



# BENEFITS. CRAFTED FOR YOU.

## 2019/20 Benefits Guide

### IMPORTANT!

You must enroll in benefits to have coverage.

If you have questions, please contact the Benefits Service Center at 1-877-368-6053 or email [craftworks@piperjordan.com](mailto:craftworks@piperjordan.com).

# Welcome to CraftWorks Holdings!

We are pleased to offer you and your family a robust benefits program. This program is designed to help you stay healthy, feel secure and maintain work/life balance. Offering a competitive benefits package is just one way we strive to provide our Team Members with a rewarding workplace.

**Immediate action required** ... you become eligible for CraftWorks Holdings, Inc. benefits on the first day of the month following your date of hire. You have 30 days from your eligibility date to enroll.

You have a variety of benefit choices from which you can elect coverage based upon your health care and financial planning needs. These include four medical plan options, a dental and vision plan, basic life and AD&D, supplemental life, short-term and long-term disability, HSA, commuter benefits, as well as work-life benefits such as critical illness, accident and hospital indemnity insurance.

The coverage you elect now will remain in place until the end of our plan year. Our Plan Year runs from September 1 through August 31. You **MUST ENROLL IN BENEFITS NOW** if you wish to be covered for benefits during the 2019/20 plan year.

If you do not elect coverage, your next opportunity to enroll in CraftWorks Holdings benefits will be during next year's Open Enrollment unless you have a Qualified Life Event.

**To learn more about any of the above - and to see all of your benefit options - visit [www.craftworksbenefits.com](http://www.craftworksbenefits.com).**

## What You Need To Do

- ✓ Visit our benefits microsite at [www.craftworksbenefits.com](http://www.craftworksbenefits.com).
- ✓ Review your benefit options by clicking the "Benefits" button at the top of the navigation bar.
- ✓ Once you've reviewed and understand your benefits, click "Enroll Now" at the top navigation bar to be taken to the election portal. There, you can enroll in or decline your benefits. **IMPORTANT: YOU MUST ENROLL IN OR DECLINE BENEFITS FOR EACH INDIVIDUAL BENEFIT.**
- ✓ If you have questions, please contact the Benefits Service Center at 877-368-6053 or email [craftworks@piperjordan.com](mailto:craftworks@piperjordan.com).



# 2019/20 Highlights

- **Plan Year** - The CraftWorks Holdings organization plan year runs from September 1, 2019 through August 31, 2020.
- **Medical Plans** – You have the choice of four medical plans. Three traditional medical plans administered by Cigna and a hybrid limited Minimum Essential Coverage (MEC) plan offered by Reliance Standard.
- **Cigna Medical Plan** - The Cigna medical plan is available for team members and their dependent children. You have the option of three medical plans with Cigna. Two of these plans have a narrow network which offers cost efficient access to a local network of high-quality doctors, hospitals and specialists.
  - \* **Tobacco Surcharge** – If you select a Cigna medical plan, and use tobacco or nicotine products, you will be subject to a tobacco surcharge of \$100 per month for the 2019/20 plan year. There is no tobacco surcharge if you enroll in the Reliance Standard plan.
  - \* **Prescription Drug Coverage** – If you select a Cigna medical plan, your prescription drug benefits will be provided by Magellan Rx to provide pharmacy services. You will be automatically enrolled into our pharmacy program when you elect a Cigna medical plan.
  - \* **Health Savings Account (HSA) Match** - CraftWorks provides an employer match program! If you elect the Cigna Basic or Cigna Open Access medical plan and contribute to the Health Savings Account, CraftWorks will match your contribution, dollar-for-dollar up to \$250 for team members and \$500 for team members and their children!
- **Reliance Standard Medical Plan** - This MEC medical plan, through Reliance Standard, provides point of service coverage for you and your family members and pays up to 100% for limited preventive services and prescriptions. You can enroll your spouse in the Reliance Standard MEC medical plan.
- **Dental Plan** - Our dental plan, through Reliance Standard, provides you with coverage for preventive, basic and major services, at any dentist you choose!
- **Vision Plan** - Vision coverage through EyeMed via Reliance Standard, gives you access to thousands of providers in-network and provides you with coverage for exams, lenses, frames and contact lenses.
- **Work-Life Benefits** - At CraftWorks Holdings, we offer Accident, Critical Illness, Hospital Indemnity, Term Life and Short Term Disability through Chubb. The benefits can be used to compliment your medical, dental or vision coverage or as stand-alone benefits.

