

BENEFIT GUIDE

August 1, 2026—July 31, 2027



If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see [page 10](#) for more details and share this information with your dependents.

WELCOME

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Welcome!

Philadelphia Housing Development Corporation (PHDC) is proud to provide our employees with a benefits program that offers choices designed to meet their individual needs and lifestyles. Each year, we review our benefit plan design to continually provide a comprehensive benefit package for our employees and their families. On the following pages, you will find a brief overview of our benefit plans. Please take the time to familiarize yourself with our benefits.



PLAN RULES & ELIGIBILITY

Benefits and Eligibility

All full-time employees are eligible to participate in the following benefit programs. All retirees can elect Medical & Prescription Drug, Dental and Vision for 5 years from the date of retirement. PRA and PHDC retirees receiving a PRA pension are covered for Life insurance benefits for 5 years from the date of retirement. PHDC retirees receiving a City Pension are covered for a \$6,000 life insurance benefit for the duration of their retirement.

- » Medical & Prescription Drug
- » Dental
- » Vision
- » Flexible Spending Accounts – **Active employees only**
- » Transportation Benefit – **Active employees only**
- » Life and AD&D – **Active employees only**
- » Voluntary Long-Term Disability – **Active employees only**
- » Voluntary Pet Insurance – **Active employees only**

DEPENDENT ELIGIBILITY

Employees and retirees who are eligible to participate in PHDC's benefit programs may enroll their dependents in the Medical & Prescription Drug, Dental, and Vision plans. Active employees can also enroll their dependents in spending accounts and voluntary insurance programs. For the purposes of our benefit plans, your dependents are defined as follows:

- » Your spouse or domestic partner (same-sex)
 - Please note that health care expenses for domestic partners **are not** reimbursable under the Health Care Flexible Spending Account
- » **Medical/Prescription Drug/Dental/Vision/Voluntary Life:** Your child(ren), or child(ren) of a domestic partner, who are under the age of 26, regardless of marital or student status
- » **Flexible Spending Accounts:** Your tax dependents under the age of 26
- » Your child(ren) over age 26 who are mentally or physically disabled and dependent upon you for support (proof of condition and dependency must be submitted)
- » Your child(ren) who are covered by a Qualified Medical Child Support Order (QMCSO)



Changing Your Benefits

Per Internal Revenue Service (IRS) rules, employees enrolled in pre-tax benefit plans may only make elections or changes to their plans once per year. Because of these rules, your benefit elections will be binding through July 31, 2027. However, you may make changes to your election if you experience one or more of the following special circumstances, which are known as “Qualifying Life Events”:

- » Marriage or divorce
- » Birth, adoption or placement for adoption of an eligible child
- » Loss of spouse's job or change in work status (when coverage is maintained through spouse's plan)
- » A significant change in your or your spouse's health coverage that is attributable to your spouse's employment
- » Death of spouse or dependent
- » Loss of dependent status
- » Becoming eligible for Medicare or Medicaid during the year
- » Receiving a Qualified Medical Child Support Order (QMCSO)

These qualifying life events allow you to make plan changes during the year. For any allowable changes, you must inform PHDC's Human Resources Department within 30 calendar days of the event. Benefit changes that are requested due to a “change of mind” cannot be allowed until the next Open Enrollment Period. For additional information concerning plan changes, please contact Human Resources.

MEDICAL & RX BENEFITS

Medical and Prescription Drug Benefits

To meet the diverse needs of PHDC's employees and their families, we offer two different medical and prescription drug options:

Keystone POS 1B	Personal Choice PPO 1B
» National network through IBC » Prescription drug covered through Optum » Preventive care, including routine screenings and checkups, covered at 100% » In and out-of-network coverage » REQUIRES PCP designation and referrals	» National network through IBC » Prescription drug covered through Optum » Preventive care, including routine screenings and checkups, covered at 100% » In and out-of-network coverage » DOES NOT REQUIRE PCP designation or referrals

To locate an in-network provider, visit www.ibx.com/providerfinder or call 1-800-ASK-BLUE.

Virtual Care Benefit

As a member enrolled in medical and prescription coverage through IBC, you get access to telemedicine, telebehavioral, and tele-dermatology services offered by Teladoc Health. You and your enrolled dependents have 24/7 access to a U.S. board-certified and licensed providers by phone, video chat, or mobile app without leaving home or work. They can treat and prescribe medication (if needed). To get started, visit www.teladochealth.com or call 1-800-835-2362.

