November 6th - November 19th, 2023

We know one size doesn't fit all, so that's why ARCO makes sure that you have an array of benefit options so you can choose those that suit you and your family best. Open enrollment is the time to review these options and to pick the ones that match your needs for the upcoming year. Take the time to review these benefit options closely so that you can rest easy knowing that you have the plan that's right for you.

What happens if I don't enroll during annual enrollment?

If you don't enroll during open enrollment, then all of your current insurance elections with the exception flexible spending accounts (FSA) will carry over to 2024 and rates will be adjusted accordingly. You will have to wait until next year's open enrollment or until you have a qualifying life event to change your coverage.

For New Hires: Insurance is effective the first of the month following date of hire.

If you are eligible for insurance coverage, it takes effect the first month following date of hire. If you don't actively enroll within 30 days from your date of hire, you will have only basic company-paid life insurance and disability coverage. You will have to wait until the next Annual Enrollment period or a qualified life event to select benefits coverage for you or any eligible dependents.

LOOK INSIDE TO LEARN MORE



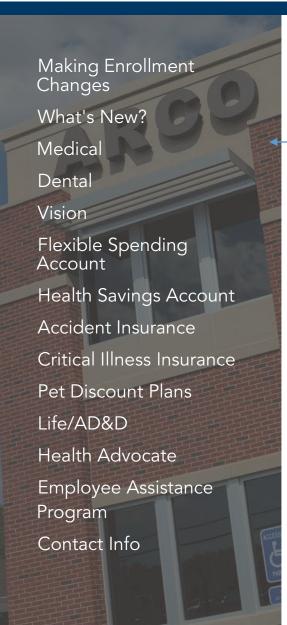












How to Use This Guide

Click on the links in the left navigation bar to go to a specific section in the guide.

Click the home button in the upper-right corner at any time to return to the first page.

Click any underlined text to access links to more information.

You can also move page by page by clicking the next and back arrows, or you can scroll with your mouse

* If you are viewing on a mobile device, these menus may not be functional. Simply scroll through the document.

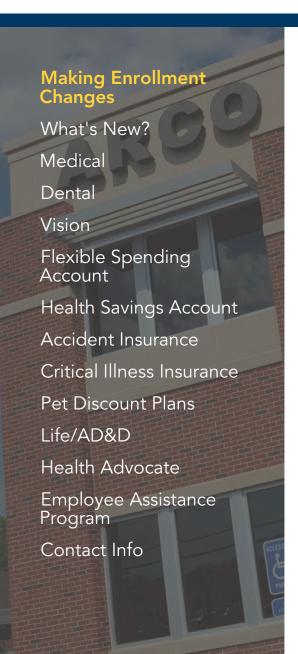












Making Enrollment Changes

Open Enrollment for 2024 benefits takes place November 06 - November 19, 2023. During this time, you will have the opportunity to elect, change, or waive benefits for the 2024 plan year. Any benefits you elect are effective January 1 - December 31, 2024.

For the plan year 2024, associates will have the ability to renew their benefits elections through a passive enrollment. This means that for those associates who do not wish to make any changes to their current elections, all of your current benefit elections will roll forward (except for Flexible Spending Accounts - associates need to choose to enroll in Flexible Spending Accounts each year).

Elections are made in the My Benefits Portal through UKG. Access instructions can be found here.

- 1. The first step is to login to UKG. Contact technology@arco1.com if you need assistance logging in.
- 2. To launch open enrollment, click the "menu" tab at the top left hand corner of the screen, hover over the myself tab, and click on My Benefits.
- 3. Once inside the My Benefits Portal, you will want to navigate to your open enrollment event and select your desired coverage and be sure to click approve on the review page. If you do not receive a confirmation page then your elections have not been submitted.
- 4. Please reach out to benefits@arco1.com if you have any questions.

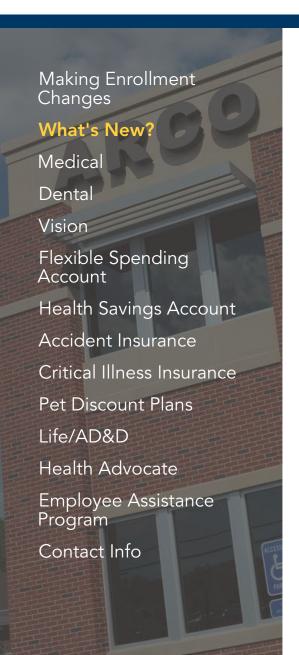












What do you need to know?

- We are moving to a new medical provider for the 2024 year, UMR. UMR is a part of the United Healthcare family of companies and the networks for medical and pharmacy will not be changing. If enrolled in ARCO medical insurance, you will receive new ID cards in the mail with instructions on how to activate them.
- Since there are no changes to our vision and dental coverages, there will not be new insurance cards issued unless you make a change to your coverage. You can continue using your current Delta dental card for you and your dependents in 2024.
- As a reminder, VSP does not send out insurance cards.
- The Medical and Commuter/Parking FSA limits have not yet been confirmed for 2024. 2023 rates are listed as is, Medical FSA: \$3,050 per year. Commuter/Parking FSA: \$300 per month.

 Dependent Care FSA remains the same at \$5,000.
- The HSA limits have increased for 2024. HSA Individual Limit: \$4,150. HSA Family Limit: \$8,300.
- Open Enrollment is passive, with the exception of your MyChoice FSA accounts.

