2023-2024 BENEFITS
BENEFITS ENROLLMENT GUIDE

FAIRFIELD®

FAIRFIELD CHAIR COMPANY | 1331 HARPER AVE SW | LENOIR, NORTH CAROLINA 28645 | P: 828.758.5571

CONTENTS

WELCOME

Fairfield Chair welcomes you to your annual benefits options, and new hires for your initial benefit elections!

Our employees are our most valuable assets and this is why at Fairfield Chair, we are committed to providing a comprehensive employee benefit program that helps our employees and their families stay healthy, feel secure, and maintain a work/life balance.

Within the following pages, you will find a summary of our 2023 - 2024 benefit plans for the period of 10/1/2023 through 9/30/2024. This guide provides a general overview of your benefit choices so that you can select the coverage that is right for you and your family. Our program offers a broad range of plan options and has been carefully designed to grow and meet the needs of our diverse workforce.

With choice comes responsibility and planning. In order to maximize your benefits and minimize your costs, please take the time to:

- Enroll on time
- Read and understand each benefit offering
- Ensure that you and your family are educated consumers of health care services and choices

ABOUT THIS BENEFITS BOOKLET

This Benefit Guide describes the highlights of Fairfield Chair's benefits program in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information in this guidebook. If there is any discrepancy between the description of the program elements as contained in this benefits guide and the official plan documents, the language in the official plan documents shall prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Any and all elements of Fairfield Chair's benefits program may be modified in the future, at any time, to meet Internal Revenue Service (IRS) rules, ERISA or otherwise as decided by Fairfield Chair.

ELIGIBILITY

Fairfield Chair encourages the health and financial well-being of its employees by providing access to quality and affordable healthcare and well-being benefits. To determine the benefits for which you may be eligible, please refer to the chart below. You're eligible to participate in these plans upon meeting each plan's eligibility requirements. You also have the option to enroll your eligible dependents. Fairfield Chair may conduct an audit requesting supporting official documentation on all eligible dependents at any time during the plan year.

Please thoroughly review this Benefits Guide to learn more about these options.

DEPENDENT ELIGIBILITY

Eligible dependents may include:

- Your federally recognized legal spouse
- Dependent children to age 26, regardless of full time student status and marital status
- Your unmarried child(ren) of any age who, prior to age 26, is incapable of self-support due to a mental or physical disability and who are totally dependent on you

Additional information on the eligibility requirements is available in the Summary Plan Description (SPD) and/or Certificate for each line of coverage. Limitations and exclusions may apply.

IRS Qualified Life Event (QLE) / Change in Status

Once your open enrollment, or new hire elections have been made, you cannot make changes to your elections again until the next annual open enrollment period unless you experience a QLE such as:

- A change in your legal marital status (such as marriage, divorce or death of a spouse)
- A change in the number of dependents (such as birth, adoption of a child, or death of a dependent)
- A change in your spouse's employment status including commencement or termination of employment, a change from full-time to part-time status or vice versa)
- Your dependent satisfying or ceasing to satisfy an eligibility requirement for coverage

You have 30 days from the date of a qualified life event to notify Human Resources and provide appropriate documentation to change your benefits. Requests received after 30 days will NOT be honored due to strict IRS regulations.

IMPORTANT NOTES:

Not every change in status permits a change in benefit plan elections. A change in election is permitted only when it is determined that the change in status affects eligibility for coverage of the employee, a spouse or a dependent under a benefit plan.

*Section 125 of the Internal Revenue Code (IRC) governs how employers provide benefits to employees on a pre-tax basis. After an employee has made an initial enrollment election, Section 125 does permit "change in status" changes outside of annual benefits Open Enrollment for certain, specific reasons as outlined in the Permitted Election Changes Regulation of Section 125 (1.125-4).

BENEFIT	Employment Status	New Hire Waiting Period & Effective Date
Medical, Prescription, Vision & Dental	Full-Time ≥ 30 hours per week	30 days Benefits are effective on the 1st of the month following 30 days of continuous employment
Basic & Voluntary Life/AD&D		
Short-Term & Long-Term Disability		
Flexible Spending Accounts (FSAs)		
Retirement Savings Plan 401(k)		

IMPORTANT ENROLLMENT INFORMATION

August 30, 2023—September 8, 2023

2023– 2024 New Benefit Elections or Changes

Must Be Submitted During This Period!

Open Enrollment will be ACTIVE.

Everyone must make elections for the plan year that starts on October 1, 2023

OPEN ENROLLMENT

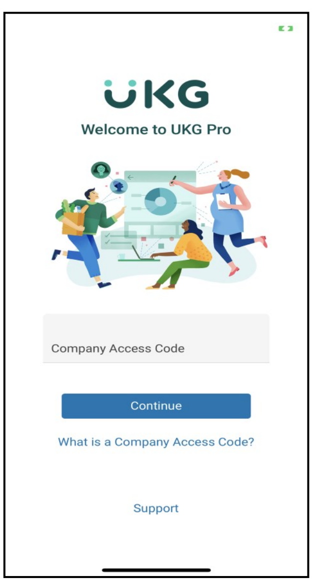
Fairfield Chair's plan year is from October 1, 2023 through September 30, 2024. Open enrollment for the 2023-2024 plan year will be from August 30 — September 8, 2023.

Open Enrollment is your once a year opportunity to add or delete dependents or change coverage tiers. If you want to keep the same benefits or make any type of change to your coverage or dependents covered, you MUST complete your elections online no later than September 8, 2023. If you do not make any elections, all your current benefits will end and you will not have any coverage effective 10/1/2023, except for the employer paid Life insurance.

If you would like to continue your participation in one of Flexible Spending Accounts (FSA), there will be a separate Open Enrollment period for that benefit. Human Resources will announce the FSA Open Enrollment date.

To sign up for benefits with Fairfield Chair, you will first need to log in to your UltiPro account. Please see your HR Operations Specialist for your User Name and temporary password.

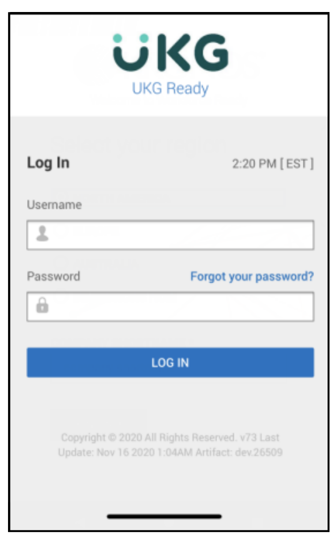
- When using a PC, please visit **ew11.ultipro.com**
- You can enroll in your benefits via the UKG Pro App. If you use the Mobile App, you will need to use **Fairfield1921** for the company access code
- Once you have registered with the UKG Pro App, you will need to download the UKG Ready App and complete the registration to link your Workforce Management (time and attendance)
- For further login assistance, please see your HR Operations Specialist



UKG Pro

Used to view:

- Benefits
- Pay Stubs
- Organization Charts
- News & Info



UKG Ready

Used to view:

- Time Clock
- Request Time off

HEALTHY LIVING

At Fairfield Chair, we want to encourage our employees to live a healthy lifestyle. There are many variables in our lives and in our world that we can't control. But we make choices everyday about things we can control: what we eat, how much we move, and whether we use tobacco products. These choices directly impact our health. While sometimes it's hard to see the correlation, over time the evidence is clear: health and quality of life is improved when we put the right food in our bodies, when we move the way we're supposed to move, and when we steer clear of tobacco – essentially when we take care of ourselves and treat our bodies well. Although that may sound easy, we know leading a healthy lifestyle can be anything but easy.

A first step in making better choices is "Knowing Your Numbers." The chart below gives you key biometric measures, national standards and a place to track your numbers. Once you know your numbers you can begin to work with your healthcare provider on improving your health.

Biometric Measure	National Standards	What are your numbers?
Tobacco Use	None	
Cholesterol Ratio	< 4.0 or 200 mg/dl	
HDL	> 40 for men > 50 for women	
Blood Pressure	120 / 80 mm HG	
Blood Glucose	< 100 mg/dl (fasting) < 140 mg/dl (non-fasting)	
Waist Circumference	< 40 inches for men < 35 inches for women	
Body Mass Index (BMI) Underweight Healthy Weight Overweight Obese	 < 18.5 = 18.5—24.9 = 25.0—29.9 >30	

HEALTHY LIVING

Regular exercise is a key step in improving your numbers! Whether that's walking in your neighborhood, following a couch to 5k exercise schedule, taking the stairs, or joining a gym, you just have to get started with "one thing."

It takes about **six to eight weeks to form a habit**, regardless of whether it is a healthy habit or one that's not so noble. And while we are forming that new, healthy habit, many folks sabotage themselves by being too aggressive in training, selecting the wrong training program, or not developing a plan to maintain an exercise program.

First, visit your physician for a check-up. Be sure your body is ready for exercise, especially if you haven't exercised in a long time. Some of us have conditions which need to be addressed before starting an exercise program.