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## Eligibility

Full-Time Restaurant Hourly Team Members are eligible to participate in the CraftWorks Holdings benefits program on the first day of the month following a change to your full time benefit eligibility status. Benefits-eligible Team Members may also enroll their legal spouses (same and opposite sex) and/or dependent children (with supporting dependent verification documents).

A dependent child may be the natural child, stepchild, legally adopted child, child placed for adoption, or other child for whom you have permanent legal custody. Age limits and other restrictions may vary by plan.

## When do I enroll?

You have 30 days from the first day of the month following your full time benefit eligibility status. The coverage you elect now will remain in place until the end of our plan year, which is August 31, 2020. If you are adding dependents, you must upload proof of dependency (e.g., birth certificate, tax form, or marriage certificate) in the Benefits Portal within your 30 days.

Full benefits deductions are owed for any pay period in which your benefits are effective for one or more days. You are responsible for premiums based on your coverage effective date. If any deductions are missed, all missed deduction amounts will be withheld.

During a Leave of Absence, an employee will be responsible for any missed insurance premiums via a retro deduction or a manual premium remittance.

## REMEMBER!

You have 30 days to submit the necessary documents. Your dependent will not be added to your coverage until valid documentation is approved. If valid documentation is not received and approved within 30 days, you will have to wait until next year's Open Enrollment to add your dependent.

## Making Changes after Your Eligibility Period

You may change your coverage during the year only when you experience a qualifying life event, such as marriage, divorce, birth of a child, death, adoption, placement for adoption, loss of coverage, or gain of other coverage. If you have a qualifying life event, log in to [www.craftworks.bswift.com](http://www.craftworks.bswift.com) or call 1-877-368-6053, complete the enrollment change, and provide the proper supporting documentation. These actions must be within 31 days of the qualifying event.

# Your Benefit Support

## CraftWorks Holdings Benefits Microsite

The CraftWorks benefits microsite makes it easy to learn about and enroll in your CraftWorks Holdings benefits.

Get connected at [www.craftworksbenefits.com](http://www.craftworksbenefits.com). From there you can view your Summary of Benefits and Coverage(s), find a provider, download claim forms and enroll in your benefits.

Our online benefits enrollment through bswift is also found on the microsite. Click on "Enroll Now" to be taken to [www.craftworks.bswift.com](http://www.craftworks.bswift.com). If it's your first time accessing the website, you'll need to register and

create your username and password. The CraftWorks Holdings Benefits Portal isn't just where you go to enroll, but it's also where you can learn about and compare your benefits and costs. Plus it's your year-round resource when you need to make a change to your benefits due to a qualified life event, or to designate/update beneficiaries.

Remember: Your default User ID is the first Initial of your first name + your last name + the last 4 digits of your Social Security Number (e.g. Jane Smith 123-45-6789 would be JSmith6789). Your initial password is the last four digits of your Social Security Number. You will be asked to change your password after your initial login.

# Medical Plan Options

For the 2019/20 plan year, team members have four medical plans from which you can choose your coverage based upon your health care needs and your budget. Review the information on the next few pages to compare the medical plans. The Cigna medical plans are available to team members and their dependent children. The Reliance Standard medical plan is available to team members and their families, including spouses. Note that the Cigna Advanced and Cigna Basic Medical Plans cover in-network providers only. That means there is no out-of-network coverage available.

## Cigna Medical Plans Options Available to Team Members and Dependent Children Only

### Cigna Advanced Medical Plan

The Advanced Medical Plan offers the lowest copays, deductibles, and out of pocket maximums of all three of our medical plans. There are copays for prescriptions, as well as lab and x-ray. Copays are required for emergency room visits and urgent care visits and do not apply to the deductible. While your costs are lowest at time services are rendered in the Advanced Medical Plan, your weekly medical premiums are the highest.