- » **Telemedicine** – non-emergent conditions, such as sinus pain, pink eye, earaches, sore throat, and flu as well as also provides pediatric services
- » **Telebehavioral health** – conditions such as anxiety, depression, and panic disorders
- » **Teledermatology** – more than 3,000 skin, hair, and nail conditions.

Member Portal and Additional Programs

Once you are registered, you can log on to www.ibx.com to

- » View your benefits, review claims and annual out-of-pocket expenses, and request replacement ID cards
- » **Doctor and Hospital Finder** – find participating providers and hospitals that are customized to your plan
- » **Health Navigator** – decision tool on where to seek care based on your medical symptoms
- » **Well-being Profile** – health survey that gives you a snapshot of your current health and provides a personalized report on recommended areas of improvement
- » **Achieve Well-being** – interactive tools and resources to develop an action plan for your health goals
- » **Acupuncture Benefit** – can receive up to 18 acupuncture visits a year if qualified based on condition; Members will pay a specialist copay if utilizing an in-network provider
- » **Baby BluePrints** – maternity management program including information through each stage, access to specialized OB registered nurse, and monthly resources and tips

- » **Blue 365** – great deals on gym memberships, weight loss programs, fitness apparel, amusement tickets, movies, museum attractions, sporting events, and more
- » **College Tuition Benefit** – offers employees the opportunity to earn tuition credits each year to be used to pay for full time, undergraduate education at over 375 private colleges and universities; program is portable if the employee is no longer enrolled with IBC
- » **GradFin Program** – provides members free, personalized solutions to accelerate their student loan debt payoff process
- » **Healthy Lifestyle Reimbursement** – get up to \$150 when you are enrolled in an approved gym, participate in an approved weight management program, or complete a tobacco cessation program
- » **Husk Movement App** – access live virtual classes through the Husk Movement app as well as purchase exercise classes, training sessions, and gym day passes at a discounted rate; members must be 18 or older
- » **Livongo by Teladoc Health**
 - **Diabetes** – manage your condition with a smart blood glucose meter, tracking app, and access to coaching support
 - **Hypertension** – manage your heart health with a smart blood pressure monitor, one-on-one coaching support, step-by-step action plan, and tips on nutrition and activity
- » **MyStrength Plus** – digital program with tools and dedicated support for stress, depression, anxiety, sleep, chronic pain, substance abuse, and more
- » **Utopia WellCare** – schedule up to 6 virtual one-on-one visits a year with a participating registered dietitian at no cost; use functional nutrition method to treat conditions such as mood regulation, stress, gastrointestinal disorders, autoimmunity, cardiovascular issues, body composition, and more
- » **WondrHealth** – free 52-week digital program to develop a healthier relationship with food and build skills to make smarter decisions, to help you lose weight, sleep better, gain energy, and reduce and reverse chronic disease

MEDICAL & RX HIGHLIGHTS

SUMMARY OF MEDICAL/PRESCRIPTION DRUG COVERAGE

	Keystone POS 1B	Personal Choice PPO 1B
In-Network Medical Benefits	(You Pay)	(You Pay)
PCP Designation & Referrals Required?	Yes	No
Calendar Year Annual Deductible (Individual/Family)	None / None	None / None
Calendar Year Out-of-Pocket Maximum Benefit (Individual/Family)	\$7,150 / \$14,300	\$7,150 / \$14,300
Preventive Care	\$0 Copay	\$0 Copay
Office Visit (PCP/Specialist)	\$15 / \$30 Copay	\$10 / \$20 Copay
Virtual Care	\$15 Copay	\$10 Copay
Urgent Care	\$87 Copay	\$87 Copay
Emergency Room (Copay Not Waived If Admitted)	\$125 Copay	\$125 Copay
Lab Services	\$0 Copay	\$0 Copay
Diagnostic X-Ray Services	\$30 Copay	\$20 Copay
Imaging Services (e.g. CT, PET Scans, and MRIs)	\$60 Copay	\$40 Copay
Hospital Inpatient	\$100 Per Day Up To \$500 Max Per Admission	\$50 Per Day Up To \$150 Max Per Admission
Outpatient Surgery	\$50 Copay	\$0 Copay
Out-Of-Network Medical Benefits		
Calendar Year Annual Deductible (Individual/Family)	\$5,000 / \$15,000	\$1,500 / \$4,500
Coinsurance	30%	30%
Calendar Year Out-of-Pocket Maximum (Individual/Family)	\$30,000 / \$90,000	\$10,000 / \$30,000
Prescription Drug Benefits		
Retail (30-day supply)		
Generic	\$10 Copay	\$10 Copay
Brand	\$20 Copay	\$20 Copay
Non-Formulary	\$35 Copay	\$35 Copay
Mail Order (90-day supply) ¹		
Generic	\$20 Copay	\$20 Copay
Brand	\$40 Copay	\$40 Copay
Non-Formulary	\$70 Copay	\$70 Copay

