

Open Enrollment (Nov. 1-15, 2024)

For Plan Year Dec. 1, 2024 - Dec. 31, 2025

Active Enrollment Required







# What's new for 2024-2025

- Medical Triple-Option Medical Plan, including a Qualified High-Deductible Health Plan (QHDHP) through Cigna,
- Health Savings Accounts (HSA) Now Available, when enrolled in the QHDHP,
- HSA Seed Aeries contributes to your account (Prorated from date of hire)
- Long-Term Disability An Aeries-paid benefit,
- Basic Life and Accidental Death & Dismemberment An Aeries-paid benefit,
- Thirteen-Month Plan year Plans year transitioning to a Jan. 1 effective date starting in 2026.





Eligibility

If you work at least 30 hours per week, you are eligible for benefits. Most of your benefits are effective on the first day of the month following your date of hire. You may also enroll your eligible dependents for coverage.



## **Changing Benefits After Enrollment**

During the year, you cannot make changes to your benefits unless you have a Qualified Life Event. If you do not make changes to your benefits within 30 days of the Qualified Life Event, you will have to wait until the next annual Open Enrollment period to make changes (unless you experience another Qualified Life Event).

| <b>Qualified Life Eve</b>      | nt   | Documentation Needed   |
|--------------------------------|--|--|
| Characa in                     | Marriage   | Copy of marriage certificate   |
| Change in<br>marital status    | Divorce/Legal Separation   | Copy of divorce decree   |
| marital Status                 | Death  | Copy of death certificate  |
|                                | Birth or adoption  | Copy of birth certificate or copy of legal adoption papers                                       |
| Change in number of dependents | Step-child   | Copy of birth certificate plus a copy of the marriage certificate between<br>employee and spouse |
|                                | Death  | Copy of death certificate  |
| Change in                      | Change in your eligibility status (i.e., full time to part time) | Notification of increase or reduction of hours that changes coverage status                      |
| employment                     | Change in spouse's benefits or<br>employment status              | Notification of spouse's employment status that results in a loss or gain of coverage            |



# **Definitions**

The following are important terms that will be used throughout this document, as well as their definitions:

- Coinsurance The amount you pay for certain covered healthcare services under your health plan. It is calculated as a
  percentage, and you pay it in addition to whatever deductible you may owe.
- Copayment Amount the insured person pays every time he or she receives a health service. For example: If your
  copay to see your regular doctor is \$20, you pay that amount each time you see your regular doctor.
- Deductible The amount you owe before your health insurance benefits kick in.
- Health Savings Account (HSA) An HSA allows you to make tax-free payroll contributions to an account that you
  may then use to pay for certain out-of-pocket medical expenses. To be eligible to open an HSA, you must participate
  in a qualified High Deductible Health Plan (HDHP). Your employer may also make contributions to your HSA. Unused
  money stays in the account year to year and can be invested for long-term use. There is a limit on how much you can
  contribute each year, but there is no limit on how much you can accumulate year to year. If your employer contributes to
  your HSA, you will need to subtract the employer contribution from the annual maximum to determine what you may
  contribute for the annual maximum.





- High Deductible Health Plan (HDHP) A health plan that contains a deductible which must be met before the health
  plan provides coverage. This typically means that 100 percent of the charges you and your family members incur for
  health and prescription services are subject to the deductible. This plan has no co-pays for office visits, prescriptions, etc.
- Out-of-pocket maximum The maximum amount you will pay for covered services during a plan year.
- Preferred Provider Organization (PPO) A health plan that includes a network of doctors, hospitals, and other
  healthcare providers that participate in a managed care plan. Members receive greater benefits by staying within the
  network but also have the option of receiving medical care outside of the network.
- Primary Care Physician (PCP) The doctor you select to coordinate your care. This generally includes family practice
  physicians, general practitioners, internists, pediatricians, etc.
- Premium A fee that is paid to provide insurance. Premiums can be paid by you, Aeries, and/or a combination of both.





