

# BENEFITS SUMMARY

For Diagnostic Clinic Medical Group Non-Exempt & Exempt Employees





## GUIDEWELL

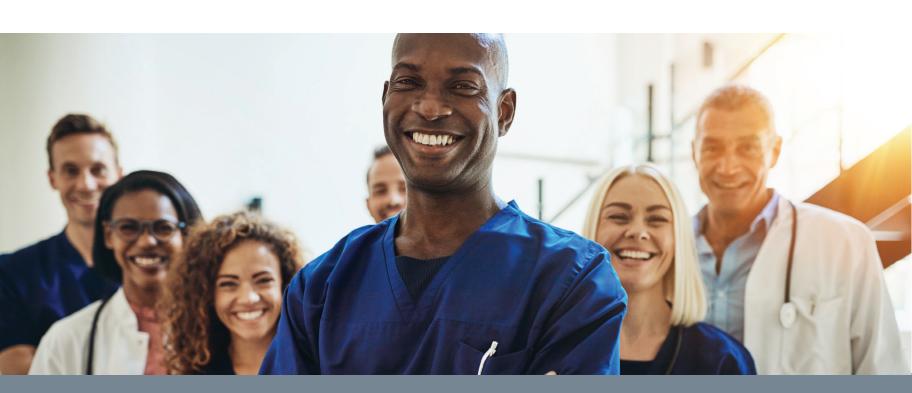
...and its family of forward-thinking companies are focused on our mission of helping people and communities achieve better health and are at the forefront in the transformation of health care.

GuideWell touches the lives of over 15 million healthcare consumers and we interact with organizations to fulfill our mission. We are committed to improving the cost, quality, and access to health care for our customer by applying our broad industry experience to reimagine and reshape the future of health.

When it comes to our benefits, we offer health plans, retirement benefits, competitive paid time off and much more. We design our offerings to take care of you—to help you be your best at work and in life.

We also offer programs and opportunities that matter most to employees and their families, like Well-Being incentives to reward healthy behaviors.

Join us in helping people and communities achieve better health.





## Florida Blue's Telemedicine Solution

Teladoc gives you convenient 24/7 year-round access to U.S. board certified doctors for general medicine, behavioral health services, and dermatology treatment.

- You can easily access this affordable care via the web, phone or mobile app.
- Members can be diagnosed, treated and prescribed medication during their visit.
- The employee cost share for Teladoc® services will be \$0 for all Florida Blue Employee Group medical plans—including the high-deductible (HSA compatible) plans.

## **Locating a Provider Outside of Florida**

Whether you are working or have relocated to another state, finding a medical, dental, or vision provider is made easy. Specific location searches are available using the Florida Blue or Florida Blue Dental websites to find a doctor or dentist near you.

## Health Plans

Choosing a health plan is a personal choice. You have choices between plans. High Deductible Health Plans (HDHP) can be accompanied with a Health Savings Account (HSA). Preferred Provider Organization (PPO) plans & Health Maintenance Organization (HMO) plans can be accompanied with an Excepted Benefit Health Reimbursement Arrangement (EBHRA) for any employer contributions and a Flexible Spending Account (FSA) for any employee contributions.

All plans include GEOBlue Travel health plan coverage that goes with you when you travel outside of the U.S. (at no additional cost).

Eligibility for health plan coverage begins the first of the month following hire date. Eligible dependents include spouse or qualified domestic partner (opposite or same sex) and their child(ren), child(ren) to age 26, child(ren) age 26 – 30 and disabled child(ren) who meet the plan criteria.

All health plans meet (or exceed) the ACA's requirements for the minimum level of benefits.

In addition to the premium rates noted on the following pages, a \$25 per-pay-period surcharge will apply to cover spouses or domestic partners who have access to other group health plans that offer minimum essential coverage – e.g., through the spouse's or domestic partner's job.