Note: This summary is meant to provide a brief overview of medical benefits. In the event of a conflict, the plan documents will govern.

¹If you are taking a maintenance medication for an ongoing or chronic condition, enroll in the mail order program to reduce your out-of-pocket costs (90-day supply for a cost of two 30 day supply at a retail pharmacy)

DENTAL BENEFITS

Dental Benefit

Good dental health is important to your overall well-being. That’s why PHDC is pleased to offer employees a dental plan through MetLife. **All employees and retirees enrolling in Medical are automatically enrolled in Dental coverage at no cost.** You are not required to select a Primary Care Dentist under this plan. To find a provider, visit [MetDental](#) and select “PDP Plus” as the network option.

The MetLife plan allows you to receive dental care from participating providers (in-network) and non-participating providers (out-of-network). Utilizing a participating dentist may result in additional savings because participating dentists have agreed to accept MetLife’s fees for covered services. There is no balance billing for covered services when they are provided by a participating dentist. If you choose to seek treatment from a non-participating dentist, you may be responsible for paying the balance of that dentist’s fees that are above MetLife’s allowed amount. Additionally, some out-of-network providers may require you to pay the entire billed amount at the time of service and then submit your claims for reimbursement.

You will not be receiving an ID card in the mail. When making your first dental appointment, tell the dental office that you are covered under MetLife and provide your company name, your name, and date of birth. You can also print a temporary ID card online through the MetLife member portal.

REQUESTING A PRE-TREATMENT ESTIMATE

Before you have certain complex dental services performed (crowns, bridges, dentures, or periodontal work), you can request a pre-treatment estimate from MetLife so you can figure out what services are covered, for how much, and discuss potential alternatives treatment options with your dentist. To receive a benefit estimate, simply have your dentist submit a request for a pre-treatment estimate online at [MetDental](#) or via phone at 1-877-MET-DDS9 (638-3379) and follow the simple prompts for a pre-treatment estimate submission.

COLLEGE TUITION BENEFIT

This program reduces financial stress and provides a simple and effective way for you to send a child or loved one to college. You can earn SAGE Scholars Tuition Rewards Points to help offset the financial burden of a four-year undergraduate degree. If you are enrolled in PHDC’s medical/Rx plan offering, you are eligible for dual enrollment (this program is stackable).

SUMMARY OF DENTAL COVERAGE

	In-Network	Out-of-Network
Calendar Year Deductible	\$25 Per Individual	\$25 Per Individual
Preventive Services (Exams, cleanings, x-rays, sealants)	100%	100% Of Plan’s Allowed Charges
Basic Services (Root canals, gum treatment, oral surgery, fillings, denture repair & relining)	100% After Deductible	100% Of Plan’s Allowed Charges After Deductible
Major Services (Crowns, inlays, onlays, cast restorations)	80% After Deductible	80% Of Plan’s Allowed Charges After Deductible
Implants	80% After Deductible	80% Of Plan’s Allowed Charges After Deductible
Orthodontia (Adults and Child[ren])	80%	80% Of Plan’s Allowed Charges
Calendar Year Maximum	\$2,000 Per Individual	
Orthodontia Lifetime Maximum	\$2,000 Per Individual	

Note: This summary is meant to provide a brief overview of dental benefits. In the event of a conflict, the plan document will govern.

