

2024 U.S. Global Assignees Inbound in the U.S.
on Assignment (Inpats) and Third Country Nationals

Discovering benefits. My way to better.

Annual Enrollment is **Oct. 14–Nov. 10**



Here are your Walmart benefits for 2024.

Each year at this time, you have an opportunity to update your benefits coverage for the coming year. If you're already enrolled, you'll automatically keep the same coverage level you have now unless you make changes. If you've declined coverage, you can enroll now for medical, dental, vision, and a range of wellness programs. It's also a great time to review and update your beneficiaries. To make changes, contact Intlben@wal-mart.com or call People Services at [800-421-1362](tel:800-421-1362).



Benefits to keep you well.

Health care and insurance coverage are just the start. Here are some additional programs to help you and your family live better:

Global virtual care.

See a doctor online anytime with the Global TeleMD app. Just download it from your app store to get started.

Global EAP.

Your benefits offer emotional, practical, physical, and clinical support services wherever you are. Get confidential counseling, work-life assistance, financial and legal guidance, and much more.

Critical incident support.

Get immediate counseling and resources in case you experience stress or trauma while on assignment.

Wellness resources.

Take advantage of personalized coaching, webinars, articles, referrals, and more to keep you and your family well.

Annual Enrollment
Oct. 14–Nov. 10



Your benefits for 2024.

You're automatically enrolled in medical, dental, vision, EAP, and company-paid life insurance for yourself, plus any dependents you've already enrolled. Here's a snapshot of your benefits, along with your options if you want to enroll or update any dependents.

Dental	
Calendar year maximum	\$2,500
Deductible	\$75/\$250
Class I – preventive	100%
Class II – basic	80% after deductible
Class III – major	50% after deductible*
Class IV – ortho	80% after \$75 deductible
Ortho lifetime maximum	\$1,500 after \$75 deductible

Vision	
Vision exams	One eye exam covered 100% every 12 months
Lenses and frames or contacts	One pair of glasses or contact lenses every 12 months, 100% covered, up to a maximum benefit of \$250

*Major Dental Services are not covered during the first three months the Insured Person is insured.

Medical	International	In-network	Out-of-network
Deductible	\$0	\$0	\$0
Coinsurance	100%	100%	80% of the maximum reimbursable charge
Out-of-pocket maximum	\$0	\$0	\$3,000/\$6,000

Prescription drugs – retail and mail order			
Based on a 30-day supply			
	Outside the U.S.	Inside the U.S.	
		Network pharmacy	Non-network pharmacy
Tier 1 – generic	0% copay no deductible	\$4 copay, no deductible	20% copay, after deductible
Tier 2 – preferred brand	0% copay no deductible	\$45 copay, no deductible	20% copay, after deductible
Tier 3 – non-preferred brand	0% copay no deductible	\$45 copay, no deductible	20% copay, after deductible

Emergency medical assistance	
Emergency medical evacuation	Maximum benefit up to \$250,000
Repatriation of mortal remains	Maximum benefit up to \$25,000
Emergency family travel	Maximum benefit up to \$5,000

File claims promptly.

It's always a good idea to submit all your medical, dental, and vision claims before the end of a calendar year, especially out-of-network claims and any international claims. To file a claim, just go to [Geo-Blue.com](https://www.geoblue.com).

Find a doctor.

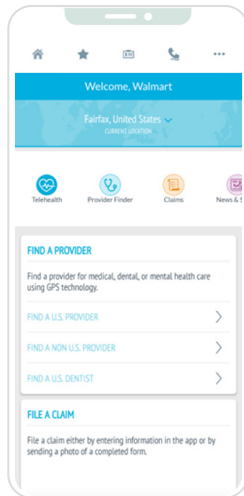
Getting started.

- Go to the GeoBlue website: Geo-Blue.com.
- Choose the blue “Register” button.
- Under “Enter Your Certificate Number,” enter the code you’ll find on your new plan ID card. It should look similar to this: **QHA500000000H**

Finding a doctor *outside* the U.S.

