In an effort to reduce the environmental impact and control costs, this Guide will not be printed and mailed every year. However, it will be updated as needed, and the most current Guide will continue to be available on Employee Center.
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ReyesConnect is the company’s online source for
news and information, including benefits information
and direct access to insurance companies’ websites.

VISIT REYESCONNECT AND
EMPLOYEE CENTER TODAY!

ReyesConnect is the company’s online source for
news and information, including benefits information
and direct access to insurance companies’ websites.

From any computer with Internet access,
go to www.reyesholdings.com and click on
ReyesConnect at the bottom of the page.
(Or visit www.reyesholdings.com/reyesconnect.)

Select My Total Compensation to find:

• Summary of Benefits and Coverage (SBC)
• Summary Plan Descriptions (SPDs)
• Benefits documents, forms and flyers
• A search tool to help you quickly find information you want

Contact your HR Representative for your username and password.

Trouble logging into ReyesConnect? Request help from your
local HR Representative, or contact the IT Service Center:
ITSC@reyesholdings.com or 877-435-7263.

VERSIONES
DISPONIBLES EN
ESPAÑOL
Versiones de las materias
de inscripción son
disponibles en español
de su representante local
de Recursos Humanos.
Healthy Reyes helps you maintain or improve your physical, financial and emotional well-being with an industry-leading program comprised of the following benefits, tools and resources.

**Benefit Eligibility**

- Employees who work an average of 30 or more hours per week are eligible.*
- For some benefit plans, your eligible dependents include:
  - Your legal spouse;
  - Your child through the end of the month in which he/she reaches age 26; and
  - Your child age 26 or older, who is incapable of self-care due to a medical disability and who depends on you for financial support.

You may be asked to provide proof of your dependents’ eligibility in order for your dependents’ enrollment to be approved. If proof is not received by the deadline provided to you, the dependent(s) will not have coverage for the remainder of the calendar year and you may not have another opportunity to enroll the dependent(s) until the next annual enrollment period.

*Includes all non-union employees and union employees who bargained for the benefit.
Enrolling in Benefits When First Eligible

If You Don’t Enroll

For medical: As a newly-eligible employee, unless you either enroll in one of the medical plans or decline medical coverage, you will be placed in the Default Plan.

If you are enrolled in the Default Plan, be aware that:
• If you have other coverage (such as through your spouse) that you lose during the year, you will not be able to enroll in one of the medical plans with Reyes Holdings until the next Annual Enrollment.
• Being covered by the Default Plan could complicate claims processing with coverage through another plan since the other plan will require your claim to be processed under the Default Plan first.

Bottom line: If you don’t want medical coverage with Reyes Holdings, decline it.

For all other benefits: If you don’t enroll, you will not have coverage.
CHANGING YOUR BENEFITS

In general, you can add, stop or make changes to the following benefits only during Annual Enrollment:

- Medical
- Dental
- Vision
- Health Care and/or Day Care
- Flexible Spending Accounts
- Health Savings Account
- Roadside Assistance
- Supplemental Life Insurance
- Identity Theft Protection
- Supplemental AD&D Insurance
- Commuter Expense Reimbursement Account
- Long Term Disability
- Pet Insurance
- 401(k) Plan
- Homeowners and Auto Insurance
- Legal Services
- Accident Insurance
- Critical Illness Insurance

When you enroll in these plans, the coverage you elect will be in effect through the end of the calendar year. You can change these elections during the year only if you:

- Lose other coverage due to a qualifying life event, or
- Gain a new dependent due to a qualifying life event and enroll your new dependent in coverage.

To add, stop or change this coverage during the year, you must submit a Benefits Change form within 31 days of the date of the qualifying life event for your coverage to become effective. Examples of qualifying life events include:

- Marriage or divorce
- Birth or adoption of a child
- Death of a spouse or child
- A change in your spouse’s eligibility for insurance coverage

With the exception of Flexible Spending Accounts, if you want to keep your current benefits from year to year, there is nothing you need to do; your current benefit elections will automatically roll over. Of course, you can make changes if you choose.

ENROLL IN/CHANGE ANYTIME “ON DEMAND”

After your initial enrollment as a new employee, you can add, stop, or make changes to the following benefits at any time or for any reason:

- Health Savings Account
- Supplemental Life Insurance
- Supplemental AD&D Insurance
- Long Term Disability
- 401(k) Plan
- Roadside Assistance
- Identity Theft Protection
- Commuter Expense Reimbursement Account
- Pet Insurance
- Homeowners and Auto Insurance

To add, stop or change this coverage, go to ReyesConnect > Employee Center > VIC > Quick Links > My “On Demand” Benefits Enrollment.

WHEN COVERAGE ENDS

Your coverage ends on your last day as a regular, full-time employee, or when you otherwise lose eligibility per the terms and requirements of the plan.

BENEFITS CHANGE FORM

To add or drop dependents, you must submit a Benefits Change form within 31 days of the date of the qualifying life event. You cannot add or drop dependent coverage on VIC.

The Benefits Change form is available on Employee Center, from your HR Representative or from the HR Service Center.
I’M WAIVING MEDICAL COVERAGE. SHOULD I GET A HEALTH SCREENING?
You and your spouse should consider getting a free health screening even if you don’t plan to enroll in medical coverage through Reyes Holdings because losing other coverage does not allow you to get a screening later. This means you would pay standard rates for the rest of the year if you enrolled in a Reyes Holdings medical plan after losing your other coverage.

WHAT’S MY DEADLINE TO GET A HEALTH SCREENING?
New employees and covered spouses who choose to get a free health screening must register through the Healthy Reyes Portal and complete their screenings by the end of the month in which their medical coverage becomes effective. Any Reasonable Alternative must be completed by the end of the third month following your screening deadline. For example, if your screening deadline is March 31, the deadline to complete the Reasonable Alternative is June 30. Discounted medical plan rates will apply as soon as administratively possible after the Reasonable Alternatives are completed.

REWARDING GOOD HEALTH
Reyes Holdings rewards you and your covered spouse for achieving and maintaining good health. You are eligible for lower medical plan rates, if you and/or your covered spouse choose to complete a free health screening and meet the good health threshold by having four of the following five healthy results:

- Blood pressure below 140/90
- LDL cholesterol below 130
- Body Mass Index (BMI) of less than 30
- Blood glucose below 100
- Triglycerides below 150

There are discounted and standard medical plan rates. To qualify for the discounted rates, you and/or your covered spouse, if applicable, must meet the good health threshold. Refer to the Benefit Plan Options and Rates flyer for rates.

Your results will be available on the Healthy Reyes Portal through Employee Center. CaféWell will notify you, through your Healthy Reyes Portal account, about whether you met or were unable to meet the good health threshold. If you were unable to meet the good health threshold, CaféWell will provide you with alternative options through your Healthy Reyes Portal account. These alternative options, called Reasonable Alternative ActionCards, will allow you to qualify for the discounted rates upon completion. CaféWell will also provide you with contact information for questions or concerns you may have in setting up the alternative program. CaféWell will work with you (and, if you want, your physician) to find a wellness program, with the same reward, that is right for you in light of your health status. The same process will apply for your spouse using the CaféWell service.