Second, figure out your starting point. You need to know where to begin your journey. Don't compare yourself to a friend, significant other, co-worker or even the "you" you were 20 years ago when you were in high school. Don't compare yourself to the "you" you will be, or want to be, in six months. Rather, honestly assess how much exercise you have had in the last six months to a year. Recent athletic activity is a precursor for selecting a proper training program.

Not using Tobacco is another key to your health, but quitting can be very challenging even for the best of us. If you are a tobacco user, there are resources to help you quit.

BCBSNC will pay for tobacco cessation products, and there is a tobacco cessation program available through www.bcbsnc.com.

You can also access the website at www.smokefree.gov, which has information you need on the best ways to quit smoking and the tools to make it happen. You can build a "quit plan," read articles, take quizzes and get quick links to other resources like:

- Smokefree TXT is a text message program that provides daily encouragement, advice and tips to quit smoking successfully.
- The QuitGuide is a free smartphone app that teaches you the steps to quit and the skills you need to become and stay Smokefree. The app gives you extra support when you need it most. You can track your progress, cravings, triggers, and tag the times and places that make it hard for you to stay Smokefree.

WHERE AND WHEN TO GET HEALTHCARE

Telehealth Virtual Visits— Average wait time: 5 minutes

- **$10 copay**
- Basic care from a board certified physician from your phone, laptop or tablet
- Available 24/7, even on weekends and holidays
- See registration instructions for 'virtual visits' through Teladoc page in this guide

Retail Health Clinics— Average wait time: 15 minutes

- **$20 copay**
- Basic care from a nurse practitioner on a walk-in basis with extended hours
- Used for minor health concerns that need care quickly
- Such as sore throats, ear infections, pink eye, skin rashes, bladder infections and those last minute sports physicals

Find the nearest Retail Health Clinic locations at:

- www.ccaclinics.org/membership/clinic-locations
- www.cvs.com/minuteclinic/clinic-locator
- Store Locator | Walgreens

Primary Care Physician— Scheduled Visits

- **$25 copay**
- Helps you prevent disease and stay healthy
- Diagnose and treat a full range of health issues
- Refer you to the right care when you need a specialist
- Help with the healthcare needs of your whole family
- Costs less than the emergency room or urgent care centers

Urgent Care Clinics— Average Wait Time: 15-45 minutes

- **$75 copay**
- When your doctor is unavailable, get immediate quality care on a walk-in basis with extended hours
  For immediate attention for minor to moderate issues such as sports injuries, migraines, vomiting, sprains and back pain

Emergency Room— Average Wait Time: 4 hours

- **$500 copay**
- Care available 24/7 for severe emergencies from trained clinicians
- If you are facing an issue that threatens your life or health, never hesitate to go straight to the emergency room

Things to think about:

- **Non-emergency care delivered in the ER costs 5 times more than in a doctor's office or clinic**
  Research studies indicate that between 8-27% of ER visits are inappropriate and should have been treated in a less expensive setting
- ER doctors rarely have relationships with the patients they see, nor do they typically have your full medical history, so they must order expensive tests to determine a diagnosis and course of treatment
- Patients, when possible, should be treated by their primary care physician for non-emergency conditions in order to promote consistent, preventive and quality care

REGISTERING FOR TELEHEALTH

Prepare for the "what ifs" and activate your telehealth account today. This will ensure you have online access to board certified physicians, therapists, social workers, psychiatrists and psychologists. When you're ready, they'll be there for you.

Sunburn at the beach? Stomach bug on Thanksgiving? In a rural area with no doctors close by? Think you have the flu, but don't feel up to driving to your doctor's office?

These are just a few of the reasons people use telehealth. And you can too! Your Fairfield Chair health plan with BCBSNC includes Telehealth services from Teladoc, a time saver with extra convenience.

Skip the waiting room and the germs!

Telehealth offers these time-saving benefits:

- Video consults available 24 hours a day, seven days a week (even holidays)
- Takes just minutes to get connected with a board certified physician
- No appointment needed—though you can make one with a specific doctor
- Pediatricians are available if your covered child gets sick
- If you need a prescription, the Telehealth doctor can electronically send your prescription to the pharmacy of your choice
- Whether you are on the couch, at work or traveling— you can use Teladoc anywhere in the USA

Teladoc can handle many non-emergency health problems:

- Acne
- Addiction
- Allergies
- Anxiety
- Asthma
- Constipation
- Cough, cold or flu
- Depression
- Diarrhea
- Ear problems
- Family difficulties
- Fever
- Grief counseling
- Headache
- Insect bites
- Joint aches & pains
- LGBTQ+ issues
- Marital issues
- Nausea/vomiting
- Pink eye
- PTSD
- Rash
- Sinus Problems
- Sore throat
- Stress
- Urinary problems
- Work pressures
- And so many more…

Getting Started— Don't wait until you're sick— Sign up today!

There are several ways to activate your telehealth account: online by texting, downloading the mobile app or by phone.

- Online at Teladoc.com and click "set up account"
- Download the mobile app and click "Activate Account"
- Text "Get Started" to 1-469-844-5637
- Call 1-800-TELADOC (835-2362)

Available on the App Store

GET IT ON Google Play

TELADOC®

PREVENTIVE CARE SERVICES

The following services are covered without a co-pay, co-insurance or deductible when the services are provided by an in-network provider. The services listed may also be subject to age, gender and frequency guidelines.

Services*	Adults		Special Populations	
	Men	Women	Pregnant Women	Children
Immunizations				
Hepatitis A	X	X		X
Hepatitis B	X	X		X
Herpes Zoster	X	X		
Human Papillomavirus	X	X		X
Hemophilic Influenza Type b				X
Influenza (flu shot)	X	X		X
Inactive Poliovirus				X
Mumps, Measles & Rubella	X	X		X
Meningococcal	X	X		X
Pneumococcal	X	X		X
Rotavirus				X
Tetanus, Diphtheria, Pertussis	X	X		X
Varicella	X	X		X
Prevention & Preventive Medications				
Aspirin for the Prevention of Cardiovascular Disease	X	X		
Breast Cancer, medications		X		
Folic Acid Supplementation		X		
Gonococcal Ophthalmic Neonatorum, Medication				X
Iron Deficiency Anemia, Prevention				X
Tobacco Use in Children and Adolescents, Primary Care Interventions				X
Counseling				
Alcohol Misuse Screening & Behavioral Counseling	X	X	X	
Breastfeeding, Counseling		X	X	
Falls in Older Adults, Counseling & Medication	X	X		
Sexually Transmitted Infections, Counseling	X	X		X
Skin Cancer, Counseling	X	X	X	X
Tobacco Use in Adults, Counseling and Interventions	X	X		

PREVENTIVE CARE SERVICES

Services*	Adults		Special Populations	
	Men	Women	Pregnant Women	Children
Screenings				
Abdominal Aortic Aneurysm	X			
Bacteriuria			X	
BRCA-Related Cancer in Women		X		
Breast Cancer		X		
Cervical Cancer		X		
Chlamydial Infection		X	X	
Colorectal Cancer	X	X		
Congenital Hypothyroidism				X
Depression in Adults	X	X		
Diabetes Mellitus	X	X		
Gestational Diabetes Mellitus			X	
Gonorrhea		X	X	
Hearing Loss in Newborn				X
Hepatitis B Virus in Pregnant Women			X	
Hepatitis C Virus Infection in Adults	X	X		
High Blood Pressure in Adults	X	X		
HIV Infection	X	X	X	X
Intimate Partner Violence and Elderly Abuse		X		
Iron Deficiency Anemia			X	
Lipid Disorders in Adults	X	X		
Lung Cancer	X	X		
Major Depressive Disorder in Children & Adolescents				X
Obesity in Adults	X	X		
Obesity in Children and Adolescents				X
Osteoporosis		X		
Phenylketonuria (PKU)				X
Sickle Cell Disease in Newborns				X
Syphilis Infection (Pregnant Women)			X	
Visual Impairment in Children Ages 1 to 5				X

Note: *Source - USPSTF A and B Recommendations and www.healthcare.gov/preventive-care-benefits/

BCBSNC MEMBER RESOURCES

BCBSNC offers a wide range of resources . Below are some of those which may be available to you and your covered family members. We encourage you to take advantage of any of these that are appropriate for your specific needs.