|                     | Cigna HDHP OAPin Low      | Cigna OAPin Mid                  | Cigna          | OAP High            |
|---------------------|---------------------------|----------------------------------|----------------|---------------------|
|                     | IN-NETWORK                | IN-NETWORK                       | IN-NETWORK     | OUT-OF-NETWORK      |
|                     |                           | You                              | Pay            |                     |
| Calendar Year Dedu  | ıctible                   |                                  |                |                     |
| Individual          | \$2,500                   | \$1,000                          | \$250          | \$5,000             |
| Family              | \$5,000                   | \$2,000                          | \$500          | \$10,000            |
| Calendar Year Out-o | of-Pocket Maximum (Includ | des Deductible)                  |                |                     |
| Individual          | \$8,000                   | \$6,000                          | \$4,000        | \$10,000            |
| Family              | \$16,000                  | \$12,000                         | \$8,000        | \$20,000            |
| Coinsurance / Copa  | ys                        |                                  |                |                     |
| Preventive Care     | \$0                       | \$0                              | \$0            | Not covered         |
| Primary Care        | \$30 copay*               | \$20 copay                       | \$10 copay     | 50% coinsurance*    |
| Specialist Visit    | \$60 copay*               | \$40 copay                       | \$20 copay     | 50% coinsurance*    |
| Emergency Room      | \$300 copay & coins.      | \$250 copay (waived if admitted) | \$200 copay (w | raived if admitted) |

<sup>\*</sup> After deductible







|                                 | Cigna HDHP OAPin Low | Cigna OAPin Mid  | Cigna O          | AP High        |
|---------------------------------|----------------------|------------------|------------------|----------------|
|                                 | IN-NETWORK           | IN-NETWORK       | IN-NETWORK       | OUT-OF-NETWORK |
| Retail Prescription Dru         | gs                   |                  |                  |                |
| Tier 1 (Generic)                | \$10 copay*          | \$10 copay       | \$10 copay       | Not covered    |
| Tier 2 (Brand<br>Preferred)     | \$30 copay*          | \$30 copay       | \$30 copay       | Not covered    |
| Tier 3 (Brand<br>Non-Preferred) | \$50 copay*          | \$50 copay       | \$50 copay       | Not covered    |
| Tier 4 (Specialty)              | 20% up to \$250*     | 30% up to \$250* | 30% up to \$250* | Not covered    |

<sup>\*</sup> After deductible





## Choose a Plan With Confidence Cigna One Guide Service Can Help.

Whether you're a current Cigna customer or considering Cigna for the first time, we understand how confusing and overwhelming it can be to review your health plan options. And we want to help by providing the resources you need to make a decision with confidence. That's why Cigna One Guide® is available to you now.

Call a Cigna One Guide representative during preenrollment to get personalized, useful guidance.

Your personal guide will help you:

- Easily understand the basics of health coverage
- Identify the types of health plans available to you that best meet the needs of you and your family
- Check if your doctors are in-network to help you avoid unnecessary costs
- Get answers on any other questions you may have about the plans or provider networks available to you

The best part is, during the enrollment period, your personal guide is just a call away.\*

#### Don't Wait Until the Last Minute to Enroll.

Call 888-806-5094 to speak with a Cigna One Guide representative today.\*

## Together, All the Way. ®

\* During enrollment, personal guides available Monday through Friday, 8:00 am-9:00 pm EST. Once your coverage begins, call the number on your ID card to speak with a personal guide. Additional customer service representatives are available 24/7.

## After Enrollment, the Support Continues For Cigna Customers.

Your Cigna One Guide representative will be there to guide you through the complexities of the health care system, and help you avoid costly missteps. Our goal is a simpler health care journey for you and your family.

#### Cigna One Guide Service Provides Personalized Assistance to Help You:

- Resolve health care issues.
- Save time and money
- · Get the most out of your plan
- · Find the right hospitals, dentists and other health care providers in your plan's network
- Get cost estimates and avoid surprise expenses
- Understand your bills

Access Cigna One Guide - After Enrollment - in the Way That's Most Convenient For You:



Chat





Phone





When you need care — anytime, day or night — or when your primary care provider is not available, telemedicine can be a convenient option. With telemedicine, you don't have to drive to the doctor's office or clinic, park, walk into or sit in a waiting room when you're sick — you can see your doctor from the comfort of your own bed or sofa.

## Register Today so You Are Ready When You Need Care



Avoid germs in the ER, urgent care clinic, or doctor's office.

See a board-certified, licensed, telehealth-trained doctor on your schedule with ondemand virtual visits 24/7, including nights, weekends and holidays.

Get treated for more than 80 common conditions including colds, flu, allergies and more.

Get a prescription or short-term refill of any existing prescription sent to a pharmacy nearby in less time than your usual doctor visit.

Avoid costly copays and deductibles of the ER and urgent care clinic.

# Using Telemedicine is as Easy as One, Two, Three

### Step 1 - Access MDLIVE

Login to myCigna.com, click on "Talk to a doctor." Or call MDLIVE at 888-726-3171.

#### Step 2 – Select care needed

Select medical care or counseling, cost will be displayed on both myCigna.com and MDLIVE.

