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2022

BENEFITS eGUIDE

January 1, 2022 through December 31, 2022

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Welcome

Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

Eligibility

Full Time Employees: 30 hours per week for all benefits listed in this brochure Part Time Employees: 20+ hours per week are eligible for Voluntary Benefits. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- ▶ Your legally married spouse
- ▶ Your domestic partner (DP) and/or his/her children, where applicable by state law
- ▶ Your children who are your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

When Coverage Begins

- ▶ **New Hires:** You must complete the enrollment process within 30 days of your date of hire. If you enroll on time, coverage is effective on the first of the month following 30 days of employment.
- ▶ If you fail to enroll on time, you will **NOT** have benefits coverage (except for company-paid benefits).
- ▶ **Open Enrollment:** Changes made during Open Enrollment are effective January 1, 2022 through December 31, 2022.

Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- ▶ Marriage or divorce
- ▶ Birth or adoption of a child
- ▶ Child reaching the maximum age limit
- ▶ Death of a spouse, DP, or child
- ▶ You lose coverage under your spouse's/DP's plan
- ▶ You gain access to state coverage under Medicaid or CHIP

Making Changes

To make changes to your benefit elections, you must contact Human Resources within 30 days of the qualified life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

Required Information—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

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Enrollment

Call 888-598-2040 for one on one assistance.

OR

Go to <https://workforcenow.adp.com/public/index.html> or use the ADP Mobile App to enroll.

Medical

We are proud to offer you a choice of three different medical plans that provide comprehensive medical and prescription drug coverage. The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

Cigna PPO

These plans give you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna network. The calendar-year deductible must be met before certain services are covered.

Once the deductible is met, the plan will pay coinsurance. You will continue to pay copays and coinsurance until the required calendar year out-of-pocket is met. Once the out-of-pocket is met, the plan pays 100% for all covered medical and prescription costs for the rest of the plan year.

Cigna HDHP

A High-Deductible Health Plan (HDHP) gives you the freedom to seek care from the provider of your choice. You will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna network. In addition, the HDHP comes with a health savings account (HSA) that allows you to save pre-tax dollars¹ to pay for any qualified health care expenses as defined by the IRS, including most out-of-pocket medical, prescription drug, dental and vision expenses. For a complete list of qualified health care expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Here's how the plan works:

- ▶ **Annual Deductible:** You must meet the entire annual deductible before the plan starts to pay for non-preventive medical and prescription drug expenses. **NOTE:** If you enroll one or more family members, each covered family member is only required to meet the **INDIVIDUAL** deductible (up to the family limit) before the plan starts to pay expenses for that individual.
- ▶ **Coinsurance:** Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80 percent and you may pay 20 percent.
- ▶ **Out-of-Pocket Maximum:** Once your deductible, copays and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100 percent of all eligible covered services for the rest of the calendar year. **NOTE:** If you enroll one or more family members, each covered family member is only required to meet the **INDIVIDUAL** out-of-pocket maximum (up to the family limit) before the plan starts to pay covered services at 100 percent for that individual.

- ▶ **Health Savings Account (HSA):** You may contribute to your HSA through pre-tax payroll deductions to help offset your annual deductible and pay for qualified health care expenses. **To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.**

Important: Your contributions may not exceed the annual IRS limits listed below.

HSA Contribution Limit	2022
Employee Only	\$3,650
Family (employee + 1 or more)	\$7,300
Catch-up (age 55+)	\$1,000

Your HSA is yours for life. The money is yours to spend or save, regardless of whether you change health plans², retire or leave the company. There is no "use it or lose it" rule. Your account grows tax free over time as you continue to roll over unused dollars from year to year. You decide how or if you want to spend your HSA funds. You can use them to pay for you and your dependents' doctor's visits, prescriptions, braces, glasses—even laser vision correction surgery.

¹ Tax free under federal tax law; state taxation rules may apply

² You must be enrolled in a qualified health plan to contribute to an HSA.



Medical

Following is a high-level overview of the coverage available through Cigna. For complete coverage details, please refer to the Summary Plan Description (SPD).