Resources	Getting the most out of your plan
Blue Connect	Your online source for tools and info about your health plan is at BlueConnectNC.com (
SmartShopper Program Blue Cross and Blue Shield of NC	FREE program available to all the employees that participate in our Medical Plan. A SmartShopper Personal Assistant can help you find the best provider for over 100 procedures at high quality locations so you can earn cash rewards and save money out-of-pocket with SmartShopper. Call the Personal Assistance Team at 1-877-702-6661 Monday through Thursday 8am to 8pm and Friday from 8am to 6pm EST for more information.
Diabetes Free NC	Free educational and informational resources from a wellbeing test, to pre-diabetes, and full-on diabetes for anyone residing in NC. You do not have to be insured by a BCBSNC plan to access the information, programs and resources. Visit www.DiabetesFreeNC.com
Blue365	Find discounts and deals at bcbsnc.com/blue365
Healthy Outcomes Care Management	Find health and wellness programs available at BlueConnectNC.com and click on Wellness
Blue Distinction Centers & Blue Distinction Centers +	Find a center near you at BlueConnectNC.com, click Look Up a Doctor to Find a Doctor, Facility or Medical Cost
Bluecard Program	Find in-network care away from home at BlueConnectNC.com, click on Look Up a Doctor and select Find a Doctor, Facility or Medical Costs or call BlueCard Access at 800-810-BLUE (2583).
Find Care That's Right For You!	Find the right care, read reviews and get cost estimates for care at BlueConnectNC.com and click on Look Up a Doctor

Setting Up a Blue Connect Account

- Go to **www.bluecrossnc.com**
- Select the Members tab
- Click on Register for Blue Connect
- Enter your Subscriber ID (from your BCBSNC ID Card), Date of Birth, Zip Code
- Create a User ID and Password
- Choose a Security Question and Answer
- Enter your preferred email and Click Finish

Earn Cash Rewards by using Smart Shopper from Blue Cross Blue Shield of NC

You have SmartShopper!

Prices for the same in-network, high-quality procedure can vary dramatically. You can shop for medical care, compare costs and save money with SmartShopper. And you can earn a cash reward as a share of the savings.

Medical procedure costs vary by location.

Use SmartShopper to compare in-network prices for 100+ procedures at high-quality locations. Call or shop online so you can earn cash and save money out-of-pocket with SmartShopper!

Here's how it works

Compare prices and rewards by shopping online or calling the Personal Assistant Team at **877-702-6661**.

Schedule your appointment or let the Personal Assistant Team do it for you.

Earn your cash reward by having your appointment within the year.

Visit **BlueCrossNC.com/SmartShopper** or call the SmartShopper Personal Assistant Team at **877-702-6661**. The Personal Assistant Team is available to help you shop, find a location, compare costs, confirm rewards, and even schedule your appointment. Call today!

Go Green by going paperless! Contact us or scan this code to register your email today.

The Personal Assistant Team is available Monday through Thursday from 8 a.m. to 8 p.m. and Friday from 8 a.m. to 6 p.m. ET.

BlueCross BlueShield of North Carolina

SmartShopper®

The SmartShopper program is offered by Sapphire Digital, an independent company. Incentives available for select procedures only. Payments are a taxable form of income. Rewards may be delivered by check or an alternative form of payment. Members with primary coverage under Medicaid or Medicare are not eligible to receive incentive rewards under the SmartShopper program.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides free aids to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the Customer Service number on the back of your ID card for assistance.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número para servicio al cliente que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

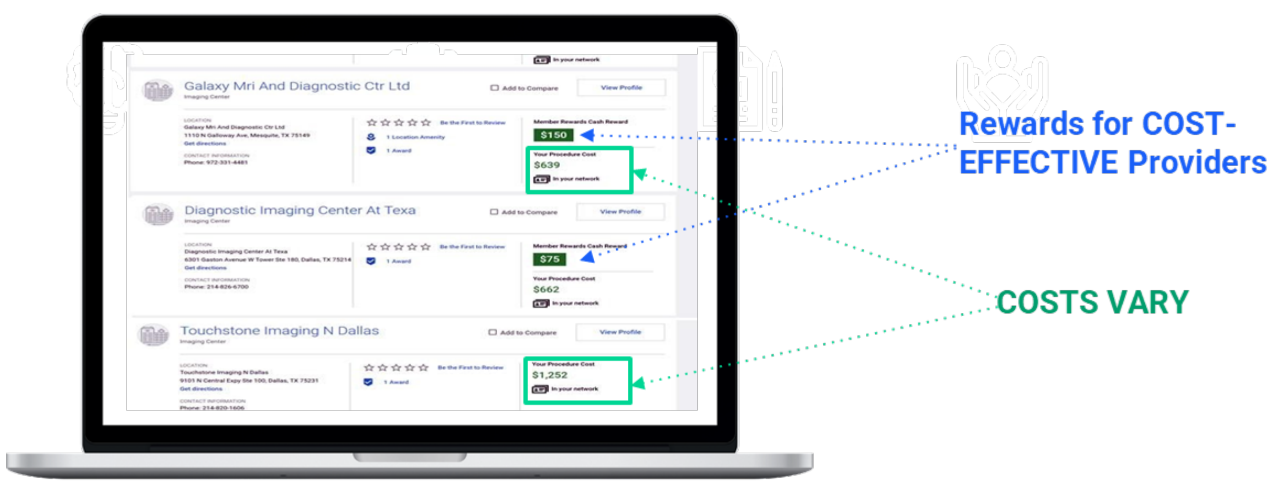
Blue Cross Blue Shield of NC

SmartShopper®

The four easy steps to savings - for any shoppable procedure

1	2	3	4
"I need a service"	**"I need help selecting"**	**"I got the service"**	**"Hey, thanks for the cash!"**
Jim's doctor recommends a medical service or procedure	Jim called a concierge for a high-quality, lower cost site. She scheduled his appointment.	His appointment was confirmed and he had the procedure.	After claim was paid, Jim received an incentive check in the mail.

Shopping Results Page – REWARDS and Costs



MEDICAL & PRESCRIPTION DRUG PLAN

Fairfield Chairs' medical and prescription drug plan is administered by BCBSNC. You have the option of using both in-network and out-of-network providers, but you will realize your biggest savings when using in-network providers whenever possible. Be sure to visit BCBSNC at www.bluecrossnc.com to confirm your current provider(s) in or out of network status or to locate a new provider. Below is a brief summary of benefits:

Benefit Plan Summary	PPO	
	In-Network (negotiated rate)	*Out-of-Network*
Plan Year Deductible		
Individual	$2,000	$5,000
Family	$4,000	$10,000
Plan Year Out-of-Pocket Maximum	Includes deductibles, coinsurance and copays	
Individual	$4,000	$12,700
Family	$8,000	$25,400
Office Visits		
Preventive Services	No Charge	Not Covered
Telehealth	$10 per visit	N/A
Retail Health Clinic	$20 per visit	40% coinsurance, after deductible
Primary Care	$25 per visit	40% coinsurance, after deductible
Specialist	$50 per visit	40% coinsurance, after deductible
Urgent Care	$75 per visit	$75 per visit
Emergency Room	$500 per visit	$500 per visit
Inpatient	20% coinsurance, after deductible	40% coinsurance, after deductible
Outpatient	20% coinsurance, after deductible	40% coinsurance, after deductible
Coinsurance	Member pays 20%, Plan pays 80%	Member pays 40%, Plan pays 60%

Medical PPO Deductions	Weekly	Semi-Monthly
Employee	$49.15	$106.50
Employee + Spouse	$120.92	$262.00
Employee + Child(ren)	$106.15	$230.00
Employee + Family	$159.23	$345.00

PRESCRIPTION DRUGS

Benefit Plan Summary	PPO		
	Retail (up to a 30 day supply)	*Retail (31-60 day supply)*	*Mail Order (90 day supply)*
Tier 1 Tier 2 Tier 3 Tier 4	$10 $40 $60 25% coinsurance *There is a $60 per Prescription Minimum and a $250 per Prescription Maximum for each 30-day supply of Tier 4 drugs.*	$20 $80 $120 N/A	$20 $80 $120 N/A
Out-of-Network	You are responsible for charges over the allowed amount		
Formulary	Enhanced 4 Tier Commercial		
Pharmacy Network	Broad Plus		
Dispense as Written (DAW) Rule	MAC B Pricing. You will be charged a Penalty when a Generic Equivalent is available and the Provider does not require a Brand to be dispensed. The Penalty does not count toward your Out-of-Pocket Limit		
Specialty Pharmacy	You must use Accredo Specialty Pharmacy for your Specialty Medications. Visit www.accredo.com or call 833-599-0513 for more information		

How to save on your Prescription Drug Costs

- Use a pharmacy that is in-network, and most major pharmacies are in the network. Use your local pharmacy for a 30-day supply or less.
- Use mail order for prescriptions of maintenance medications at a lower cost— Mail order copay is 2x the cost of a 30 day retail fill, but for up to a 90 days supply. Maintenance drugs are those that are taken every day.
- Use Tier 1 drugs (usually generics) whenever possible. Generics are “copies” of brand name drugs whose patent protection has expired, are approved by the FDA and are typically less expensive to you.
- Discuss the preferred drug list (aka formulary) with your doctor. If a Tier 1 or generic drug is not an option, using preferred formulary prescription drugs will save you money over non-preferred brand name drugs.

How Mail Order Works For You

If you take any medications on a regular basis, we strongly encourage you to use the mail order home delivery program. Home delivery is safe, and saves you time and money! Whether you have a new prescription or need to transfer an existing prescription, it’s easy to get started with Express Scripts.