#### Step 3 - Schedule Appointment

Schedule a future appointment or start your visit today.





To be eligible to open an HSA, you must be Enrolled in a qualified HDHP, and NOT:

- Enrolled in Medicare (including Part A),
   Medicaid, HIP, or Tricare
- Covered under other health insurance with first-dollar coverage
  - Claimed as a dependent on another person's tax return
- Enrolled in a general medical FSA through your spouse's employer
- Received VA medical benefits within three months of the date your make contributions into an HSA

A Health Savings Account (HSA) is a personal savings account you can use to pay for qualified out-of-pocket medical expenses with pretax dollars — now or in the future. Once you're enrolled in the HSA, you'll receive a debit card to help manage your HSA reimbursements. Your HSA can also be used for your expenses and those of your spouse and dependents, even if they are not covered by the HDHP medical plan.

# How a Health Savings Account Works



## Eligibility

You must be enrolled in the Qualified High-Deductible Health Plan.

#### Contributions

The company contributes: Employee Only (EE): \$600; Employee + Spouse (ES): \$900; Employee + Child(ren) (EC): \$900; Employee + Family (EF): \$1,200.

You contribute on a pretax basis and can change how much you contribute from each paycheck up to the 2025 annual IRS maximum of \$4,300 if you enroll only yourself or \$8,550 if you enroll in family coverage. You can make an additional \$1,000 catch-up contribution if you are age 55 or older.







# **⊕**

### Eligible Expenses

You may use your HSA funds to cover medical, dental, vision and prescription drug expenses incurred by you and your eligible family members.

## **Using Your Account**

Use the debit card linked to your HSA to cover eligible expenses, or pay for expenses out of your own pocket and save your HSA money for future health care expenses.





## Your HSA is always yours — no matter what.

One of the best features of an HSA is that any money left in your account at the end of the year rolls over so you can use it next year or sometime in the future. And if you leave the Company or retire, your HSA goes with you so you can continue to pay for or save for future eligible health care expenses.







Specialty medications can cost a lot of money. That's why your plan offers you access to a service called SaveOnSP. With SaveOnSP, you'll pay \$0 out-of-pocket for your medication. There's no extra cost to participate – it's available through your pharmacy benefit.

## Pay \$0 with SaveOnSP

If you're filling a medication through Accredo that's available at \$0 with SaveOnSP, you should consider using this service.

- With SaveOnSP, you'll pay \$0 out-of-pocket for your medication. The medication's full cost will be paid through a manufacturer copay assistance program.
- Without SaveOnSP, you'll pay 30%
   coinsurance to fill your medication. You can
   use the Price a Medication tool on the myCigna®
   App or myCigna.com® to see how much your
   medication will cost.

#### How it Works

John's taking an eligible specialty medication. His copay is currently \$70. He has a choice to make.

- With SaveOnSP, he won't pay anything (\$0)
   out-of-pocket. However, the cost won't count
   toward his deductible (if he has one) and/or
   out-of-pocket maximum.
- Without SaveOnSP, he'll pay his full 30% coinsurance (which is \$1,000) out-of-pocket.
   Also, the cost won't count toward his deductible (if he has one) and/or out-of-pocket maximum.





# Member Choice – Pharmacy Network Options

# Your Pharmacy Network Options – Choice and Convenience

You and each covered family member can choose between two networks:

## **CVS Pharmacy Network**

- 30-day supplies can be filled at any in-network retail pharmacy, including CVS.
- 90-day supplies are available at select in-network pharmacies, including CVS.
- Walgreens is not in this network. Prescriptions at Walgreens may not be covered.

## Walgreens Pharmacy Network

- 30-day supplies can be filled at any in-network retail pharmacy, including Walgreens.
- 90-day supplies are available at select in-network pharmacies, including Walgreens.
- CVS is not in this network. Prescriptions at CVS may not be covered.

Both Networks Offer Over 55,000 Pharmacies, including local independent pharmacies, grocery stores, retail chains, and wholesale warehouse stores.

## Changing Your Pharmacy Network

- By Phone: Call customer service using the toll-free number on your Cigna HealthcareSM ID card.
- Online: Log in to myCigna® App or myCigna.com®, go to the profile section, and follow the instructions to change networks.