## Things to Consider:

- Review your health plan options
- Premiums, deductible, coinsurance and out-of-pocket limits
- Review the annual company contribution to your expense account (HSA or EBHRA), if any.
- Consider your potential Well-Being incentive.
- Weigh your options and your health plan needs



## High Deductible Health Plans

Our high deductible health plans (HDHPs) have lower premiums per pay period. These plans can be paired with a health savings account (HSA) to help you budget for out-of-pocket expenses and make your pretax dollars go further. An HSA is a great way to save toward future medical expenses.

The company will make annual contribution to your HSA in addition to your earned Well-Being dollars. You may also make contributions to your HSA. These contributions are not subject to

federal income, social security or Medicare taxes.

You own the account and can pay for eligible medical expenses with tax-free dollars, even if you no longer work for the company.

Listed below are the biweekly premiums for health plan coverage. The amount you pay is deducted from each biweekly paycheck throughout the year. Health plan premiums are tiered based on job level from non-exempt employees to senior leaders.

		Biweekly cost	
	Level	Non-exempt	Exempt
Employee Health Plans		Full-time (30+ hrs/wk)	<b>Full-time</b> (30+ hrs/wk)
BlueOptions 80/20 Coinsurance Plan  Plan 5192 (single, \$2,500 deductible)  Plan 5193 (family, \$5,000 deductible)	Employee	\$17	\$45
	+ Spouse/DP	\$35	\$87
	+ Child(ren)	\$31	\$79
	+ Family	\$54	\$133
	+ Over age Child	\$243	\$243
BlueOptions 90/10 Coinsurance Plan  Plan 5180 (single, \$1,600 deductible)  Plan 5181 (family, \$3,200 deductible)	Employee	\$102	\$144
	+ Spouse/DP	\$200	\$278
	+ Child(ren)	\$178	\$249
	+ Family	\$306	\$427
	+ Over age Child	\$305	\$305

#### **Annual Company contributions:**

- BlueOptions 5192 (single): up to \$1,625\*
- BlueOptions 5193 (family): up to \$2,250\*
- BlueOptions 5180 (single): up to \$1,375\*
- BlueOptions 5181 (family): up to \$1,750\*

This is a brief description of the plans offered through the employee benefit program. The benefits described here are subject to the provisions of the plan documents, corporate policies and certificates of coverage. This summary is for information only and should not be construed as an offer of employment.



<sup>\*</sup> Includes potential Well-Being dollars round to the nearest dollar. Family coverage for purposes of HSA contributions includes all coverage levels except "employee only" ("single").



## Health Savings Accounts (HSA)

An HSA is a great way to save toward future medical expenses. You own the account and can pay for eligible medical expenses with tax-free dollars. When paired with an HDHP, it gives you the benefit of lower premiums and a way to have more control over your health care spending. With an HSA, you have full access to your employer's contribution by mid-January. Your contribution will be deducted from your paycheck over 26 pay periods and added to the HSA each pay period.

Eligibility: Full- and part-time: First of month following hire date. Company pro-rates contributions based on effective date of benefits. Well-Being dollars earned in 2024 apply to 2025 HSA accounts. Employees enrolled in Medicare are not eligible to receive any company HSA contributions.

#### Maximum 2024 contributions:

- Single up to \$4,150 (including company + employee contributions)
- Family up to \$8,300 (including company + employee contributions)
- Age 55+ Can contribute an additional \$1,000

**Biweekly Cost:** No cost to employee, other than personal contributions to the HSA account made over 26 pay periods.

\*Family coverage for purposes of HSA contributions includes all coverage levels except "employee only" ("single").

**Rollover**: No rollover necessary. The employee and employer contributions are the employees to keep, even if the employee leaves the company.

