2019-2020 Benefit Guide





Enriching the quality of life of those we serve



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### WELCOME TO THE MILLENNIA COMPANIES®

The Millennia Companies® is pleased to offer a broad program of benefits to serve your needs. Your benefit choices will affect how you receive care, what you pay for the services you elect, and how you secure your future. It's important that you take time to understand your options before you make any elections. Please review this benefits guide in its entirety so that you'll know the benefits that are best for you.

#### **ELIGIBILITY**

Eligibility and contributions for the benefits and programs we offer depend on both your employee status and whether you elect to extend coverage to your dependents. Generally, if you average 30 or more hours per week, you are eligible to participate in Millennia's benefits program beginning on the first day of the month following your date of hire.

#### **DEPENDENTS**

Your dependents are eligible for coverage under the medical, dental, and vision plans. For medical coverage, children can be covered up to age 26, whether or not they are students, dependents, or married. For dental and vision, dependent children can be covered up to age 26. For the Voluntary Life and Voluntary Personal Accidental insurance plans, you can add coverage for your unmarried dependent children under age 19 (or under age 26 only for an unmarried full-time student).

To enroll in benefits offered by The Millennia Companies®, call the Benefit Concierge at 877-282-0808 Monday through Friday from 8AM-5PM Eastern Time. If you have any questions about open enrollment or any of the benefits offered by The Millennia Companies®, you may call the Benefits Concierge or send an email to info@millenniacompaniesbenefits.com. In addition, The Millennia Companies® Employee Benefits Website millenniacompaniesbenefits.com has detailed information about the benefits offered.

### MEDICAL INSURANCE

The medical plans cover a wide range of services, from preventive and routine care to hospitalization and surgery. The medical plans include a prescription drug benefit, which covers prescriptions at participating pharmacies and mail-order maintenance drugs.

Medical Carrier: Anthem Blue Cross and Blue Shield Website: www.anthem.com Phone: (833) 639-1634

### Anthem Blue Access PPO 7 (\$1,500)

If you enroll in the Millennia PPO 7 Plan, you can use any provider for your care. However, when you see an in-network provider, out-of-pocket costs are limited to a \$30 copay for primary care office visits and a \$60 copay for specialists. Out-of-network care is also covered, but you will pay more for your care. Most out-of-network expenses are subject to an annual deductible, and the plan pays 50 percent of covered expenses. Deductibles in this plan are generally lower than in the other medical plans offered.

### Anthem Blue Access HSA E2 (\$3,000)

If you enroll in the Millennia HSA E2 plan, you may also use any provider for your care. However, out-of-pocket expenses are lower when you see an in-network provider. This plan allows utilization of a health savings account (HSA). **Copays for office visits and prescriptions apply once you meet your deductible.** The plan pays 70 percent of out-of-network covered expenses, after meeting your deductible.

### Anthem Blue Access HSA E5 (\$5,000)

If you enroll in the Millennia HSA E5 plan, you may also use any provider for your care. However, out-of-pocket expenses are lower when you see an in-network provider. This plan allows utilization of a health savings account (HSA). **Copays for office visits and prescriptions apply once you meet your deductible.** The plan pays 70 percent of out-of-network covered expenses, after meeting your deductible.

Preventive care from a doctor in your plan is covered at 100%. Getting these regular checkups, screenings and shots can help you stay healthy and catch problems early. Examples of preventive care includes; routine medical exams, mammograms, pelvic exams, PSA exams, and immunizations.