Fillings, Sealants, Extractions,

Crowns, Inlays/Onlays, Dentures and

**Emergency Exams** 

**Major Procedures** 

Bridgework, Repairs

|                                   | MetLife Dental Plan - In-Network |                             |
|-----------------------------------|----------------------------------|-----------------------------|
|                                   | IN-NETWORK                       | OUT-OF-NETWORK              |
| Calendar Year Plan Maximum        |                                  |                             |
| Per Individual                    | \$5,000 per individual (Basic a  | nd Major Services combined) |
|                                   | You Pay                          |                             |
| Calendar Year Deductible          |                                  |                             |
|                                   | \$95 per individual              | \$50 per individual         |
| Individual                        | \$25 per individual              | 400 per inalvidual          |
|                                   | \$75 per family                  | \$150 per family            |
| Individual Family Preventive Care | •                                | •                           |
| Family                            | •                                | •                           |

20%\*

50%\*



20%\*

50%\*

# **Vision Plan**



Utilizing the



|                                   | MetLife Vision Plan – VSP Network                     |
|-----------------------------------|---|
|                                   | IN-NETWORK  |
|                                   | You Pay   |
| Exam                              | \$20 up to \$39                                       |
| Single Vision Lenses              | \$0 after copay                                       |
| Bifocals Lenses                   | \$0 after copay                                       |
| Trifocals Lenses                  | \$0 after copay                                       |
| Frames                            | Balance over \$180 allowance after copay              |
| Contacts in lieu of Frames/Lenses | Balance over \$180 allowance after maximum \$60 copay |
| Benefit Frequency                 |   |
| Exams                             | Once every 12 months                                  |
| Lenses                            | Once every 12 months                                  |
| Frames                            | Once every 12 months                                  |
| Contacts                          | Once every 12 months                                  |
|                                   | A Aeries <sup>®</sup>                                 |



#### Basic Life and AD&D





You must add your beneficiary(ies) in Employee Navigator.

## Voluntary Life and AD&D



#### Guaranteed Issue and Evidence of Insurability

Employees and spouses who elect Voluntary Life and AD&D coverage when they are first eligible can elect up to the Guaranteed Issue (GI) amount without Evidence of Insurability (EOI). If the amount requested is more than GI, you will need to provide EOI before the amount over GI becomes effective.







# **Voluntary Life**

| Age        | Monthly Rates per \$1,000 | Age   | Monthly Rates per \$1,000 |
|------------|---------------------------|-------|---------------------------|
| Child Rate | \$0.200*                  | 50-54 | \$0.350                   |
| 15-24      | \$0.060                   | 55–59 | \$0.560                   |
| 25–29      | \$0.070                   | 60-64 | \$0.780                   |
| 30–34      | \$0.090                   | 65–69 | \$1.290                   |
| 35–39      | \$0.100                   | 70–74 | \$2.510                   |
| 40-44      | \$0.140                   | 75+   | \$4.850                   |
| 45–49      | \$0.220                   |       |                           |

<sup>\*</sup>Note: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have. Children are eligible up to age 26.





#### Disability Benefits at a Glance









## First 7 Days

PTO replaces 100% of your pay.

#### Next 12 Weeks

Approved STD replaces 60% of your earnings to a \$2,000 maximum for 12 weeks.

Benefit begins after 7 days of disability.

## After 90 Days

LTD replaces 60% of your earnings to a \$10,000 maximum per month.

Benefit begins after 90 days of disability and payments will last for as long as you are disabled or until you reach your Social Security Normal Retirement Age, whichever is sooner.







# **Planning for Retirement**

As a part of your plan, your account dashboard gives you a real-time view of spending, saving, debt and more so you can track, manage and plan all your financial priorities in one place.

#### 1. Know your estimated monthly retirement income

- See what your retirement might look like and what percentage of your goal you're on track to reach.
- Adjust the sliders to see how changes affect yoursavings in real time.
- Put your savings in context.
- Make changes with just one click.

#### 2. See and understand your net worth

Your net worth is a good measure of where you stand at a point in time. The more accounts you link, the clearer view you'll have of what you own (your assets) and what you owe (your liabilities).

#### 3. Manage progress toward your goals

Your dashboard includes a progress meter and personalized next steps to help you reach your individual goals.

#### 4. Easily and securely link other accounts

Advanced security measures are taken to protect your privacy and information and ensure your accounts can't be viewed by your employer or plan administrators.

#### 5. Access an expanded financial toolbox

Designed to help you better plan and manage your finances, it includes a retirement planner, a savings planner, budgeting tools and more.

# Increase Your Retirement Savings With a 401(k) Funded with PRE-TAX dollars cannot exceed the IRS limit of Your \$23,000 ANNUAL Contribution Company If you are AGE 50+ you can make an additional contribution of \$7,500

## View Tips and Best Practices to Protect Yourself

See what you can do to help defend against cybersecurity threats. Visit empowermyretirement.com and click on the Security Tips link at the bottom of the page.