**Covers In-Network Services Only**

\$750 (I) or \$1,500 (F)

Annual Deductible

\$25 copay (PCP) / \$50 copay (Specialist)

Doctor's Office Visits

\$50/\$200 copay

Urgent Care/Emergency Room

\$50/\$150

Lab & X-ray services / Major Diagnostic services

### Cigna Open Access Medical Plan

The Open Access Medical Plan provides you with the option of using providers that are in- or out-of-network. You must attain the annual deductible before any co-insurance benefits (including those for prescription drugs) would apply. Prescriptions are subject to copays in-network and are not covered out-of-network. This is a high deductible health plan (HDHP). As such you are eligible to contribute to a health savings account (HSA). Participating in the Company's HSA benefit provides pre-tax savings and a Company matching benefit which can help defer the out-of-pocket costs associated with this medical coverage option.

**Covers In- and Out-of-Network Services**

\$1,500 (I) or \$3,000 (F) - In-Network

\$3,000 (I) or \$6,000 (F) - Out-of-Network

Annual Deductible

20% after deductible (In-Network)

50% after the deductible (Out-of-Network)

Doctor's Office Visits/Specialist Visit

20% after deductible (In-Network)

50% after the deductible (Out-of-Network)

Lab & X-ray services / Major Diagnostic services

### Cigna Basic Medical Plan

The Basic Medical Plan has the highest deductible and co-insurance but the lowest weekly premium cost. This plan may be suitable for a healthy team member who is not a frequent user of health care services but offers coverage in the unforeseen event of a serious illness or injury. Note that preventative prescriptions are covered at 100% and are not subject to the deductible. The Basic Medical Plan is also a HDHP that offers the Company matching benefit. Participation in the Company's HSA benefit can help defer the out-of-pocket costs associated with this medical coverage option.

**Covers In-Network Services Only**

\$3,500 (I) or \$7,500 (F)

Annual Deductible

30% after deductible

Doctor's Office Visits

FREE!

Preventive Rx (diabetic supplies & medication, asthma medication, and more!)

30% after deductible/\$150 copay

Urgent Care/Emergency Room

# Cigna Medical Plan Summaries

## Cigna Advanced Medical Plan

Plan Feature	In-Network Only Coverage
HSA Eligible	No
Network Option	LocalPlus
Deductible	\$750 (I) / \$1,500 (F)
Deductible Definition	After each eligible family member meets his or her individual deductible, covered expenses for that family member will be paid based on the coinsurance level specified by the plan. Or, after the family deductible has been met, covered expenses for each eligible family member will be paid based on the coinsurance level specified by the plan.
Out-of-Pocket Maximum	\$3,000 (I) / \$6,000 (F)
Coinsurance	You pay 20% after deductible
Lab Work and Diagnostic Tests	\$50 (tier 1) / \$150 (tier 2)
Hospital Stay	You pay 20% after deductible
Emergency Room	\$200 copay (no deductible applies)
Urgent Care	\$50 copay
Preventive Drug	Based on Rx tiers
Generic Drug	\$10 copay
Preferred Brand Rx	\$40 copay
Non-Preferred Brand Rx	\$70 copay
Specialty Drug	\$150 copay
<b>Cigna Medical Plan Contributions</b>	
Employee-Only	\$49.12
Employee + Child(ren)	\$80.92

(I) = Individual; (F) = Family

### Summary of Benefits and Coverage

A Summary of Benefits and Coverage (SBC) has been designed to assist you with better understanding the coverage being offered to you, and to allow you to compare coverage options. The SBC is available on [www.craftworksbenefits.com](http://www.craftworksbenefits.com). A paper copy is also available, free of charge, by calling 1-877-368-6053 or emailing [craftworks@piperjordan.com](mailto:craftworks@piperjordan.com).

In the event of any conflict between the content contained herein and the Summary Plan Description (SPD), the