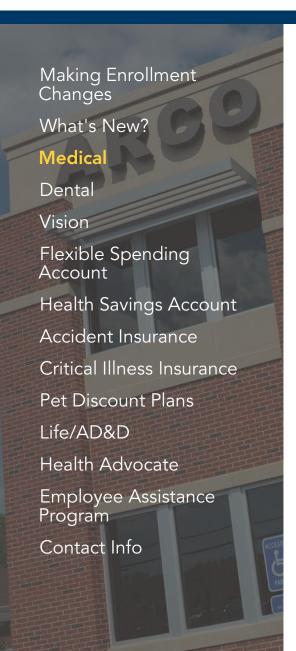












Medical Insurance UMR

High Deductible Health Plan (HDHP)

	Monthly	Bi-Week	ly	Weekly
Associate Only	\$75.35	\$34.78		\$17.39
Associate + Spouse	\$158.25	\$73.04		\$36.52
Associate + Children	\$147.69	\$68.16		\$34.08
Family	\$244.83	\$113.00		\$56.50
General Plan Information	In-Network		Out-of-	Network
Lifetime Maximum	Unlimited			
Deductible				
Individual	\$2,500		\$5,000	
Family	\$5,000		\$10,000	
Coinsurance	90%		60%	
Out of Pocket Maximum*				
Individual	\$3,600		\$10,000	
Family	\$7,150		\$20,000	
	Includes the deductible			

www.umr.com

INSURANCE TERMS 101

Consumerism

HDHPs encourage individuals to become more active in healthcare decisions as the cost of services has a bigger impact on the member. This in turn keeps claims costs lower which will result in lower yearly premium increases.

Deductible

A deductible is the amount of money you pay before the plan begins paying benefits.

In a HDHP you pay for all expenses out of pocket until you meet your deductible. There are not traditional copays for office visits like under the PPO.

Note that in the HDHP the deductible is nonembedded. This means each family member does not have their own deductible. The full deductible must be met.



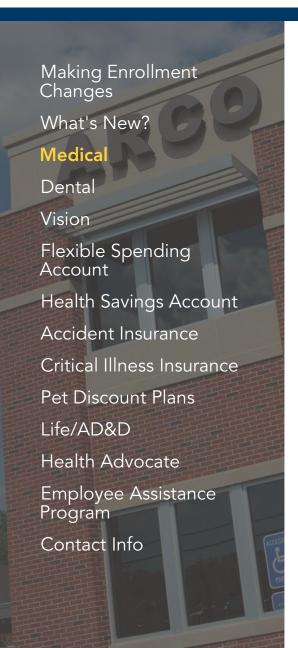












Medical Insurance HDHP UMR

Physician Office Visits		
Primary Care	90% after deductible	60% after deductible
Specialist	90% after deductible	60% after deductible
Preventive Care		
	100% no deductible	60% after deductible
Emergency Room		
	90% after deductible	60% after deductible
In-Network Prescription Drug Benefits	Retail (31 day supply)	Mail (90 day supply)
Tier 1	\$10 copay after deductible	\$25 copay after deductible
Tier 2	\$35 copay after deductible	\$87.50 copay after deductible
Tier 3	\$60 copay after deductible	\$150 copay after deductible

INSURANCE TERMS 101 (Continued)

Co-Insurance

What insurance pays after you have met your deductible.

Out-of-Pocket Maximum

After you have paid your specified out-of-pocket amount during a calendar year (which includes your deductible), the plan pays the remaining covered services at 100%.

Health Savings Account (HSA)

Enrolling in the HDHP allows you to open a HSA account. Please see the following page for information on HSAs.

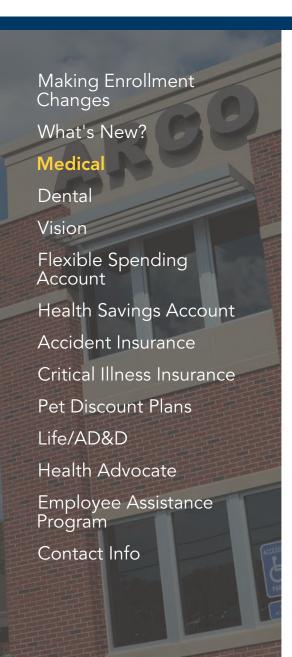












Medical Insurance HDHP cost of Services

No copays? How much can I expect to spend on a doctors visit?

- In-network primary care doctors in the range of \$100-\$200.
- You can review your prior explanation of benefits to see what the amount would be for your specific doctor.
 - Login to www.umr.com and go to the Claims tab. You want to look at what the plan paid and what your responsibility was and add those two together to determine the amount you would pay towards your deductible.
 - Remember to ignore the preventative care claims because those are still covered at 100%.

How do I find out how much my prescriptions cost?

• Login to <u>www.umr.com</u> and click on the Pharmacies tab. Link to Optum Rx's site and then click on drug search to look up each Rx and see the cost based on where you pick it up.