# Log in to Your Accounts and Start Linking Accounts

Take advantage of all the tools available to you and link outside accounts to enjoy a 360° view of your finances.

It's easy to create your account if you haven't already.

- Log on and select Register.
- Choose the I do not have a PIN tab.
- Follow the prompts to create your username and password.

Click Español to view the website and receive your statements in Spanish.

For more help, call 800-338-4015.

Representatives are available weekdays from 6 a.m. to 8 p.m. Mountain time and Saturdays from 7 a.m. to 3:30 p.m. Mountain time.

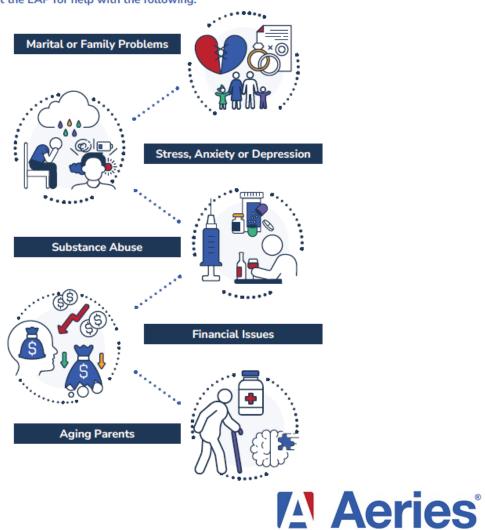




You can contact the EAP for help with the following:

LifeCare EAP Program through ADP
Call toll-free, 24 hours a day
1-866-338-5516 (1-800-873-1322 TTY). Please mention your affiliation with ADP.

**Log into** http://member.lifecare.com. Screen name: GROUPADPEAP and Password: login



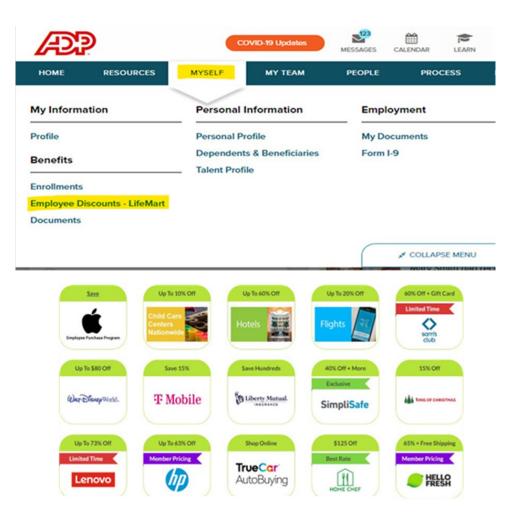
Our Employee Assistance Program is available at no cost to you — whether or not you elect other benefits coverage.



## LifeMart

Through our partnership with ADP, you have access to thousands of discounts. If you are in the market for something, please check LifeMart first before making a purchase online.

These discounts vary and can change throughout the year. The link can be found on the homepage of ADP. Discounts include, pet insurance, Apple products, electronics, cell phones, food & grocery, home and auto insurance and much more!









## Legal Services - Unum

Navigating legal matters can be complex and costly. With Unum's Legal Services, you have access to a network of experienced attorneys to assist with a variety of personal legal issues, such as estate planning, real estate transactions, family law matters, and more. Whether you need legal advice, document preparation, or representation, this service helps ensure you receive the support you need without the high cost of typical attorney fees. Protect your peace of mind by taking advantage of this valuable benefit. Call 800-854-1446 or visit <a href="https://www.unum.com/lifebalance">www.unum.com/lifebalance</a>.

## Travel Assistance Program - Unum

If you're looking for peace of mind while traveling, consider the travel assistance program. It offers toll-free emergency assistance to you, your spouse and your dependents 24 hours a day, seven days a week when you're traveling 100 miles or more from your primary home for 90 days or less. Services provided by Assist America, Inc. through your Unum group life and disability insurance plans. Call 800-872-1414 within the U.S., +01 609-986-1234 outside the U.S., or email <a href="mailto:medservices@assistamerica.com">mailto:medservices@assistamerica.com</a>. You may also download the mobile app from the Apple® App Store or Google Play™. Reference No. 01-AA-UN-762490

## Tuition Reimbursement - Aeries

Through the Tuition Reimbursement benefit, full-time employees are eligible to receive reimbursement for a portion of the tuition costs for study or training programs pursued outside of working hours.