## Cigna Open Access Medical Plan

## Cigna Basic Medical Plan

In-Network		Out-of-Network	In-Network Only Coverage
Yes		Yes	Yes
Open Access Plus Network			LocalPlus
\$1,500/Ind. or \$3,000/Ind. in a Family or \$3,000/family		\$3,000/Ind. or \$6,000/Ind. in a Family or \$6,000/family	\$3,500 (I) / \$7,500 (F)
After each eligible family member meets his or her individual deductible, covered expenses for that family member will be paid based on the coinsurance level specified by the plan. Or, after the family deductible has been met, covered expenses for each eligible family member will be paid based on the coinsurance level specified by the plan.			After each eligible family member meets his or her individual deductible, covered expenses for that family member will be paid based on the coinsurance level specified by the plan. Or, after the family deductible has been met, covered expenses for each eligible family member will be paid based on the coinsurance level specified by the plan.
\$4,500 (I) / \$9,000 (F)		\$9,000 (I) / \$18,000 (F)	\$6,750 (I) / \$13,500 (F)
You pay 20% after deductible		You pay 50% after deductible	You pay 30% after deductible
You pay 20% after deductible		You pay 50% after deductible	You pay 30% after deductible
You pay 20% after deductible		You pay 50% after deductible	You pay 30% after deductible
\$150 copay true emergency/ \$300 copay non-emergency (after deductible)		You pay 50% after deductible	\$150 copay true emergency/ \$300 copay non-emergency (after deductible)
You pay 20% after deductible		You pay 50% after deductible	You pay 30% after deductible
Based on Rx tiers*		No coverage	Free!*
\$15 after deductible		No coverage	\$10 after deductible
\$45 after deductible		No coverage	\$40 after deductible
\$75 after deductible		No coverage	\$70 after deductible
\$150 after deductible		No coverage	\$150 after deductible
Weekly Rates			
\$40.64			\$21.39
\$66.96			\$35.23

\* Applies to drugs on the preventive drug lists, otherwise based on Rx tiers.  
To find the preventive drugs covered, please visit [www.craftworksbenefits.com/fth/rx.html](http://www.craftworksbenefits.com/fth/rx.html).

# Cigna Providers

## Is Your Provider In-Network?

Follow the steps below to explore in-network providers in the CraftWorks Holdings medical plans:

1. Go on-line to [www.cigna.com](http://www.cigna.com). If you are currently enrolled in a Cigna medical plan, DO NOT go your [mycigna.com](http://mycigna.com) user portal as only the doctors participating in your current medical plan will be listed.
2. At the top of the home page, click on the blue button at the right that says "Find a Doctor, Dentist or Facility"
3. On the next page under "Not a Cigna Customer Yet?" select "Plans through your employer or school"
4. Next page will appear titled "Find Providers"
5. Type in your search location
6. Under "Select A Plan", click on "PICK"
7. The page will scroll down, click on Medical Plans
  - a. Select "LocalPlus" for the CraftWorks Advanced or Basic plans or,
  - b. Select "Open Access Plus, OA Plus, Choice Fund OA Plus" for the CraftWorks Open Access plan
8. For Dentist click on Dental Plans
  - a. Select "Total Cigna DPPO (Cigna DPPO Advantage and Cigna DPPO)"
9. Then underneath click on the "CHOOSE" button
10. The screen will scroll back up and you can type your providers name or specialty in the "SEARCH" box
11. Your search results will appear on the next page

*If your current medical provider (doctor, hospital, therapist, lab, etc.) is not in the Cigna LocalPlus network, you must be willing to transition to an provider who participates in this network for any benefits to be provided in the Advanced or Basic Medical Plan.*

## Wellness Benefits - Cigna Medical Plans Only

If you enroll in a Cigna medical plan for the 2019/20 plan year, we are pleased to offer two wellness offerings to enhance your benefit coverage.

### Progyny

The Progyny benefit is designed to assist covered Team Members and their partners who want to have a child and are experiencing challenges conceiving.

Your benefit also provides coverage for infertility or a one-time \$5,000 adoption benefit, which allows you to build a family when you're ready.

Call Progyny to activate your benefit at 855.369.3336.

### Livongo

At CraftWorks, we believe that wellness should be an integrated part of your medical coverage. That's why we are introducing Livongo to our Team Members. If you or a family member have been diagnosed with diabetes, you qualify for our Livongo for Diabetes™ program\*. This program includes a glucose meter and unlimited lancets and test strips — all at no cost to you!

#### Why enroll in Livongo for Diabetes

- **Connected Meter:** Automatically uploads your blood glucose readings to your secure online account and provides real-time, personalized tips.
- **Support from Coaches When You Need It:** Communicate with a coach anytime about diabetes questions on nutrition or lifestyle changes.
- **Unlimited Strips at No Cost to You:** When you are about to run out, Livongo ships more supplies right to your door.