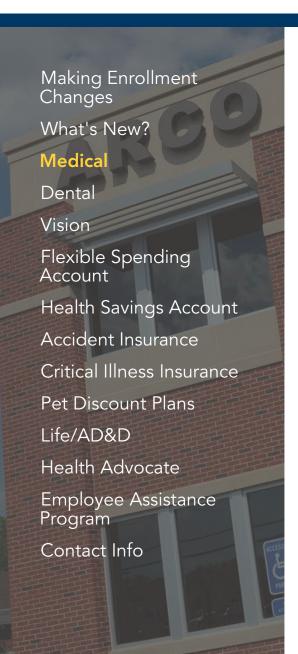












Medical Insurance PPO UMR

	Monthly	Bi-Wee	kly	Weekly	
Associate Only	\$176.08	\$81.27		\$40.63	
Associate + Spouse	\$369.79	\$170.67		\$85.34	
Associate + Children	\$345.12	\$159.29)	\$79.64	
Family	\$572.12	\$264.06)	\$132.03	
GENERAL PLAN INFO	In-Network		Out-of-	·Network	
Lifetime Maximum	Unlimited				
Deductible					
Individual	\$750		\$2,000		
Family	\$1,500 \$4,00		\$4,000)	
Coinsurance	90%	70%			
Out of Pocket Maximum*	t				
Individual	\$2,500		\$5,000		
Family	\$5,000		\$10,000		
	Includes the ded	uctible			
Physician Office Visits					
Primary Care	\$20 copay		70% aft	er deductible	
Specialist	\$40 copay		70% after deductible		
Urgent Care	\$50 copay		70% after deductible		

INSURANCE TERMS 101

Deductible

A deductible is the amount of money you pay before the plan begins paying benefits. There are several commonly received services for which the deductible does not apply. For example, if you have a physician's visit or refill prescriptions at an in-network provider, you pay the specified copayment amount.

Co-Insurance

What insurance pays after you have met your deductible.

Out-of-Pocket Maximum

The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. After you have paid your specified out-of-pocket amount during a calendar year (which includes your deductible), the plan pays the remaining covered services at 100%.

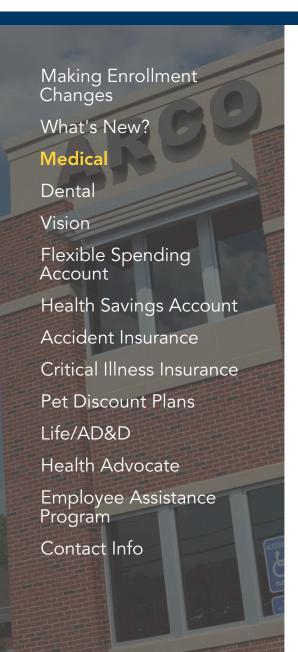












Medical Insurance PPO UMR

Preventive Care		
	100% no copay or deductible	70% after deductible
Emergency Room		
	\$150 copay	\$150 copay
In-Network Prescription Drug Benefits	Retail (31 day supply)	Mail (90 day supply)
In-Network Prescription Drug Benefits Tier 1	Retail (31 day supply) \$10 copay	Mail (90 day supply) \$25 copay
	7	1 111

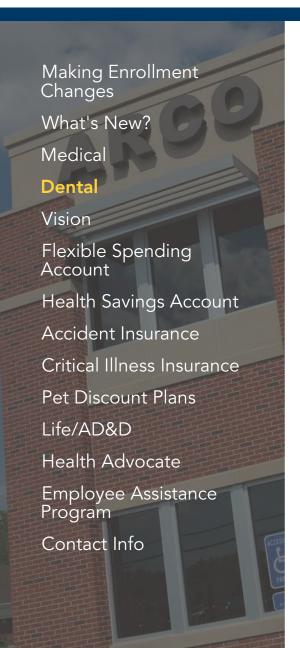












Dental Insurance DELTA DENTAL

www.deltadentalmo.com

Premiums	Monthly	Low	High	Bi-Weekly	Low	High	Weekly	Low	High
Associate Only		\$7.59	\$19.39		\$3.50	\$8.95		\$1.75	\$4.47
Associate + Spouse		\$15.17	\$38.76		\$7.00	\$17.89		\$3.50	\$8.94
Associate + Children		\$19.27	\$51.61		\$8.89	\$23.82		\$4.45	\$11.91
Family		\$25.94	\$68.61		\$11.97	\$31.67		\$5.99	\$15.83
	DDG // N								

Deductible	PPO/In-Network	Low	High	Premier/Out-of-Network	Low	High
Individual		\$50	\$0		\$50	\$0
Family		\$150	\$0		\$150	\$0
Calendar Year Maximum						
		\$1,000	\$2,000		\$1,000	\$2,000
Coinsurance						
Preventive		100%	100%		100%	100%
Basic		90%	100%		80%	80%
Major		60%	60%		50%	50%
Orthodontia						
Deductible		\$0	\$0		\$0	\$0
Coinsurance		50%	50%		50%	50%
Lifetime Maximum		\$1,000	\$2,000		\$1,000	\$2,000
Benefits applies to		Child(ren) under 19	Adults & Children		Child(ren) under 19	Adults & Children

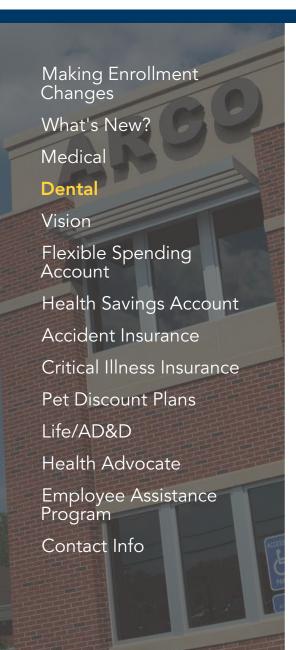












Dental Insurance DELTA DENTAL

Visits & Exams	Low	High	Low	High
Visit for Oral examination	100%	100%	100%	100%
Prophylaxis (including scaling & polishing)	100%	100%	100%	100%
Fluoride	100%	100%	80%	80%
Sealants	90%	100%	80%	80%
X-rays	PPO/In-Network		Premier/Out-of-Netw	ork
Bitewing X-rays	100%	100%	100%	100%
Full mouth X-rays	100%	100%	100%	100%
Endodontics				
	90%	100%	80%	80%
Minor Restorations				
Amalgram (silver) fillings	90%	100%	80%	80%
Composite fillings (anterior teeth only)	90%	100%	80%	80%
Periodontics				
Incision & drainage of abscess	90%	100%	80%	80%
Composite fillings (anterior teeth only)	90%	100%	80%	80%
Prosthodontics/Major Restorations				
Crowns	60%	60%	50%	50%
Full & partial dentures	60%	60%	50%	50%