Reyes Holdings will be told only whether you met the good health threshold and will not be told if a Reasonable Alternative was used for any of the measures.

The Healthy Reyes Portal is hosted through our wellness partner, CaféWell. The interactive site will help you take steps towards better health, including support and guidance; tailored healthy activities; and tips, tricks and articles.
## New Hires and Health Screenings: Steps to Follow

<table>
<thead>
<tr>
<th>Step 1: Choose your screening option</th>
<th>Your Physician (blood draw)</th>
<th>LabCorp (blood draw)</th>
<th>eScreen (finger stick)</th>
<th>CVS MinuteClinic (finger stick)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Schedule an appointment with your physician. Visit the Healthy Reyes Portal to download and print the <strong>Physician Form</strong> for your physician to complete.*</td>
<td>Visit the Healthy Reyes Portal to download and print the forms and voucher you’ll need for your appointment. For CVS MinuteClinic, the voucher can be used only at CVS MinuteClinic and not at CVS/Pharmacy.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Step 2: Prepare for your screening | Fast for 8 hours before your screening. Drink plenty of water, but no food or other beverages. If you are diabetic, pregnant, on medication or have a medical condition that prevents you from fasting for 8 hours, follow your physician’s instructions regarding fasting. |

| Step 3: Get your health screening | Most health screenings take approximately 15 minutes and include a blood pressure reading, fasting finger stick or blood draw, and recording of your height and weight. If you choose to visit your physician, screening time is based on your physician. |

| Step 4: Review your screening results | Your results will be available on the Healthy Reyes Portal within three weeks of your screening. |

*Your physician may require a lab visit separate from an office visit. Be sure to talk to your physician’s office in advance so you know the requirements and have time to complete them by your deadline.

### Access the Healthy Reyes Portal from your computer, tablet or mobile device...

**Employees:** Visit [ReyesConnect > Employee Center > Healthy Reyes Portal (under Direct Access)](http://www.reyesconnect.com). The first time you log on to the Healthy Reyes Portal, you will be prompted to register. You’ll need an email address, your date of birth and your VIC Employee Number.*

**Spouses:** Go to [healthyreyes.cafewell.com](http://www.healthyreyes.cafewell.com). The first time you visit the Healthy Reyes Portal, you will be prompted to register. You’ll need an email address, your date of birth and your spouse’s VIC Employee Number.*

*Find your VIC Employee Number on your payroll check, or contact your local HR Representative or the HR Service Center.

### Who sees my results? How do I know this program is confidential?

Your results are seen only by you. To help plan for future programs and benefit offerings, Reyes Holdings will receive a summary report, but no one at Reyes Holdings will know anyone’s individual health information. CaféWell/Welltok follows all patient privacy laws and is prohibited by law from sharing your individual results with Reyes Holdings.

CaféWell/Welltok does, however, collaborate with other Reyes Holdings vendors who help us promote good health. We ask all of our wellness program providers to work together to help us get and stay healthy.
**MEDICAL**

**OPTIONS:**

Choose from the following options:
- HRA Plan
- HSA Plan
- Default Plan
- PPO Plan
- Decline

Other plans may be available - see the *Benefit Plan Options and Rates* flyer for details.

**FIND MORE INFORMATION**

- *Benefit Plan Options and Rates* flyer
- Employee Center
- HR Service Center
  benefits@reyesholdings.com
  800-298-9461

For details on your medical plans, see the *Benefit Plan Options and Rates* flyer. **Reminder to newly-eligible employees:** if you don’t actively enroll in or decline a medical plan, you will be placed in the Default Plan.

**Prescription Drug**

If you enroll for medical coverage, you also receive prescription drug coverage, which is administered by Caremark for most medical plans. See the *Benefit Plan Options and Rates* flyer for details. You get the best benefit when you use a pharmacy that participates in the Caremark network. Find a participating pharmacy and review what drugs are covered on [www.caremark.com](http://www.caremark.com) or call 800-552-8159.

**HRA Plan**

The HRA Plan includes a **company-funded** Health Reimbursement Account that helps pay for deductible and co-insurance amounts, including prescription drug co-insurance amounts.

**An example:**

1. You see your doctor and the charge is $200 after any discounts are applied.
2. Your doctor submits a claim to the insurance company.
3. $200 is applied to your deductible.
4. The claim is also sent through your Health Reimbursement Account and $200 is paid directly to the provider.

These steps are repeated until you use up your Health Reimbursement Account. After that, you pay your provider for any amounts not paid by the medical plan (for example, the rest of your deductible).

---

**Terms to Know**

**Deductible** – The amount you have to pay for covered expenses before the plan starts to pay co-insurance. If you cover dependents, the deductible works differently with the HSA and Default Plans than with the HRA and PPO Plans.

**Out-of-pocket limit** – The maximum amount you have to pay for covered expenses each calendar year.
USING THE HRA PLAN OPTION (IN-NETWORK)...

- You pay a co-payment for prescription drugs. Prescription drug expenses do not apply to the medical plan deductible or out-of-pocket limit. See the Benefit Plan Options and Rates flyer for details.

- If you cover dependents, one of two deductible amounts applies for a covered individual. There is an “individual deductible” and a “family deductible.”
  - Individual: $3,000
  - Family: $6,000

  An individual can meet the annual deductible in one of two ways:
  - Covered expenses for that person reach the $3,000 individual deductible. Once one person has met the individual deductible, the plan will start to pay 80% co-insurance for that person.
  - All covered expenses for all covered family members combine to reach the $6,000 family deductible. Once the family deductible has been met, the plan will start to pay 80% co-insurance for all covered family members.

- The annual out-of-pocket limit (which includes your deductible) is met in the same way.
  - Individual: $5,900
  - Family: $11,800

FOR UHC AND HIGHMARK
MEDICAL PLANS
CENTERS OF EXCELLENCE

The Edison Healthcare Program provides you with access to top specialists for certain serious medical conditions and procedures, including:
- Spine surgery,
- Cardiac surgery,
- Joint replacement,
- Cancer treatment, and
- Stem-cell therapy.

Edison’s Smart Care Network provides access to healthcare experts who are some of the best in the world.

If you enroll in the Reyes Holdings HRA Plan or PPO Plan, the plan will pay 100% of the covered costs with a travel benefit for approved on-site visits.

If you enroll in the Reyes Holdings HSA Plan or Default Plan, the plan will pay 100% of the covered costs, after the deductible, with a travel benefit for approved on-site visits.

For more information, contact Edison Healthcare at 866-982-7988.
FOR UHC AND HIGHMARK MEDICAL PLANS
FREE, CONFIDENTIAL AND EXPERT MEDICAL GUIDANCE

ConsumerMedical is your medical ally for one-on-one support to help you and your family make informed medical decisions. Services include:
- Personal support from a nurse backed by a doctor and professional researcher.
- Information to help you better understand your condition and treatment options.
- Recommendations for top-rated specialists and hospitals in your area and insurance network.

Receive a $400 gift card for working with ConsumerMedical at least 30 days before lower back surgery, hip or knee replacement, or hysterectomy. For details, go to Employee Center.

Contact ConsumerMedical at 1-888-361-3944. Monday - Friday, 8:30 a.m. to 11 p.m. ET, or visit www.myconsumermedical.com (enter “Reyes” in the company code field).