## Surcharges - Cigna Medical Plans Only



### **Tobacco Surcharge:**

If you use tobacco products and you do not elect to complete a tobacco or nicotine cessation program, you will be required to pay a weekly tobacco surcharge of \$23.08 if you enroll in medical coverage.

You will be considered a tobacco user if you have used any tobacco products within the past 12 months. This includes the use of smoked or smokeless products such as cigarettes, cigars, pipes, chewing tobacco, e-cigarettes, etc. or if you don't complete a tobacco cessation program within three months following the effective date of your medical coverage.

Tobacco users can eliminate the tobacco surcharge by enrolling in the free Cigna's Lifestyle Management - tobacco cessation program. CraftWorks Holdings is committed to helping you to stop using tobacco products and improve your health. The tobacco surcharge will be waived if you complete the requirements of Cigna's Lifestyle Management - tobacco cessation program within three months following the effective date of your medical coverage regardless of whether you quit using tobacco products.

You can enroll in the program, or ask questions, by contacting Cigna at 1-800-244-6224 or go online to [www.myCigna.com](http://www.myCigna.com), at the top of the page click on "Wellness" and select "My Health Assistant - Online Coaching Program".

### **Working Spouse Surcharge:**

If your spouse is eligible for medical coverage through his/her employer and you elect to enroll him/her on your CraftWorks Holdings medical plan, you will pay a weekly Working Spouse Surcharge of \$23.08.

However, if your spouse is a CraftWorks Holdings employee, the Working Spouse Surcharge will not apply.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all team members and eligible spouses. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by a different means. Contact the Benefits Service Center at 1-877-368-6053. We will work with you (and, if you wish, with your doctor) to develop another way to qualify for the reward.

## Telemedicine - Cigna Medical Plans Only

Cigna provides access to telehealth services as part of your medical plan - MDLIVE. MDLIVE lets you get the care you need - including most prescriptions (when appropriate) - for a wide range of minor conditions. Now you can connect with a board-certified doctor via video chat or phone, without leaving your home or office. When, where and how it works best for you!

Televisits with MDLIVE can be a cost-effective alternative to a convenience care clinic or urgent care center, and cost less than going to the emergency room. The cost of a phone or online visit is the same or less than with your primary care provider. Remember, your telehealth services are only available for minor, non-life-threatening conditions. In an emergency, dial 911 or go to the nearest hospital.

Say it's the middle of the night and your child is sick. Or you're at work and not feeling well. If you pre-register on MDLIVE, you can speak with a doctor for help with sore throats, headaches, stomachache, fevers, colds and flu, allergies, rashes, acne, shingles, bronchitis, urinary tract infections and more.

**Choose when:** Day, night, weekdays, weekends, holidays.

**Choose where:** Home, work or on the go.

**Choose how:** Phone or video chat.

**Choose who:** MDLIVE doctors.

### **Telemedicine Visit Cost:**

- \$15 copay with the Advanced Medical Plan
- \$40 copay after deductible with the Open Access or Basic Medical Plans

Call 1-888-726-3171 or visit [MDLIVEforCigna.com](http://MDLIVEforCigna.com) to access your telemedicine benefits.

# Prescription Drug Program - Cigna Medical Plans Only

## Your Prescription Benefit Plan is through Magellan Rx Management

CraftWorks Holdings is pleased to partner with Magellan Rx as our provider for the Cigna prescription drug program. Any team member who enrolls in a Cigna medical plan will automatically be enrolled with Magellan Rx as their pharmacy carrier.

### Using Your Prescription Drug Card at a Participating Pharmacy

Our prescription drug program is available at CVS or participating pharmacies. (Note: Walmart, Rite-Aid and Walgreens are excluded providers.)

1. You will receive a prescription card at your home address.
2. You need to present your prescription card along with your prescription to any participating pharmacy every time you fill your prescription.
3. You can access a participating pharmacy list at [www.magellanrx.com](http://www.magellanrx.com).

Our prescription drug program covers select FDA-approved preventive drugs for chronic conditions. Team members enrolled in the Basic Medical Plan receive these drugs at no cost and team members on the Open Access plan do not need to meet their deductible. To see an approved list of preventive drugs visit [www.craftworksbenefits.com/fth/rx.html](http://www.craftworksbenefits.com/fth/rx.html).

Team members who select Cigna as a medical carrier will receive a separate pharmacy identification card and welcome letter from Magellan Rx.