Please note that reimbursement is only for educational courses in areas that will improve your present job performance. You must have advance written approval. Contact Human Resources for more information.







## Short-Term Disability

The loss of income due to illness or injury can cause serious financial hardship for your family. Disability insurance replaces a portion of your income to help you continue paying your bills and meeting your financial obligations during this difficult time.

#### How Does Short-Term Disability Insurance Work?

- You are eligible to receive STD benefits after you have been disabled for seven days due to a non-work-related illness or injury, or pregnancy.
- Replaces up to 60% of your eligible income, up to a maximum of \$2,000 per week.
- Benefits end after 12 weeks.





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# **Short-Term Disability**

|          | Full-time Employees              |  |
|----------|----------------------------------|--|
| Age Band | Rates per \$10 of Weekly Benefit |  |
| Under 25 | \$0.041                          |  |
| 25–29    | \$0.103                          |  |
| 30–34    | \$0.231                          |  |
| 35–39    | \$0.157                          |  |
| 40-44    | \$0.072                          |  |
| 45-49    | \$0.055                          |  |
| 50-54    | \$0.071                          |  |
| 55-59    | \$0.086                          |  |
| 60-64    | \$0.118                          |  |
| 65+      | \$0.142                          |  |







#### **Accident Insurance**

Accident insurance pays out a lump sum if you become injured because of an accident — even if the injuries you incur do not keep you out of work. While health insurance companies pay your provider or facility, Accident insurance pays you directly.

#### How Does Accident Insurance Work?

Accident insurance policies can provide you with a lump sum paid directly to you that will help pay for a wide range of situations, including initial care, surgery, transportation and lodging, and follow-up care. Here's how it works:

- A set amount is payable based on the injury you suffer and the treatment you receive.
- Benefits are payable directly to you (unless you specify otherwise) and can be used as you see fit.
- Coverage is available for you, your spouse and eligible dependent children.
- You do not need to answer medical questions or have a physical exam to get basic coverage.
- Accident insurance covers injuries that happen on the job or off the job — unlike workers' compensation, which only covers on-the-job injuries.
- Benefit payments are not reduced by any other insurance you may have with other companies.

#### **Examples of Covered Expenses**







# **Accident Insurance**



|                       | Full-Time Employees - Monthly Premiums |
|-----------------------|--|
| Employee Only         | \$12.55                                |
| Employee + Spouse     | \$22.20                                |
| Employee + Child(ren) | \$27.79                                |
| Employee + Family     | \$37.44                                |







## **Critical Illness Insurance**

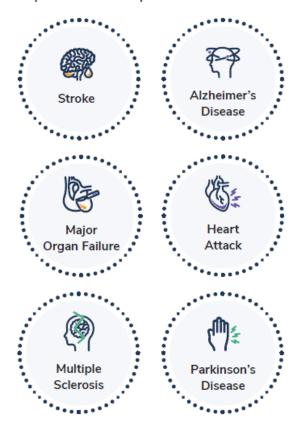
While medical insurance is vital, it doesn't cover everything. If you suffer from a serious illness, such as cancer, stroke or a heart attack, Medical insurance may not provide the coverage you need. Critical Illness insurance will ease the financial strain and help you focus on your recovery.

#### How Will a Critical Illness Claim Get Paid?

After purchasing Critical Illness insurance, if you suffer from one of the serious illnesses covered by your policy, you'll be paid in a lump sum. The payment will go directly to you instead of to a medical provider. The payment you receive can be used for many things including:

- Child care costs
- Medical and living expenses
- Travel expenses for you and your family
- Lost wages from missed time at work

#### **Examples of Covered Expenses**







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# Critical Illness Insurance

|          | Full-time Employees - Monthly Critical Illness Attained Age Rates per \$1,000 |             |  |
|----------|---|-------------|--|
| Age      | Employee & Child(ren) Rate  | Spouse Rate |  |
| Under 25 | \$0.42  | \$0.42      |  |
| 25–29    | \$0.50  | \$0.50      |  |
| 30–34    | \$0.57  | \$0.57      |  |
| 35–39    | \$0.66  | \$0.66      |  |
| 40-44    | \$0.82  | \$0.82      |  |
| 45-49    | \$1.10  | \$1.10      |  |
| 50-54    | \$1.41  | \$1.41      |  |
| 55-59    | \$1.86  | \$1.86      |  |
| 60-64    | \$2.68  | \$2.68      |  |
| 65-69    | \$3.60  | \$3.60      |  |
| 70-74    | \$5.14  | \$5.14      |  |
| 75-79    | \$7.00  | \$7.00      |  |
| 80-84    | \$9.14  | \$9.14      |  |
| 85+      | \$12.54   | \$12.54     |  |