HSA Plan and Default Plan
Both the HSA Plan and the Default Plan are qualified high-deductible health plans as defined by the IRS. This allows you to open a tax-advantaged savings account called a Health Savings Account. You can use the Health Savings Account for eligible health care expenses now or in the future. For more details on Health Savings Accounts, see pages 14 - 15 or go to Employee Center.

USING THE HSA AND DEFAULT PLAN OPTIONS (IN-NETWORK)...

- Prescription drugs are treated as any other medical expense. You pay for all expenses, medical and/or prescriptions, until you’ve met the plan deductible. Then, the plan starts paying co-insurance, as follows:
  - 90% co-insurance under the HSA Plan.
  - 70% co-insurance under the Default Plan.

- If you cover dependents, you must meet the employee + dependent(s) deductible before the plan starts to pay co-insurance. The expenses of one person alone, or any combination of your family members, counts toward the employee + dependent(s) deductible, which is:
  - $2,800 under the HSA Plan.
  - $6,800 under the Default Plan.

- If you cover dependents, an individual can meet the annual out-of-pocket limit in one of two ways:
  1. Covered expenses for one person reach the individual out-of-pocket limit. Once the individual limit ($6,750) has been met by one person, the plan will start to pay at 100% for that person.
  OR
  2. Covered expenses for all covered family members reach the family out-of-pocket limit ($13,500). Once the family limit has been met, the plan will start to pay at 100% for all covered family members.

So what’s the difference between the two plans? The amounts of the deductible and co-insurance are different between the two plans. See the Benefit Plan Options and Rates flyer for details.

Am I eligible to contribute to a Health Savings Account?
You can enroll in the HSA Plan or Default Plan without opening a Health Savings Account. However, if you choose to contribute to a Health Savings Account, the IRS requires that the following conditions be met. You:
- Must be enrolled in a high-deductible health plan, like the Reyes Holdings HSA Plan or Default Plan.
- Must not have any other type of medical coverage other than a high-deductible health plan (as defined by the IRS). If you have coverage through a spouse’s traditional medical plan or through a spouse’s Health Care Flexible Spending Account, you can’t contribute to a Health Savings Account.
- Must not be enrolled in Medicare.
- Must not be claimed as a dependent on another person’s federal income tax return.
Using Your Health Savings Account
If you open an Optum Bank Health Savings Account, you can contribute to your account through pre-tax payroll deductions. Then, you can use the money in your account to pay for eligible health care expenses, including amounts you pay for medical, dental and vision expenses and other expenses as listed in IRS publication 502 (available at www.irs.gov).

Health Savings Account contributions, earnings and withdrawals used for eligible health care expenses are generally free of all federal taxes and most state income taxes. Because of these tax benefits, the IRS limits the amount you can contribute per year:

- Employee Only coverage: $3,550 ($4,550 if you are age 55 or older in 2020), or up to the current IRS limit.
- Employee + Dependents: $7,100 ($8,100 if you are age 55 or older in 2020), or up to the current IRS limit.

You can change how much you contribute to your Optum Bank Health Savings Account at any point during the year. The money remaining in the account rolls over from year to year, and if you leave the company you keep the account.

Opening Your Optum Bank Health Savings Account
Your Optum Bank Health Savings Account can be opened online at www.optumbank.com. Select Enroll Online. You will need the group number associated with your medical plan:

- UnitedHealthcare: 704285
- Highmark: 704285Z

Per IRS regulations, Reyes Holdings conducts annual testing for Health Savings Accounts each year. This testing may result in limits to contributions for employees who are considered by the IRS to be highly compensated.

You can have both a Health Savings Account and a Health Care FSA. However, the Health Care FSA is not a standard FSA. For more information, see Comparing Health Accounts on pages 14 – 15.
PPO Plan

The PPO Plan has the lowest annual deductible. However, you’ll pay more in employee contributions. Also, unlike the HRA Plan, HSA Plan and Default Plan, there is no health account automatically associated with this plan. However, you are eligible to enroll in and contribute to a Health Care Flexible Spending Account. See pages 13 - 15 for more information.

USING THE PPO PLAN (IN-NETWORK)...

- You pay co-payments for prescription drugs. Prescription drug expenses do not apply to the medical plan deductible or out-of-pocket limit. See the Benefit Plan Options and Rates flyer for details.

- If you cover dependents, one of two deductible amounts applies for a covered individual. There is an “individual deductible” and a “family deductible.”
  - Individual: $750
  - Family: $1,500

- An individual can meet the annual deductible in one of two ways:
  - Covered expenses for that person reach the $750 individual deductible. Once one person has met the individual deductible, the plan will start to pay 80% co-insurance for that person.
    OR
  - All covered expenses for all covered family members combine to reach the $1,500 family deductible. Once the family deductible has been met, the plan will start to pay 80% co-insurance for all covered family members.

- The annual out-of-pocket limit (which includes your deductible) is met in the same way.
  - Individual: $5,500
  - Family: $11,000
**FLEXIBLE SPENDING ACCOUNTS (FSAs)**

<table>
<thead>
<tr>
<th>OPTIONS:</th>
<th>CONSIDER THIS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Health Care FSA</td>
<td>• You can enroll in a Health Care FSA even if you don’t enroll in a Reyes</td>
</tr>
<tr>
<td>• Limited Purpose Health Care FSA</td>
<td>Holdings medical plan.</td>
</tr>
<tr>
<td>(available only if you contribute</td>
<td>• If you know you will have health care or day care expenses, you will save</td>
</tr>
<tr>
<td>to a Health Savings Account)</td>
<td>money with an FSA.</td>
</tr>
<tr>
<td>• Day Care FSA</td>
<td></td>
</tr>
<tr>
<td>• Decline any or all FSAs</td>
<td></td>
</tr>
</tbody>
</table>

Flexible Spending Accounts—or FSAs—allow you to set aside money pre-tax to pay for health care or day care expenses. You save money because you don’t pay taxes on the amounts that you put into the FSAs.

There are two FSAs—a Health Care FSA (standard or limited purpose) and a Day Care FSA. You make pre-tax contributions to your account(s) through payroll deductions throughout the year. Then, you use those tax-free dollars to either pay your providers or reimburse yourself for eligible out-of-pocket expenses you incur during the plan year.

### Eligible Expenses

In general, amounts you pay for health-related expenses or day care expenses are considered eligible. For a list of eligible expenses, refer to IRS publication 502 (health care) or 503 (day care) at [www.irs.gov](http://www.irs.gov), call 800-TAX-FORM or find a link to the document on Employee Center.

- **Health Care FSA:** You will be reimbursed for eligible health care, prescription drug, dental or vision expenses. Expenses must be incurred from your coverage effective date through March 15 of the following year. If you are contributing to a Health Savings Account, this FSA is not available to you. See the Limited Purpose Health Care FSA below.
- **Limited Purpose Health Care FSA:** You will be reimbursed for dental, vision and post-deductible medical expenses only. Expenses must be incurred from your coverage effective date through December 31. If you are contributing to a Health Savings Account, this FSA is available to you.
- **Day Care FSA:** You will be reimbursed for eligible day care expenses. Expenses must be incurred from your coverage effective date through December 31.