From the GeoBlue app:

- Log into the app using your email address and password.
- Choose “Find a U.S. provider” or “Find a non-U.S. provider.”
- Search by specialty, name, type, and distance.



Finding a doctor *inside* the U.S.

From a browser:

- Choose the blue banner below the “Find a doctor” box as shown below.
- Search by your condition, a medical specialty, a doctor’s name, or a location.



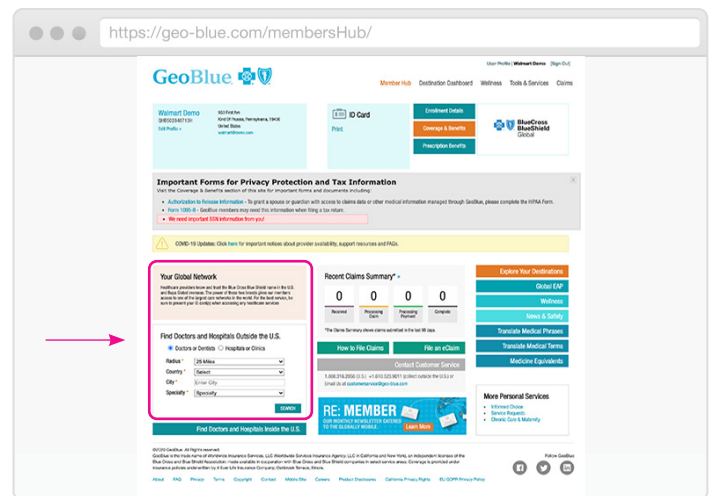
Making sense of health care.

Confused about the health care system in the U.S.? Log into Geo-Blue.com and go to “find providers in the U.S.” for more information.



From a browser:

- In the lower left of your dashboard, choose the care you need: “Doctors or Dentists” or “Hospitals or Clinics.”
- Search by distance, city, or medical specialty.



- On the GeoBlue website, choose the “Launch U.S. provider search website” option:





Questions, answered.

If you have questions about ...	Website	Phone/Email
Medical, dental, and vision benefits; claims; care management; or finding a network provider	Geo-Blue.com	GeoBlue: 1-610-230-2406 (outside U.S.) 888-304-8898 (in U.S.)
Finding a network doctor	Geo-Blue.com/login/login.cfm	GeoBlue: 1-610-230-2406 (outside U.S.) 888-304-8898 (in U.S.)
Global Employee Assistance Plan (EAP)	Geo-Blue.com	GeoBlue: text +44-790-934-1229 GeoBlue: support@worldwideassist.co.uk
Long-term disability insurance	UnisureGroup.com	grouplifeadmin@unisuregroup.com 1-949-547-7009 , or: +44-7733-276-851
Benefits while on assignment		Intlben@wal-mart.com Walmart People Services chat now or call: 800-421-1362

Need help with everyday challenges?

GeoBlue's Global EAP offers wellness and counseling services worldwide. Here's how to contact a counselor:

- Select "Telehealth" on your GeoBlue mobile app.
- Email support@worldwideassist.co.uk.
- Text [+44-790-934-1229](tel:+44-790-934-1229).

Talk to a wellness coach.

If you're inside the U.S., call [1-877-249-4752](tel:1-877-249-4752). Outside the U.S., call [+44-208-987-6229](tel:+44-208-987-6229). You can also send an email to contactcoach@wellness-assist.com.



Explore it all online at Geo-Blue.com.





A few more things...

Here are some important legal documents that let you know about your rights as a Plan participant.

You should also share these notices with any family members who are covered under your Plan. If they live in a different household, you can ask for these notices to be sent to a different address. You and your family members can also ask for a free paper copy of these notices by calling People Services at **800-421-1362**.