#### **Prorated Employer Contributions**

## **BlueOptions 5192-93**

Company Contribution & Well-Being Dollars			
Start Date	Single	Family	
January 1	\$1,625.00	\$2,250.00	
February 1	\$1,497.92	\$2,070.83	
March 1	\$1,370.83	\$1,891.67	
April 1	\$1,218.75	\$1,687.50	
May 1	\$1,091.67	\$1,508.33	
June 1	\$964.58	\$1,329.17	
July 1	\$875.00	\$1,125.00	
August 1	\$685.42	\$945.83	
September 1	\$558.33	\$766.67	
October 1	\$406.25	\$562.50	
November 1	\$279.17	\$383.33	
December 1	\$152.08	\$204.17	

## **BlueOptions 5180-81**

Company Contribution & Well-Being Dollars		
Start Date	Single	Family
January 1	\$1,375.00	\$1,750.00
February 1	\$1,268.75	\$1,612.50
March 1	\$1,162.50	\$1,475.00
April 1	\$1,031.25	\$1,312.50
May 1	\$925.00	\$1,175.00
June 1	\$818.75	\$1,037.50
July 1	\$687.50	\$875.00
August 1	\$581.25	\$737.50
September 1	\$475.00	\$600.00
October 1	\$343.75	\$437.50
November 1	\$237.50	\$300.00
December 1	\$131.25	\$162.50

Note: Illustration is for newly hired employees. Existing employees' company contribution and Well-Being Incentive is based on actual Well-Being Incentive earned.

## Limited Purpose Flexible Spending Account (LPFSA)

Allows employees enrolled in a high deductible health plan with a Health Savings Account to use pre-tax dollars to pay for eligible dental and vision expenses. Maximum annual employee contribution is \$3,050. See details in Other Flexible Spending Accounts section of this brochure.

## Health Maintenance Organizations (HMO) Plans Preferred Provider Organization (PPO) Plans

Our health maintenance organization (HMO) plan provides first dollar coverage paired with higher premiums. Our flexible PPO plan offers a combination of first dollar coverage for common services and a higher deductible. These plans can be paired with an excepted benefit health reimbursement arrangement (EBHRA) and a flexible spending account (FSA) to cover out-of-pocket expenses.

The company will make annual contributions to your

EBHRA in addition to your earned Well-Being dollars. You may also make contributions to your FSA. These contributions are not subject to federal income, social security or Medicare taxes.

Listed below are the biweekly premiums for health plan coverage. The amount you pay is deducted from each biweekly paycheck throughout the year. Health plan premiums are tiered based on job level from nonexempt employees to senior leaders.

		Biweekly cost		
		Non-exempt	Exempt	
Employee Health Plans	Level	Full-time (30+ hrs/wk)	Full-time (30+ hrs/wk)	
	Employee	\$61	\$76	
BlueOptions 5906 Plan	+ Spouse/DP	\$118	\$148	
Deductible of \$2,500/\$5,000 applies to	+ Child(ren)	\$106	\$134	
hospitalization and select services; copays only for many other services.	+ Family	\$181	\$227	
	+ Over age Child	\$289	\$289	
PluoCoro	Employee	\$158	\$188	
BlueCare HMO 59 Plan Deductible of \$1,000/\$2,000 applies to hospitalization and select services; copays only for many other services.	+ Spouse/DP	\$306	\$364	
	+ Child(ren)	\$278	\$331	
	+ Family	\$470	\$558	
	+ Over age Child	\$357	\$357	
Teoli	Employee	\$26	\$66	
Truli HMO C2064 Deductible of \$2,800/\$5,600 applies to hospitalization and select services; copays only for many other services.	+ Spouse/DP	\$95	\$128	
	+ Child(ren)	\$86	\$116	
	+ Family	\$146	\$196	
	+ Over age Child	\$257	\$257	

HMO plans are available to employees residing in Florida.

Truli plans have limited availability based on zip code.

#### **Annual Company contributions:**

- PPO 5906 (single): up to \$1,325\*
- PPO 5906 (family): up to \$1,625\*
- HMO 59 & Truli C2064 (single): up to \$1,000\*
- HMO 59 & Truli C2064 (family): up to \$1,000\*

This is a brief description of the plans offered through the employee benefit program. The benefits described here are subject to the provisions of the plan documents, corporate policies and certificates of coverage. This summary is for information only and should not be construed as an offer of employment.