- Visit BlueConnectNC.com to use your existing BCBSNC login — or go directly to https://www.esrx.com/BCNC or call 833-599-0449.
- Transfer your prescriptions from a retail pharmacy to home delivery
  - Fill out the online form and Express Scripts will take care of the rest
  - Be sure to have your BCBSNC member ID handy because you’ll be prompted to enter your ID number

PRESCRIPTION DRUGS

Prior Authorization (PA)

Certain medications need approval from BCBSNC before your plan will cover them. These medications have a **(PA)** next to them on your drug list. What types of medications typically need approval? Medidcations that:

Your plan will only cover these medications if your doctor's office requests and receives approval from BCBSNC.

- May be unsafe when combined with other medications
- Are often misused or abused
- Have lower-cost, equal effectiveness alternatives
- Should only be used for certain health conditions

Step Therapy (ST)

Certain high-cost medications are part of the Step Therapy program. These medications have a **(ST)** next to them on your drug list. Step Therapy encourages the use of lower-cost medications (typically generics and preferred brands) that can be used to treat the same condition as the higher-cost medication. These conditions include, but are not limited to:

- ADD/ADHD
- High Blood Pressure/Cholesterol
- Allergies
- Skin Conditions
- Depression
- Sleep Disorders

Drug Utilization Review (DUR)

Your plan is designed to provide you with quality health care coverage, and that includes a cost-effective pharmacy benefit. Certain medications on your drug list have extra requirements before your plan will cover them. This helps to make sure you're receiving coverage for the right medication, at the right cost, in the right amount and for the right situation.

Other Ways You May Be Able To Save On Prescription Drugs

Generic Drug Programs

Outside of your BCBSNC prescription drug coverage, Wal-Mart, Sam's Club, Target, and Walgreens may offer generics that are on their "**approved"** list for a lower cost than your drug copay with BCBSNC. Some of them offer $4.00 per prescription, per month. Their lists are available on each of their respective websites (**Walmart.com, Samsclub.com, Target.com, Walgreens.com**).

Mobile Apps for Prescription Savings

There are free mobile apps for your iPhone, Android, or Windows phone. These apps will compare prescription drug costs in your area. **Rx Saver** and **Good Rx** are just two of the available mobile apps. **(Cannot be used in conjunction with your BCBSNC Plan)**

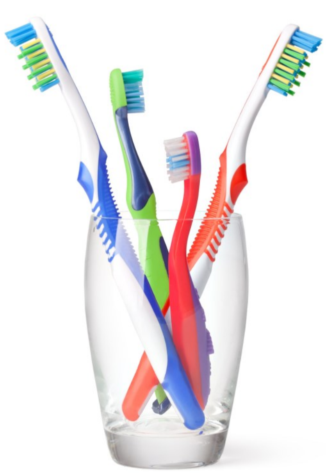
Partnership for Prescription Assistance

As the cost of prescription drugs rise, Partnership for Prescription Assistance (PPA) is a free service that connects individuals with payment assistance programs for prescriptions and other medical supplies. PPA provides a single point of access to more than 475 patient assistance programs. For a full list of patient assistance programs visit **www.pparx.org/.**

DENTAL INSURANCE

Our NEW Dental Plan provider is SunLife effective 10/1/2023. SunLife gives you the freedom to choose whether you would like to visit a participating dentist or an out-of-network dentist. You may seek treatment from the dentist of your choice, but you will realize your greatest savings by using in-network providers. Below is a brief summary of benefits. You will receive an ID card in the mail, and you may also access your ID Card using SunLife's mobile App. **PLEASE REMEMBER to provide your NEW Dental plan information to your provider for services obtained after 10/1/2023**.to avoid claims denied due to eligiblity.

Benefit Plan Summary	PPO	
	In-Network (negotiated rate)	*Out-of-Network*
Calendar Year Deductible Individual Family	$50 $150	
Annual Maximum Benefit	$2,000	
Diagnostic & Preventive Routine teeth cleaning, topical fluoride treatment, sealants, x-rays and oral exams	100% (Deductible does not apply)	
Basic New Fillings, non-surgical extractions, non-surgical residual root removal, non-cast prefabricated crowns, emergency exams, space maintainers (space maintainers for children under 19) and appliances	80% after deductible	
Major Crowns, inlays and onlays, removable or fixed bridgework, dentures, oral surgery, periodontics and endodontics	50% after deductible	
Orthodontia Dependent children up to age 26	50% after deductible $2,000 lifetime maximum	



CONSIDER A PRE-DETERMINATION OF BENEFITS

It is recommend them for any dental treatment expected to exceed $500. They allow SunLife to review your provider's treatment plan to let you know before treatment is started how much of the work should be covered by the plan, and how much you may need to cover. Providers that participate in the SunLife network and non-participating providers can submit these on your behalf.

Dental PPO Deductions	Weekly	Semi-Monthly
Employee	$7.61	$16.48
Employee + Spouse	$15.50	$33.59
Employee + Child(ren)	$17.25	$37.38
Family	$26.94	$58.36

DENTAL

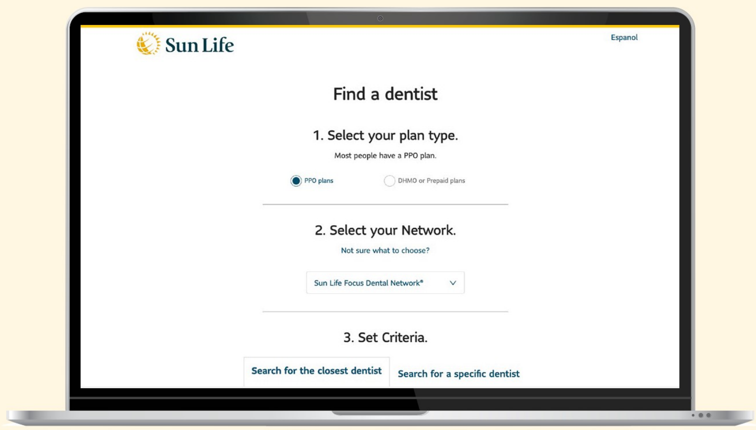
How to find a Sun Life Focus Dental Network® dentist

Online

1. Go to www.sunlife.com/findadentist
2. Select 'PPO' as your plan type and 'Sun Life Focus Dental Network®' as your network.
3. Choose whether you would like to search for the closest dentist or a specific one, and then select 'search dentists'.

Phone

800-442-7742



Watch our video at www.sunlife.com/howtofindadentist to learn more!

If you are not currently registered for a Sun Life account, you can register at www.sunlife.com/account. Your account gives you access to your personalized dental ID card, benefit and plan details, claim history and more.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (SLOC) (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 15-GP-01 and 16-DEN-C-01. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (SLHIC) (Lansing, MI) under Policy Form Series 15-GP-01 and 16-DEN-C-01.

The Sun Life Focus Dental Network is only available for policies issued in North Carolina.

GDFL-6367SLFDN-e (02/23)

Why create a Sun Life account?

Sun Life

Below are the different ways you can use your Sun Life account.

1 **It's the easiest way to submit your claim!**

2 **Upload claim documents** directly to your account—making it the fastest way to get your information to us.

3 **View your claim status, payment information,** and other important information about your claim in one spot.

4 **Report your return to work date** as well as time if you need to take an intermittent leave.

5 **Apply for Evidence of Insurability.** Our site leads you step by step through the process.

6 **Access Employee Assistance Program (EAP)** resources, **benefits information** and more.

7 **It's mobile friendly,** so you can do everything right from your smartphone or tablet!

Have Dental with us? You can find your most recent dental visit history, view and print your personalized dental ID card, and search for an in-network dental provider.

Register for an account today at www.sunlife.com/createaccount

For more information or to register by phone, call 800-247-6875, Monday through Friday from 8 a.m. to 8 p.m. ET.

VISION INSURANCE

Your Vision Plan continues to be administered by Community Eye Care (CEC). CEC gives you the freedom to choose whether you would like to visit a participating eye doctor or an out-of-network eye doctor. You may seek treatment from the eye doctor of your choice, but you will realize your greatest savings by using in-network providers. Below is a brief summary of benefits:

Benefit Plan Summary	160 Plan	
	In-Network	*Out-of-Network*
Routine Eye Exam	$10 copay	CEC allows you to use your full benefit when visiting an out-of-network provider. You'll need to submit an out-of-network claim form and will be reimbursed for the cost of the exam (minus the co-pay) and for the cost of the eyewear, up to the amount of the eyewear allowance (minus the co-pay). Note that co-pays for out-of-network visits are deducted from reimbursements. Reimbursement generally occurs within 60 days of submission. To learn more about filing an out-of-network claim, go to cecvision.com/oonform.
Routine Retinal Screening	Up to $39 copay	
Eyewear (lenses & frames)	$15 copay with a $160 allowance; 20% discount on glasses, and 10% discount on contacts for anything over the allowance	
Contact Lens Fitting, Re-Fit or Evaluation	$15 copay	
Service Frequencies Exam Contact Lenses Eyewear (lenses & frames)	Once Per Year	

Vision Deductions	Weekly	Semi-Monthly
Employee	$1.26	$2.73
Employee + Spouse	$2.52	$5.46
Employee + Child(ren)	$2.65	$5.74
Family	$3.78	$8.19

FLEXIBLE SPENDINGACCOUNTS (FSAs)

CALENDAR YEAR PLAN BASIS:
January 1—December 31, annually
Human Resources will announce the dates for Open Enrollment for this Benefit

Fairfield Chair offers Flexible Spending Accounts (FSAs), administered through Flores & Associates. You can **INCREASE** your take-home pay while paying for eligible health care and/or day care expenses. An FSA can help you save money by providing a way to pay for eligible types of health care and dependent care on a pre-tax basis. The contributions you make are deducted from your pay **BEFORE** your federal, state or Social Security taxes are calculated. There are two types of **FSAs**, the Health Care Account and Dependent Care Account.