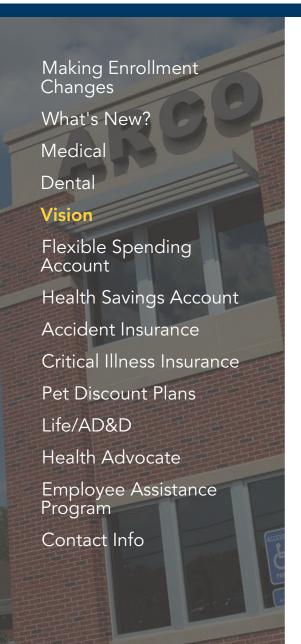












Vision Insurance VSP

www.vsp.com

	Monthly	Bi-Week	ly	Weekly
Associate Only	\$2.04	\$0.94		\$0.47
Associate + Spouse	\$3.27	\$1.51		\$0.75
Associate + Children	\$3.34	\$1.54		\$0.77
Family	\$5.38	\$5.38 \$2.48		\$1.24
General Plan Information	In-Network		Out-of-N	letwork
Exam	\$10 copay		Up to \$50)
Materials	\$25 copay		See below	
Lenses				
Single	\$25 copay		Up to \$50)
Bifocal	\$25 copay		Up to \$75	5
Trifocal	\$25 copay		Up to \$10	00
Lenticular	\$25 copay	\$25 copay		25
Frames				
	Up to \$200 allowand	Up to \$200 allowance		0
Contacts (elective in lieu of	a assas)			

Bifocal	\$25 copay	Up to \$75
Trifocal	\$25 copay	Up to \$100
Lenticular	\$25 copay	Up to \$125
Frames		
	Up to \$200 allowance	Up to \$70
Contacts (elective, in lieu of g	lasses)	
	Up to \$200 allowance	Up to \$105
Frequency		
Exam	12 months	12 months
Lenses	12 months	12 months
Contacts (in lieu of glasses)	12 months	12 months
Frames	12 months	12 months













Flexible Spending Account (FSA) MyChoice Accounts

We offer a tax-friendly Flexible Spending Account (FSA) spending program through MyChoice Accounts.

Why should I participate?

FSAs provide you with an important tax advantage that can help you pay healthcare and dependent care expenses on a pre-tax basis. By anticipating your family's healthcare and dependent care cost for next year, you can actually lower your taxable income.

How does the plan work?

Essentially, the Internal Revenue Service set up FSAs as a means to provide a tax break to associates. As an associate, you agree to set aside a portion of your pre-tax salary in an account, and that money is deducted from your paycheck over the course of a year. The amount you contribute to the FSA is not subject to Social Security (FICA), federal, state or local income taxes- effectively adjusting your annual taxable salary. The taxes you pay each paycheck and collectively each year can be reduced significantly, depending on your tax bracket. And, as a result of the personal tax savings you realize, your spendable income will increase.

You can access your MyChoice accounts through your My Benefits portal.

Healthcare Reimbursement FSA

The Healthcare Reimbursement FSA lets you pay for certain IRS-approved medical care expenses not covered by your insurance plan with pre-tax dollars. For example, cash that you now spend on the deductibles, co-payments or other out-of-pocket medical expenses can instead be placed in the Healthcare Reimbursement FSA pre-tax to pay for these expenses. The 2024 FSA limits have not yet been released by the IRS. The maximum contribution to the Healthcare Reimbursement FSA was \$3,050 for 2023.

Dependent Care FSA

The Dependent Care FSA lets you use pre-tax dollars toward qualified dependent care. The maximum amount you could contribute to the Dependent Care FSA in 2023 was \$5,000 (or \$2,500 if married and filing separately) per calendar year.

Commuter and Parking FSA

The commuter FSA allowed you to put up to \$300 per month aside, in 2023, pretax to use on eligible commuter expenses such as bus, ferry, monorail, streetcar, subway, train, and carpooling through Via, UberPool, and Lyft Line. The parking FSA allows you to put up to \$300 per month aside pretax to use for parking at or near the public transportation or at or near your work.

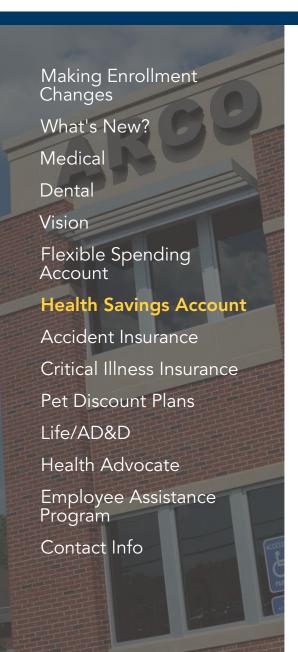












Health Savings Account (HSA) OPTUM

www.optumbank.com

What is an HSA?

