# **2024** BENEFITS OVERVIEW

BENEFIT PLANS EFFECTIVE JANUARY 1, 2024-DECEMBER 31, 2024



At Big Red F, we care about you. That's why we offer benefits that support your physical, emotional, and financial health. We encourage you to evaluate and elect benefits that best suit your personal needs.

# **ELIGIBILITY**

# FULL-TIME MANAGERS AND SALARIED EMPLOYEES All full-time managers and Big Red F salaried employees working 30 or more hours per week are eligible for medical, dental, vision, basic life and AD&D, and long-term disability on the first of the month following 30 days of employment.

### **FULL-TIME HOURLY EMPLOYEES**

All hourly employees averaging 30 or more hours per week over a specified measurement period of six months are eligible for medical, dental, and vision benefits the first day of the month following a 30-day administration period.

After three years of employment, full-time hourly employees averaging 30 or more hours per week are eligible for basic life and AD&D coverage and long-term disability on the first of the month following 30 days.

### **DEPENDENTS**

Many of the plans allow you to cover your eligible dependents, which include:

- Your legal spouse, civil union partner, or domestic partner.
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legallyadopted child, a child placed with you for adoption, or a child for whom you are the legal guardian).
- Your dependent children of any age who are physically or mentally unable to care for themselves.

# **ENROLLMENT**

You can sign up or change your benefits within 30 days of your start date (as a newly-hired employee), during the annual open enrollment period, or within 30 days of a qualifying life event. The choices you make at this time will remain the same through December 31, 2024. If you do not sign up for benefits during your initial eligibility period or during the open enrollment period, you will not be able to elect coverage until the following plan year.

### **HOW TO ENROLL**

To enroll in coverage, visit Employee Self Service (ESS) at **eselfserve.com**, and click on the box on the top left of the home page titled "Open Enrollment Available". You will be guided through the system to elect your benefit plans. If you have not yet enrolled in ESS and cannot locate your invitation, please email **hr@bigredf.com**. You must enroll via the desktop version of ESS—you cannot enroll using the mobile app.

# CHANGING YOUR BENEFITS

Due to IRS regulations, once you have made your elections for 2024, you cannot change your benefits until the next annual open enrollment period, unless you experience a qualifying life event. Election changes must be consistent with your life event.

### Qualifying life events include, but are not limited to:

- Marriage, divorce, or legal separation.
- Birth or adoption of a child.
- Death of your spouse or covered child.
- Change in your spouse's work status that affects his or her benefits.
- Change in your child's eligibility for benefits.
- o Qualified Medical Child Support Order.

To request a benefits change, notify Human Resources within 30 days of the qualifying life event. Change requests submitted after 30 days cannot be accepted. You may need to provide proof of the event, such as a marriage license or birth certificate.

# **MEDICAL BENEFITS**

Big Red F offers three medical plan options through Cigna. The plans offer in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider. Locate a Cigna network provider at **mycigna.com**.

The table below summarizes the key features of the medical plans. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