A Health Care FSA may be used for eligible expenses not fully covered by your medical, dental or vision plans for you and/or your eligible dependents. Your full election amount is available on day one of the coordinating plan year, as you make payroll contribution deductions throughout the year. If you participated in a Healthcare FSA this past plan year, and are electing to participate again for the upcoming plan year, you may continue to use your same Flores Debit Card for Healthcare FSA expenses. Therefore, please keep your Flores Debit Card.

Your Healthcare FSA has a **ROLLOVER** provision. This provision allows any money left in your account at year-end to "roll over" into the next plan year, up to a maximum of **$610 (2024 amount may be higher. HR will announce if this amount changes)**. Funds left in your account over the **$610** are **forfeited** by you once the time period for incurring and submitting expenses has passed.

A Dependent Care FSA may be used for eligible expenses which allow for you to work and that are related to the care and supervision of your children (to age 13) or adult dependents that are claimed on your tax return.

How an FSA Works

Every year during our open enrollment period, you decide how much money you want to contribute to each account for the year - see annual IRS limits below. The second advantage to **Health Care FSAs** is your entire election balance is **available and loaded on your debit card day one** while you make equal installments throughout the year via payroll deductions.

Annual IRS Contribution Limits	Minimum	IRS Maximum for 2023*
Health Care FSA	$100	$2,850
Dependent Care Account (DCA)	$100	$5,000 If you are married and filing separately, your DCA limit is $2,500
Health Care FSA Rollover Amount	$610	

***The IRS has not announced the 2024 maximum allowed contributions yet. That information will be available at the FSA Open Enrollment period.**

Please see the chart below for important dates about when eligible expenses may be incurred and the time period for submitting those expenses.

Important Dates For Your FSA	Expense Incurred	Submit Expenses for Reimbursement
Health Care	January 1, 2024 - December 31, 2024	January 1, 2024 - March 31, 2024
Dependent Care	January 1, 2024 - March 15, 2024	January 1, 2024- March 31, 2024

FLEXIBLE SPENDING ACCOUNTS (FSAs)

Use the worksheet(s) provided below to estimate you and your families Health Care and/or Dependent Care expenses for the 2024 plan year. Remember, you can elect one or both of the Flexible Spending Accounts (FSAs), even if you have not elected to be covered under the Fairfield Chair medical plan. You may use your FSA plan to pay for eligible expenses for anyone in your family that you claim on your federal tax return.

IMPORTANT NOTE: You are <u>not</u> eligible to participate in the Fairfield FSAs if you are contributing to a Health Savings Account (HSA). Contact Human Resources for further details if you are unsure or have questions.

Plan Carefully!

The IRS has a **"Use it or Lose it Rule."**

Check your FSA account balance and expenses throughout the year to avoid forfeiting any of your hard earned money! If you end up with money in your accountat the end of the year, call Flores for suggestions on how you can spend those dollars so that you donot forfeit them.

Health Care Expense Worksheet

Medical/Rx		*Vision*		*Dental*	
Deductibles	$	Exams	$	Routine Exam	$
Copays	$	Eye Surgery	$	Filling/Crowns	$
Prescriptions	$	Lenses & Frames	$	Orthodontia	$
Other	$	Contacts	$	Other	$
Total	$	Total	$	Total	$
$570 Rollover Provision				Health Care Total	$

Dependent Day Care Expense Worksheet

	Dependent 1	*Dependent 2*	*Dependent 3*	
Childcare Centers	$	$	$	$
Before/After School Care/Day Camps	$	$	$	$
Adult Daycare	$	$	$	$
Other	$	$	$	$
			Dependent Care Total	$

Mobile App
Flores e-receipt

Debit Card
All FSA participants will receive a debit card that can be used to purchase eligible items with a card swipe that accesses their available funds without having to pay first and submit a claim for reimbursement. The card is secure, with transactions provided by MasterCard, and will only work to purchase eligible and authorized items. In many cases the claim will be completed at the point of purchase; in others, participants will receive a request for a receiptafter the claim has been paid.

BASIC LIFE AND AD&D

GROUP BASIC LIFE INSURANCE & AD&D

Fairfield Chair provides Basic Term Life and Accidental Death & Dismemberment (AD&D) in the amount of $15,000 to all active full-time employees working 30 or more hours per week at no cost to you. Coverage is provide through Symetra. Please remember to review and update your beneficiary designation annually. Below is a brief summary of benefits.

Benefit Plan Summary	Basic Term Life
Life Insurance Amount	$15,000 *
Basic AD&D Amount	Matches Life amount
Age Reduction Schedule	Reduces to 65% of benefit at age 65, Reduces to 50% of benefit at age 70
Waiver of Premium	If disabled prior to age 60, the premium is waived until age 65
Conversion & Portability	You must contact Symetra within 30 days of your termination to take advantage of either of these options

* If you are an officer or an exempt employee **(paid semi-monthly)**, and **hired on or before September 30, 2021,** you may qualify for a different benefit. Please see HR for more information.

VOLUNTARY LIFE AND AD&D

SYMETRA
RETIREMENT | BENEFITS | LIFE

Employees who would like to supplement their Basic Term Life and AD&D coverage may purchase additional Term Life coverage through **Symetra**. If you elect Voluntary Life Insurance, AD&D is included as well. Employees pay the total cost through convenient payroll deductions. Employee participation is required to enroll a spouse or dependent child(ren).

FOR 10/1/2023 ONLY Symetra will offer a **TRUE OPEN ENROLLMENT** for this benefit. **No Evidence of Insurability (EOI) will be required** for anyone that elects Voluntary Term Life coverage for themselves, their spouse or children, up to the guaranteed issue amounts listed below (whether an employee had any amount of Voluntary Life prior to 10/1/23 or not). If an employee does NOT increase their current benefit amount or their spouse's, or elects this as a new benefit this year, EOI will be required at our next open enrollment for any amount above one (1) increment for employees or spouses. EOI is never required for children.

NEW HIRES (eligible for benefits AFTER 10/1/23) can elect coverage for themselves, their spouse and/or their children up to the guaranteed issue amounts listed below without EOI during their initial eligibility period. If no Voluntary Life coverage is elected when first eligible, you will be considered a late entrant at our next open enrollment and EOI will be required for any amount above one (1) increment for employee and spouse.

Benefit Plan Summary	Voluntary Life and AD&D Insurance
Employee Amount Includes matching AD&D	Increments of $10,000 up to the lesser of $500,000 or 5x annual salary
Employee Guarantee Issue	$100,000
Spouse Amount Includes Matching AD&D	Increments of $5,000 up to the lesser of 50% of Employee amount or $150,000
Spouse Guarantee Issue	$30,000
Age Reduction Schedule	Reduces to 67% at age 70, 50% at age 75 Spouse coverage terminates at age 70
Child(ren) Amount Includes matching AD&D	Birth to age 26: $1,000 increments up to $10,000
Conversion & Portability	You must contact Symetra within 30 days of your coverage being terminated to take advantage of either of these options

Monthly Voluntary Life and AD&D Premiums (per $1,000)		
Age	Employee	Spouse
< 25	$0.158	$0.109
25-29	$0.158	$0.109
30-34	$0.158	$0.109
35-39	$0.187	$0.134
40-44	$0.252	$0.181
45-49	$0.393	$0.276
50-54	$0.566	$0.385
55-59	$0.885	$0.591
60-64	$1.347	$0.890
65-69	$1.966	$1.339
70-74	$4.010	Spouse Coverage Terminates at Age 70.
75-79	$8.639	
80-84	$8.639	
85 and over	$8.639	

Monthly Voluntary Life and AD&D Premiums (per $1,000)	
Dependent Child Rate	$0.22

Please note, your dependent child election is one election and one rate to cover any/all dependent children, all at the same benefit amount. You can not choose different benefit levels for different children.