Expenses are incurred when services are received, not when you actually pay for them.

### Maximum Contribution*

**Health Care FSA – standard and limited purpose:** Up to $2,700 per year, or the current IRS limit.

**Day Care FSA:** Up to $5,000 per year, or the current IRS limit.

Contributions are deducted in equal installments – on a pre-tax basis – from your paychecks.

### Using the FSAs

You pay the cost of eligible health and/or day care expenses.

**For the Health Care FSA,** unless you actively select otherwise, eligible health care expenses that are processed by the medical plan administrator will be automatically paid from the FSA. Otherwise, file a claim by June 30 of the following year to receive reimbursement for eligible FSA expenses. (FSA debit cards are not available.)

**Plan carefully!** Money left in your FSA after June 30 of the following year will be forfeited and cannot be returned to you.

*Per IRS regulations, Reyes Holdings conducts annual testing for Flexible Spending Accounts each year. This testing may result in limits to contributions for employees who are considered by the IRS to be highly compensated.*

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**Important!**

Flexible Spending Accounts require an election every year!
# COMPARING HEALTH ACCOUNTS

Your Reyes Holdings medical plan options include eligibility for various accounts. All three accounts can help you pay for your out-of-pocket expenses, but the accounts differ in important ways:

<table>
<thead>
<tr>
<th>HEALTH REIMBURSEMENT ACCOUNT (HRA)</th>
<th>HEALTH SAVINGS ACCOUNT (HSA)</th>
<th>HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Who is eligible for this account?</strong></td>
<td>Anyone who enrolls in the HRA Plan.</td>
<td>Anyone who enrolls in the HSA Plan or Default Plan and does not have any other health care coverage that is not a high-deductible plan (as defined by the IRS).</td>
</tr>
<tr>
<td><strong>Is the account automatically a part of the medical plan?</strong></td>
<td>Yes. The HRA is a feature of the HRA Plan.</td>
<td>No. The HSA is separate and optional.</td>
</tr>
<tr>
<td><strong>When are funds available?</strong></td>
<td>Your benefit effective date (January 1 for employees enrolling at annual enrollment).</td>
<td>Three business days from the date of the paycheck from which the funds were deducted.</td>
</tr>
<tr>
<td><strong>How do I get money out of the account?</strong></td>
<td>For medical claims processed by the plan administrator, the administrator will automatically use HRA funds to pay providers for any amounts you owe. For other covered services, such as prescriptions, you must submit a claim form and get reimbursed directly for your out-of-pocket expenses.</td>
<td>You will receive a debit card and can request a checkbook. You choose whether you want to use funds to pay for eligible expenses as they are incurred or save the money in the account for future use. Be sure to keep receipts that show you had an eligible expense.</td>
</tr>
<tr>
<td><strong>Who opens the account?</strong></td>
<td>Reyes Holdings.</td>
<td>You open the HSA before you can start a payroll deduction to the account.</td>
</tr>
<tr>
<td><strong>Who makes the contributions?</strong></td>
<td>Reyes Holdings.</td>
<td>You, through pre-tax payroll deductions, and you can change the amount at any time. You may also qualify for earnings on your account.</td>
</tr>
<tr>
<td><strong>How much can I contribute?</strong></td>
<td>The HRA is funded only by Reyes Holdings.</td>
<td>This is based on the level of your medical coverage, up to the current IRS limit. If you cover only yourself: $3,550 per year. If you cover yourself + any dependents: $7,100 per year. If you are age 55 or older in the effective year of coverage, you may contribute an additional $1,000.</td>
</tr>
</tbody>
</table>

## MOVING FROM AN FSA TO AN HSA?

IRS rules state that if you change from a Health Care FSA one year to a HSA the following year and your FSA balance is not $0 on December 31, you will not be able to contribute to your new HSA until April 1.
<table>
<thead>
<tr>
<th><strong>HEALTH REIMBURSEMENT ACCOUNT (HRA)</strong></th>
<th><strong>HEALTH SAVINGS ACCOUNT (HSA)</strong></th>
<th><strong>HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What expenses are eligible?</strong></td>
<td>Medical and prescription drug expenses not paid for by the medical plan.</td>
<td>Medical, dental, vision and prescription expenses not paid for by a plan, as well as expenses for prescribed over-the-counter drugs. See IRS publication 502 at <a href="http://www.irs.gov">www.irs.gov</a> for a complete list of eligible expenses.</td>
</tr>
<tr>
<td><strong>What are the tax advantages for me?</strong></td>
<td>You do not pay taxes on the amounts paid from your account on your behalf.</td>
<td>Contributions, earnings and withdrawals are all tax-free (including most states' income taxes) if used to pay for eligible health care expenses. If you use the account to pay for a non-qualified health expense, you’ll pay ordinary income taxes plus a 20% penalty.</td>
</tr>
<tr>
<td><strong>Does non-discrimination testing apply?</strong></td>
<td>No.</td>
<td>Yes. Contributions are subject to IRS non-discrimination testing rules. If you are considered by the IRS to be “highly compensated” and if the test fails, it’s possible that some of your contributions would have to be considered taxable income.</td>
</tr>
<tr>
<td><strong>Who handles the recordkeeping?</strong></td>
<td>The insurance company.</td>
<td>You and the bank where you open your HSA. <a href="#">Note: Administrative fees may apply.</a></td>
</tr>
<tr>
<td><strong>Do I keep the account if I switch to another plan next year?</strong></td>
<td>No.</td>
<td>Yes.</td>
</tr>
<tr>
<td><strong>Do I keep the account if I leave Reyes Holdings?</strong></td>
<td>No.</td>
<td>Yes.</td>
</tr>
<tr>
<td><strong>Is there a deadline for me to use the account?</strong></td>
<td>Yes and no. Unused money in the account rolls over to the next year, but only if you take the HRA Plan next year. If you do not take the HRA Plan next year, you would need to incur expenses by December 31.</td>
<td>No. You can use the money now, or you can save it and use it for future expenses. You can take money out of the account at any time after you incur the expense (even years later, in retirement). Just be sure you have receipts to prove the expense. <strong>Health Care FSA:</strong> You must incur the expense for the year in which you opened the account by March 15 of the following year. <strong>Limited Purpose Health Care FSA:</strong> You must incur the expense for the year in which you opened the account by December 31 of that year.</td>
</tr>
<tr>
<td><strong>If I have multiple accounts, which one is accessed first?</strong></td>
<td>You access your HRA first, then your Health Care FSA.</td>
<td>Since you submit expenses to the HSA, you determine which account is accessed first. <strong>Health Care FSA:</strong> If you are in the HRA Plan, you access your Health Reimbursement Account first, then your Health Care FSA. If you are in the HSA Plan or Default Plan, you determine which account is accessed first.</td>
</tr>
</tbody>
</table>
You receive the greatest benefits when you use a participating provider. If your dentist is not in the Dental PDP Plus Network, you may be required to:

- Pay the full cost of your dental care at the time of your visit, and file a claim form for reimbursement.
- Pay rates that are over what is considered reasonable and customary. Any amounts over reasonable and customary amounts are not covered by the plan and are your responsibility.

