Benefit Category	Who is Covered?	Benefit Details	How to use this benefit	Additional information
Dental	Member, spouse, children	See booklet for detailed fee schedule	Your dentist submits form to Cook	Maximum \$2,750.00 per covered person per calendar year. Any treatment exceeding \$600.00 MUST BE PREAPPROVED.
Vision	Member, spouse, children	Member Maximum \$250.00, Spouse/Child Maximum \$150.00 reimbursed per covered person per calendar year	See booklet, submit form and receipts to D.H. Cook	
Supplemental	Member and/or spouse and/or children	Maximum \$500.00 reimbursed for out of pocket covered dental and/or vision	See booklet, submit form and receipts to D.H. Cook	Submit Explanation of Benefit letters for covered dental/vision out-of-pocket expenses with supplemental form to Cook Associates.
Life Insurance	Member	\$100,000.00 policy on the member	See booklet for detailed information	
Hearing Aid	Member, spouse, children	\$700.00 per ear, per person once every 48 months	See booklet, submit form and receipts to D.H. Cook	
Legal Services	Member and eligible dependents	Various legal services at greatly reduced prices	See booklet, Call Mirkin & Gordon	
Financial Counsel	Member	6 hours free counseling per year in person or phone. Unlimited access to help desk by email or web.	See booklet, Call Stacey Braun	