An Health Savings Account (HSA) is a personal bank account you can use to pay for your family's healthcare costs. If you enroll in the HDHP medical plan, you may set up an HSA account and elect to contribute funds from your paycheck which you can use to pay medical costs tax free.

Why should I participate?

There are many tax advantages of an HSA. Your HDHP premium cost is lower than average health plans, so you pay less on pre-tax payroll deductions in this plan. You can add the money you save on premiums to your HSA and automatically start a healthcare budget.

An HSA is more than a bank account

You don't pay taxes on the money you save, spend, or earn. The money in your account always rolls over and always belongs to you, even if you change jobs, health plans, or retire. You can use your HSA savings for qualified expenses for your spouse and tax dependents, even if they are not covered on your plan. Finally, it is a tool to plan for retirement. You can invest funds now and use your "nest-egg" later in life and make changes throughout the year.

How does it work?

As an associate, you agree to set aside a portion of your pre-tax salary in an account, and that money is deducted from your paycheck over the course of the year.

The HSA lets you pay for IRS-approved healthcare expenses with pre-tax dollars. For example, cash that you spend on deductibles and other out-of-pocket healthcare expenses can be paid out of the HSA.

NOTE: You must be enrolled in the High Deductible Healthcare Plan (HDHP). You cannot have a Health Savings Account (HSA) and a Healthcare Flexible Spending Account (FSA). Your spouse cannot have a Healthcare (FSA) through his/her own employer if you are enrolled in the HSA.

Coverage Level Limit				
Individual Coverage	\$4,150			
Family Coverage	\$8,300			
Age 55 or older?	Employees age 55 or older eligible to contribute additional \$1,000 catch-up contribution on top of these annual limits			













Accident Insurance Reliance Standard

www.realiancestandard.com/arco

Accidents can happen in an instant affecting you or a loved one. Accident insurance is designed to help families plan for unexpected healthcare costs and take away some of the uncertainty and financial insecurity associated with them. The tax-free benefit resulting from non-work-related injuries or accidents covers more than 150 events in 5 categories: injuries, medical services and treatment, wellness visit, and hospitalization.

Features

- Guaranteed issue: No medical questions or tests are required for coverage.
- Flexible: You can use the benefit payments for any purpose you like.
- Payroll deductions: Premiums are paid through convenient payroll deductions.
- Portable: If you leave your current employer or retire, you can take your coverage with you.

Things to Know

- You can purchase coverage on yourself, your spouse, and dependent children up to age 26.
- The accident must occur after you are enrolled in the coverage.
- The plan pays a lump sum benefit depending on the type of injuries you sustain.
- Wellness Benefit the plan provides a wellness benefit that pays out \$100 per year for completing a health screening test such as pap test, serum cholesterol test, mammography, colonoscopy, or stress test. Only one Wellness Benefit will be paid in a twelve month period per covered individual, subject to a maximum of four per family.

Monthly Rates					
Associate	Associate and Spouse	Associate and Children	Family		
\$13.99	\$23.50	\$28.75	\$38.50		

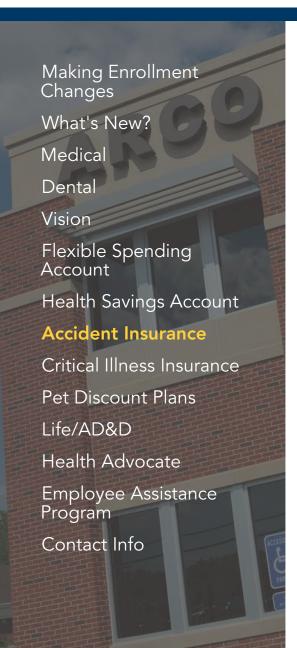












The following list is a summary of benefits provided. Please see the Accident Insurance Handout for the full list of coverage, plan details, and exclusions.

Accident Hospital Care	
Hospital admission	\$1,750
Hospital confinement per day, up to 365 days	\$450
Accidental Care	
Initial doctor visit	\$100
Urgent care facility treatment	\$300
Emergency room treatment	\$300
Ground ambulance	\$400
Air ambulance	\$2,000
Follow-up doctor treatment	\$100
Physical Therpay up to 6 per accident	\$50
Accidental Care (Continued)	
X-ray	\$50
Common Injuries	
Eye injury removal of foreign object	\$200
Laceration* sutures 2"-6"	\$480
Fractures	Closed/open reduction
Leg	\$5,336/\$10,672
Ankle	\$2,001/\$4,002
Fractures (Continued)	Closed/open reduction
Foot excluding toes, heel	\$2,001/\$4,002
Forearm, hand, wrist except fingers	\$2,001/\$4,002
Nose	\$1,001/\$2,002



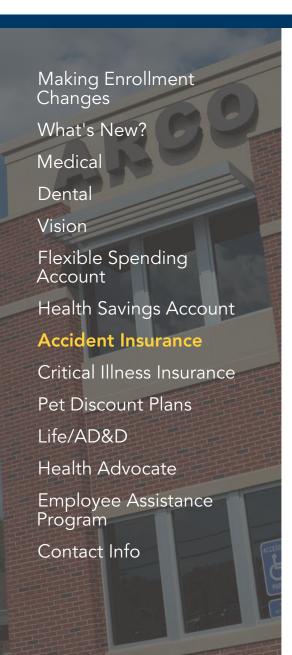






17





For Example...

