	Semi-Monthly Payroll Cost									
	Under 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
	<input type="checkbox"/> \$5,000	\$0.34	\$0.34	\$0.41	\$0.53	\$0.76	\$1.15	\$1.66	\$2.45	\$3.41
<input type="checkbox"/> \$10,000	\$0.68	\$0.68	\$0.82	\$1.06	\$1.51	\$2.29	\$3.31	\$4.89	\$6.81	\$9.53
<input type="checkbox"/> \$25,000	\$1.70	\$1.70	\$2.05	\$2.65	\$3.78	\$5.73	\$8.28	\$12.23	\$17.03	\$23.83
<input type="checkbox"/> \$50,000	\$3.40	\$3.40	\$4.10	\$5.30	\$7.55	\$11.45	\$16.55	\$24.45	\$34.05	\$47.65
<input type="checkbox"/> Other	Must be in \$5,000 increment and not more than supplemental life amount for employee elected above.									
NOTE: Your rate will increase as you age and move to the next age band.										

RETAIN A COPY OF THIS FORM FOR YOUR RECORDS AND SEND A COPY TO YOUR EMPLOYER

Child Life and AD&D Insurance Coverage		
I am applying for Child Life and AD&D Insurance in the amount of:	Child Life and AD&D Insurance - You may elect to purchase life and AD&D insurance for your child(ren) if you purchase supplemental life insurance for yourself. You may purchase any amount in increments of \$2,000, up to \$10,000. See certificate for details of coverage including the definition of child. NOTE: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have.	
	<u>Semi-Monthly Payroll Cost</u>	
	Under Age 26	
	<input type="checkbox"/> \$2,000	\$0.52
	<input type="checkbox"/> \$4,000	\$1.04
	<input type="checkbox"/> \$6,000	\$1.56
	<input type="checkbox"/> \$8,000	\$2.08
<input type="checkbox"/> \$10,000	\$2.60	
Must be in \$2,000 increment and not more than supplemental life amount for employee elected above.		



Disability Insurance Long-term - Unum

Disability insurance is coverage that provides you with income protection should you be unable to work due to an injury or illness. With disability coverage, you are compensated for a portion of your lost income.

Long-term disability (LTD) coverage is a type of disability insurance that pays you a set percentage of your regular income after a specified waiting period.

Summary of Coverage

Plan Features	Long Term Disability
Employee benefit amount	60%
Maximum benefit amount	\$6,000
Elimination period	90 days
Benefit duration	65 or SSNRA

Let us handle the healthcare stuff.

Health benefits can be confusing, medical costs are rising, and finding the right care for you and your family can be frustrating and time consuming. We are here to simplify your healthcare experience and help you take control of healthcare costs. Your personal Health Pro® consultant will take care of you, so you can spend more time on what matters most. We can help you...

- **Understand your benefits**
Clear up any confusion about your health plan.
- **Find great doctors**
Locate highly-rated doctors, dentists and eye care professionals.
- **Save money on healthcare**
Compare prices and choose more cost-effective options.
- **Pay less for prescriptions**
Get recommendations for lower-cost medications.
- **Resolve billing errors**
Over 30% of medical bills are wrong.
Don't get overcharged.
- **Schedule appointments**
Have your appointments scheduled at times most convenient for you.



Get started.