Key Medical Benefits	High Deductible Health Plan - PPO		OAP PPO Value Plan - PPO		OAP PPO Premium Plan - PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible (per calendar year)						
Individual / Family	\$2,800 / \$5,600	\$6,000 / \$12,000	\$1,500 / \$3,000	\$4,000 / \$8,000	\$750 / \$1,500	\$2,000 / \$6,000
Out-of-Pocket Maximum (per calendar year)						
Individual / Family	\$6,000 / \$12,000	\$10,000 / \$20,000	\$5,000 / \$10,000	\$7,900 / \$15,800	\$4,000 / \$8,000	\$6,000 / \$14,000
Covered Services						
Office Visits (physician/specialist)	20%*	40%*	\$30 / \$60 copay	40%*	\$30 / \$40 copay	40%*
Routine Preventive Care	No charge	40%*	No charge	40%*	No charge	40%*
Outpatient Diagnostic (lab/X-ray)	20%*	40%*	20%*	40%*	20%*	40%*
Complex Imaging	20%*	40%*	20%*	40%*	20%*	40%*
Chiropractic	20%*; 20 visits per calendar year	40%*; 20 visits per calendar year	\$60; 20 visits per calendar year	40%*; 20 visits per calendar year	\$40; 20 visits per calendar year	
Ambulance	20%*		20%*		20%*	
Emergency Room	20%*		20%*		20%*	
Urgent Care Facility	20%*	40%*	\$60 copay	40%*	\$40 copay	40%*
Inpatient Hospital Stay	20%*	40%*	20%*	40%*	20%*	40%*
Outpatient Surgery	20%*	40%*	20%*	40%*	20%*	40%*
Prescription Drugs (Tier 1 / Tier 2 / Tier 3 / Tier 4)						
Retail Pharmacy (30-day supply)	\$15* / \$40* / \$60* / 30% up to \$250*	40%*	\$15 / \$40 / \$60 / 30% to \$250	Not covered	\$15 / \$40 / \$60 / 30% up to \$250	Not covered
Mail Order (90-day supply)	3x retail copay* (specialty is 30 day supply only)	Not covered	3x retail copay (specialty is 30 day supply only)	Not covered	3x retail copay (specialty is 30 day supply only)	Not covered

Coinurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

Voluntary Benefits

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It's true! Our voluntary benefits through MetLife are designed to complement your health care coverage and allow you to customize our benefits to you and your family's needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents.

You can enroll in these plans during Open Enrollment—they're completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

Accident Insurance

Group accident insurance covers you and your family 24 hours a day, 7 days a week. An accident policy helps policyholders cope with out-of-pocket medical expenses that add up quickly after an injury. If you have minor or major accidents, you are paid for your initial visit, follow ups, surgery, hospital stays and more. MetLife does not coordinate or offset with any other coverage you may have.

Critical Illness

A critical illness policy can make a big difference by providing lump-sum cash benefits that allow policyholders to concentrate on healing. Protection includes coverage for cancer, heart attack, stroke, kidney failure, major organ transplant, bone marrow transplant, sudden cardiac arrest, bypass surgery, severe burn, coma, loss of sight/hearing/speech and more. These extremely affordable plans are Guaranteed Issue. You can purchase coverage amounts of \$10,000, \$20,000 or \$30,000. Premiums are based on your age.

Another benefit of the critical illness plan is the MetLife Health Screening Benefit. You will receive \$50 each calendar year you take one of the covered screenings or tests. Please see the Critical Illness brochure for more information.

Hospital Indemnity Insurance

Hospital Indemnity provides financial assistance to enhance your current coverage. The plan includes hospital confinement benefits, hospital admission, intensive care, and intermediate intensive care Step-Down unit. The average cost of a hospital stay is \$11,700—and the average length of a stay is 4.6 days. Hospital Indemnity insurance can help reduce costs by paying you or a covered dependent a benefit to help cover your deductible, coinsurance and other out-of-pocket costs due to a covered sickness or injury related hospitalization.



Dental

We are proud to offer you a choice between two different dental plans.

MetLife DPPO

This plan offers you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist who participates in the MetLife network.

MetLife DHMO

With this plan, you choose a primary dental provider to manage your care. There are no charges for most preventive services, no claim forms and no deductibles. Reduced, pre-set charges apply to other services.

Following is a high-level overview of the coverage available.

Key Dental Benefits	DPPO		DHMO
	In-Network	Out-of-Network	In-Network Only
Deductible (per calendar year)			
Individual / Family	\$50 / \$150		None
Benefit Maximum (per calendar year; preventive, basic, and major services combined)			
Per Individual	\$1,500		None
Covered Services			
Preventive Services	No charge	No charge for allowed amount	Set Copayments. See Schedule
Basic Services	20%*	20% of allowed amount*	
Major Services	50%*	50% of allowed amount*	
Orthodontia (Child Only)	50%; \$1,500 lifetime maximum	50% of allowed amount up to \$1,500 lifetime maximum	

Coinsurance percentages shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

Vision

We are proud to offer you a vision plan.

The MetLife vision plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the MetLife network.

Following is a high-level overview of the coverage available.