<sup>\*</sup> Includes potential Well-Being dollars round to the nearest dollar. Family coverage for purposes of EBHRA contributions includes all coverage levels except "employee only" ("single").



## Excepted Benefits Health Reimbursement Arrangements (EBHRA)

## **Health Care EBHRA Accounts (Employer Funded)**

An EBHRA is an employer-owned benefit that enables the company to make contributions with pre-tax dollars for you to pay for qualified medical expenses, regardless of whether or not you elect to participate in your employer's health plan. You can be enrolled in an PPO or HMO health plan to set up an account. With an EBHRA, you have full access to the employer contribution mid-January. You can also make employee contributions to the FSA plan described on the following page.

**Eligibility**: First of month following hire date. Company pro-rates contributions based on effective date of benefits. Well-Being dollars earned in 2024 apply to 2025 FSA accounts. **Biweekly Cost:** No cost to you, must enroll in the plan to participate.

**Rollover:** Up to \$610 can now rollover into the next benefit year. However, the remaining balance – is forfeited if expenses are not incurred during the plan year ("use it or lose it").

\*Family coverage for purposes of EBHRA contributions includes all coverage levels except "employee only" ("single").

#### **Prorated Employer Contributions**

#### **EBHRA Compatible Plans**

#### **PPO 5906**

Company Contribution & Well-Being Dollars			
Start Date	Single	Family	
January 1	\$1,325.00	\$1,625.00	
February 1	\$1,222.92	\$1,497.92	
March 1	\$1,120.83	\$1,370.83	
April 1	\$993.75	\$1,218.75	
May 1	\$891.67	\$1,091.67	
June 1	\$789.58	\$964.58	
July 1	\$662.50	\$812.50	
August 1	\$560.42	\$685.42	
September 1	\$458.33	\$558.33	
October 1	\$331.25	\$406.25	
November 1	\$229.17	\$279.17	
December 1	\$127.08	\$152.08	

## HMO 59 and Truli C2064

	Company Contribution & Well-Being Dollars		
Start Date	Single	Family	
January 1	\$1,000.00	\$1,000.00	
February 1	\$925.00	\$925.00	
March 1	\$850.00	\$850.00	
April 1	\$750.00	\$750.00	
May 1	\$675.00	\$675.00	
June 1	\$600.00	\$600.00	
July 1	\$500.00	\$500.00	
August 1	\$425.00	\$425.00	
September 1	\$350.00	\$350.00	
October 1	\$250.00	\$250.00	
November 1	\$175.00	\$175.00	
December 1	\$100.00	\$100.00	

Note: Illustration is for newly hired employees. Existing employees' company contribution and Well-Being Incentive is based on actual Well-Being Incentive earned.

## Health Care Flexible Spending Accounts (FSA)

## **Health Care FSA Accounts (Employee Funded)**

An FSA is an employer owned benefit that enables you to save pre-tax dollars to pay for your qualified medical expenses, regardless of whether or not you elect to participate in your employer's health plan. You can be enrolled in an PPO or HMO health plan to set up an account.

With an FSA, you have full access to your own annual contribution pledge by mid-January of the plan. Your contribution will be deducted from your paycheck over 26 pay periods.

Eligibility: First of month following hire date

Maximum 2024 contributions: \$3,050.

**Biweekly Cost:** Must enroll in the plan and contribute at least \$1 to the account to participate.

**Rollover**: Up to \$610 can now rollover into the next benefit year. However, the remaining balance is forfeited if expenses are not incurred during the plan year ("use it or lose it").

## Other Flexible Spending Accounts

## Limited Purpose Flexible Spending Account (LPFSA)

Allows employees enrolled in a high deductible health plan with a Health Savings Account to use pre-tax dollars to pay for eligible dental and vision expenses.