	In-Network	Out-of-Network
Can I go to any doctor and receive plan benefits?	Yes	Yes
Do I pay less if I see certain doctors?	You will pay less out-of-pocket when you use In-Network doctors	
Do I need a referral to see a specialist?	You can always go directly to a specialist, but you will   for an In-Network specialist	
Can I use mail-order for prescription drugs I use regularly?	Yes	Yes

# Medical Insurance

## Millennia PPO 7 (\$1,500)

### Anthem Blue Access PPO Option 7 with Rx Option T2

COVERED BENEFITS	<b>In-Network</b> You Pay:	Out-of-Network You Pay:	
Benefit Period Deductible Single / Family	\$1,500 / \$3,000	\$4,500 / \$9,000	
Coinsurance Applies after deductible	20%	50%	
Out of Pocket Maximum Single / Family	\$3,800 / \$7,600	\$11,400 / \$22,800	
Physician / Office Services			
Primary Care Office Visit	\$30 Copay	Deductible then 50%	
Specialty Care Office Visit	\$60 Copay	Deductible then 50%	
Preventive Services  Routine Physical Exams / Immunizations	No charge	Deductible then 50%	
<b>Emergency Care Services</b>			
Facility / Other covered services copayment waived if admitted	\$350	/ 20%	
Urgent Care	\$75 Copay Deductible then 5		
Hospital Services			
Hospital - Inpatient Charges	Deductible then 20%	Deductible then 50%	
Hospital - Outpatient Charges	Deductible then 20%	Deductible then 50%	
Diagnostic Testing / Imaging	Deductible then 20% Deductible then		
Prescription Drugs			
Retail (30 day supply)	Level 1 Pharmacy	Level 2 Pharmacy	
Tier I / Generic	\$10	\$20	
Tier II / Formulary	\$40	\$50	
Tier III / Non-Formulary	\$70 \$80		
Specialty	25% max \$350	25% max \$450	
Out-of-Network	Deductible then 50%		
Home Delivery (90 day supply)			
Tier I / Generic	\$25		
Tier II / Formulary	\$120		
Tier III / Non-Formulary	\$2	10	
Specialty	25% ma	ax \$350	

# Medical Insurance

Millennia HSA E2 (\$3,000)

## Anthem Blue Access PPO HSA Option E2 with Rx Option T8

COVERED BENEFITS	In-Network You Pay:	Out-of-Network You Pay:	
Benefit Period Deductible Single / Family	\$3,000 / \$6,000	\$9,000 / \$18,000	
Coinsurance Applies after deductible	0%	30%	
Out of Pocket Maximum  Single / Family	\$4,000 / \$8,000	\$12,000 / \$24,000	
Physician / Office Services			
Primary Care Office Visit	Deductible then \$30	Deductible then 30%	
Specialty Care Office Visit	Deductible then \$60	Deductible then 30%	
Preventive Services  Routine Physical Exams / Immunizations	No charge	Deductible then 30%	
Emergency Care Services			
Facility / Other covered services	Deductible	then \$350	
Urgent Care	Deductible then \$75 Deductible then 3		
Hospital Services			
Hospital - Inpatient Charges	Deductible	Deductible then 30%	
Hospital - Outpatient Charges	Deductible	Deductible then 30%	
Diagnostic Testing / Imaging	Deductible	Deductible then 30%	
Prescription Drugs			
Retail (30 day supply)	Level 1 Pharmacy	Level 2 Pharmacy	
Tier I / Generic	Deductible then \$10	Deductible then \$20	
Tier II / Formulary	Deductible then \$40	Deductible then \$50	
Tier III / Non-Formulary	Deductible then \$70 Deductible then		
Specialty	Deductible; 25% to \$350	Deductible; 25% to \$450	
Out-of-Network	Deductible then 50%		
Home Delivery (90 day supply)			
Tier I / Generic	Deductible then \$25		
Tier II / Formulary	Deductible	then \$120	
Tier III / Non-Formulary	Deductible	then \$210	
Specialty	Deductible then 25% to \$350		

# Medical Insurance

Millennia HSA E5 (\$5,000)