Meet John

John works full-time while raising two energetic children and playing in a summer softball league. While sliding into home base, he broke his ankle and tore his ACL. Fortunately, the accident didn't break John's bank account – and the family vacation was saved.

Benefits paid by John's Accident Insurance

	Out-of-Pocket Costs	Accident Insurance Benefit
Urgent care facility treatment	\$400	\$300
X-ray and MRI	\$300	\$250
Tendon/ligament/rotator cuff surgery	\$1,000	\$1,200
Broken ankle, closed reduction	\$1,500	\$2,001
Medical equipment	\$150	\$200
Follow-up doctor visit	\$125	\$100
Physical therapy (6 sessions)	\$300	\$300
Total	\$3,775	\$4,351

This is an example of how coverage could work. The amounts shown are an example only. Actual costs/results may vary.









18



Making Enrollment Changes What's New? Medical Dental Vision Flexible Spending Account Health Savings Account Accident Insurance Critical Illness Insurance Pet Discount Plans Life/AD&D Health Advocate Employee Assistance Program Contact Info

Critical Illness Insurance

Reliance Standard

Chances are you may know someone who's been diagnosed with a critical illness. There are a lot of expenses associated with a critical illness. During recovery, having to worry about out-of-pocket expenses is the last thing anyone needs. Critical illness coverage helps you focus on recuperation instead of the distraction of out-of-pocket costs.

Critical illness coverage pays you a lump sum if you are diagnosed with one of the following:

- Heart attack
- Major organ failure
- Multiple sclerosis
- Stroke
- Alzheimer's
- Paralysis
- Coma
- HIV

- ALS
- Renal failure (kidney failure)
- Cancer/benign brain tumor/ skin cancer/carcinoma in situ
- Coronary artery bypass
- Deafness and blindness
- Parkinson's disease

<u>Click here</u> to see the full list of coverage, plan details, and exclusions.

www.reliancestandard.com/arco

Features

- Guaranteed issue: No medical questions or tests are required prior to enrolling.
- Flexible: You receive a check for the payout and can use the money on whatever you want.
- Payroll Deductions: Premiums are paid through payroll deductions.
- Portable: If you leave ARCO or retire, you can take your coverage with you.

Things to Know

- You can purchase coverage on yourself, your spouse, and dependent children up to age 26. To cover your dependents, you must purchase coverage on yourself.
- You must be newly diagnosed after you are enrolled in the coverage.
- The plan pays out 100% of the benefit you enrolled in unless otherwise noted.
- Wellness Benefit the plan provides a wellness benefit that pays out \$100 per year for completing a health screening test such as pap test, serum cholesterol test, mammography, colonoscopy, or stress test. Only one Wellness Benefit will be paid in a twelve month period per covered individual, subject to a maximum of four per family.













How much does Critical Illness Insurance cost?

See charts for premium amounts. Rates are based on associate age as of 12/31/2023. Children are no cost but associate must be enrolled.

Associate Coverage Monthly Rates (Includes Wellness Benefit Rider)					
Attained Age	\$5,000	\$10,000	\$15,000	\$20,000	
Under 30	\$4.00	\$8.00	\$12.00	\$16.00	50
30-39	\$4.50	\$9.00	\$13.50	\$18.00	lin
40-49	\$8.50	\$17.00	\$25.50	\$34.00	
50-59	\$21.50	\$43.00	\$64.50	\$86.00	
60-69	\$34.00	\$68.00	\$102.00	\$136.00	
70+	\$54.50	\$109.00	\$163.50	\$218.00	

Spouse Coverage Montl (Includes Wellness Bene

\$10,000

\$8.00

\$9.00

\$17.00

\$43.00

\$68.00

\$109.00

Attained Age

Under 30

30-39

40-49

50-59

60-69

70+

\$5,000

\$4.00

\$4.50

\$8.50

\$21.50

\$34.00

\$54.50

\$163.50	\$218.00	
hly Rates efit Rider)		
\$15,000	\$20,000	
\$12.00	\$16.00	
\$13.50	\$18.00	
\$25.50	\$34.00	
\$64.50	\$86.00	
\$102.00	\$136.00	

\$218.00

\$163.50

Children Coverage			
Includes	Wellness	Benefit Rider)

Coverage Amount			
50% of Associate Critical Illness benefit election,			
limited to a maximum of \$10,000			



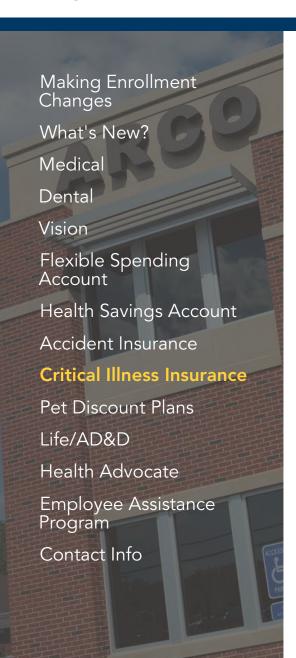






20





For Example...

Meet Julie

When Julie looks at her life, she thinks she's in pretty good health. Sure, she has a sedentary job, but Julie feels she offsets sitting 40 hours a week by eating fairly well, getting enough sleep and taking regular walks around her neighborhood. That's why the heart attack she suffered just three months after her 42nd birthday came as such a shock. While Julie is expected to make a full recovery, her recuperation could have been more challenging had it not been for the benefit paid by her Critical Illness Insurance.