- Funded with pre-tax dollars, so employees can maximize their tax and savings benefits
- A health spending account that can only be used for eligible dental and vision expenses as determined by the IRS
- Annual contribution Limit an employee can make is \$3,050 in 2023
- Access your entire annual contribution amount by mid-January the plan year
- Unlike regular FSAs, employees can contribute to a LPFSA while contributing to an HSA
- To establish an LPFSA, you cannot be enrolled in an FSA in the same year or carry over a portion of your FSA into the next plan year

## **Dependent Care Flexible Spending Account**

These accounts provide additional pretax savings and can be used for qualified dependent care expenses, such as day care, babysitter costs, and before- and after-school programs.

**Company contributions:** If you are not already receiving a contribution toward the HSA or Health Care FSA, you can receive the following match:

**Non-exempt:** \$1 for \$1 up to \$500

**Exempt:** \$0.50 for \$1, up to \$500

**Biweekly Cost:** You must contribute a minimum of \$1 in the account to participate. You can only be reimbursed for funds actually on deposit in your Dependent Care FSA.

**Eligibility:** Full- and part-time employees are eligible the first of month following hire date.



## **Employee Well-Being Incentive**

With our Well-Being incentive program, you can earn up to \$1,000 deposited in an HSA or EBHRA (based on health plan). Well-Being points are earned in the current year for the succeeding year's HSA or EBHRA.

**Eligibility:** Full and part-time employees are eligible to participate in the Well-Being Program.

Cost: This benefit is fully paid by the company with

no cost to employees. Three requirements must be met to earn the full incentive:

- 1. Complete the annual Well-Being profile within the designated timeframe.
- 2. Earn points through designated Well-Being improvement activities.
- 3. Enroll in the HSA or EBHRA each year to have company dollars deposited into your account.



## **Dental Plans**

Taking good care of yourself includes having healthy teeth and gums. Our BlueDental Choice plans provide the benefits you need to make it easier to stay healthy.

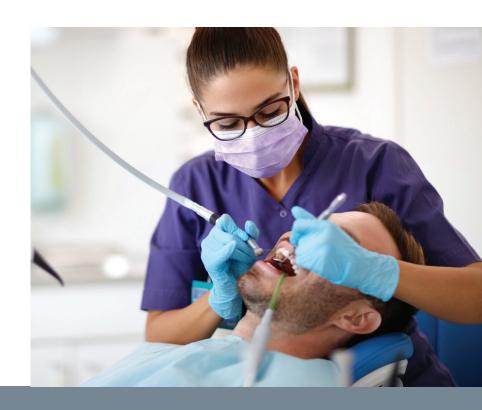
Employee Dental Plans	Level	<b>Full-time</b> (30+ hrs/wk)
BlueDental Choice	Employee	\$8.78
<ul> <li>Signature PPO</li> <li>Offers the highest coverage for preventive, major and</li> </ul>	+ Spouse/DP	\$17.66
orthodontic care	+ Child(ren)	\$19.27
<ul> <li>Deductible: \$50 per person up to \$150 max per family (for all covered)</li> </ul>	+ Family	\$28.23
Annual maximum benefit per person: \$2,500	+ Over age Child	\$20.97
BlueDental Choice	Employee	\$5.77
Value PPO	+ Spouse/DP	\$11.60
<ul> <li>Offers medium coverage for preventive, major and orthodontic care</li> </ul>	+ Child(ren)	\$12.66
<ul> <li>Deductible: \$75 per person up to \$225 max per family (for all covered)</li> </ul>	+ Family	\$18.55
Annual maximum benefit per person: \$1,500	+ Over age Child	\$13.79
Plus Pontal Chaica	Employee	\$3.22
BlueDental Choice Basic PPO	+ Spouse/DP	\$6.46
<ul> <li>Covers preventive and major care at the lowest per-pay-period cost</li> </ul>	+ Child(ren)	\$7.05
Deductible: \$0 per person	+ Family	\$10.33
Annual maximum benefit per person: \$1,000	+ Over age Child	\$7.66

Eligibility: First of month following hire date.