| Summary of<br>Covered Benefits  | Bronze Plan (Lo<br>In network  | calPlus Network)<br>Out of network                                | <b>Silver Plan (</b><br>In network  | <b>HSA Eligible)</b><br>Out of network                            | <b>Gold</b><br>In network  | <b>Plan</b><br>Out of network                                     |
|---|--|---|---|---|--|---|
| Calendar Year Deductible<br>Individual/Family   | \$5,000/\$10,000   | \$10,000/\$20,000   | \$3,200/\$6,000   | \$6,000/\$12,000  | \$1,500/\$3,000  | \$3,000/\$6,000   |
| Out-of-Pocket Maximum   | Includes deductible, copays, and coinsurance                               |   | Includes deductible, Rx copays, and coinsurance                                   |   | Includes deductible, copays, and coinsurance                               |   |
| Individual/Family   | \$7,000/\$14,000   | \$14,000/\$28,000   | \$3,200/\$6,000   | \$14,000/\$28,000   | \$5,000/\$10,000   | \$10,000/\$20,000   |
| Preventive Care   | Plan pays 100%   | Not covered   | Plan pays 100%  | Not covered   | Plan pays 100%   | Not covered   |
| Physician Services<br>Primary Care Physician<br>Telehealth<br>Specialist<br>Urgent Care                     | \$25 copay<br>Plan pays 100%<br>\$75 copay<br>\$50 copay                   | 50% after ded.<br>Not covered<br>50% after ded.<br>50% after ded. | 0% after ded.<br>0% after ded.<br>0% after ded.<br>0% after ded.                  | 50% after ded.<br>Not covered<br>50% after ded.<br>50% after ded. | \$25 copay<br>Plan pays 100%<br>\$75 copay<br>\$50 copay                   | 50% after ded.<br>Not covered<br>50% after ded.<br>50% after ded. |
| Lab/X-Ray<br>Diagnostic Lab/X-Ray<br>High-Tech Services (MRI, CT, PET)                                      | 20% after ded.<br>20% after ded.   | 50% after ded.<br>50% after ded.                                  | 0% after ded.<br>0% after ded.  | 50% after ded.<br>50% after ded.                                  | 20% after ded.<br>20% after ded.   | 50% after ded.<br>50% after ded.                                  |
| Hospital Services<br>Inpatient<br>Outpatient  | 20% after ded.<br>20% after ded.   | 50% after ded.<br>50% after ded.                                  | 0% after ded.<br>0% after ded.  | 50% after ded.<br>50% after ded.                                  | 20% after ded.<br>20% after ded.   | 50% after ded.<br>50% after ded.                                  |
| <b>Emergency Room</b>   | \$300 copay + 20% after ded.   |   | 0% after ded.   |   | \$300 copay + 20% after ded.   |   |
| Prescription Drugs Generic Preferred Brand Non-Preferred Brand Specialty Mail Order (Up to a 90-day supply) | \$25 copay<br>\$50 copay<br>\$75 copay<br>\$250 copay<br>2.5x retail copay | Not covered   | 0% after ded.<br>0% after ded.<br>0% after ded.<br>0% after ded.<br>0% after ded. | Not covered   | \$25 copay<br>\$50 copay<br>\$75 copay<br>\$250 copay<br>2.5x retail copay | Not covered   |

Note: If electing dependent coverage, the individual deductible applies for each covered family member (i.e., once each individual reaches the individual deductible, they are subject to coinsurance). Two or more family members can satisfy the family deductible. The same rule applies for the out-of-pocket max.

If you enroll in the Silver Plan, you may be eligible to open and fund a health savings account (HSA) through the financial institution of your choice. Learn more about HSAs at irs.gov/pub/irs-pdf/p969.pdf.

### CIGNA ONE GUIDE

Cigna One Guide is available to help you engage in your health and get the most from your medical plan. This concierge service provides a personalized experience that can help you make smarter, more informed choices, and get the most from your medical plans. For more information, call 888-806-5094, visit **mycigna.com**, or download the myCigna mobile app.

### **EMOTIONAL WELL-BEING PROGRAM**

You have access to the emotional well-being program through Cigna. This free program is strictly confidential and helps employees and their family members who are enrolled in the medical health care plan address personal and workplace problems. Services include three face-to-face sessions per issue with a counselor and access to the apps iPrevail and Happify.

To enroll, visit **mycigna.com**, select "Coverage" and click on "Employee Assistance Program" to obtain an EAP code. Or, call customer service at 877-231-1492 for a referral.

- iPrevail: A digital therapeutics platform designed to help you take control of stress, anxiety, and negative thoughts.
- Happify: Utilizes scientific research and gamification techniques to cultivate resilience. It includes activities that are designed to help you defeat negative thoughts, gain confidence, and reduce stress and anxiety.

# **VOLUNTARY DENTAL BENEFITS**

Big Red F offers a dental insurance plan through Cigna. The plan offers in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider. Locate a Cigna network provider at **mycigna.com**.

The table below summarizes the key features of the dental plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

| Summary of  | Cigna Dental Plan    |                      |  |  |
|---|----------------------|----------------------|--|--|
| Covered Benefits  | In Network           | Out of Network       |  |  |
| Calendar Year Deductible<br>Individual/Family   | \$50/\$150           | \$50/\$150           |  |  |
| Calendar Year Benefit Maximum   | \$1,000              |                      |  |  |
| Preventive Care (Oral exams, cleanings, x-rays)   | Plan pays 100%       | Plan pays 100%       |  |  |
| Basic Services (Periodontal services, endodontic services, oral surgery, fillings)                | 20% after deductible | 20% after deductible |  |  |
| Major Services (Bridges, crowns [inlays/onlays], dentures [full/partial], implants <sup>1</sup> ) | 50% after deductible | 50% after deductible |  |  |

<sup>(1) \$1,000</sup> calendar year maximum for dental implants.