VISION BENEFITS

Vision Benefit

PHDC offers a choice of two vision plans through Vision Benefits of America (VBA). Both plans allow you to receive an eye exam every 12 months and provide substantial savings on your eye care purchases. The buy-up plan offers \$0 anti-reflective coatings, polycarbonate lenses, and progressive lenses.

You also have the option of receiving care from participating providers (in-network) and non-participating providers (out-of-network). Dollar for dollar, you receive the best value from your vision benefit when you visit a participating provider. If you choose to use a non-participating provider, you will need to submit a claim form, available on the VBA website, to VBA by mail or fax with the itemized receipts.

For more information or to search for an in-network provider, you may visit <https://www.vbaplans.com/> and fill in your zip code or call 1-800-432-4966.



SUMMARY OF VISION COVERAGE

	Base Plan		Buy-Up Plan	
	In-Network	Out-of- Network	In-Network	Out-of- Network
Frequency Exams Lenses/Contact Lenses Frames	12 Months 12 Months 24 Months		12 Months 12 Months 12 Months	
Eye Exams	\$0 Copay	Up To \$40	\$0 Copay	Up To \$40
Standard Lenses Single Vision Bifocal Trifocal Progressive Lenticular	\$0 Copay \$0 Copay \$0 Copay \$45 - \$175 Allowance \$0 Copay	Up To \$40 Up To \$60 Up To \$80 Up To \$80 Up To \$120	\$0 Copay \$0 Copay \$0 Copay \$0 Copay \$0 Copay	Up To \$40 Up To \$60 Up To \$80 Up To \$80 Up To \$120
Frames	Up to \$150 Allowance	Up To \$50	Up to \$180 Allowance	Up To \$50
Contact Lens (In Lieu Of Glasses) Elective Medically Necessary	Up to \$110 Allowance \$0 Copay	Up To \$110 Up To \$320	Up to \$150 Allowance \$0 Copay	Up To \$110 Up To \$320
Lens Options Polycarbonate Scratch Coating Anti-Reflective Coating	\$0 Children under 19 \$0 Copay Extra Cost	Not Covered Not Covered Not Covered	\$0 for all ages \$0 \$0	Not Covered Not Covered Not Covered

Note: This summary is meant to provide a brief overview of vision benefits See the plan document for out-of-network benefits. In the event of a conflict, the plan document will govern.

SPENDING ACCOUNTS

Flexible Spending Accounts (FSAs) – Active Employees Only

PHDC allows you to redirect a portion of your pre-tax pay into Flexible Spending Accounts (FSAs). Since these deductions are calculated without Federal and Social Security taxes included, your taxable income is lower and your spendable income is potentially higher. This benefit is provided by The Harrison Group.

Please remember to keep all receipts! It is necessary for you to save your receipts for all eligible medical and dependent care expenses. Even though the expense was paid with the debit card, the IRS requires every transaction to be validated to ensure it is health or dependent care related. In some instances, the expense cannot be automatically substantiated or validated. In these instances, you will receive a request to provide a receipt as validation. **Failure to provide receipts when requested may cause your FSA card to be frozen until proper substantiation is provided.**

HEALTH CARE FLEXIBLE SPENDING ACCOUNTS

You may set aside an annual amount up to \$3,050 on a pre-tax basis to use towards health care purchases.

These purchases include medical copays, prescription drug copays, dental costs not covered by insurance, vision costs not covered by insurance as well as other items.

Your annual contribution is divided by your number of pay periods, and that amount will be deducted pre-tax each pay period. The amount you elect may not be changed or revoked during the plan year unless you experience a qualifying life event.

Participants can roll over \$680 of unused healthcare FSA funds at the end of the plan year. Rollover balances will be applied to the next plan year approximately 95 days after the end of the prior plan year.

The plan year runs from 8/1 – 7/31. There is a 90-day runout period at the end of the plan year for active participants

90 Day Run-out: The 90-day administrative period at the end of the plan year, from 8/1 – 10/30, where claims incurred during the prior plan year (ending 7/31) can still be submitted for reimbursement.

The debit card should not be used to submit claims for the prior plan year. The debit card will always auto-draw the funds from the current plan year. If the debit card is used to pay for a claim where the date of service was in the prior plan year, the claim will be denied when the substantiation documentation is reviewed

Substantiation: Transactions that cannot be auto approved with the debit card require you to provide documentation listing the name of provider or merchant, date service received, or item purchased, description of service or item, and dollar amount.