Expenses incurred over two months:

\$15,000	Maximum Critical Illness Benefit paid under Julie's policy
\$10,750	Total out-of-pocket expenses
\$500	living expenses
\$150	Car insurance Other
\$800	Car payment
\$1,500	Food and utilities
\$2,800	Mortgage
\$5,000	Out-of-pocket medical expenses

The amounts shown are for illustrative purposes only. Actual costs/results may vary. The benefit amount assumes a Maximum Critical illness Benefit of \$15,000 of base coverage. Your employer may offer/provide different amounts or options.



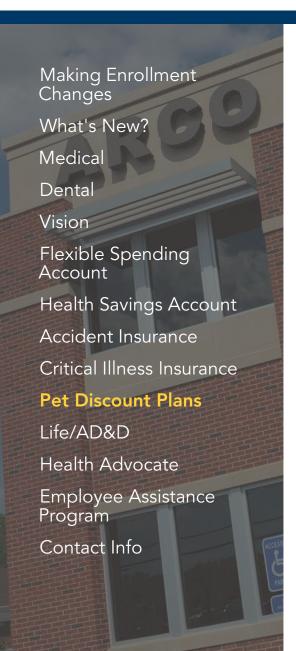






21





Pet Discount Plans PET BENEFIT SOLUTIONS

www.petassure.com

There are two pet discount plans available through Pet Benefit Solutions, the Pet Assure Plan and Pet Plus Plan. Read below to learn about each plan.

	Pet Assure	Pet Plus
One Pet:	\$8.00 per month	\$3.75 per month
Multiple Pets:	\$11.00 per month	\$7.50 per month

Pet Plus Plan

Which pets qualify for Pet Plus?

All dogs and cats qualify for Pet Plus -- no exclusions for preexisting conditions.

Is Pet Plus insurance?

No! With Pet Plus, you get wholesale pricing on prescriptions, preventatives and other products. It's instant savings without any paperwork.

What's covered under Pet Plus?



How do I use Pet Plus?

After you enroll, you will receive a welcome letter with instructions on activating your account. If you want to pick up prescriptions from a pharmacy, you can print a Pet Plus card from your online account or show your card at the pharmacy on the Pet Plus app.

How do I order pickup or delivery medications with PetPlus?

First, search for the pet's medication on PetPlus.com. On each page, you'll be able to see the various dosages and quantities available in the drop down menu, as well as the PetPlus member price for each. Deliverability depends on the item - most medications are available for both delivery or in-store pickup, but some may only be available in one form.

Select your preferred delivery option, proceed to checkout and place your order.

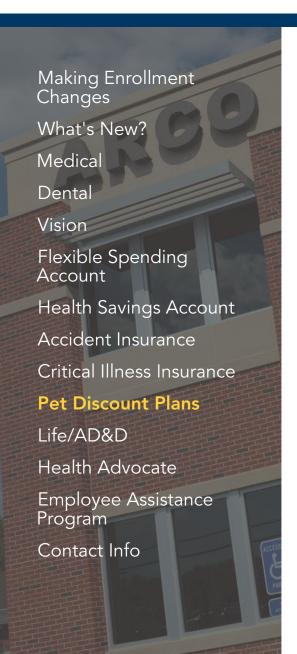












Pet Discount Plans PET BENEFIT SOLUTIONS

www.petassure.com

Pet Assure Plan

What is Pet Assure?

Pet Assure is America's Veterinary Discount Plan. Simply show your Pet Assure card and the participating veterinary staff will reduce your entire medical services bill, no questions asked!

Which pets are covered?

All types of pets accepted. Dogs, cats, birds, monkeys, llamas, and every other member of the animal kingdom (besides humans).

What will the veterinary practice discount when I show them my Pet Assure card?

Participating Pet Assure veterinary practices will give you a 25% discount on ALL medical care provided in the office by the veterinary staff.

This includes:

Wellness Visits
Sick Visits
Dental Cleanings Dental
Exams and X-Rays Allergy
Treatments Cancer Care
Ultrasound

Diabetes Management
Emergency Care
Hospitalization Routine
Care & Vaccines Spays &
Neuters Surgical
Procedures Tumor
Removal

What are the exclusions?

Pet Assure has no exclusions based on age, breed or type of pet, and every in-house medical service is discounted. Pre-existing and hereditary conditions are also covered with Pet Assure. You can use the Pet Assure discount every time you go to the participating vet; discount usage is unlimited.

Non-medical services such as routine grooming and boarding, outsourced services such as blood work sent to a lab or an outside specialist, mileage fees, and products you take home such as medications and food are not discounted.

Please note: You cannot combine the discount with other discounts or service packages.

Where can I receive the Pet Assure discount?

Thousands of participating veterinarians nationwide honor the Pet Assure discount card. Enter your zip code here to find a participating veterinarian in your area.

Why is the Pet Assure discount only 25% savings? Pet insurance covers 70% - 90%?

Pet insurance covers 70%-90% after you have met your deductibles if the medical service is a "covered instance." The fine print on these policies often limits or excludes hundreds of services. In their public disclosure to state insurance regulators, insurance companies report that for every dollar they receive in premiums they actually only pay out to their policyholders about 50¢.













Life and AD&D Life and Accidental Death & Dismemberment Insurance

ARCO provides all full-time active associates with basic term life and a matching accidental death & dismemberment benefit of 1 ½ times salary to \$250,000. This benefit is administered by Reliance Standard and associates are automatically enrolled.