### Anthem Blue Access PPO HSA Option E5 with Rx Option T8

COVERED BENEFITS	<b>In-Network</b> You Pay:	Out-of-Network You Pay:	
Benefit Period Deductible  Single / Family	\$5,000 / \$10,000	\$15,000 / \$30,000	
Coinsurance Applies after deductible	0%	30%	
Out of Pocket Maximum  Single / Family	\$6,650 / \$13,300	\$19,950 / \$39,900	
Physician / Office Services			
Primary Care Office Visit	Deductible then \$30	Deductible then 30%	
Specialty Care Office Visit	Deductible then \$60	Deductible then 30%	
Preventive Services  Routine Physical Exams / Immunizations	No charge	Deductible then 30%	
<b>Emergency Care Services</b>			
Facility / Other covered services	Deductible	then \$350	
Urgent Care	Deductible then \$75 Deductible then 3		
Hospital Services			
Hospital - Inpatient Charges	Deductible	Deductible then 30%	
Hospital - Outpatient Charges	Deductible	Deductible then 30%	
Diagnostic Testing / Imaging	Deductible	Deductible then 30%	
Prescription Drugs			
Retail (30 day supply)	Level 1 Pharmacy	Level 2 Pharmacy	
Tier I / Generic	Deductible then \$10	Deductible then \$20	
Tier II / Formulary	Deductible then \$40	Deductible then \$50	
Tier III / Non-Formulary	Deductible then \$70	Deductible then \$80	
Specialty	Deductible; 25% to \$350	Deductible; 25% to \$450	
Out-of-Network	Deductible	then 50%	
Home Delivery (90 day supply)			
Tier I / Generic	Deductible then \$25		
Tier II / Formulary	Deductible	then \$120	
Tier III / Non-Formulary	Deductible	then \$210	
Specialty	Deductible then 25% to \$350		



## **Health Savings Account**

To help our associates take a more active role in their health care decisions, Millennia is offering plans coupled with a health savings account (HSA). You will be set up with an account through WageWorks that allows you to make pre-tax payroll contributions. You can contribute any amounts you wish to your account, up to the current federal limit of \$3,500 for a single person and \$7,000 for a family (associates overage 55 can contribute an additional amount up to \$1,000). Unlike traditional PPO plans, you may use funds from your HSA to help meet your annual deductible and out-of-pocket maximum. Whatever you don't use in a given year earns interest and rolls over to the next year. If you leave Millennia, the health savings account goes with you and you retain any account balance.

### You are eligible to open up an HSA bank account if:

- You enroll in Millennia's HSA E5 or HSA E2 plan
- You are not covered by any other non-high-deductible health plan, such as a spouse's plan
- You are not enrolled in Medicare
- You do not receive health benefits under TRICARE
- You have not received Veterans Administration (VA) benefits within the pastthree months
- You cannot be claimed as a dependent on another person's tax return
- You are not covered by a general purpose health care flexible spending account (FSA) or health reimbursement account (HRA). Alternative plan designs, such as a limited-purpose FSA or HRA, may be permitted

#### Additional details on HSAs:

- HSAs may be used to cover all eligible expenses, including medical, dental and vision
- HSAs offer a triple taxadvantage:
  - Tax-free contributions
  - Tax-free earnings
  - Tax-free withdrawals (when used for eligible expenses)
- If HSA funds are used for non-qualified expenses, you may be charged a 20 percent penalty tax
- At retirement age, funds can be withdrawn and used for any reason while applying normal taxes



## **Dental Insurance**

### Anthem

If you elect this plan, you can go to any dentist you want; however, you may owe an out-of-network dentist for fees that are not reimbursed by Anthem. Most expenses are subject to an annual deductible and a \$2,000 per member annual maximum applies. This plan includes child orthodontia coverage with a lifetime maximum of \$1,500 per member. Preventative care is exempt from the deductible.

	In-Network	Out-of-Network
Reimbursement Levels*	Based on contracted fees	Maximum allowable charge
Calendar Year Maximum	\$2,000	\$2,000
Annual Deductible	\$50 per person	\$50 per person
Annual Deductible	\$150 per family	\$150 per family
Reimbursement Levels*	Based on contracted fees	Maximum allowable charge
Class I Preventive & Diagnostic	No charge	Any balanced billing
Class II Basic Restorative Care	20% after deductible	20% after deductible
Class III Major Restorative Care	50% after deductible	50% after deductible
Orthodontia (children only)	50% after deductible	50% after deductible
Calendar Year Maximum	\$1,500	\$1,500

<sup>\*</sup> For services provided by an in-network dentist, Anthem will reimburse the dentist according to a contracted fee schedule. For services provided by an out-of-network dentist, Anthem will reimburse according to reasonable and customary allowances, but the dentist may balance up to their usual fees.