If a claim is denied due to substantiation reflecting that the date of service was for the prior plan year, The Harrison Group should send you information explaining you need to submit the claim against the prior plan year.

Please see The Harrison Group FSA User Guide for information on how to create an account and submit claims online or through the mobile app: [FSA User Guide](#)



SPENDING ACCOUNTS

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNTS

This spending account allows you to set aside a portion of your pay on a pre-tax basis to pay for eligible dependent expenses so that you and your spouse can work. Generally, expenses will qualify for reimbursement if they are the result of care for:

- » Your children, under the age of 13, for whom you are entitled to a personal exemption on your federal income tax return.
- » Your spouse or other dependent, including parents, who are physically or mentally incapable of self-care.

You can set aside an annual amount up to \$7,500 (\$3,750 if married and filing separately). At the end of the plan year, any amount that is left over will be “forfeited.”

Transportation Benefit – Active Employees Only

PHDC provides a transit benefit, which allows you to set aside pre-tax dollars to pay for expenses related to commuting to and from work as well as work-related parking costs. This includes transit passes, tokens, vouchers, parking passes, vanpooling, and more. Once enrolled, you will get a debit card that you will use to pay for such expenses. The monthly contribution limit for transit and parking expenses is \$325. You will not pay federal income or FICA taxes on these dollars. This benefit is provided to you through The Harrison Group.



ADDITIONAL BENEFITS

Medicare Help Team

Employees nearing age 65 and/or retirement, have access to

Medicare education, guidance, and assistance through HTA Financial Services at no cost. These licensed experts can help you transition to Medicare, acquire appropriate coverage to meet your needs, and provide ongoing support. You start with a one-on-one phone counseling session, where they will prepare and answer questions for all aspects of retirement healthcare. From that consultation, they provide you with a “roadmap” with step-by-step action items leading up to retirement. When it is time to make your decision, they will educate you on the Medicare Onboarding process, explain each product offered, and assist with the completion of enrollment. If any questions or assistance is needed in the future, you will have unlimited phone support. To set up a phone consultation, call 610-430-6650. If you are seeking advice on prescriptions, please make sure to have your prescriptions ready for the call.

Life and Accidental Death and Dismemberment (AD&D)

BASIC LIFE AND AD&D

- » Active PHDC employees who are former PRA employees have Life and AD&D insurance through The Standard at no cost for a benefit amount of one times annual earnings, rounded to the next highest \$1,000 to a maximum \$100,000 without evidence of insurability. Retirees, receiving a PRA pension, are covered by this benefit for 5 years from the date of retirement.
- » Active PHDC employees who are enrolled in one of the City of Philadelphia’s pension plans, have Life & AD&D insurance through Securian/Minnesota Life at no cost for a benefit amount of \$20,000. Retirees, receiving a City pension, are eligible for \$6,000 for their lifetime from the date of retirement. Please contact your HR department representative for a copy of the insurance certificate. To continue your life insurance coverage after employment ends, and get information, forms, and calculate rates, visit www.lifebenefits.com/continue and Enter policy #: 34021, Access key: Philadelphia. Call 866-365-2374 for website assistance. You have 60 days from the date your employment ends to convert your coverage.

VOLUNTARY LIFE AND AD&D – ACTIVE EMPLOYEES ONLY

- » Active PHDC employees who are former PRA employees can purchase additional Voluntary Life coverage through the Standard. You will have to complete a health questionnaire if enrolling for the first time and may need to complete a health questionnaire if increasing your coverage amounts.
- » Active PHDC employees who have pension benefits through the City of Philadelphia, can purchase additional Voluntary Life and AD&D coverage through Securian. You can purchase coverage for yourself, spouse, and children.

Voluntary Long-Term Disability (LTD)

ACTIVE EMPLOYEES ONLY

You may select a monthly benefit amount in \$100 increments (based on the table and guidelines within plan documents). The monthly benefit amount must not exceed 60% of your monthly earnings. The maximum monthly benefit is \$6,000; the minimum benefit is \$200. You may also elect a benefit waiting period, which is the period that you must be continuously disabled before benefits become payable. The waiting period options are listed below. If you do not elect this benefit when you are first eligible, you will be able to elect or make changes during open enrollment. Cost will be paid by you and based on your benefit amount and waiting period elections.