Eligible dependents:

- Spouse or qualified domestic partner (opposite or same-sex)
- Child(ren)\* to age 26 (see rates for "+ Children")
- Child(ren) \*age 26 30 (see rates for "+ Over age Child")
- Disabled child(ren)\* who meet plan criteria

Dependents must be enrolled in the same dental plan(s) that you are enrolled in to be covered.



<sup>\*</sup>Includes spouse or domestic partner children.

## **Vision Plans**

Our vision plans can keep your eyesight sharp with annual eye exams, prescription eyeglasses and contact lenses.

Employee Vision Plans	Level	Full-time & Part-time (20+ hrs/week)
	Employee	\$3.23
BlueVision	+ Spouse/DP	\$6.00
Plan 2	+ Child(ren)	\$6.46
Offers comprehensive eye care benefits at the lowest per-pay-period cost.	+ Family	\$9.69
	+ Over age Child	\$3.23
	Employee	\$4.15
BlueVision	+ Spouse/DP	\$6.92
Plan 4 Offers comprehensive eye care benefits at a mid-level	+ Child(ren)	\$7.38
per-pay-period cost.	+ Family	\$11.54
	+ Over age Child	\$3.23
	Employee	\$5.54
BlueVision	+ Spouse/DP	\$9.69
Plan 6 Offers comprehensive eye care benefits at the highest	+ Child(ren)	\$10.15
per-pay-period cost.	+ Family	\$16.15
	+ Over age Child	\$4.62

Eligibility: First of month following hire date.

Eligible dependents:

- Spouse or qualified domestic partner (opposite or same-sex)
- Child(ren)\* to age 26 (see rates for "+ Children")
- Child(ren)\* age 26 30 (see rates for "+ Over age Child")
- Disabled child(ren) who meet plan criteria (includes spouses or domestic partner children

Dependents must be enrolled in the same vision plan(s) that you are enrolled in to be covered.

Vision plan coverage is employee-paid; only one set of rates applies, regardless of full- or part-time status.

\*Includes spouse or domestic partner children.



## **Time Off Benefits**

#### **Paid Time Off**

Use time away for vacation, sickness, family illness or other personal reasons. First year accrual for newly hired employees:

- Exempt: six days PTO available at hire with accrual change to 11 days for a total of 17 days in first year
- Non-Exempt: six days PTO available after 90 days/480 hours with accrual change to 11 days for a total of 17 days in first year.

Two PTO Cash-out periods are offered (Spring and Fall)

**Biweekly cost:** There is no cost to employees. Time accrued is based on years of service and is pro-rated based on hours worked. The following PTO schedule is based on an employee working 80 hours biweekly.

**New hires:** New hires receive six days front-loaded to their accounts: these days count toward the annual accrual.

None-exempt/Exempt Plan		
Years of Service	Days	
0-1	17	
1-4	17	
5 — 9	20	
10 — 14	23	
15 — 19	26	
20 — 24	29	
25+	31	

#### **Company Holidays** (six designated and one flexible Well-Being day)

Designated holidays include the following – some business areas may observe alternate dates:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving holiday (two days)
- Christmas holiday

 Flexible Well-Being day may be taken anytime during the calendar year with manager approval.





## **Retirement Benefits**

## 401(k) Retirement Savings Plan

Investing in a 401k retirement plan is a great way to save for the future. You not only get the benefit of making tax-free contributions, but you also can get employer matching contributions—it's like getting free money!

## There are two types of contributions:

- 1. Employee contributions (up to \$22,500 in 2023 plus an over-50 catch- up of \$7,500.)
- 2. Matching company contributions (max of 4% on employee's 5% contribution)

**Biweekly cost:** Employees can choose to have individual contributions made either on a pre-tax or ROTH basis.

**Eligibility:** Day one of service for employee and company matching contributions.

## **Income Protection**

## **Short-term Disability**

Short-term disability provides salary continuation of 70% of pay, as defined by program guidelines.

**Biweekly Cost:** There is no cost to employees; this is a company paid benefit.

**Eligibility:** Full- and part-time employees are eligible after three months of active employment.

## **Long-term Disability**

Long-term disability provides income protection of 60% of your annual base salary.