Key Vision Benefits	In-Network	Out-of-Network Reimbursement
Exam (once every 12 months)	\$20	\$45 allowance
Materials Copay	Various	Various allowance allowed
Lenses (once every 12 months)	\$20	Single Vision \$30 allowance
Bifocal		\$50 allowance
Trifocal		\$65 allowance
Frames (once every 12 months)	\$130 allowance; \$150 allowance on featured frames; \$70 allowance for Costco, Walmart and Sam's Club	\$70 allowance
Contact Lenses (once every 12 months; in lieu of glasses)	Elective: \$130 allowance Medically Necessary: Covered in full after \$20 copay	Elective: \$105 allowance Medically Necessary: \$210 allowance



Flexible Spending Accounts (FSAs)

We provide you with an opportunity to participate in up to two different flexible spending accounts (FSAs) administered through HealthEquity. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

Health Care FSA

For 2022, you may contribute up to \$2,850 to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. Some qualified expenses include:

- ▶ Coinsurance
- ▶ Copayments
- ▶ Deductibles
- ▶ Prescriptions
- ▶ Dental treatment
- ▶ Orthodontia
- ▶ Eye exams/ eyeglasses
- ▶ Lasik eye surgery

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Limited-Purpose Health Care FSA (for HSA participants)

If you enroll in an HSA eligible medical plan, you may only participate in a limited-purpose Health Care FSA. This type of FSA allows you to be reimbursed for eligible dental, orthodontia and vision expenses while preserving your HSA funds for eligible medical expenses. Employees can contribute up to \$2,850 for 2022.

Dependent Care FSA

For 2022, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). Some eligible expenses include:

- ▶ Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- ▶ Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

FSA Rules

YOU MUST ENROLL EACH YEAR TO PARTICIPATE.

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules:

Health Care FSA: Unused funds of up to \$570 from one year can carry over to the following year. Carryover funds will not count against or offset the amount that you can contribute annually. Unused funds over \$570 will **NOT** be returned to you or carried over to the following year.

You can incur expenses through Employees have through 12/31/2022 to incur claims, and must file claims by Employees have through 3/31/2023 to submit claims.

Maximum contribution amount is established by the IRS and your employer each year. See plan document for details.

Life and AD&D Insurance

Life insurance provides your named beneficiary(ies) with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot or eye). In the event that your death occurs due to a covered accident, both the life and the AD&D benefit would be payable.

Basic Life/AD&D (Company-paid)

This benefit is provided at **NO COST** to you through MetLife.

Benefit Amount	
	Hourly Full time Employees: \$10,000; Hourly Supervisors: \$30,000; Salaried Employees: \$50,000 Executives: 1x pay to a maximum of the lesser of 1x pay or \$500,000

Supplemental Life/AD&D (Employee-paid)

If you determine you need more than the basic coverage, you may purchase additional coverage through MetLife for yourself and your eligible family members.

	Benefit Option	Guaranteed Issue*
Employee	\$10,000 increments to a maximum of the lesser of 5x pay or \$500,000	\$200,000
Spouse/ DP	\$5,000 increments to a maximum of \$250,000, not to exceed 50% of employee amount	\$30,000
Child(ren)	Less than 1 year old: \$2,000; Child more than 1 year to age 26: \$2,000 increments to maximum of \$10,000	Elected amount is GI

*During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

Disability Insurance

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

Voluntary Short-Term Disability

Provided at an affordable group rate through MetLife.

Benefit Percentage	60%
Weekly Benefit Maximum	\$2,000
When Benefits Begin	15 th day after accident or sickness
Maximum Benefit Duration	13 weeks

Long-Term Disability

Provided at **NO COST** to you through MetLife.

Benefit Percentage	60%
Monthly Benefit Maximum	\$8,000
When Benefits Begin	91 st day of accident or sickness
Maximum Benefit Duration	Lesser of Reducing Benefit Duration or 5 years

Employee Assistance Program

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at **NO COST** to you through MetLife.

The EAP can help with the following issues, among others:

- ▶ Mental health
- ▶ Relationships or marital conflicts
- ▶ Child and eldercare
- ▶ Substance abuse
- ▶ Grief and loss
- ▶ Legal or financial issues

EAP Benefits

- ▶ Assistance for you and your household members
- ▶ Up to 5 phone or video sessions with a counselor per issue, per year, per individual
- ▶ Unlimited online resources



Valuable Extras

We also offer the following additional benefits:

- ▶ **MetLife Legal Plan:** In need of legal assistance? You have the option of enrolling in the Voluntary Legal Plan, which offers access to both in- and out-of-network attorneys who can assist you with a range of legal, family and real estate matters, including:

- » Wills and trusts
- » Debt collection
- » Matrimonial
- » Family matters
- » Real estate

You can enroll in this benefit on ADP.