**OPTIONS:**
- Dental Plan
- Decline

**GOOD TO KNOW:**
- To find a network dentist:
  
  - [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits) (Dental PDP Plus Network)
  
  - 800-942-0854

MetLife Dental does not mail or require ID cards. Tell your dentist you have coverage with MetLife. Or, print a card from the MetLife website.

**PLAN FEATURES**

<table>
<thead>
<tr>
<th>DENTAL PLAN</th>
<th>DENTAL PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible Individual/Family</td>
<td>$25/$75</td>
</tr>
<tr>
<td>Preventive and Diagnostic Care</td>
<td>Plan pays 100%, no deductible</td>
</tr>
<tr>
<td>Basic Dental Services</td>
<td>Plan pays 80% after deductible</td>
</tr>
<tr>
<td>Major Dental Services</td>
<td>Plan pays 50% after deductible</td>
</tr>
<tr>
<td>Annual Benefit Maximum</td>
<td>Plan pays up to $2,000 per person</td>
</tr>
<tr>
<td>Orthodontics (adults are eligible; deductible does not apply; lifetime benefits maximum)</td>
<td>Plan pays 50%, up to $2,000 per person</td>
</tr>
</tbody>
</table>
# VISION

## OPTIONS:
- Vision Plan
- Decline

## GOOD TO KNOW:
To find an EyeMed participating provider:
- [www.eyemedvisioncare.com](http://www.eyemedvisioncare.com) (Select network)
- Before you are enrolled: **866-299-1358**
- After you are enrolled: **866-723-0514**

You receive the greatest benefits when you use a participating provider in the Select network.

## PLAN FEATURES
<table>
<thead>
<tr>
<th></th>
<th>PARTICIPATING PROVIDER</th>
<th>NON-PARTICIPATING PROVIDER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Exam</strong> (one per calendar year)</td>
<td>100% after $10 co-payment*</td>
<td>Up to $60</td>
</tr>
<tr>
<td><strong>Eyeglass Lenses</strong>**</td>
<td>100%* after $20 co-payment</td>
<td>Up to $80</td>
</tr>
<tr>
<td>Single Vision Lenses</td>
<td>100%* after $20 co-payment</td>
<td>Up to $60</td>
</tr>
<tr>
<td>Bi-focal Lenses</td>
<td>100%* after $20 co-payment</td>
<td>Up to $40</td>
</tr>
<tr>
<td>Tri-focal Lenses</td>
<td>100%* after $20 co-payment</td>
<td>Up to $40</td>
</tr>
<tr>
<td><strong>Frames</strong> (one per calendar year)</td>
<td>Up to $150</td>
<td>Up to $90</td>
</tr>
<tr>
<td><strong>Contact Lenses</strong> (if medically necessary)</td>
<td>100%*</td>
<td>Up to $210</td>
</tr>
<tr>
<td><strong>Contact Lenses</strong> (not medically necessary) Conventional Contacts</td>
<td>Up to $125; 15% off balance over $125*</td>
<td>Up to $125</td>
</tr>
<tr>
<td><strong>Disposable Contacts</strong></td>
<td>Up to $125</td>
<td>Up to $125</td>
</tr>
</tbody>
</table>

*Limits apply; see the vision brochure available on [Employee Center](http://Employee Center) or review with your provider before receiving services or ordering frames/lenses.

**Lenses (either contacts or for eyeglasses) are covered once each calendar year.

## ADDITIONAL SAVINGS
At Sears Optical and Target Optical, get any available frame (any brand) free of charge.

At ContactsDirect.com, save $20 and get free shipping on your next order of contacts. Create an account at [www.contactsdirect.com](http://www.contactsdirect.com) and an extra $20 will be deducted at checkout. No coupon or code is needed.
WHAT’S A BENEFIT SALARY?

- **Salaried employees**: Your benefit salary for a plan year is your annual salary on December 31 of the prior year.
- **Hourly and component-paid employees**: Your benefit salary for a plan year is your eligible year-to-date pay as of December 31 of the prior year.
- **New hires**: Your benefit salary is your annual salary as of your hire date.

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**LIFE AND AD&D INSURANCE**

**AUTOMATICALLY PROVIDED**

Automatically provided by Reyes Holdings at no cost to you:

- Life insurance: one times your annual benefit salary, up to $300,000
- AD&D: one times your annual benefit salary, up to $300,000

**OPTIONS:**

You can choose to purchase additional life and AD&D coverage for yourself and dependents.

Add, stop or make changes at any time and for any reason.

**GOOD TO KNOW:**

When you are first eligible to enroll in additional life and AD&D coverage, you are not required to provide evidence of insurability for any level of life insurance coverage below $200,000. Future requests for increases in coverage require approval from the insurance company.

These policies are administered by The Hartford. You can choose to purchase additional life and AD&D coverage for yourself and dependents, as follows:

- **SUPPLEMENTAL LIFE**: You choose from an additional one, two or three times your salary, for up to $500,000 of additional coverage. Your cost is based on your age, benefit salary and your status as a tobacco user, and is available on VIC when you enroll.
- **SUPPLEMENTAL AD&D**: AD&D benefits are payable if you die or are seriously injured as the result of an accident. The amount of AD&D benefit payable depends on the severity of the loss. You choose from six coverage options.
- **DEPENDENT LIFE**: Coverage is available for your spouse and/or child(ren). You are automatically the beneficiary, and you choose from five coverage options.

More information on your life and AD&D coverage is available on Employee Center.

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**Designate a Beneficiary**

Designate a life insurance beneficiary on VIC. From the VIC home page, select **Myself, Life Events**, then **Update My Beneficiary**. Be sure to review your designation if you have a life event (for example, if you marry, divorce or have a child).
Short Term Disability—*no enrollment required*

You are eligible for Short Term Disability (STD) coverage on the first of the month after you have completed one year of continuous full-time employment. If, after becoming eligible for the plan, you have a qualifying illness or injury that keeps you from work, the STD plan may begin to pay you benefits. More information on the STD plan is available on [Employee Center](#).

After 26 weeks of STD benefits, you may be eligible for Long Term Disability benefits.

**Long Term Disability**

You may purchase Long Term Disability (LTD) coverage through The Hartford to provide you with an income if you are unable to work due to a lengthy illness, injury or condition.

Coverage is effective the first of the month after you have completed one year of continuous, full-time employment.

Your cost is based on your age, salary and the level of coverage you elect. You will see the cost of each coverage option when you enroll. More information on the LTD plan is available on [Employee Center](#).
If you are a member of a union, you may have bargained for a benefit with plan features that differ from those presented here. For complete plan details, refer to the packet that you received at home from John Hancock Retirement Plan Services. Information is also available on Employee Center.

MODEL MY PAY TOOL IN VIC
Model My Pay is a tool to help you estimate your take-home pay when entering different voluntary deduction scenarios, including 401(k) contributions.

Once logged into VIC, click Menu > Myself > Pay > Model My Pay.

Questions? Look for the Grab ’n’ Go on Employee Center or see your local HR Representative.