**Biweekly Cost:** Employee can choose company paid or employee paid benefit.

**Eligibility:** Full- and part-time employees are eligible after 12 months of service. Part-time employees must have a minimum work schedule of 25+ hrs/wk to qualify.





## Leave Benefits

#### **Leaves of Absence**

Various leave plans to provide additional support:

- Family Medical Leave of Absence (up to 12 weeks of time for family members, as defined by policy)
- General Unpaid Leave of Absence
- Seasonal Leave (for certain jobs)
- Military Leave
- Jury Duty

Biweekly cost: No cost to the employee;

company-paid benefit.

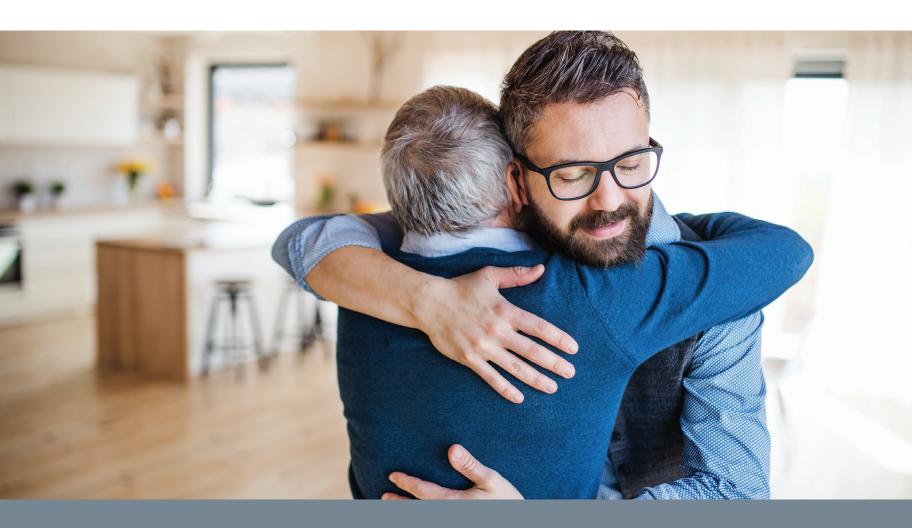
Eligibility: Varies by program

#### **Bereavement Leave**

Up to five days of paid time away for the loss of an immediate family member as defined by policy.

**Biweekly cost:** No cost to the employee; company-paid benefit.

Eligibility: After 90 days of employment.



## Life Insurance Benefits

#### **Company Paid Life Insurance Benefits**

The company pays for basic life insurance and accidental death and dismemberment income protection. Coverage amounts are based on your employee status, and the benefit is paid to your beneficiary in the event of your death:

 Full-time benefit (30+ hrs/week): Amount of the employee's base salary plus annual incentive or commissions (up to \$1.5 million)

**Biweekly cost:** No cost to the employee; company-paid benefit

**Eligibility:** Full-time employees are eligible the first of month after hire date.

## **Supplemental Life Insurance Benefit**

Additional voluntary protection is available.

Premiums are based on your age and coverage amounts, and smoker and nonsmoker rates apply.

The benefit is paid to your beneficiary in the event of your death:

• Employees can purchase coverage up to six times their earnings (for a combined maximum of \$3 million including Basic Life)

**Biweekly cost:** Rates are based on your age; a non-smoker's discount of 20% applies. Premiums are deducted from your biweekly pay.

**Eligibility:** Full-time employees are eligible the first of month following a 90-day waiting period. Other restrictions may apply.

#### **Dependent Life Insurance Benefit**

This optional insurance covers eligible dependents. You pay the premiums based on the coverage amounts and the benefit is paid to you in the event of the death of your eligible covered dependent(s).

Spouse Life: \$25,000 - \$250,000

• Child Life: \$5,000 - \$25,000

**Biweekly cost:** Rates for your spouse are based on coverage level, age of your spouse and smoker status.

**Eligibility:** Full-time employees are eligible the first of month following a 90-day waiting period. Other restrictions may apply.