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# Critical Illness Insurance

|          | Full-time Employees - Monthly Critical Illness Attained Age Costs<br>\$10,000 Employee and \$10,000 Spouse, \$50 Be Well Benefit |             |  |
|----------|--|-------------|--|
| Age      | Employee & Child(ren) Rate   | Spouse Rate |  |
| Under 25 | \$4.20   | \$4.20      |  |
| 25–29    | \$5.00   | \$5.00      |  |
| 30–34    | \$5.70   | \$5.70      |  |
| 35–39    | \$6.60   | \$6.60      |  |
| 40-44    | \$8.20   | \$8.20      |  |
| 45-49    | \$11.00  | \$11.00     |  |
| 50-54    | \$14.10  | \$14.10     |  |
| 55-59    | \$18.60  | \$18.60     |  |
| 60-64    | \$26.80  | \$26.80     |  |
| 65-69    | \$36.00  | \$36.00     |  |
| 70-74    | \$51.40  | \$51.40     |  |
| 75-79    | \$70.00  | \$70.00     |  |
| 80-84    | \$91.40  | \$91.40     |  |
| 85+      | \$125.40   | \$125.40    |  |





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# Critical Illness Insurance

|          | Full-time Employees - Monthly Critical Illness Attained Age Costs<br>\$20,000 Employee and \$20,000 Spouse, \$50 Be Well Benefit |             |  |
|----------|--|-------------|--|
| Age      | Employee & Child(ren) Rate   | Spouse Rate |  |
| Under 25 | \$8.40   | \$8.40      |  |
| 25–29    | \$10.00  | \$10.00     |  |
| 30–34    | \$11.40  | \$11.40     |  |
| 35–39    | \$13.20  | \$13.20     |  |
| 40–44    | \$16.40  | \$16.40     |  |
| 45-49    | \$22.00  | \$22.00     |  |
| 50-54    | \$28.20  | \$28.20     |  |
| 55-59    | \$37.20  | \$37.20     |  |
| 60-64    | \$53.60  | \$53.60     |  |
| 65-69    | \$72.00  | \$72.00     |  |
| 70-74    | \$102.80   | \$102.80    |  |
| 75-79    | \$140.00   | \$140.00    |  |
| 80-84    | \$182.80   | \$182.80    |  |
| 85+      | \$250.80   | \$250.80    |  |







## **Hospital Indemnity Insurance**

Hospital Indemnity insurance is a plan designed to pay for the costs of a hospital admission that may not be covered by other insurance. The plan covers employees who are admitted to a hospital or ICU for a covered sickness or injury. Even if your Medical insurance covers most of your hospitalization, you can still receive payments from your Hospital Indemnity insurance plan to cover extra expenses while you recover.

#### How Does Hospital Indemnity Insurance Work?

You pay monthly premiums for your Hospital Indemnity insurance plan. If you are admitted to the hospital for an injury or illness, your Hospital Indemnity plan makes cash payments to you. And with the payments going directly to you, you can use these emergency funds to pay for costs not covered by your Medical insurance, Medical insurance deductibles, copays and coinsurance, child care expenses while you are in the hospital or cost-of-living expenses as you recover.

#### **Examples of Covered Expenses**





# **Hospital Indemnity Insurance**



|                       | Full-Time Employees - Monthly Premiums |
|-----------------------|--|
| Employee Only         | \$17.44                                |
| Employee + Spouse     | \$35.39                                |
| Employee + Child(ren) | \$24.82                                |
| Employee + Family     | \$42.77                                |





# Learn more about your annual Be Well Benefit



# Your Unum plan pays a Be Well Benefit for one Be Well screening each year.

With the Unum Be Well Benefit, you and other covered family members can receive a valuable incentive for important tests and screenings. Many of these tests are routinely performed, so it's easy to take advantage of this benefit.

Your Critical Illness Insurance Be Well benefit is \$50. Your Accident Insurance Be Well benefit is \$50. Your Hospital Insurance Be Well benefit is \$50.

#### BE WELL SCREENINGS

- Annual exams by a physician including sports physicals and well-child visits, dental and vision exams
- · Cancer screenings including pap smear, colonoscopy
- Cardiovascular function screenings
- Cholesterol and diabetes screenings
- Imaging studies, including chest X-ray, mammography
- Immunizations including HPV, MMR, tetanus, influenza



#### HOW TO FILE A CLAIM

You can receive a benefit for tests that are performed after your initial coverage date.