VOLUNTARY LTD WAITING PERIOD

Accidental Injury	Other Disability
0 days	7 days
14 days	14 days
30 days	30 days
60 days	60 days
90 days	90 days
180 days	180 days

Voluntary Pet Insurance –

ACTIVE EMPLOYEES ONLY

PHDC has partnered with Nationwide to get employees preferred pricing on Voluntary Pet Insurance plans. You can be reimbursed for eligible veterinary expenses relating to accidents, illnesses, and injuries for dogs, cats, birds, reptiles, and exotic pets. Optional wellness protection coverage is also available for routine preventive exams and services. Lump sum benefit amount is based on type of coverage and elected reimbursement level. This benefit is offered on a voluntary basis, and deductions will be taken out of your paycheck. To enroll, visit <https://benefits.petinsurance.com/phdcphila> or call 1-877-738-7874 and mention “Philadelphia Housing Development Corporation employee.”

InsurChoice

As an employee, you and your family members have access to InsurChoice, your one-stop shop for exclusive and personalized savings on products, experiences, and insurance coverages. One size doesn’t fit all, so you can match yourself with the best rates and coverages from multiple insurance companies. Select the products that meet YOUR needs, such as auto insurance, travel deals, pet insurance, travel protection, home warranty, discounted gift cards, and more! The cost of the services or quote is the responsibility of the employee. Visit https://digital.nfp.com/pc/PHDC_IC_MP.

IMPORTANT NOTICES

Important Notices

ALL TEAM MEMBERS

Click the link below or scan the QR Code to the right to read important information related to the benefits program.

<https://mybenefits.nfp.com/PHDC/2026/Notices-Annual.pdf>



NEW TEAM MEMBERS

Click the link below or scan the QR Code to the right to read important information related to the benefits program.

<https://mybenefits.nfp.com/PHDC/2026/Notices-Annual.pdf>



CONTACT INFORMATION

Have Benefit Questions? Contact the NFP Benefits Support Team

Our employee benefits consulting firm, NFP, provides a dedicated benefits support team who can answer your benefit plan questions and assist you in resolving benefit claim issues. This confidential service is available to you, as well as your family members who are enrolled in benefits.

You can reach the NFP team at: 855-287-2202 (toll free), between 8:00 a.m. and 5:00 p.m. Eastern Time, Monday through Friday; or by email at: BenefitsSupportTeamCSMidAtlantic@nfp.com.

Plan		Phone	Website / Email Address
Independence Blue Cross Medical and Rx Network: • Keystone HMO/POS/Direct POS • Personal Choice PPO	Member Services	1-800-275-2583	www.ibx.com
	Pharmacy Services	1-888-678-7012	
	Find a Provider		www.ibx.com/providerfinder
	Teladoc Health / Livongo	1-800-835-2362	www.teladochealth.com
	AblePay Program	1-484-292-4000	https://ablepayhealth.com/ibx
	Blue365		https://blue365deals.com/register
	Utopia WellCare		www.utopiawellcare.com
MetLife Dental Network: PDP Plus	Member Services	1-800-438-6388	https://dentalprovider.metlife.com
Vision Benefits of America (VBA) Vision	Member Services	1-800-432-4966	www.vbaplans.com
The Harrison Group • Health Care Flexible Spending Account • Dependent Care Flexible Spending Account • Commuter Benefit	Participant Services	1-855-222-5727	www.theharrisingrouponline.com Service@theharrisingrouponline.com
The Standard <i>(Active, Former PRA Employees & Retirees receiving a PRA pension)</i> Life and Disability	Member Services	1-888-937-4783	www.standard.com
Securian (Minnesota Life) – (Employee & Retirees receiving pension benefits through City of Philadelphia) Life	To file a claim	215-686-0859	www.lifebenefits.com
Nationwide <i>(Active Employees Only)</i> Pet Insurance		1-877-738-7874 and mention "PHDC Employee"	https://benefits.petinsurance.com/phdcphila
HTA Financial Services	Medicare Help Team	610-430-6650	Medicare@HTA-insurance.com https://htafinancial.com/schedule/
InsurChoice			https://digital.nfp.com/pc/PHDC_IC_MP/