# Vision Insurance

## Anthem

Participation in the Anthem Vision PPO Comprehensive Plan is also available to all eligible employees. The most generous benefits are paid when you use a doctor in the network. The plan helps you pay for a wide range of vision-related services and products as shown below.

Benefit	Frequency Period (begins on January 1)	In-Network Provider	Out-of-Network Provider
Exam	12 months	\$20	N/A
Exam Allowance	12 months	100% after copay	Up to \$45
Materials Copay	12 months	\$20	N/A
Eyeglass Lenses*			
Single Vision	12 months	100% after copay	Up to \$40
Bifocal	12 months	100% after copay	Up to \$60
Trifocal	12 months	100% after copay	Up to \$80
Frames	24 months	Up to \$130	Up to \$45
Contact Lenses*			
Elective	12 months	\$130	Up to \$105
Therapeutic	12 months	Covered 100%	Up to \$210

<sup>\*</sup>One pair or single purchase per frequency period, as applicable.



## Flexible Spending Accounts

Flexible Spending Accounts (FSAs) enable you to put aside pretax dollars to pay for certain out-of-pocket expenses and help reduce your income taxes at the same time. Millennia offers two types of FSAs: Healthcare and Dependent Care. You do not need to enroll in other company benefits to be eligible to open an FSA. The annual maximum for the Healthcare FSA for the plan year beginning August 1, 2019 is \$2,700. The annual maximum for the Dependent Care FSA is \$5,000. Over-the-counter medicines and drugs must be accompanied by a prescription from a licensed healthcare professional.

For 2018-19 FSA claims, all expenses must be incurred by July 31, 2019, and all claims must be submitted to WageWorks by September 30, 2019.

The Healthcare FSA can be used to reimburse yourself for out-of-pocket expenses like medical, dental, or vision care deductibles, coinsurance, and copays. You can also use it for expenses not covered by a healthcare plan such as contact lens solution, hearing aids, prescribed vitamins, and smoking cessation programs.

The Dependent Care FSA can be used to help working parents pay for childcare, including babysitting, daycare, and preschool expenses. You can also use it to pay the costs associated with caring for a parent or grandparent, provided that person is your dependent.

### How Flexible Spending Accounts Work

- 1. Each year during your enrollment period, you decide how much to set aside for healthcare and/or dependent care expenses.
- 2. Your contributions are deducted from your paycheck on a pretax basis in equal installments throughout the plan year (August 1, 2019 July 31, 2020).
- 3. As you incur healthcare or dependent care expenses throughout the year, submit a claim form for reimbursement. Your claim will be processed and you will be reimbursed from your account.

Plan	Annual Maximum Contribution	Examples of Covered Expenses
Healthcare FSA	\$2,700	Copays, deductibles, orthodontia, etc*
Dependentcare FSA	\$5,000 (\$2,500 if married and filing separate tax returns)	Day care, nursery school, elder care expenses, etc*

Please note, these accounts are separate - you may choose to participate in one, both, or neither. You cannot use money from the Healthcare FSA to cover expenses eligible under the Dependent Care FSA or vice versa.

#### You must actively re-enroll in the FSAs each year. You are not automatically re-enrolled.

Claim forms can be downloaded from the WageWorks website at https:// myspendingaccount.wageworks.com. Employees without internet access should contact WageWorks at 888-557-3156.

FSAs are strictly governed by IRS regulations, including the Use It or Lose It requirement.

You cannot use a FSA and HSA for medical expenses. Both allow pre-tax contributions to help pay for qualified medical expenses. However, there are key differences between a FSA and HSA. Please review the following chart.