#### Follow these steps:

Online: www.unum.com App: MyUnum for Members Phone: 1-800-635-5597

#### You will need to provide the following:

- First and last names of the employee and claimant (the employee might not be the claimant)
- Employee's Social Security number or policy number
- · Name and date of the test
- Name of physician and the facility where the test was performed.



Each year, you can earn a valuable incentive just for taking care of your health. And so can each of your covered family members.





# **Employee Contributions**

## Medical

Rates are per pay period

|                       | HDHP Low Plan | PPO Mid Plan | PPO High Plan |
|-----------------------|---------------|--------------|---------------|
| Employee Only         | \$9.38        | \$29.06      | \$47.26       |
| Employee + Spouse     | \$20.63       | \$63.93      | \$103.96      |
| Employee + Child(ren) | \$18.75       | \$58.11      | \$94.51       |
| Employee + Family     | \$28.13       | \$87.17      | \$141.77      |

## Dental

Rates are per pay period

|                       | DPPO Plan |  |  |  |  |
|-----------------------|-----------|--|--|--|--|
| Employee Only         | \$0.00    |  |  |  |  |
| Employee + Spouse     | \$6.44    |  |  |  |  |
| Employee + Child(ren) | \$6.44    |  |  |  |  |
| Employee + Family     | \$10.25   |  |  |  |  |





# **Employee Contributions**

# Vision

Rates are per pay period

|                       | Vision Plan |  |  |
|-----------------------|-------------|--|--|
| Employee Only         | \$0.00      |  |  |
| Employee + Spouse     | \$0.99      |  |  |
| Employee + Child(ren) | \$0.99      |  |  |
| Employee + Family     | \$1.58      |  |  |





# **Important Contacts**

| Coverage   | Contact        | Phone                                    | Website  |
|--|----------------|--|--|
| Medical  | Cigna          | 866-494-2111                             | www.mycigna.com                                |
| Dental   | MetLife        | 800-438-6388                             | www.metlife.com/insurance/<br>dental-insurance |
| Vision   | MetLife        | 800-438-6388                             | www.metlife.com/insurance/<br>vision-insurance |
| Basic Life, AD&D, LTD  | Unum           | 800-445-0402 (Life)<br>866-779-1054 (DI) | www.unum.com                                   |
| Voluntary Benefits (STD,<br>Accident, Critical Illness,<br>Hospital Indemnity) | Unum           | 800-635-5597                             | www.unum.com                                   |
| HSA  | Optum          | 866-234-8913                             | www.optumbank.com                              |
| 401(k)   | Empower        | 800-338-4015                             | www.empowermyretirement.com                    |
| HR Contact   | Nica Tahsequah | 714-575-3685                             | N/A  |





11/1 - 11/15

- This is an ACTIVE enrollment. Your participation is required.
- It's here your once-a-year opportunity to enroll or make changes to your benefits without experiencing a qualified life event (marriage/divorce, birth/adoption, job change, etc.).
- Choose carefully since elections you make will be in effect for the next plan year.
- To waive all benefits, please see the quick and easy online instructions below. Available 24/7.
- Be sure to review your benefit information before you enroll.

## Speak with a Benefit Coach by phone for

- Help with benefit decisions
- Password reset or login assistance
- Help enrolling in your benefits





**BEGINS** 

**ENDS** 

11/11 - 11/15



Weekdays, 9 am – 6 pm MT



## Be prepared with:

#### Dependents you want to enroll

- Name
- Social Security #
- Date of Birth

#### Beneficiaries for Life Insurance

- Name
- Date of Birth
- Relationship to you



#### **NEW** Unum Benefits!

- Voluntary Short Term Disability
- **Employer Paid Long Term Disability**

Don't forget these great benefits offered by Unum:

- Accident
- Critical Illness
- Hospital Indemnity



# Enroll online 24/7:

Note, this is the best & most convenient way to waive all benefits.



This summary highlights the main features of many of the benefit plans sponsored by Aeries Software. Full details of these plans are contained in the legal documents governing the plans. If there is any discrepancy between the plan documents and the information described here, the plan documents will govern. In all cases, the plan documents are the exclusive source for determining rights and benefits under the plans. Participation in the plans does not constitute an employment contract. Aeries Software reserves the right to modify, amend, or terminate any benefit plan or practice described in this summary. Nothing in this summary guarantees that any new plan provisions will continue in effect for any period of time. This summary serves as a Summary of Material Modifications (SMM) as required by the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