- ▶ **ID Theft:** Identity theft can be emotionally devastating and take years to resolve without help from an experienced professional. Replacing documents, cutting through red tape, and untangling fraud is daunting. But with help from ID Shield's experienced team, available 24/7, restoration takes place quickly and effectively, giving customers peace of mind. This benefit is paid entirely by you.

You can enroll in this benefit on ADP.

- ▶ **Nationwide Pet Insurance:** Your pet is like family, and deserves to be covered as one. You have the option of purchasing voluntary pet insurance to help cover the costs associated with veterinary care. You'll also have access to discounted rates.

To enroll visit <https://benefits.petinsurance.com/honeybee>

- ▶ **401(k):** All employees who are 21 years or older can start saving for your retirement by taking advantage of the 401(k) plan with Honeybee! Employees may begin contributing to the 401(k)-plan 1st of the month following 90 days of employment. Contributions are conveniently deducted from your pay. You will be contributing on a pre-tax basis, also helping you lower your current taxable income. Honeybee will match your contributions 100% on the first 3% you contribute and 50% on the next 2% you contribute.

Honeybee will match your contributions 100% on the first 3% you contribute and 50% on the next 2% you contribute. Employees will receive matching contributions 1st of the month following 12 months of employment. The maximum contribution for 2022 is \$20,500. For those age 50 and over, you can contribute an additional \$6,500 during the 2022 plan year.

Commuter Benefits

The transit/commuter benefit allows you to use pre-tax dollars to pay for your commute (up to IRS annual limits), including qualified transit and parking expenses. Your transit/commuter benefit contributions are set aside pre-tax, before your federal and Social Security taxes are calculated, so your taxable income is reduced and you get to keep a greater portion of your paycheck. You can use this benefit to cover all types of commuting, including subway, bus, train, ferry, vanpool, bicycle and parking—even ride-sharing services!

Any remaining funds on 12/31/22 will be carried over into the following year. Carryover funds will not count against or offset the amount that you can contribute monthly.

To enroll visit www.healthequity.com. Enrolling by the 10th of the month will allow the commuter benefit to be effective the first of the next month. For New York employees, you must enroll by the 4th of the month for it to be effect for the first of the next month.



Cost of Benefits

Your contributions for Medical, Dental, Vision, Accident, Hospital Indemnity and Critical Illness benefits are automatically deducted from your paycheck before taxes. Premiums for Voluntary Supplemental Life/AD&D, Voluntary Short-Term Disability, Legal, Identity Theft and Pet Insurance benefits will be deducted from your paycheck after taxes. The premium amounts will depend upon the plan you select and if you choose to cover eligible family members, as applicable to each plan.

Medical: Cigna

Coverage Tier	Employee Contribution (Monthly)		
	High Deductible Health Plan	OAP PPO Value Plan	OAP PPO Premium Plan
Employee Only	\$77.98	\$117.23	\$154.27
Employee + Spouse/RDP	\$416.31	\$484.62	\$546.83
Employee + Child(ren)	\$345.35	\$401.61	\$457.74
Family	\$735.78	\$858.16	\$947.65

Dental: MetLife

Coverage Tier	Employee Contribution (Monthly)	
	PPO (All States)	DHMO (CA, FL, NJ, NY, TX Only)
Employee Only	\$24.50	\$2.56
Employee + Spouse/RDP	\$49.42	\$4.86
Employee + Child(ren)	\$46.37	\$5.12
Family	\$72.36	\$7.29

Vision: MetLife

Coverage Tier	Employee Contribution (Monthly)
Employee Only	\$3.69
Employee + Spouse/RDP	\$5.84
Employee + Child(ren)	\$5.89
Family	\$8.94



Registered Domestic Partner (RDP) Contributions: Your contributions to cover an RDP are the same as those to cover a legal spouse. However, because of Internal Revenue Code (IRC) restrictions, in most cases, the fair market value of your RDP's or RDP's children's (if they are not federal tax dependents) healthcare coverage will be taxable to you as imputed income. This value is determined by the amount that the Company pays in premium for RDP coverage. This amount raises your taxable gross income. Also, the payroll deductions to cover an RDP must be taken on an after-tax basis.