DISABILITY INCOME BENEFITS

VOLUNTARY SHORT-TERM DISABILITY (STD)

Fairfield Chair provides full-time employees with the option to elect Short-Term Disability benefits. This plan is provided by Symetra. You pay the full cost for this coverage through weekly or monthly payroll deductions. In the event you become disabled from a non work-related injury or sickness, disability income benefits are there to help provide a source of income. You are not eligible to receive Short-Term Disability benefits if you are receiving worker's compensation benefits. Below is a brief summary of benefits:

Benefit Plan Summary	Exempt Class 1	Non-Exempt Class 2
Elimination Period (illness and accident)	30 days	14 days
Maximum Duration Inclusive of the elimination period	26 weeks	26 weeks
Benefit Percentage	60%	60%
Maximum Weekly Benefit	$1,250	$1,250
Pre-Existing Condition Exclusion	3/12	3/12

CURRENT EMPLOYEES: If you did not elect voluntary coverage when you first became eligible for benefits with Fairfield Chair and would like to elect this benefit at Open Enrollment, you will need to complete an Evidence of Insurability (EOI) form and Pre-existing limitations will apply. Coverage is subject to approval by Symetra and may be denied.

NEW HIRES (eligible for benefits after 10/1/2023): You may elect our Short Term Disability benefit without providing EOI. If you wish to apply for coverage outside of this opportunity and for the first time at a later date, EOI will be required and pre-existing limitations will apply.

Monthly STD Rate (per $10 of weekly benefit)		
Age	Exempt Class 1	Non-Exempt Class 2
Under age 25	$0.119	$0.480
25-29	$0.138	$0.548
30-34	$0.211	$0.541
35-39	$0.197	$0.493
40-44	$0.174	$0.391
45-49	$0.238	$0.451
50-54	$0.251	$0.562
55-59	$0.306	$0.748
60-64	$0.424	$0.925
65-69	$0.451	$1.077
70 and over	$0.447	$1.147

Voluntary Short-Term Disability

Sample Premium Calculation

(Exempt Class 1 employee, age 30, $30,000 annual salary)

Voluntary STD Rate $0.211
Yearly Salary $30,000
Weekly Income ($30,000 / 52 weeks) $576.92
Weekly Benefit Amount ($576.92 x 60%) $346.15
Monthly Premium ($346.15 x $0.211/$10 of benefit) $7.30
OR Weekly Premium ($10.83 x 12 months / 52 weeks) $1.68

Employees living in a state that has a mandated short-term disability program are not eligible to participate in the Fairfield Chair short-term disability plan. States and USA Territories with Mandated Short-Term Disability Plans:

- California
- Hawaii
- New Jersey
- New York
- Rhode Island
- Puerto Rico

DISABILITY INCOME BENEFITS

SYMETRA
RETIREMENT | BENEFITS | LIFE

VOLUNTARY LONG-TERM DISABILITY (LTD)

Fairfield Chair provides full-time employees with the option to purchase Long-Term Disability benefits administered by Symetra. You pay the full cost for this coverage through weekly or monthly payroll deductions. In the event you become disabled due to a qualified injury or sickness, disability income benefits are there to help provide a source of income. Employees who reach 180 days of consecutive absence will be removed from active status and contacted by HR.

Benefit Plan Summary	
Elimination Period	180 days
Benefit Percentage	60% of your base salary
Maximum Monthly Benefit	Up to $5,000 per month
Maximum Benefit Duration	Social Security Normal Retirement Age
Pre-Existing Condition Exclusion	3/12

CURRENT EMPLOYEES: If you did not elect voluntary coverage when you first became eligible for benefits with Fairfield Chair and would like to elect coverage at Open Enrollment, you will need to complete an Evidence of Insurability (EOI) form. Coverage is subject to approval by Symetra and may be denied

NEW HIRES (eligible for benefits after 10/1/2023): You may elect Short Term Disability coverage without providing EOI and the pre-existing limitations are waived. If you wish to apply for coverage outside of this opportunity and for the first time at a later date, EOI will be required and pre-existing limitations will apply.

Monthly LTD Rate (per $100 of monthly covered payroll)	
Age	**Rate**
Under age 25	$0.241
25-29	$0.207
30-34	$0.221
35-39	$0.360
40-44	$0.628
45-49	$0.654
50-54	$0.761
55-59	$0.745
60-64	$0.878
65-69	$0.279
70 and over	$0.279

Voluntary Long-Term Disability

Sample Premium Calculation

(40 year old employee)

Voluntary LTD Rate $0.628
Yearly Salary $30,000
Monthly Income ($30,000 / 12 months) $2,500
Monthly Premium ($2,500 x $0.628/$100 of monthly salary) $15.70
OR Weekly Premium ($19.78 x 12 months / 52 weeks) $3.62

Value Added Benefits brought to you by Symetra Life Insurance Company

Fairfield Chair Company is proud to provide several free programs that provide a number of services in several areas through our partnership with Symetra Life Insurance Company.

- **Employee Assistance Program (EAP)** - This program allows you and your family members to receive confidential counseling by Licensed Mental Health Counselors, as well as Financial and Legal experts. They can be reached 24 hours a day, 7 days a week.

- **Health Champion Program -** This program provides you with access to Master or Doctorate Level Guidance Counselors to help you navigate the maze of doctor bills, insurance statements and health plan requirements.

- **Travel Assistance Program** - If your are traveling for business or pleasure, the offers a variety of services in more than 200 countries and territories worldwide, and their services and information are only a phone call away—they even accept collect calls (see the Travel Assist Program flyer for details on how to call collect, if needed).

- **Identity Theft Program** - This program will allow you direct access to 24/7 support if your identity is stolen. It provides step-by-step coaching to help you confirm and resolve identify theft.

- **Beneficiary Companion Program** - If you or your family member experience a loss, this program can offer some relief by providing guidance to help with paperwork, notifications and other time-consuming details that make an already stressful time even more difficult.

We encourage you to review the information in the following flyers included in this guide for each of these programs and share it with your families.

These programs are not insurance but they can assist you in understanding and getting the most of your insurance plans that make up the employee benefits package offered to you by Fairfield Chair Company.

Employee Assistance Program

Helping you cope with the present and plan for the future

When life gets tough, it's helpful to have someone in your corner to listen, offer advice and point you in the right direction for additional help. That's what you get from DisabilityGuidance℠—an Employee Assistance Program that offers confidential counseling when you need it most.

Program Highlights

You and eligible family members can meet face-to-face with a counselor, financial planner or attorney for expert, confidential information and guidance.[1] Your household is eligible for a total of five sessions per calendar year, plus an additional five with a covered disability claim.[2] These services are included in the overall premium so no additional payment is required to use the program.

Confidential Counseling

Trained counselors with a master's or doctorate degree are just a phone call away—and completely confidential. They'll listen to your concerns and quickly refer you to appropriate resources and providers for:

- Stress, anxiety and depression
- Credit card or loan problems
- Difficulties with children
- Job pressures
- Grief and loss
- Substance abuse

Financial Information and Resources

Contact a certified public accountant or certified financial planner for financial information and guidance, including:

- Getting out of debt
- Credit card or loan problems
- Tax questions
- Retirement planning
- Estate planning
- Saving for college

Legal Support

Talk to an attorney about:

- Divorce and family law
- Debt and bankruptcy
- Landlord/tenant issues
- Real estate transactions
- Civil and criminal actions
- Contracts

Need Legal Representation?

A guidance consultant will refer you to a qualified attorney in your area for a free 30-minute consultation. Any customary legal fees after that are reduced by 25%.

Your Employee Assistance Program

We're available 24/7 to assist you.

Call: **1-888-327-9573**
TDD: **1-800-697-0353**
Online: **guidanceresources.com**
Web ID: **SYMETRA**

When talking on the phone, mention Symetra as your employer sponsor.

Your DisabilityGuidance℠ Employee Assistance Program

Access Anytime

Call: **1-888-327-9573**
TDD: **1-800-697-0353**
Online: **guidanceresources.com**
Web ID: **SYMETRA**

When talking on the phone, mention Symetra as your employer sponsor.

Confidential support, information and resources for all of life's challenges.

Online Resources and Tools

Get trusted, professional information online about relationships, work, school, children, wellness, legal or financial issues, and more. Turn to GuidanceResources® online for:

- Timely articles, tutorials, videos and self-assessments
- "Ask the Expert" personal responses to your questions
- Searches for child or elder care, attorneys and financial planners

First-time users, follow these simple steps:

1. Go to **www.guidanceresources.com** and click on "Register."
2. Provide your organization web ID: SYMETRA
3. Create a user name and password.

Future logins

Simply enter your user name and password, then click on the "Login" button.

If you have problems registering or logging in, send an email to memberservices@compsych.com or call 1-888-327-9573. Be sure to mention Symetra as your employer sponsor.

Planning for the Future

A will is one of the most important legal documents you can have. It ensures that you'll control who gets your property, who will be your children's guardian, and who manages your estate when you die.

EstateGuidance® makes it easy to create a simple, customized, legally binding will by offering:

- Convenient online access to will documentation tools
- Simple-to-follow instructions guiding you through the will generation process
- Online support from licensed attorneys, if needed
- The ability to make revisions at no cost

You can create a simple will for $14.99; printing and mailing services are available for an additional fee. Prices may be subject to change—contact ComPsych for additional information.

To get started:

1. Visit **www.estateguidance.com**
2. Enter your promotional code: SYMETRA
3. Choose any of the options in the drop-down menu.