The Reyes Holdings 401(k) Thrift Plan is a tax-deferred retirement plan administered by John Hancock. It allows you to make your contributions with either pre-tax, Roth or after-tax dollars. If you are eligible, the company matches your pre-tax and Roth contributions. There is no company match on after-tax contributions. The Plan includes:

- **Payroll deduction contributions**—employees can contribute up to 50% of eligible compensation.
- **Company match** of 50% of the first 10% you contribute, as of the first of the month after one year of employment, if eligible. (50% of the first 6% for Martin-Brower driver/warehouse employees.)
- **Vesting**—you are 100% vested after five years of service as follows:
You can choose from among a wide variety of funds to invest your contributions.

- You are eligible to begin making contributions to the 401(k) Plan on the first day of the month after your hire date.
- Two months after you are eligible, if you haven’t already enrolled or waived coverage, Reyes Holdings will automatically enroll you at a 5% pre-tax contribution rate, which you can change at any time.
- You can enroll in or waive coverage, and direct the investment of your plan contributions, by calling 800-294-3575 or logging into mylife.jhrps.com for more information.

<table>
<thead>
<tr>
<th>YEARS OF VESTING SERVICE</th>
<th>PERCENT VESTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 2 years</td>
<td>0%</td>
</tr>
<tr>
<td>2 years but less than 3 years</td>
<td>25%</td>
</tr>
<tr>
<td>3 years but less than 4 years</td>
<td>50%</td>
</tr>
<tr>
<td>4 years but less than 5 years</td>
<td>75%</td>
</tr>
<tr>
<td>5 years or more</td>
<td>100%</td>
</tr>
</tbody>
</table>
HOW ACCIDENT INSURANCE WORKS
– AN EXAMPLE
Due to a car accident, Edgar was taken by ambulance to the hospital with a broken leg. Accident insurance paid a benefit amount directly to Edgar for each covered service as a result of the accident, as follows:

- Ground Ambulance: $600
- Emergency Room Visit: $100
- X-ray: $75
- CT Scan: $100
- Leg Fracture (closed; non-surgical): $600
- Medical Appliance: $150
- Accident Follow-up (two visits): $150
- Chiropractor (six visits): $150
- Physical Therapy (three visits): $75

Total: $2,000

Accident Insurance
Accident insurance through The Hartford can pay benefits if you suffer an accidental injury. Benefits are based on the type of injury you sustain. Following are examples of covered accidents.

### ACCIDENT INSURANCE

<table>
<thead>
<tr>
<th>EXAMPLES OF WHAT’S COVERED – See the complete schedule of benefits on Employee Center</th>
<th>BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency, Hospital and Treatment Care</td>
<td></td>
</tr>
<tr>
<td>Hospital Admission</td>
<td>$2,000</td>
</tr>
<tr>
<td>Ground Ambulance</td>
<td>$600</td>
</tr>
<tr>
<td>Emergency Room or Urgent Care Visit</td>
<td>$100</td>
</tr>
<tr>
<td>X-rays</td>
<td>$75</td>
</tr>
<tr>
<td>Physical Therapy (up to 10 visits)</td>
<td>$25 per visit</td>
</tr>
<tr>
<td>Injury, Surgery and Treatment Services</td>
<td></td>
</tr>
<tr>
<td>Arthroscopic Surgery</td>
<td>$2,000</td>
</tr>
<tr>
<td>Hip Fracture</td>
<td>$2,000</td>
</tr>
<tr>
<td>Joint Replacement</td>
<td>$1,500</td>
</tr>
<tr>
<td>Most Fractures</td>
<td>$500</td>
</tr>
<tr>
<td>Laceration (2” – 6”)</td>
<td>$150</td>
</tr>
<tr>
<td>Finger or Toe Fracture</td>
<td>$100</td>
</tr>
</tbody>
</table>

If you suffer a qualifying injury, you must submit your claim for benefits directly to The Hartford. You may use the benefit any way you choose, such as paying for deductibles, copays or non-medical costs.

This coverage is guaranteed and it’s portable – you can take it with you if you leave Reyes Holdings.
**Critical Illness Insurance**

Critical illness insurance through The Hartford can help protect your finances from the expense of a serious health problem such as cancer, stroke or heart attack. A lump-sum benefit is paid directly to you for:

- Your illness: $10,000
- Your spouse’s illness: $5,000
- The illness of your dependent child: $5,000.

If you suffer a qualifying critical illness, you must submit your claim for benefits directly to The Hartford. You may use the benefit any way you choose. This coverage is guaranteed but pre-existing exclusions apply.

Coverage is portable – you can take it with you if you leave Reyes Holdings.

**Roadside Assistance**

National Motor Club provides roadside assistance whether you are a driver or a passenger in a car. More information is available on Employee Center or at [www.nmc.com](http://www.nmc.com) or 800-523-4582.

**Identity Theft Protection**

Identity theft protection through LifeLock can help safeguard personal information and alert you to potential security threats. Services include fraud monitoring, data breach notifications and account activity alerts. More information, including a complete list of plan comparisons, is available on Employee Center or at [www.lifelock.com](http://www.lifelock.com) or 800-543-3562.

### Identity Theft Protection

<table>
<thead>
<tr>
<th>SOME PLAN FEATURES – See the complete list on Employee Center</th>
<th>ELITE PLUS</th>
<th>ELITE PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credit, Checking, Savings, Investment and 401(k) Account Activity Alerts</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Checking and Savings Account Application and Takeover Alerts</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Stolen Wallet Assistance and Prior ID Theft Remediation</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Information Protected (Social Security number, Public Records, Driver’s License, etc.)</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Credit Monitoring</td>
<td></td>
<td>3 Bureaus</td>
</tr>
<tr>
<td>Annual Credit Report and Credit Scores</td>
<td></td>
<td>1 Bureau</td>
</tr>
<tr>
<td>File Sharing Network Searches, Norton Identity Safe, Mail List Removal</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

*Note: You must provide an email address and phone number at the time of enrollment.*
Legal Services
With MetLaw® from Hyatt Legal Services, choose from a nationwide network of more than 10,000 participating attorneys for assistance with a variety of legal issues including wills, home refinancing, adoption, debt collection defense and identity theft defense. Within the network, covered legal services are provided with no additional attorney fees. More information is available on Employee Center or at www.legalplans.com or 800-821-6400.

Commuter Expense Reimbursement Account
A Commuter Expense Reimbursement Account through Optum Bank allows you to set aside pre-tax money from your paycheck to use for eligible commuting and parking expenses. Eligible expenses include:
• Public transit services (bus, light rail, streetcar, subway, ferry, etc.);
• Vanpool; and
• Parking at or near work and/or public transportation for your commute.
You can contribute up to the IRS maximum:
• $265 per month for parking expenses; and
• $265 per month for public transportation expenses.
Choose your contribution amount each month for the following month, or you can choose a recurring amount to be deducted each month until you change it or cancel it – which you can do at any time and for any reason.
To enroll, visit www.optumbank.com and login (or register as an account holder if you’re a first-time user). Click on the Transportation Services link and select the transit or parking services you want.

Pet Insurance
Pet insurance through Nationwide is available to help cover veterinary treatment costs. You can choose from three levels of reimbursement: 90%, 70% or 50%.
After the $250 annual deductible, you’ll receive reimbursement for veterinary treatments related to your pet’s accident, injury, illness, surgery, and certain diagnostic tests and prescriptions. You can also purchase wellness coverage for exams, vaccinations, routine blood tests and more. The maximum annual benefit is $7,500.
To enroll, visit www.petinsurance.com/reyes or call 877-738-7874 (be sure to mention you’re an employee of Reyes Holdings). Select the species (dog or cat), provide your zip code and pick your plan.