Cost of Benefits

Voluntary Supplemental Life/AD&D

Age	Per \$1,000 for employee and spouse (Monthly)
0-24	\$0.079
25-29	\$0.079
30-34	\$0.099
35-39	\$0.113
40-44	\$0.144
45-49	\$0.207
50-54	\$0.307
55-59	\$0.515
60-64	\$0.734
65-69	\$1.289
70-74	\$2.079
75-79	\$2.079
80-99	\$2.079
Child Life/AD&D (Monthly)	
\$0.201 per \$1,000	

Voluntary Short-Term Disability

Per \$10 covered weekly benefit
\$0.372

Accident Coverage: MetLife

Coverage Tier	Employee Contribution (Monthly)	
	Accident Base Plan Option	Accident Buy-Up Option
Employee Only	\$4.93	\$7.24
Employee + Spouse/RDP	\$9.72	\$14.21
Employee + Child(ren)	\$11.33	\$16.49
Family	\$13.83	\$20.14

Hospital Premiums: MetLife

Coverage Tier	Employee Contribution (Monthly)	
	Hospital Base Plan Option	Hospital Buy-Up Option
Employee Only	\$13.64	\$20.46
Employee + Spouse/RDP	\$29.68	\$44.53
Employee + Child(ren)	\$22.49	\$33.73
Family	\$38.53	\$57.79

Cost of Benefits

Legal Coverage: MetLife

Coverage Tier	Employee Contribution (Monthly)
Employee or Family	\$18.00

Identity Theft Coverage: ID Shield

Coverage Tier	Employee Contribution (Monthly)
Employee Only	\$8.95
Family	\$16.95

Pet insurance: Nationwide

Employee Contribution (Monthly)
Rates will vary depending on plan chosen

Critical Illness Premiums: MetLife

Age	Employee Contribution (Monthly) - per \$1,000 of Coverage			
	Employee Only	Employee+Spouse	Employee + Children	Family
<25	\$0.32	\$0.51	\$0.49	\$0.68
25-29	\$0.36	\$0.58	\$0.53	\$0.75
30-34	\$0.44	\$0.69	\$0.61	\$0.86
35-39	\$0.54	\$0.84	\$0.71	\$1.01
40-44	\$0.71	\$1.10	\$0.88	\$1.27
45-49	\$0.98	\$1.50	\$1.15	\$1.67
50-54	\$1.39	\$2.12	\$1.56	\$2.29
55-59	\$1.93	\$2.93	\$2.10	\$3.10
60-64	\$2.68	\$4.06	\$2.85	\$4.23
65-69	\$3.72	\$5.64	\$3.89	\$5.81
70-74	\$5.02	\$7.60	\$5.19	\$7.77
75+	\$6.99	\$10.54	\$7.16	\$10.71

Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	Cigna - Group #: 00612910	866-494-2111	mycigna.com
Voluntary Benefits: Accident, Critical Illness, Hospital Indemnity	MetLife - Group #: 230429	800-438-6388	www.metlife.com
Dental (DPPO)	MetLife - Group #: 230429	800-438-6388	www.metlife.com/dental
Dental (DHMO)	MetLife - Group #: 230429	800-942-0854	www.metlife.com/dental Plan is MET290
Vision	MetLife - Group #: 230429	800-438-6388	www.metlife.com
Commuter Benefits, Flexible Spending Account (FSAs) and Health Savings Account (HSA)	HealthEquity	866-346-5800	www.healthequity.com You will also go to www.healthequity.com to enroll in the commuter benefits
Life/AD&D	MetLife - Group #: 230429	800-438-6388	www.metlife.com
Disability	MetLife - Group #: 230429	866-729-9201	www.metlife.com
Employee Assistance Program (EAP)	MetLife	888-319-7819	metlifeeap.lifeworks.com User Name: metlifeeap; Password: eap
Legal Plan	MetLife Legal Plan - Group #: 9904337	800-821-6400	Pre-Enrollment: https://info.legalplans.com/Home/ and enter access code: 9904400 After Enrollment, go to https://www.legalplans.com/
Pet Insurance	Nationwide	877-738-7874	To Enroll: https://benefits.petinsurance.com/honeybee Virtual Pet Booth: https://www.petinsurance.com/openenroll507090/
Identity Theft	ID Shield	888-410-2004	www.idshield.com Email: IDShield@LegalShield.com
401(k)	John Hancock	800-294-3575	https://myplan.johnhancock.com/login

Benefits Website

Our benefits website <https://workforcenow.adp.com/public/index.html> can be accessed anytime you want additional information on our benefits programs.

Questions?

If you have additional questions, you may contact:

Karissa Guillen at 626-824-7702 |
pbbenefits@jollibeefoods.com



DISCLAIMER: The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern.
Annual Notices: ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The company will distribute all required notices annually.