Group benefits are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

[1] Once you are enrolled in a group benefits policy from Symetra Life Insurance Company.

[2] In California, counseling sessions are limited to three sessions in a six-month period.

Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

HealthChampion®

Help navigating your health care plan

Missing work due to a disabling illness or injury can be stressful. The last thing you need is to navigate a maze of doctor bills, insurance statements and health plan requirements alone.

Employees on a covered disability leave have access to the HealthChampion® health care navigation program 24 hours a day, seven days a week, by calling 1-866-263-4365.

When you call, you'll reach a Guidance Consultant with a relevant master's or doctorate degree who will assess your issues and needs, then connect you to the appropriate HealthChampion specialist.

Assistance from medical experts

- Explanation of your benefits—what's covered and what's not.
- Guidance on claims and billing issues.
- Referral to financial resources.
- Fee and payment plan negotiation.
- Assistance with cost estimates for treatment options.
- Explanation of the appeals process.

Support for your health care concerns

- One-on-one review of your medical concerns.
- Straightforward answers regarding specific diagnosis and treatment options.
- Support and preparation for upcoming doctor visits, lab work and procedures.
- Coordination with appropriate health care providers.
- Referrals to counseling, legal and financial services through an employee assistance program (EAP), and to community resources and applicable support groups.

Your HealthChampion® Program

We're available 24/7 to assist you.
Call: **1-866-263-4365**

Travel Assistance Program

24-hour-a-day emergency help

Your Travel Assistance Program

Call anytime from anywhere. We're available 24/7 to assist you.

U.S. and Canada:
1-877-823-5807

Anywhere else
(collect or direct):
(240) 330-1422

Emergencies happen. When they happen far from home, it's comforting to know there's a team of multilingual professionals standing by to help.

Your Travel Assistance Program offers a variety of 24-hour-a-day services in more than 200 countries and territories worldwide—and each one is just a phone call away.

Medical Services

- Assistance finding physicians, dentists and medical facilities.
- Monitoring during a medical emergency to determine if care is appropriate or if evacuation is required.
- When medically necessary, free transportation[1,2] under medical supervision to a hospital/treatment facility or to your place of residence for treatment.
- Arrangement for your traveling companion's return home if previously made arrangements must change due to your medical emergency.
- When medically necessary, free transportation[1,2] home for dependent children under the age of 26 who were traveling with you and are left unattended because of your hospitalization. A qualified escort will be arranged if necessary.
- Free round-trip transportation[2]—we arrange and pay for the most direct round-trip economy flight—for one immediate family member or friend to visit you if you're traveling alone and are likely to be hospitalized for seven consecutive days.
- Replacement of medication and eyeglasses.[3]
- In the event of death while traveling, all necessary government authorizations and a container appropriate for transportation will be arranged and paid for, as well as return home of the remains for burial.

Other Key Services

- Pre-trip information, including visa, passport, inoculation and immunization requirements; cultural information; embassy and consulate referrals; foreign exchange rates; and travel advisories.
- Emergency message relay to and from friends, relatives and business associates.
- If requested, new travel arrangements or change of airline, hotel and car rental reservations.
- An advance of up to $500 in emergency cash after satisfactory guarantee of reimbursement from you. You are responsible for any fees associated with the transfer or delivery of funds.
- Help locating and replacing lost or stolen luggage, documents and personal possessions.
- Help locating an attorney and advancement of bail bond, where permitted by law, after satisfactory guarantee of reimbursement from you. You are responsible for attorneys fees.
- Assistance with telephone interpretation in all major languages, or referral to an interpretation or translation service for written documents.

Travel Assistance Program

24-hour-a-day emergency help

Who's eligible?

You, your spouse or domestic partner, and your dependents under the age of 26 are eligible for all services provided by the Travel Assistance Program.

You can receive pre-trip information at any time

All other services take effect when you're on a trip 100 miles or more from home lasting 90 days or less.

When you call, please provide the following:

1. The address where you are staying
2. A phone number where we may reach you
3. Your employer's name

Group insurance policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

Europ Assistance (EA) will not evacuate or repatriate you if an EA-designated physician determines that such transport is not medically advisable or necessary or if the injury or illness can be treated locally.

EA provides the services in all countries. However, EA may determine that services cannot be provided in certain countries or locales because of situations such as war, natural disaster or political instability. EA will attempt to assist you consistent with the limitations presented by the prevailing situation in the area. EA cannot be held responsible for failure to provide, or for delay in providing, services when such failure or delay is caused by conditions beyond its control, including but not limited to flight conditions, labor disturbance and strike, rebellion, riot, civil commotion, war or uprising, nuclear accidents, natural disaster, acts of God, or where rendering service is prohibited by local law or regulations.

Travel Assistance is provided by Europ Assistance. Benefits may not be available in all states. Europ Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit www.europassistance-usa.com.

europ assistance
you live we care

[1] Our medical team or one of our doctors will make the determination that transport is needed.

[2] Travel arrangements must be made through Europ Assistance.

[3] Provided service, ancillary expenses are the member's responsibility.

SYMETRA®
RETIREMENT | BENEFITS | LIFE

Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

Identity Theft Protection Program

Direct access to 24/7 support if your identity is stolen

Your Identity Theft Protection Program

Call anytime from anywhere. We're available 24/7 to assist you.

U.S. and Canada:
1-877-823-5807

Anywhere else (collect or direct):
(240) 330-1422

Identity theft is a rising concern and it can happen to anyone. That's where your Identity Theft Protection Program comes in.

It provides you with information to protect yourself, and step-by-step coaching to help you confirm and resolve identity theft.

If you think your identity has been stolen

Just pick up the phone—24 hours a day, seven days a week—and call **1-877-823-5807** if you're in the U.S. or Canada, or **(240) 330-1422** from anywhere else in the world.

A Symetra Identity Theft Expert will help you obtain a copy of your credit report from all three major credit-reporting agencies. All three agencies will also place a fraud alert on your records.

Once you receive your reports, your Identity Theft Expert will walk you through the documents to help determine if fraud or theft has occurred.

Here's the help you'll receive

- Lost wallet assistance[1]
- Credit information review[2]
- Three-bureau fraud alert placement assistance
- ID theft affidavit assistance
- Emergency cash while traveling (a repayment guarantee is needed)

Tips to remember

- Carry only one or two credit cards.
- Bring only the ID information that you'll actually need.
- Do not carry your Social Security card in your wallet.
- If your purse or wallet is stolen, immediately report it to the police.
- Notify your financial institution if your credit card is lost or stolen.

Continued >

Who's eligible?

Once enrolled in a Symetra group insurance plan, you, your spouse and your dependents up to age 26 (regardless of student status) are eligible for all services provided by the Identity Theft Protection Program.

Identity thefts discovered prior to enrollment in a Symetra group insurance plan are not eligible for services.

Don't wait until theft occurs

There's no better time to deal with identity theft than before it happens. Be sure to call 1-877-823-5807 and mention you're calling about the Symetra Identity Theft program to get your Identity Theft Protection Kit. It covers the ins and outs of identity theft and provides advice on how to avoid it. And just in case your identity is stolen, the kit includes forms you'll need to help resolve the problem.

SYMETRA®
RETIREMENT | BENEFITS | LIFE

Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, WA 98004-5135
www.symetra.com

Group insurance policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004.

There is no guarantee that intervention on behalf of covered members will result in a particular outcome or that efforts on their behalf will lead to a result satisfactory to them. Services do not include, and covered members will not be assisted with, thefts involving non-U.S. bank accounts.

Identity Theft Protection is provided by Generali Global Assistance. Benefits may not be available in all states. Generali Global Assistance is not affiliated with Symetra Life Insurance Company or any of its affiliates. For more information, visit us.generaliglobalassistance.com.

GENERALI
GLOBAL ASSISTANCE

[1] Generali Global Assistance will assist you with canceling lost credit cards and provide information to help you replace lost items such as your driver's license and Social Security card.

[2] Member must provide a copy of their credit report, which can be obtained free of charge at www.annualcreditreport.com (once every 12 months).

Beneficiary Companion Program

A helping hand after a loss

Your Beneficiary Companion Program

Call anytime from anywhere. We're available 24/7 to assist you.

U.S. and Canada:
1-877-823-5807

Anywhere else
(collect or direct):
(240) 330-1422

Managing a loved one's final affairs can be overwhelming. The amount of time and effort needed to close an estate can make an already stressful time even more difficult.

Your Beneficiary Companion Program can offer some relief and provide guidance to help with paperwork, notifications and other time-consuming details.

Guidance Services

Dedicated Beneficiary Assistance coordinators are available 24/7 to:

- **Answer any questions**
- **Offer guidance on obtaining death certificate copies**
- **Manage notifications, including:**
  - Social Security Administration
  - Credit reporting agencies
  - Credit card companies/financial institutions
  - Third-party vendors
  - Government agencies
- **Discontinue access to loved one's social media accounts, and assist with memorialization to preserve their digital profile.**

Fraud Resolution

A deceased's identity is an attractive target for criminals—and may be relatively easy to obtain. Beneficiary Assistance coordinators will help protect your loved one's identity and lend a hand if their identity is stolen.