Homeowners and Auto Insurance
Most employees are eligible to purchase homeowners and/or auto insurance at special discounted rates – paid for via payroll deduction – through MetLife Home and Auto. Homeowners insurance is not available in all states. Call 800-438-6388 for more information and to enroll.
**IMPORTANT NOTICES**

**BENEFIT CHANGES DURING THE PLAN YEAR**

Due to federal regulations, the benefits you select during your enrollment period for a given calendar year will be in effect through December 31 of that calendar year. You may add or drop dependents and make other changes to your benefit plans only under certain circumstances, called life events. Your request for a change must be submitted to the Reyes Holdings HR Service Center within 31 days of the date of the life event. See page 5 of this Guide for additional information.

Examples of life events include: birth, adoption, marriage, divorce, and a change in your spouse’s eligibility for insurance coverage. Refer to the Benefits Change form for a complete listing of qualified life events. Benefit changes may be made only if they are consistent with the life event.

The Benefits Change form is available from your HR Representative, on Employee Center, or from the HR Service Center at benefits@reyesholdings.com or 800-298-9461.

**Important!** You must submit the Benefits Change form and supporting documentation within the 31-day period. Otherwise, you are limited as to when you can make changes and add or drop dependents, and most often would need to wait until the next annual enrollment.

**NOTICE REGARDING WELLNESS PROGRAM**

Reyes Holdings Total Wellness (the “Program”) is a voluntary wellness program available to all employees and their spouses who are eligible for medical coverage under the Reyes Holdings, L.L.C. Health and Welfare Plan. The Program is administered according to federal rules governing employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. You are not required to participate in the Program. However, if you choose to participate, you will be asked to complete a biometric screening, which will include a blood test for total cholesterol, HDL, LDL, triglycerides and glucose, and to participate in a measurement of your height, weight, and blood pressure. The incentive provided to employees and spouses who choose to participate in the Program and who meet the Program’s “Good Health Threshold” is lower medical plan rates. Detailed information about the Good Health Threshold is on page 6 of this Guide. The specific amounts of the incentive are listed in the Benefit Plan Options and Rates flyer that accompanies this Guide.

If you are unable to complete a biometric screening, participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or a reasonable alternative. You may request a reasonable accommodation needed to participate in the Program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the Program will not be provided to your supervisors or managers and will never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed, except to the extent permitted by law to carry out specific activities related to the Program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the Program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the Program will abide by the same confidentiality requirements. The only individuals who will receive your personally identifiable health information are those who need it in order to provide you with services under the Program, such as a registered nurse, doctor or health coach.

In addition, all medical information obtained through the Program will be maintained by CaféWell/Welltok, and will not be disclosed to your employer. CaféWell/Welltok will encrypt any such information that is stored electronically, and will take appropriate precautions to avoid any data breach. In the event a data breach involving information you provide in connection with the Program occurs, you will be notified in accordance with all applicable laws.

You will not be discriminated against in employment because of the medical information you provide as part of participating in the Program, and you will not be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the HR Service Center at 800-298-9461.

**NOTICE OF PRIVACY PRACTICES**

The Notice of Privacy Practices, dated September 23, 2013, describes how medical information about you may be used and disclosed and how you can get access to this information. Please review the notice carefully.

The Notice of Privacy Practices describes the legal obligations of the Reyes Holdings Group Health Plan (the Plan) and your legal rights regarding your protected health information held by the Plan under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH Act). Among other things, the notice describes how your protected health information may be used or disclosed to carry out treatment, payment or health care operations, or for any other purposes that are permitted or required by law. Reyes Holdings is required to provide the Notice of Privacy Practices to you pursuant to HIPAA.

The complete notice is available on Employee Center or from the HR Service Center at benefits@reyesholdings.com or 800-298-9461.

**WOMEN’S HEALTH AND CANCER RIGHTS ACT**

The Reyes Holdings plan complies with this Act, which requires that plans that include maternity benefits, which the Reyes Holdings plan does, allow for a maternity hospital length of stay of at least 48 hours for a vaginal delivery and 96 hours for a cesarean delivery. The hospital stay begins at the time of delivery. The mother and newborn are not required to stay for the minimum number of hours if the attending provider, after consulting with the mother, decides to discharge the mother or newborn earlier. No pre-certification is required for the 48- or 96-hour stays. Precertification is required for hospital stays that exceed the 48- or 96-hours.

The Act also requires that group health plans that offer coverage for a mastectomy also provide coverage for breast cancer patients who elect breast reconstruction in connection with a mastectomy.
Coverage is for reconstruction of the breast on which the mastectomy was performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas. These benefits are provided subject to the deductible and co-insurance/co payment provisions of the medical plan you selected.

**PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)**

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2019. Contact your state for more information on eligibility:

<table>
<thead>
<tr>
<th>State</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALABAMA – Medicaid</td>
<td><a href="http://myalhipp.com">myalhipp.com</a></td>
<td>1-855-692-5447</td>
</tr>
<tr>
<td>ALASKA – Medicaid</td>
<td>The AK Health Insurance Premium Payment Program <a href="http://myalhipp.com">myalhipp.com</a></td>
<td>1-886-251-4861</td>
</tr>
<tr>
<td>ARKANSAS – Medicaid</td>
<td><a href="http://myarhhipp.com">myarhhipp.com</a></td>
<td>1-855-MyARHIP (855-692-7447)</td>
</tr>
<tr>
<td>COLORADO – Health First Colorado (Colorado’s Medicaid Program) &amp; Child Health Plan Plus (CHP+)</td>
<td><a href="https://www.healthfirstcolorado.com/">https://www.healthfirstcolorado.com/</a></td>
<td>1-800-221-3943/State Relay 711</td>
</tr>
<tr>
<td>GEORGIA – Medicaid</td>
<td><a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a></td>
<td>678-564-1162 ext 2131</td>
</tr>
</tbody>
</table>

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your state Medicaid or CHIP office or dial 1-877-KIDS NOW or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren’t already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance.