	HSA	FSA
Eligibility	You must be enrolled in one of the HSA plans (E2 \$3,000 or E5 \$5,000)	All eligible employees
2019 Contribution Limit	\$3,500 Individual / \$7,000 Family	Healthcare: \$2,700 Dependentcare: \$5,000
Contribution Source	Employer and/or employee	Employer and/or employee
Account Owner	Employee	Employer
Rollover	Unused contribution can be rolled over to the next year	Unused contribution is lost at the end of the year
Withdrawals (for non- medical expenses)	Allowed, but will be taxed in addition to a 20% penalty	Not allowed
Interest Earned	Interest earned in the account is tax-free	Account does not earn interest
Portability	You keep ownership of the account even if you leave the company	Account is forfeited after a job change

<sup>\*</sup>For more details, you can refer to IRS Publications 502 and 503, available on the IRS website: www.irs.gov.

## Life and Personal Accident Insurance

Millennia's Life and Personal Accident Insurance pays benefits if you die or are seriously injured. The Basic Life Insurance and Basic Personal Accidental Insurance are provided by Millennia. Voluntary Life Insurance and Voluntary Personal Accident Insurance are also available for you and your family and are paid for by you. To cover your spouse or dependent children, you must also apply for, and be covered by, Voluntary Life and Personal Accident Insurance.

Basic Life	\$15,000	
	(Benefits reduce to 65% at age 65 and 50% at age 70)	
Basic Personal Accident*		
Maximum benefit amount	\$15,000	
Loss of life	100%	
Total paralysis	100%	
Total paralysis of either upper or lower limbs	75%	
Loss of hand, foot, etc.	50%	
Total paralysis of one upper or lower limb, etc.	25%	
Voluntary Life		
•	Increments of $$10,000$ with maximum of the lesser of $5x$ your salary or $$500,000$ . ( $$200,000$ guaranteed issue)^	
For your spouse up to age 70	Increments of \$5,000 up to \$30,000 (\$30,000 guaranteed issue) not to exceed 50% of your coverag amount	
For your unmarried, dependent child(ren) under age 19 (or 26 if full-time student)	) Increments of \$10,000, with maximum of \$10,000 (\$500 birth to 6 months)	
Voluntary Personal Accident	Matches Voluntary Life coverage	

<sup>\*</sup>Payment is made if the bodily injuries result in the listed conditions within 365 days of a covered accident.

<sup>^</sup>Guaranteed issue is the amount of coverage you can elect without answering any medical questions or taking a health exam. If you are still employed, your benefits will reduce to 65 percent at age 65, 40 percent at age 70, and 25 percent at age 75.

## Disability

The Short-Term and Long-Term Disability plans are designed to continue a portion of your pay during absences due to illnesses or injuries. This is voluntary coverage paid for by you. Remember that you will be required to provide proof of your earnings and your continued disability.

#### Voluntary Short-Term Disability Benefits

If you are disabled, the Short-Term Disability (STD) plan will pay 50 percent of your weekly covered earnings to a maximum of \$500 per week for a period of up to 13 weeks, provided you remain disabled. If your disability is due to an accident, your benefit will begin immediately. If your disability is due to illness, your benefit will begin after seven days or, if earlier, the date you are admitted to the hospital due to your illness. You are considered disabled if you are unable to perform the material duties of your regular occupation and you are unable to earn 80 percent or more of your indexed earnings from working in your regular occupation.

#### Voluntary Long-Term Disability Benefits

You are eligible for Long-Term Disability (LTD) benefits if you have been continuously disabled for 180 days (the elimination period). This plan pays a benefit of up to 60 percent of your monthly covered earnings, to a maximum of \$5,000 per month. You are considered disabled for the first 24 months if you are unable to perform the material duties of your regular occupation and you are unable to earn 80 percent or more of your indexed earnings from working in your regular occupation. After 24 months, you are considered disabled if, solely due to your injury or sickness, you are unable to perform the material duties of any occupation for which you are (or may reasonably become) qualified by education, training, or experience; and you are unable to earn 60 percent or more of your indexed earnings.

The duration of your LTD depends on your age at the time you become disabled and whether you remain continuously disabled.

