



Benefits at Whole Foods Market



Candidate name: _____

Position: _____

At Whole Foods Market (WFM), we value the health and wellbeing of every Team Member and their families. That's why we're committed to offering comprehensive, customizable and cost-effective benefits.

Explore this brochure to learn about WFM's benefits and discover how you can tailor them to your lifestyle and financial needs.

Eligibility

In general, you are eligible for benefits coverage on the first of the month following 60 days of employment at WFM if you are classified as full-time and regularly work 30 or more hours per week. The 60 day period is waived if you were previously employed by Amazon and are transitioning as part of the company-wide 2022 Transition.

Eligible dependents include spouse, domestic partner, and child(ren) up to age 26.

Medical and Prescription Drugs

WFM offers a choice of medical plans and carriers to meet the needs of our workforce.

- The **Consumer Driven Health Plan (CDHP)** through Blue Cross Blue Shield of Texas (BCBSTX) with a national network of providers and prescription drug coverage through CVS Caremark
- The **Whole Health Plan (WHP)**, with a Preferred Tier local network of providers through Employers Health Network (EHN)*, an Expanded Tier national network of providers through Aetna Signature Administrators (ASA), and in-network prescription drug coverage. The WHP is available in the Austin, Los Angeles, New York Metro, Dallas-Forth Worth, Houston, Seattle, San Diego and Phoenix/Tuscon markets.

Eligibility for the medical plans is determined by your home ZIP code.

When you enroll in the CDHP or WHP, you have the choice of two Health Care Funding Accounts – the Health Savings Account (HSA) or Personal Wellness Account (PWA) – to pair with your medical coverage.

**For New York Metro area residents, the Preferred Tier network is provided by Northwell Direct.*

How the CDHP Works

With the CDHP through BCBSTX, you have the flexibility to see any provider you choose – even providers outside of the BCBSTX network. No referrals are required! When you enroll, you'll also receive prescription drug benefits through CVS Caremark.

- **In-Network:** Access a national network of high-quality, vetted providers, clinics and hospitals through BCBSTX.
- **Out-of-Network:** The CDHP provides a benefit for services received from out-of-network providers. Remember, you generally pay less for in-network services.



The following table shows how much you will pay for common medical and prescription drug expenses under the CDHP.

Consumer Driven Health Plan (CDHP) with HSA or PWA		
Plan Feature	In-Network	Out-of-Network
HSA or PWA Funding	Up to \$1,300 Individual Up to \$1,800 Family (includes all other coverage tiers)	
Annual Deductible		
• Individual	\$3,750	\$7,500
• Family	\$5,250	\$10,500
Out-of-Pocket Maximum		
• Individual	\$6,650	\$13,300
• Family	\$13,300	\$26,200
You pay:		
Preventive Care	\$0 not subject to deductible	60% after deductible
Office Visits (PCP/Specialist)	25% after deductible	60% after deductible
Urgent Care Visits	25% after deductible	60% after deductible
Lab Services (X-ray, blood work)	25% after deductible	60% after deductible
Inpatient Hospital Services	25% after deductible	60% after deductible
Outpatient Hospital Services	25% after deductible	60% after deductible
Emergency Room Care	25% after deductible	25% after deductible



How the Whole Health Plan Works

With the Whole Health Plan, you have access to three tiers of in-network care, each with access to high-quality, vetted care providers:

- **WFM Medical and Wellness Centers:** Access a supportive community of board-certified primary care providers at the WFM Medical and Wellness Center.
- **Preferred Network:** Access a curated network of recognized local providers, clinics, and hospitals that have partnered with us to offer services at an even greater benefit through Employers Health Network (EHN), administered by WebTPA.
- **Expanded Network:** Access a national network of providers, clinics and hospitals through Aetna (Aetna Signature Administrators) to receive care at the standard benefit level, administered by WebTPA.

The following table shows how much you will pay for common medical expenses under the Whole Health Plan.

Plan Feature	Preferred Medical and Wellness Providers	Whole Health Plan with HSA or PWA		
		In-Network		Out-of-Network
		Preferred Tier	Expanded Tier	
HSA or PWA Funding		Up to \$1,300 Individual Up to \$1,800 Family (includes all other coverage tiers)		
Annual Deductible • Individual • Family	\$0 (PWA only)	\$1,875 \$2,800 (HSA) / \$2,125 (PWA)	\$3,750 \$5,250	\$7,500 \$10,500
Out-of-Pocket Maximum • Individual • Family	\$0 (PWA only)	\$3,325 \$6,650	\$6,650 \$13,300	\$13,300 \$26,200
You Pay				
Preventive Care	\$0, not subject to deductible	\$0, not subject to deductible	\$0 not subject to deductible	60% after deductible
Office Visits (PCP/Specialist)	PCP: \$0 (PWA only)* Specialist: N/A	25% after deductible	25% after deductible	60% after deductible
Urgent Care Visits**	25%*	25% after deductible	25% after deductible	60% after deductible
Lab Services (X-ray, blood work)	25%*	25% after deductible	25% after deductible	60% after deductible
Inpatient Hospital Services	N/A	25% after deductible	25% after deductible	60% after deductible
Outpatient Hospital Services	N/A	25% after deductible	25% after deductible	60% after deductible
Emergency Room Care	N/A	25% after deductible	25% after deductible	25% after deductible

*If you elect the HSA, this care is subject to the Preferred Tier deductible. If you elect the PWA, this care is not subject to the deductible.