Valued Plan Participant

THE ASSOCIATES' HEALTH AND WELFARE PLAN (AHWP) RESPECTS THE DIGNITY OF EACH INDIVIDUAL WHO PARTICIPATES IN THE PLAN.

The AHWP does not discriminate on the basis of race, color, national origin, sex, age, or disability and strictly prohibits retaliation against any person making a complaint of discrimination. Additionally, we gladly provide our participants with language assistance, auxiliary aids and services at no cost. We value you as our participant and your satisfaction is important to us.

If you need such assistance or have concerns with your Plan services, please call the number on the back of your plan ID card. If you have any questions or concerns, please use one of the methods below so that we can better serve you.

عربي
خدمات الترجمة الفورية متاحة دون تكلفة. 1-800-421-1362.

မြန်မာ
စကားပြန်ဝန်ဆောင်မှုများကို အခမဲ့ ရရှိနိုင်ပါသည်။ 1-800-421-1362

汉语普通话
翻译服务免费提供。1-800-421-1362.

فارسی
خدمات مترجم بدون هیچ هزینه ای در دسترس می باشد. 1-800-421-1362.

Français
Des services d'interprètes sont disponibles sans frais.
1-800-421-1362.

kreyòl ayisyen
Gen Sèvis entèprèt ki disponib gratis. 1-800-421-1362.

日本人
通訳サービスは無料でご利用いただけます。1-800-421-1362.

한국어
통역 서비스를 무료로 이용하실 수 있습니다. 1-800-421-1362.

Polski
Usługi tłumacza dostępne są bez żadnych kosztów.
1-800-421-1362.

Availability of Summary of Health Information

As an associate, the health benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your family in the case of illness or injury.

Your plan offers a series of health coverage options. Choosing a health coverage option is an important decision. To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about any health coverage option in a standard format, to help you compare options. The SBC is available on One.Walmart.com/Health. A paper copy is also available, free of charge, by calling [800-421-1362](tel:800-421-1362).

For assistance, call the number on the back of your plan ID card.

To learn about or use our grievance process, contact People Services at [1-800-421-1362](tel:1-800-421-1362)

To file a complaint of discrimination, contact the U.S. Department of Health and Human Services, Office of Civil Rights:

- **Phone:** [1-800-368-1019](tel:1-800-368-1019) or [1-800-537-7697](tel:1-800-537-7697) (TDD)
- **Website:** https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf
- **Email:** OCRComplaint@hhs.gov

Interpreter Services are available at no cost. [1-800-421-1362](tel:1-800-421-1362)

Português (Brasil)
Serviços de interprete estão disponíveis grátis. 1-800-421-1362.

ਪੰਜਾਬੀ
ਦੇਵਾਸ਼ੀਆ ਸੇਵਾਵਾਂ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ। 1-800-421-1362.

Română
Serviciile de interpretariat sunt disponibile gratuit. 1-800-421-1362.

Русский
Переводческие Услуги оказываются бесплатно. 1-800-421-1362.

Af-Soomaali
Adeegyada Turjumaanka waxaa lagu heli karaa kharash la'aan.
1-800-421-1362.

Español
Los servicios de interpretación están disponibles de manera gratuita. 1-800-421-1362.

Kiswahili
Huduma za tafsiri zipo bila malipo. 1-800-421-1362.

Tiếng Việt
Dịch Vụ Thông Dịch có sẵn miễn phí. 1-800-421-1362.

Women's Health and Cancer Rights Act

As required by the Women's Health and Cancer Rights Act (WHCRA) of 1998, Walmart-provided medical plans provide coverage for:

1. All stages of reconstruction of the breast on which the mastectomy has been performed;
2. Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
3. Prosthesis and physical complications of mastectomy, including lymphedemas, in a manner determined in consultation with the attending physician and the patient.

Such coverage may be subject to annual deductibles and coinsurance provisions as may be deemed appropriate and are consistent with those established for other benefits under the plan or coverage. Written notice of the availability of such coverage shall be delivered to the participant upon enrollment and annually thereafter.