#### Termination of Disability Benefits

Your benefits will generally terminate on the earliest of any of the following dates:

- The date the insurance company determines you are no longer disabled
- The date you earn, from any occupation, more than the percentage of indexed earnings as defined in your definition of disability
- The date the maximum benefit period ends
- The date you cease to get appropriate care
- The date you die
- The date you refuse to participate, without good cause, in all required phases of the rehabilitation plan
- The date you fail to cooperate with us in the administration of the claim

### Accident

All employees have the opportunity to enroll in Accident Insurance provided by Allstate. This voluntary benefit helps your family cover unexpected out-of-pocket expenses and supplement lost income due to a covered on-the-job or off-the-job accident. Accident Insurance provides coverage for injuries based on a schedule of benefits. You may submit more than one claim if you receive different treatments for the same covered accident. The benefits do not coordinate with existing medical insurance, so they can be used toward deductibles, copays, prescriptions, and/or anything that you see fit.

## Critical Illness Insurance

All employees have the opportunity to enroll in Critical Illness Insurance provided by Allstate. Critical Illness insurance can pay a lump-sum benefit at the diagnosis of a specific covered disease (e.g., stroke, heart attack, cancer, advanced Parkinson's or Alzheimer's disease, etc.). Employees can purchase a \$10,000 or \$20,000 policy with no health questions. The benefits do not coordinate with existing medical insurance, so they can be used toward deductibles, copays, prescriptions, and/or anything that the insured sees fit. Covered dependents are offered 50 percent of the employee benefit.

## **Hospital Indemnity**

All employees have the opportunity to enroll in Hospital Indemnity Insurance provided by Allstate. Hospital Indemnity insurance can help provide a financial safety net, with cash benefits that help fill gaps left by major medical coverage associated with a hospital stay because of injury or illness. Employees can purchase a \$500 or \$1,000 first day hospital confinement benefit. Benefits can be used for out-of-pocket expenses such as copays, deductibles and treatments.

## **Employee Assistance Program**

All employees have access to an employee assistance program (EAP) through Anthem. This EAP provides you and your family members with access to experienced advocates who can assist you with counseling, referrals, and guidance on a variety of work and life issues. Members also have access to in-person counseling sessions with network providers in their area. This service is completely confidential and can be accessed 24 hours a day, 365 days a year by calling 800-865-1044. You can also go to www.anthemEAP.com and enter the company code: Millennia Housing Management

## 401(k) Retirement Plan

#### 401(k) Retirement Plan

As an employee of The Millennia Companies®, you are eligible to participate in the 401(k) Retirement Plan after you meet the plan's age and service requirements. You must attain age 21 and complete 60 days of service. Your participation in the plan will begin on the first day of the month after you meet the age and service requirements. You will not be eligible to participate in the plan if you are a member of an excluded group. Excluded groups include employees with a collective bargaining agreement and nonresident aliens.

### Pretax Employee Contributions

Your plan allows for employee contributions. You are permitted to defer a percentage of your compensation up to the annual IRS limit. The IRS employee contribution limit for 2019 is \$19,000; however, if you are age 50 or older, you may contribute an additional \$6,000 under a special catch-up rule.

The Millennia Companies® may make a discretionary matching contribution.

## Time off and Holiday Schedule

#### Paid Time Off (PTO)

Millennia recognizes that employees have diverse needs for time off from work. As such, Millennia has established this paid time off (PTO) policy. The benefits of PTO are that it promotes a flexible approach to time off by combining vacation, sick, and personal leave. Employees are accountable and responsible for managing their own PTO hours to allow for adequate reserves if there is a need to cover vacation, illness or disability, appointments, emergencies, or other situations that require time off.

#### Eligibility

PTO is accrued upon hire or transfer into a benefits-eligible position. Eligible employees are those classified as regular full-time and regularly scheduled to work at least 30 or more hours per week. All other classifications are not eligible.

#### **Availability of PTO**

PTO accruals are available for use in the pay period following completion of 30 days of employment. All hours after that are available for use in the pay period following the pay period in which they are accrued.