# **VOLUNTARY VISION BENEFITS**

Big Red F offers a vision insurance plan through Cigna and utilizes the EyeMed network. You have the freedom to choose any vision provider. However, you will maximize the plan benefits when you choose a network provider. Locate a Cigna network provider at **mycigna.com**.

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

| Summary of<br>Covered Benefits                                      | <b>Cigna Vision Pl</b><br>In Network | n <b>/EyeMed Network</b><br>Out of Network |  |
|---|--------------------------------------|--|--|
| Eye Exam (Every 12 months)  | \$10 copay                           | Reimbursement up to \$45                   |  |
| Standard Plastic Lenses (Every 12 months) Single/Bifocal/Trifocal   | \$25 copay                           | Reimbursement up to<br>\$32/\$55/\$65      |  |
| Frames (Every 24 months)  | \$130 allowance                      | Reimbursement up to \$71                   |  |
| Contact Lenses (Every 12 months in lieu of standard plastic lenses) | \$130 allowance                      | Reimbursement up to \$105                  |  |

# WEEKLY BENEFIT PLAN COSTS

| Level of Coverage     | Cigna Bronze | Cigna Silver | Cigna Gold | Cigna Dental | Cigna Vision |
|-----------------------|--------------|--------------|------------|--------------|--------------|
| Employee Only         | \$57.32      | \$77.35      | \$89.28    | \$7.33       | \$1.38       |
| Employee + Spouse     | \$206.11     | \$240.63     | \$265.72   | \$14.88      | \$2.48       |
| Employee + Child(ren) | \$179.06     | \$211.07     | \$233.64   | \$18.41      | \$2.51       |
| Employee + Family     | \$327.83     | \$374.30     | \$410.06   | \$27.65      | \$3.84       |

# BASIC LIFE AND AD&D INSURANCE

Life and accidental death and dismemberment (AD&D) insurance is an important element of your income protection planning. For your peace of mind, Big Red F provides basic life and AD&D insurance to all eligible employees **AT NO COST** through New York Life. Benefits reduce to 65% at age 65 and to 50% at age 70.

Employee life benefit: \$25,000Employee AD&D benefit: \$25,000

# LONG-TERM DISABILITY INSURANCE

Big Red F provides long-term disability (LTD) insurance to eligible employees **AT NO COST** through New York Life. LTD insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury.

- Benefit amount: 60% of salary up to \$10,000 per month
- Elimination period: 90 days
- Benefit duration: If disabled before age 60, two years own occupation, then any occupation to age 65; if disabled after age 60, refer to official plan documents

# 401(k) SAVINGS PLAN

Automatic enrollment for all full-time managers and salaried employees at the first of the quarter after 1 year of service with Big Red F.

- Traditional 401(k) and Roth plans available.
- Multiple fund choices to choose from.
- Big Red F pays all administrative costs and fees.

Visit **principal.com** or call 800-547-7754 for plan information and to elect contributions.



# **CONTACTS**

If you have any questions regarding your benefits or the material contained in this guide, contact Human Resources at **hr@bigredf.com**.

| Provider/Plan                                  | Phone Number | Website       |
|--|--------------|---------------|
| Medical   Cigna                                | 866-494-2111 | mycigna.com   |
| Emotional Well-Being Program   Cigna           | 877-231-1492 | mycigna.com   |
| Voluntary Dental   Cigna                       | 866-494-2111 | mycigna.com   |
| Voluntary Vision   Cigna                       | 866-494-2111 | mycigna.com   |
| Life and AD&D Insurance   New York Life        | 800-362-4462 | mynylgbs.com  |
| Long-Term Disability Insurance   New York Life | 800-362-4462 | mynylgbs.com  |
| 401(k) Savings Plan   Principal                | 800-547-7754 | principal.com |

This overview contains highlights of the benefits options available to you through Big Red F. They are not complete descriptions of the benefits. Big Red F may terminate, withdraw, or modify any benefit described in this overview, in whole or in part, at any time. The descriptions of the benefit are not guarantees of current or future employment or benefits. If there is any conflict between this overview and the official Plan Document, the official documents will govern.