If you have questions about enrolling in your employer plan, contact the Department of Labor at [www.asksbsa.dol.gov](http://www.asksbsa.dol.gov) or call 1-866-444-EBSA (3272).
To see if any other states have added a premium assistance program since July 31, 2019, or for more information on special enrollment rights, contact either:

**U.S. Department of Labor**  
Employee Benefits Security Administration  
[www.dol.gov/ebsa](http://www.dol.gov/ebsa)  
1-866-444-EBSA (3272)

**U.S. Department of Health and Human Services**  
Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
1-877-267-2323, Menu Option 4, Ext. 61565

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**ABOUT THIS GUIDE:** This guide describes only selected highlights of the Reyes Holdings employee benefit plans. If any statement within this guide, or any other communication, conflicts with applicable plan documents, the plan documents shall govern. Reyes Holdings retains the right to amend, modify or terminate its benefit plans in any respect and at any time, and neither its benefit plans nor your plan participation shall be considered a contract for future employment.
**Important Contacts**

<table>
<thead>
<tr>
<th>RESOURCES</th>
<th>GETTING IN TOUCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reyes Holdings HR Service Center</td>
<td>email: <a href="mailto:benefits@reyesholdings.com">benefits@reyesholdings.com</a> 800-298-9461</td>
</tr>
<tr>
<td>ReyesConnect/Employee Center: Details regarding benefits information applicable to you</td>
<td><a href="http://www.reyesholdings.com">www.reyesholdings.com</a> and click on ReyesConnect at the bottom of the page. (Or visit <a href="http://www.reyesholdings.com/reyesconnect">www.reyesholdings.com/reyesconnect</a>) Click Employee Center &gt; My Total Compensation</td>
</tr>
<tr>
<td>Reyes IT Service Center (for trouble logging into ReyesConnect)</td>
<td>email: <a href="mailto:ITSC@reyesholdings.com">ITSC@reyesholdings.com</a> 877-435-7263</td>
</tr>
</tbody>
</table>

**WELLNESS PROGRAMS**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Assistance Program (Optum)</td>
<td><a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a></td>
<td>866-248-4094</td>
</tr>
<tr>
<td>Weight Watchers</td>
<td>wellness.weightwatchers.com</td>
<td>866-204-2886</td>
</tr>
<tr>
<td>Naturally Slim</td>
<td><a href="http://www.naturallyslim.com/reyes">www.naturallyslim.com/reyes</a></td>
<td>855-999-7549</td>
</tr>
<tr>
<td>Quit for Life Tobacco Cessation Program</td>
<td><a href="http://www.quitnow.net">www.quitnow.net</a> (enrollment code: RHQUIT)</td>
<td>866-784-8454</td>
</tr>
<tr>
<td>CaféWell/Welltok’ (Healthy Reyes Portal/health screenings)</td>
<td>Employees: Employee Center Spouses: healthyreyes.cafewell.com</td>
<td>888-567-2048 886-966-5400</td>
</tr>
<tr>
<td>Hearing Health Care</td>
<td><a href="http://www.epichearing.com">www.epichearing.com</a></td>
<td>866-966-5400</td>
</tr>
<tr>
<td>Wellness Discounts’</td>
<td>Highmark’s Blue365: UnitedHealth Allies: (search for “Extra Programs and Discounts” on homepage.)</td>
<td>844-637-5489 800-860-8773</td>
</tr>
</tbody>
</table>

**MEDICAL**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highmark Blue Cross Blue Shield (including telemedicine)*</td>
<td><a href="http://www.highmarkbcbs.com">www.highmarkbcbs.com</a></td>
<td>844-637-5489</td>
</tr>
<tr>
<td>Highmark 24/7 Nurse Line</td>
<td></td>
<td>888-258-3428</td>
</tr>
<tr>
<td>UnitedHealthcare (including telemedicine)*</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
<td>866-328-6574</td>
</tr>
<tr>
<td>ConsumerMedical</td>
<td><a href="http://www.myconsumermedical.com">www.myconsumermedical.com</a> (enter “Reyes” in the company code field)</td>
<td>888-361-3944</td>
</tr>
<tr>
<td>Edison Healthcare Program</td>
<td></td>
<td>866-982-7988</td>
</tr>
</tbody>
</table>

**PRESCRIPTION DRUG (except Kaiser and MediExcel)**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caremark*</td>
<td><a href="http://www.caremark.com">www.caremark.com</a></td>
<td>800-562-8159</td>
</tr>
<tr>
<td>Caremark Specialty Pharmacy</td>
<td></td>
<td>800-237-2767</td>
</tr>
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</table>

**DENTAL**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>MetLife Dental*</td>
<td><a href="http://www.metlife.com/mybenefits">www.metlife.com/mybenefits</a></td>
<td>800-942-0854</td>
</tr>
</tbody>
</table>

**VISION**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Before you enroll: After you enroll:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EyeMed Vision Care*</td>
<td><a href="http://www.eyemedvisioncare.com">www.eyemedvisioncare.com</a></td>
<td>866-299-1358 866-723-0514</td>
</tr>
</tbody>
</table>

**FLEXIBLE SPENDING ACCOUNTS**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highmark Blue Cross Blue Shield*</td>
<td><a href="http://www.highmarkbcbs.com">www.highmarkbcbs.com</a></td>
<td>844-637-5489</td>
</tr>
<tr>
<td>UnitedHealthcare*</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
<td>877-311-7849</td>
</tr>
</tbody>
</table>

**HEALTH SAVINGS ACCOUNTS**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optum Bank</td>
<td><a href="http://www.optumbank.com">www.optumbank.com</a></td>
<td>800-791-9361</td>
</tr>
</tbody>
</table>

**LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Hartford</td>
<td><a href="http://www.thehartford.com/benefits/reyes">www.thehartford.com/benefits/reyes</a></td>
<td>888-563-1124</td>
</tr>
</tbody>
</table>

**SHORT TERM DISABILITY**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reyes Holdings HR Service Center</td>
<td><a href="mailto:leaves@reyesholdings.com">leaves@reyesholdings.com</a></td>
<td>800-298-9461</td>
</tr>
</tbody>
</table>

**LONG TERM DISABILITY**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Hartford</td>
<td><a href="http://www.thehartford.com/benefits/reyes">www.thehartford.com/benefits/reyes</a></td>
<td>800-752-9713</td>
</tr>
</tbody>
</table>

**OTHER BENEFITS**

<table>
<thead>
<tr>
<th>Program</th>
<th>Website</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retirement Plan</td>
<td>mylife.jhrps.com</td>
<td>800-294-3575</td>
</tr>
<tr>
<td>Accident Insurance</td>
<td><a href="http://www.thehartford.com/benefits/reyes">www.thehartford.com/benefits/reyes</a></td>
<td>866-547-4205</td>
</tr>
<tr>
<td>Critical Illness Insurance</td>
<td><a href="http://www.thehartford.com/benefits/reyes">www.thehartford.com/benefits/reyes</a></td>
<td>866-547-4205</td>
</tr>
<tr>
<td>Roadside Assistance</td>
<td><a href="http://www.nmc.com">www.nmc.com</a></td>
<td>800-523-4982</td>
</tr>
<tr>
<td>Identity Theft Protection</td>
<td><a href="http://www.lifelock.com">www.lifelock.com</a></td>
<td>800-543-3562</td>
</tr>
<tr>
<td>Legal Services’</td>
<td><a href="http://www.legalplans.com">www.legalplans.com</a></td>
<td>800-821-6400</td>
</tr>
<tr>
<td>Commuter Expense Reimbursement Account</td>
<td><a href="http://www.optumbank.com">www.optumbank.com</a></td>
<td>877-462-5039</td>
</tr>
<tr>
<td>Pet Insurance</td>
<td><a href="http://www.petinsurance.com/reyes">www.petinsurance.com/reyes</a></td>
<td>877-738-7874</td>
</tr>
<tr>
<td>Homeowners and Auto Insurance*</td>
<td><a href="http://www.metlife.com">www.metlife.com</a></td>
<td>800-438-6388</td>
</tr>
</tbody>
</table>

* Direct access to these websites is available on Employee Center.