Member Portal: member.alight.com

Health Pro: MyHealthPro@alight.com | 800.513.1667

alight

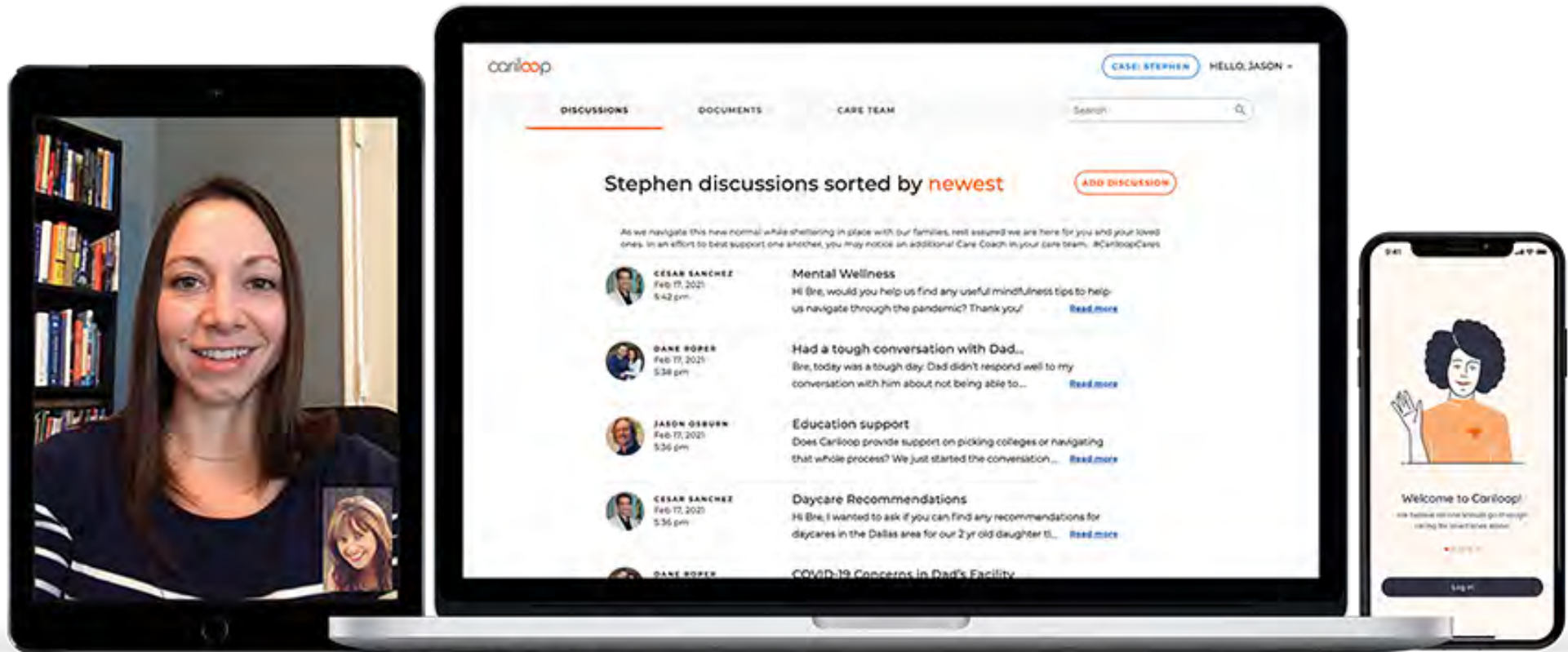
No one should go through caregiving **alone.**



Your free Caregiver Support benefit
provided by:



Cariloop's Caregiver Support Platform relieves the stress and anxiety of balancing work with caring for loved ones.



Experienced, compassionate Care Coaches accessible through a digital, SOC2-compliant platform.



Ready to connect with your very own Coach?

Learn more and connect with a Coach any time at:
www.cariloop.com/nationaltitlegroup

Have more questions?
Call [972-325-5836](tel:972-325-5836)

Ready to Enroll

Who Is Eligible?

If you're a full-time employee, you're eligible to enroll in the benefits outlined in this guide. Full-time employees are those who work 30 or more hours per week. In addition, the following family members are eligible for medical, dental and vision coverage:

Legal Spouse

Children to the age of 26, unless disabled and approved by carrier to continue coverage

Questions to ask before Enrolling?

Are you ready to enroll? The first step is to review your current benefits. Did you move recently or get married? Verify all of your personal information and make any necessary changes. Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

When to Enroll?

Open enrollment begins on November 3rd and runs through November 14th. The benefits you choose during open enrollment will become effective on December 1st, 2025.

How to Make Changes outside of Open Enrollment?

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- Marriage, divorce or legal separation
- Death of a spouse, child or other qualified dependent
- Birth or adoption of a child
- Change in residence
- Change in child's dependent status
- Change in employment status or a change in coverage under another employer-sponsored plan

What changes are Effective December 1st?

All plans are remaining in place as is. You will see a difference in your employee contribution for medical in your first paycheck in December.

How do I enroll or make changes?

All employees will log into Paycom and complete enrollments online.

Flexible Spending will not renew until January 1st 2026, however, we are taking your elections now. You will see your new election contribution in the first paycheck in January.

***** Remember although our plan renews in December, deductible and coinsurance start over on January 1st.**

National Title Group LLC

2025-2026 Employee Benefits Guide



Prepared by Endeavor Risk Advisors for National Title Group LLC