#### **Accrual of PTO**

Accrual Level 1	Days	<b>Accrual Rate</b>	<b>Max Hours</b>	Roll-over
Regular Full-Time Employees	Per Year	Per Paycheck	Per Year	
Less than 2 years completed =	14	4.30769231	112	Up to 160
Greater than 2 less than 5 years completed =	20	6.15384615	160	Up to 160
Greater than 5 but less than 10 years completed =	26	8	208	Up to 160
Greater than 10 years completed =	32	9.84615385	256	Up to 160

Accrual Level 2	Days	<b>Accrual Rate</b>	<b>Max Hours</b>	Roll-over
Department Heads, Regional Managers and above	Per Year	Per Paycheck	Per Year	
Less than 2 years completed =	16	4.92307692	128	Up to 160
Greater than 2 less than 5 years completed =	22	6.76923077	176	Up to 160
Greater than 5 but less than 10 years completed =	27	8.30769231	216	Up to 160
Greater than 10 years completed =	33	10.1538462	264	Up to 160

Accruals are based upon paid hours up to 2,080 hours per year, excluding overtime. Length of service determines the rate at which the employee will accrue PTO. PTO does not accrue while on leave of absence. Employees become eligible for the higher accrual rate on the first day of the pay period in which the employee's anniversary date falls. Employees who are promoted to a position with a higher level of accrual become eligible for the higher accrual rate on the first day of the pay period in which the promotion was completed. PTO is accrued per pay period, based on 26 pay periods per year.

#### **PTO Carryover**

Annual maximum carryover from one year to the next is 160 PTO hours for all benefits-eligible employees. Hours accrued in excess of 160 hours and not used by the end of the year will not be carried over into the following year. End of the year refers to the last day of the last pay period for the year.

Please refer to the full PTO Policy that will be provided to you upon hire.

#### **HOLIDAYS**

All employees classified as regular full-time and who are regularly scheduled to work at least 30 or more hours per week, and who have been employed by the Company for thirty (30) days are eligible to receive holiday pay. All other classifications are not eligible.

Holidays	
New Year's Day	Labor Day
Martin Luther King	Thanksgiving Day
Good Friday (1/2 day)	Friday after Thanksgiving
Memorial Day	Christmas Eve
Independence Day	Christmas Day
One (1) floating holiday – Designated by the Company every year	

To qualify for holiday pay, employees must work all hours the last scheduled workday prior to, the first scheduled work day after, and all hours scheduled to be worked on the holiday, if any. Employees do not qualify for holiday pay while on layoff or leave of absence. When a holiday falls during an employee's schedule and pre-approved PTO time, holiday pay will be applied.

## **Contact Information**

Plan	Plan Number	Website	Phone Number
Medical Care			
Anthem	OH2543	www.anthem.com	833-639-1634
Dental Care			
Anthem	OH2543D001	anthem.com/mydentalvision	844-729-1565
Vision Care			
Anthem	OH2543V001	anthem.com/mydentalvision	866-723-0515
Health Savings Account (HSA)			
WageWorks	0000040763	https://myspendingaccount.wageworks.com	888-557-3156
Flexible Spending Accounts (FSAs)			
WageWorks	0000040763	https://myspendingaccount.wageworks.com	888-557-3156
Life / Personal Accident Insurance			
Cigna	FLX-966080	www.mycigna.com	800-362-4462
401 (K) Retirement Plan			
	454505-01	www.empower-retirement.com/partcipant	800-338-4015
Employee Assistance Program			
Anthem	OH2543	www.anthemEAP.com	800-865-1044
Voluntary Accident Insurance			
Allstate	GVAP6 (34029)	allstatebenefits.com/mybenefits	800.521.3535
Voluntary Critical Illness Insurance			
Allstate	GVCIP4 (34029)	allstatebenefits.com/mybenefits	800.521.3535
<b>Voluntary Hospital Indemnity Insurance</b>			
Allstate	GIM2 (34029)	allstatebenefits.com/mybenefits	800.521.3535

For benefit forms and other information, go to http://millenniacompaniesbenefits.com To enroll in benefits, contact the Benefit Concierge Call Center at 1-877-282-0808 Questions about benefits? Email to benefits@mhmltd.com