Services include:

- **A credit report review with the beneficiary**
- **Suppression of the deceased's credit report or an offer to freeze/close the account with credit bureaus**
- **Full-service resolution assistance if the deceased's identity is stolen:**
  - Credit bureau and fraud department notification
  - Help filing a police report
  - Creditor follow-ups

Call 1-877-823-5807 for your Beneficiary Companion Guidebook—a handy tool to help you after a loved one's death.

401(k) RETIREMENT SAVINGS PLAN

The Fairfield Chair 401(k) Retirement Savings Plan is a valuable benefit program offered to you as an employee. It can help you put money aside for a financially secure retirement. Through the plan, you can save for retirement now so that you will have the income you'll need after you stop working.

Participation is easy. You contribute a portion of your pay to your 401(k) account through a convenient pre-tax payroll deduction. These contributions are then invested in the Plan's investment options you select. If you make no investment elections, your contribution will be placed in the default fund. You can always re-allocate any balances and/or re-direct future contributions into the investments you prefer. Remember to designate a beneficiary and review and/or update annually.

There are tax benefits to contributing. Your pre-tax contributions, associated employer Match and all earnings on your account are not subject to current federal or state income tax, until you withdraw them from the Plan.

To give you the most flexibility in how you contribute to your 401(k) plan, you can also make after-tax (ROTH) contributions to your account. You can have a mix of pre-tax and after-tax contributions. However, the combination of either or both types of contributions can not be more that the IRS contribution limits.

IRS Contribution Limits	2022	2023	2024
Contributions	$19,500	$20,500	The IRS has not yet announced 2024 contribution limits
Catch-Up (Age 50+)	$6,500	$6,500	

Benefit Plan Summary	401(k) Retirement Plan	
Contribution Types	Pre-tax	ROTH (After-tax)
Enrollment	Automatic 3%	Election Only
Eligibility	1 month of service and 18 years of age	
Contribution	1% — 100% of your pay	
Employer Match	100% on the first 3%, then 50% on the next 2%	
Vesting Schedule Employee Contributions Employer Match	 100% immediately vested Year 1— 0% Year 2— 20% Year 3— 40% Year 4— 60% Year 5— 80% Year 6— 100%	

REQUIRED NOTICES

Summary of Material Modification (SMM)

This Benefit Enrollment Guide is your Summary of Material Modification (SMM). Please keep a copy of the SMM with your Summary Plan Description (SPD) for each plan, as these documents must be read together for a full understanding of your benefits. Copies of the SPDs are posted on the UKG portal by going to: **Menu>Myself>MyCompany>CompanyInfo**. Printed copies are available upon request from your Human Resources/Benefits Department.

Health Care Reform Requirements

Under the Patient Protection and Affordable Care Act (PPACA), Fairfield Chair is required to provide health coverage that meets certain standards.

Pursuant to PPACA guidelines, the medical coverage offered by Fairfield Chair meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages. According to PPACA regulations, if you have an offer of health coverage from your employer that meets the minimum value standard, **you will not be eligible for a tax credit through the Health Insurance Marketplace**.

Note: If you decide to purchase a health plan through the Marketplace instead of accepting health coverage offered by Fairfield Chair, then you would also lose the employer contribution Fairfield Chair pays toward the cost of your health coverage. In addition, this employer contribution, as well as your employee contribution, is pre-tax and excluded from income for Federal and State income tax purposes. Premiums you would pay for coverage through the Marketplace would be made on an after-tax basis. For more information, please visit **http://www.healthcare.gov/**.

PPACA also requires Fairfield Chair to provide a Summary of Benefits and Coverage (SBC) to you. The SBC is intended to help you make an informed choice by summarizing, in a standard format, important information about the Fairfield Chair health coverage options. The SBC contains:
- Comparison of medical plans
- Glossary of terms
- Claim examples

We encourage you to review the SBCs, which are housed on the benefit enrollment portal **https://ew11.ultipro.com/**.

REQUIRED NOTICES

HIPAA Notice of Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within [insert “30 days'' or any longer period that applies under the plan] after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children's health insurance program is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within 60 days after your or your dependents' coverage ends under Medicaid or a state children's health insurance program.

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 60 days after your or your dependents' determination of eligibility for such assistance.

To request special enrollment or obtain more information, contact Fairfield Chair HR Operations at fairfieldhr@fairfieldchair.com or 828-758-5571.

REQUIRED NOTICES

The Newborns' and Mothers' Health Protection Act

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

The Women's Health and Cancer Rights Act Annual and Enrollment Notice

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under our plans. Therefore, deductibles and coinsurance apply based on the option in which you are enrolled. The plan deductibles and coinsurance that apply can be found on page 13 of this guide.

If you would like more information on WHCRA benefits, contact the Claims Administrator, BCBSNC. See page 33 for contact details.

REQUIRED NOTICES

Premium Assistance Under Medicaid and the Children's Heath 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.

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** 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.askebsa.dol.gov** or call **1-866-444-EBSA (3272).**

You may be eligible for assistance paying your employer health plan premiums. The following is current as of July 31, 2023. Contact your State for more information on eligibility –

State	Program	Website	Phone Number
North Carolina	Medicaid	https://medicaid.ncdhhs.gov/	919-855-4100

To see if any other states have added a premium assistance program since July 31, 2023, or for more information on special enrollment rights, contact either: U.S. Department of Labor, Employee Benefits Security Administration, **www.dol.gov/agencies/ebsa**, **1-866-444-EBSA (3272).** U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, **www.cms.hhs.gov, 1-877-267-2323**, Menu Option 4, Ext. 61565.

REQUIRED NOTICES

Genetic Information Nondiscrimination Act "GINA"

On November 9, 2010, the Equal Employment Opportunity Commission ("EEOC") issued the final rule implementing Title II of the Genetic Information Nondiscrimination Act ("GINA"), which applies to all employers with fifteen or more employees, as well as unions, employment agencies and labor management training programs. This final rule is effective January 10, 2011, and prohibits the use of genetic information in the employment context, restricts an employer's deliberate acquisition of genetic information, requires employers to maintain employee genetic information as confidential, and strictly limits employers from disclosing genetic information.

Prohibition on Use of Genetic Information by Employers

According to GINA, an employer may not discriminate against an applicant, employee or former employee on the basis of genetic information in hiring, compensation, promotion or demotion, seniority, discipline, employment termination, or any other term, condition or privilege of employment. GINA also prohibits employers from limiting, segregating, or classifying employees based on genetic information and prohibits entities from causing an employer to discriminate based on genetic information.

What is Genetic Information?

Genetic information is defined broadly to include:

- Genetic tests of an individual or a family member
- The manifestation of a disease or disorder in an individual's family medical history
- An individual's request or receipt of genetic services
- Participation in genetic clinical research by an individual or a family member
- The genetic information of a fetus carried by an individual or a pregnant family member
- The genetic information of any embryo held by an individual or a family member using assisted reproductive technology information about the sex or age of an individual or a family member; however, is specifically excluded from the definition of genetic information

The Practical Effects of GINA

The following guidelines are designed to help employers comply with GINA's requirements:

1. Post the revised Equal Employment Opportunity ("EEO") poster, which includes GINA information and can be found at **http://www1.eeoc.gov/employers/poster.cfm**.
2. Update medical requests, such as Family and Medical Leave Act ("FMLA") and fitness-for duty forms, to include the new safe harbor language.
3. Review and revise employee handbooks or other EEO statements and anti-discrimination/anti-retaliation policies to include genetic information in the list of protected traits.
4. Review and revise, as necessary, social media policies to prevent GINA liability for inadvertent acquisition of information from employee social media profiles.
5. Train managers about casual conversations/communications with employees concerning their health or the health of their family members.
6. Maintain all genetic information in a separate and confidential medical file. However, there is no need for a separate GINA section if a medical file already exists, as genetic information can be kept in an ADA file.
7. Confirm that all company-sponsored wellness programs are compliant with the final rule. To learn more information regarding GINA please refer to the following website: **http://www.eeoc.gov/laws/statutes/gina.cfm**.

CONTACTS

For any questions or concerns you may have regarding your 2023 - 2024 Benefits, contact the following;

Fairfield Chair HR Operations
fairfieldhr@fairfieldchair.com
828-758-5571

Medical and Prescription Drugs
(888) 206-4697
www.bluecrossnc.com

Dental
(800)-442-7742
www.sunlife.com

Vision
(888) 254-4290
www.cecvision.com

Flexible Spending Accounts
(800) 532-3327
www.flores247.com

Life and AD&D, Voluntary STD, Voluntary LTD
(800) 796-3872 *www.symetra.com*

Employee Assistance Program
1-888-327-9573
www.guidanceresources.com

401(k) Retirement Plan
800-835-5097
www.401k.com

FAIRFIELD®

2023-2024 EMPLOYEE **BENEFITS**