Supplemental Term Life Insurance

Active associates can elect additional group term life insurance for themselves, their spouses, and their children.

Associates will be able to elect in \$10,000 increments, up to \$500,000.

For your spouse, you can elect an amount in \$10,000 increments up to \$500,000.

Finally, you can choose coverage for you children in the following options (no medical questions will be required).

Evidence of Insurability Requirements

If you are not in your newely-eligible period or wish to elect more than the guarantee issue, you will need to complete an evidence of insurability (EOI) form for any Voluntary Life election or increase to current election. Reliance Standard will then approve or deny the election based on the results from the EOI. Click here for the form.

Please note: Life and AD&D policies have an age reduction, meaning once you reach age 65 the benefit starts to decline. This is typical for most life insurance policies as individuals approach retirement age.













Health Advocate

www.healthadvocate.com

Health Advocate will assist you, your spouse, children, parents, and in-laws. Please share the resource with these members of your family. Health Advocate is a tool ARCO provides to you at no cost that can assist you, especially if you are enrolled in the HDHP plan.

The tool can help you:

- Find the right doctors, hospitals and other healthcare providers; expedite appointments
- Explain complex medical conditions; research and locate the latest treatments
- Coordinate care and schedule follow-up visits; facilitate second opinions; transfer X-rays and medical records
- Arrange specialized treatments and tests; answer questions about results, treatment options and prescribed medications
- Clarify benefits including copays; help facilitate access to appropriate care

Retiree assistance:

- Retirees transitioning to a new health plan
- How to enroll in Medicare
- Clarify Medicare Parts A, B, D and supplemental plans
- Locate eldercare services that fall outside traditional healthcare coverage

To speak to a member of the Health Advocate team call 866-695-8622





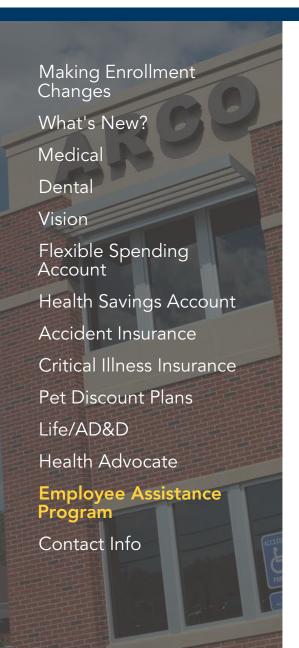






27





Employee Assistance Program supportLinc

www.supportlinc.com

Employee Assistance Program Through Support Linc

We offer an Employee Assistance Program (EAP). Through our contract with our service provider, SupportLinc, you and your eligible dependents can receive confidential assistance with personal and work/life concerns. Our EAP benefit offers confidential, short-term counseling for personal and family issues at no cost to you. For example, family and relationship issues, substance abuse, stress and anxiety, communication issues, and emotional concerns. The EAP also provides the following services to help you balance work and home life:

- Managing stress and change
- Family and relationship concerns
- Parenting issues
- Legal concerns
- Budgeting and debt management
- Substance abuse
- Care management for aging parents
- Locating child and elder care resources

- Identifying school college resources
- Emotional and personal conflicts
- Depression and grief
- Lifestyle weight management
- Work performance issues
- Retirement issues
- Health and wellness issues

EAP Costs

Your EAP is a pre-paid benefit provided to you by ARCO. There is no charge for services covered under your EAP benefit. Should your consultant recommend a referral to a specialist or longer-term care provider, the referral is made to quality providers with your best interests in mind. Please make sure referrals are in-network for your insurance.

Contact SupportLinc to speak to a representative with any questions you have or to make an appointment.

Tel: (1-800) 881-5462



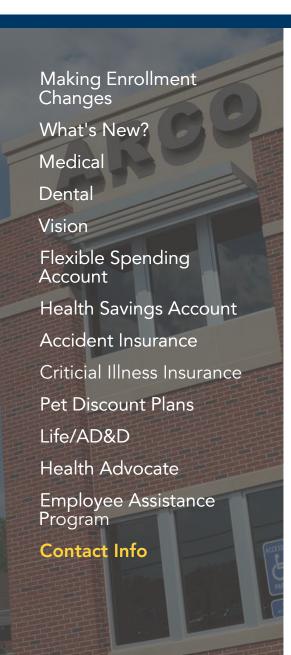






28





Contact

Benefits Team Contact

Please email any questions you have to benefits@arco1.com and a member of the benefits team will respond to you as quickly as possible. If you need to speak to someone via phone, you can reach us at - 314-391-5985.

Provider Contact Information

UMR

Medical Insurance (800) 826-9781 | www.umr.com

Delta Dental

Dental Insurance (800) 335-8266 | www.deltadental.com

VSP

Eye Care Insurance (800) 877-7195 | www.vsp.com

MyChoice Accounts

Flexible Spending Accounts 855-883-8541| My Benefits Portal

Pet Benefits Solutions

Veterinary and Rx Discount Plans (888) 789-7387 | www.petassure.com

SupportLinc

Employee Assistance Program (1-800) 881-5462 | www.supportlinc.com

Optum Bank

Health Savings Account (866) 234-8913 | www.optumbank.com

HealthAdvocate

Healthcare Assistance (866) 799-2655 | www.healthadvocate.com

Reliance Standard

Critical Illness & Accident Insurance (800) 351-7500 | www.reliancestandard.com

Matrix

Absence Management (877) 202-0055 | www.matrixabsence.com