**PWA members have access to virtual primary and urgent care through Amazon Care at no cost; HSA members may be subject to the deductible.

***Annual Deductible and Out-of-Pocket Maximum amounts under a WFM medical plan will not be adjusted for any expense you may have paid under any non-WFM medical plan.

Health Care Funding Accounts

The HSA and PWA are Company-funded accounts and can help you pay for health care expenses for yourself and your eligible dependents.

WFM contributes:

- \$1,300 if you enroll in individual coverage
- \$1,800 if you enroll in family coverage

Contributions are typically made on a semi-annual basis; the amount you receive is prorated based on your benefit effective date.

In addition, if you chose the HSA, you'll also be able to contribute to your account, up to the annual IRS maximum less WFM's contribution and any HSA contribution you may have made or received under any non-WFM medical plan in the same year.



Dental Plan Options

You may choose from three dental plan options all provided by Cigna Dental: the Low Plan, the High Plan and the Dental Health Maintenance Organization (DHMO) Plan (available in select locations).

Note: You are eligible for the DHMO if there is a DHMO provider within 10 miles of your home ZIP code.

See what you pay for common services in the table below.

Plan Feature	DHMO	Low Plan	High Plan
	In-Network Only	In- and Out-of-Network	
Annual Deductible (does not apply to preventive and diagnostic services)	None	\$50 per person	\$50 individual/ \$150 family
Preventive and Diagnostic (Exams, cleanings, X-rays, space maintainers, fluoride*, sealants*)	You pay \$0 (100% covered)	You pay \$0 (100% covered)	You pay \$0 (100% covered)
Basic Restorative (Fillings, extractions, root canals and pulp therapy, treatment of gum and mouth tissue disease)	Copays vary by procedure (\$12 – \$460)	You pay 20% after deductible	You pay 20% after deductible
Major Restorative (Inlays, crowns, fixed/removable bridges, full or partial dentures)	Copays vary by procedure (\$335 – \$875)	You pay 50% after deductible	You pay 50% after deductible
Orthodontia	24-month treatment fees**: Children to age 19: \$2,184 Adults: \$2,904	Not covered	You pay 50% after deductible Lifetime Orthodontia Maximum: \$1,200
Annual Maximum (Does not apply to preventive and diagnostic services)	None	\$1,000 per person	\$1,500 per person

*Fluoride is limited to members who are less than 19 years old, and sealants are limited to members who are less than 14 years old.

**Cases beyond 24 months require additional payments.

***Annual Deductible and Out-of-Pocket Maximum amounts under a WFM dental plan will not be adjusted for any expense you may have paid under any non-WFM dental plan.

Vision Plan

You may enroll in vision coverage through Vision Service Plan (VSP), which helps cover the cost of regular eye exams and other vision care expenses.

See what you pay for common services in the table below.

Plan Feature	In-Network	Out-of-Network
Exam (Once every calendar year)	\$10 copay	Plan pays up to \$45
Materials Copay (applies to lenses and frames)	\$10 copay	\$10 copay
Lenses* (Once every calendar year) <ul style="list-style-type: none"> • Single vision • Bifocal • Trifocal 	\$0 copay	<ul style="list-style-type: none"> • Plan pays up to \$30 • Plan pays up to \$50 • Plan pays up to \$65
Lens Enhancements <ul style="list-style-type: none"> • UV lens coating • Tints/Photochromic adaptive lenses • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses 	\$0 copay \$0 copay \$0 copay \$95 – \$105 copay \$150 – \$175 copay	<ul style="list-style-type: none"> • Not covered • Plan pays up to \$5 • Plan pays up to \$50 • Plan pays up to \$50 • Plan pays up to \$50
Frames (Once every calendar year) <ul style="list-style-type: none"> • Retail allowance • Discount over allowance 	\$200 allowance 20% off amount over allowance	Plan pays up to \$70
Contact Lenses* <ul style="list-style-type: none"> • Lenses • Exam 	\$200 allowance Up to \$60 copay	Plan pays up to \$105

*The vision plan covers either lenses with frames or contact lenses, but not both. If you choose to switch to eyeglasses, they are covered during the next calendar year.

**Annual Deductible and Annual Maximum amounts under a WFM vision plan will not be adjusted for any expense you may have paid under any non-WFM vision plan

Income Protection Benefits

Your income protection benefits include life and accidental death and dismemberment, or AD&D, insurance, as well as disability coverage.