## Additional Benefits Programs

#### **Work-Life Balance Programs**

Includes various programs to help employees manage their professional and personal lives:

- Employee Assistance Program helps employees and their families resolve issues, including marital/family concerns, financial problems, substance abuse issues and more.
- Back-up Child, Adult and Elder Care services through Bright Horizons.

**Biweekly cost:** Programs are offered at discounted rates or at no cost to employees.

Eligibility: First of month following hire date.

## **Adoption Program**

Provides expense reimbursement for adoptions that fall within plan guidelines:

#### **Adoption Expenses**

Reimburses up to \$10,000 for eligible adoption expenses per child.

Biweekly cost: No cost to employees.

Eligibility: After three months of active employment.

#### **Illness and Accident Plans**

Three plans are available through USAble to offset financial losses due to certain health issues or accidents:

- AccidentElite
- CriticalCare Elite
- Hospital Confinement Plan

**Biweekly cost:** Employee-paid plan based on coverage level selected.

**Eligibility:** First of month following hire date.

#### **Legal Insurance**

Legal assistance for common issues such as real estate transactions, tax issues, traffic violations and wills/estate planning.

**Biweekly cost:** Employee-paid plan based on coverage level selected.

Eligibility: First of month following hire date.

#### **Identification Theft Protection**

Proactive, holistic cyber protection that empowers an individual and family with the knowledge and tools necessary to take swift action against cyberthreats. Cyber wellness amplifies other benefits to enable employees to achieve total wellbeing.

**Biweekly cost:** Employee-paid plan based on coverage level selected.

Eligibility: First of month following hire date.



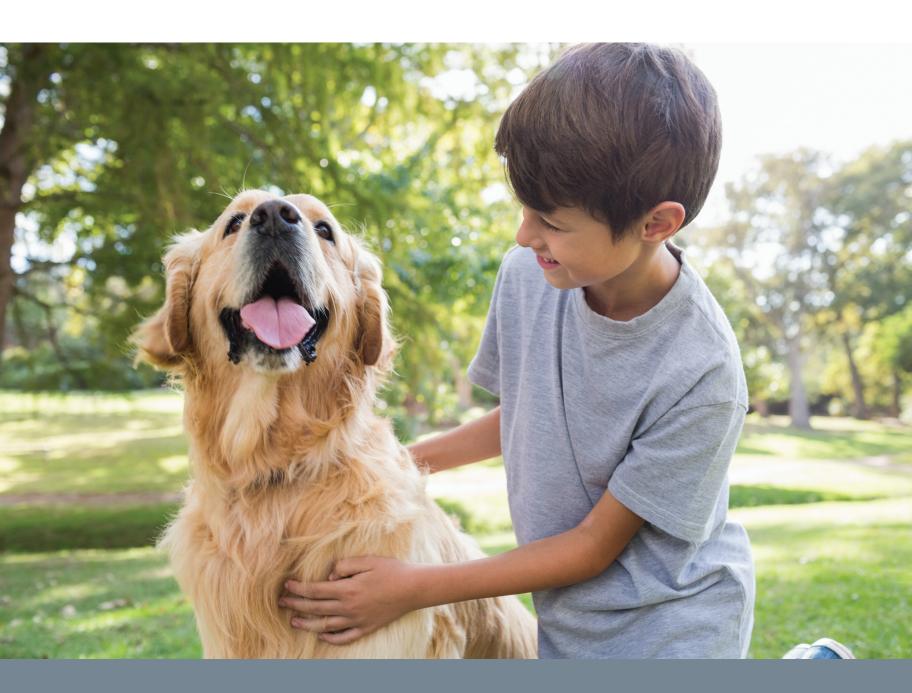
## Additional Benefits Programs

## **Pet Insurance**

Insurance offered through SPOT, a top pet insurance provider. Individual policies with choice of coinsurance and deductible.

**Plan cost:** Employee-paid plan based on coverage level selected.

Eligibility: First of month following hire date.



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