Life and AD&D Insurance (Basic and Voluntary)

Life insurance provides a lump sum of money to your beneficiaries if you die, while AD&D insurance provides a lump sum payment if you are dismembered or should die as the direct result of an accident.

WFM offers Voluntary Life Insurance for Team Members and their eligible dependents; this coverage is fully paid for by the Team Member.

- **Team Member Voluntary Life Insurance:** 1x – 5x your annual earnings, up to a maximum of \$750,000. Amounts greater than \$500,000 require evidence of insurability (EOI).
- **Spouse/Domestic Partner Life Insurance:** 50% of Team Member Voluntary Life Insurance coverage amount. Coverage may be subject to EOI.
- **Chil(dren) and Domestic Partner Child(ren) Life Insurance:** \$10,000

When you elect any amount of Team Member Voluntary Life Insurance, you'll automatically receive Company-paid Basic Life and AD&D insurance of 1x your annual earnings, up to \$300,000.

Team Members who enroll in Voluntary Life Insurance automatically receive AD&D coverage at no additional cost. The AD&D coverage is equal to the combined coverage amount of the Team Member Basic Life Insurance and Team Member Voluntary Life Insurance.

Note: You must elect Team Member Voluntary Life Insurance in order to elect spouse/domestic partner and/or child(ren) life insurance.

Short-Term Disability

You have the option to purchase Short-Term Disability (STD) coverage, which provides income replacement of 60% of your base weekly earnings, up to a maximum of \$1,500 per week, for up to 25 weeks.

WFM pays for half the cost of coverage.

Long-Term Disability

You have the option to purchase Long-Term Disability (LTD) coverage, which provides income replacement of 60% of your salary, up to a maximum of \$10,000 per month.

WFM pays for half the cost of coverage.

Retirement Benefits

To help you save for retirement, Team Members who are age 18 or older are immediately eligible to participate in the 401(k) Plan administered by Fidelity Investments. You can contribute on a pre-tax and/or Roth after-tax basis up to the annual IRS limit, as well as additional catch-up contributions if you are age 50 or older. For Team Members who contribute and are employed on December 31, WFM helps your savings grow by making an annual discretionary contribution.

*If you were a participant in the Amazon 401(k) Plan prior to joining WFM, you generally will be able to continue to earn years of service for vesting purposes in the Amazon 401(k) Plan.

Other Benefits

WFM provides more than just your compensation, welfare and retirement benefits. We offer many other benefits and programs to round out our total rewards program.

Time Off

WFM gives you time away from work to rest and recharge. You accumulate Paid Time Off (PTO) based on your job level and actual hours worked. Your annual PTO increases as you accrue service hours. PTO may be used for vacation, holidays, and other types of time off like bereavement.

In addition, WFM offers five floating holidays to salaried Team Members to use without restriction.

Your PTO Hours Upon Hire

In the chart below, you may review the total PTO hours accrued per 2,000 hours of service. PTO is credited on a per-pay period basis.

Service Hours	Annual PTO Accrual
1 – 2,000	86
2,001 – 8,000	124
8,001 – 18,000	154
18,001 – 28,000	192
28,001 – 40,000	232

Ask your recruiter to confirm the number of service hours you will be granted upon hire. Then, use the table above to determine your annual PTO accrual. For your records, enter the corresponding annual PTO accrual here: _____

Paid Parental Leave

WFM provides eligible Team Members with **six weeks of fully paid parental leave**, so you can focus on spending time with your new birth or adopted child.

To be eligible for parental leave, you must have completed 4,000 actual service hours with WFM at the time of the birth or adoption. Birth and non-birth parents, including adopting parents, are eligible for WFM paid parental leave following the date you become a new parent through a birth or adoption..

Accident and Critical Illness Insurance

You may elect accident insurance and/or critical illness insurance that provide additional financial protection. Each benefit provides a lump-sum benefit you may use for unexpected health care and everyday expenses, like rent or groceries.

Auto and Home Insurance

This voluntary benefit provides you with access to special discounts on insurance policies for your auto, home and other items such as boat, RV and rental insurance.

Store Discount and Healthy Discount

All Team Members receive a 20% store discount. You can increase your store discount to as high as 30% by meeting a series of biometric criteria. All Team Members are eligible for Healthy Discounts after 800 service hours. After completing 4,000 service hours, WFM pays the cost of one biometric screening every two years.

Healthy Retreats

Our Healthy Retreats Program provides the knowledge, tools and support you need to create and sustain healthy lifestyle changes. WFM covers certain transportation and program costs for Team Members and their eligible spouses/domestic partners. Regular, full-time Team Members who have completed one year of service and have not had a corrective action within the previous six months are eligible to participate.

Team Member Assistance Plan

The confidential Team Member Assistance Plan (TMAP), provided through New Directions, can help you achieve a better work-life balance with free, unlimited phone consultations and up to seven short-term, face-to-face sessions per concern.