### Maintenance Medication(s)

If you take a maintenance medication(s), you have two options to fill your prescription. A maintenance medication is a prescription that will be filled more than two times.

- Mail Order – Sends a 90-day supply of your maintenance medication(s) to your home address.
- Maintenance Choice at CVS – Allows you to refill your 90-day supply of your maintenance medication(s) at a participating Maintenance Choice CVS pharmacy at the same cost as mail order.

### What do I Need to Do?

1. **Get your prescription:** Ask your physician to write one prescription for a 90-day supply of your maintenance medication(s).
2. **Submit your prescription:**
  - **E-prescribe or Fax:** Have your doctor e-prescribe or fax your prescription to 1.888.282.1349. Faxed prescriptions may only be sent by a doctor's office and must include patient information and diagnosis for timely processing.
  - **Mail:** Mail us your 90-day prescription, a completed order form, along with payment to:  
PO Box 620968, Orlando, FL 32862.
  - **Walk In:** To your local CVS Pharmacy and fill your prescription onsite using the Maintenance Choice program.

*If you have any specific questions about the CraftWorks Holdings prescription drug program, please contact Magellan Rx at 1-855-371-9778 using reference code "CraftWorks" to seek assistance from a Magellan customer service representative.*

## Is Your Drug Covered?

### Step One

- Visit our website at [www.magellanrx.com](http://www.magellanrx.com).
- Click on Portal Access: Member from the home screen.

### Step Two

- Click on Tools & Resources in the navigation bar and select Documents.  
(It's not necessary to log into access the formulary).

### Step Three

- Craftworks Holdings will have the Magellan Rx Precision Formulary effective September 1, 2019
- Select the "View the Precision Drug Look Up" Link to access the formulary look up tool documents.

### Step Four

- Type in the drug name in the search bar, or search by therapy class.
- You can also view and print the Formulary, Prior Authorization and Quantity Limit listings from this

When the selected drug displays, the formulary tier and any quantity, step therapy or prior authorization limits will also be indicated.

Our formulary tier structure is as follows (the drug look up tier is driven by the formulary tier):

- Tier 1 (T1) = Generics.
- Tier 2 (T2) = Preferred brands.
- Tier 3 (T3) = Non-preferred brands.
- NF = Non-formulary or excluded ("non-formulary" and "excluded" are interchangeable). Non-formulary drug drugs will reject at the point of service because they are not on the formulary.

*Remember, if a preferred drug from the formulary is prescribed, your copay may be less than if a non-preferred drug is prescribed for you. To receive maximum prescription drug benefits, ask your doctor to prescribe a medication that is on the formulary.*

# Health Savings Account (HSA)

*Cigna Basic & Cigna Open Access Plans Only*



## What is an HSA?

A health savings account (HSA) is a medical savings account and can be used for qualified healthcare expenses including medical, dental and vision. This account is funded by you and has a dollar for dollar match up to \$250 for individuals and \$500 for families funded annually by CraftWorks.

## CraftWorks Match

If you enroll in the Cigna Basic or Cigna Open Access medical plan, you can open an HSA during the enrollment process by electing the amount you want to contribute. When you enroll in and contribute to a Health Savings Account, CraftWorks will match your CraftWorks Holdings HSA account contribution up to \$250 for individuals and \$500 for families. This money is yours to spend on eligible health care expenses. If you don't want to contribute to the HSA, click "Waive" during your benefits enrollment.

However, you'll miss out on a great savings opportunity. So it's a good idea to elect to contribute to your HSA when you enroll online. Discovery Benefits will automatically send you a debit card once your account is opened.

## How Much Can I Contribute in 2019 or 2020?

	Advanced Medical Plan	Open Access Medical Plan	Basic Medical Plan
<b>CraftWorks Matching Contribution</b>			
<ul style="list-style-type: none"> <li>Individual</li> <li>Family</li> </ul>	N/A	\$250 \$500	\$250 \$500
<b>Your Maximum Contribution</b>			
<ul style="list-style-type: none"> <li>Individual</li> <li>Family</li> </ul>	N/A	\$3,250 \$6,500	\$3,250 \$6,500
<b>2019 &amp; 2020 Maximum Contribution Limit</b>			
<ul style="list-style-type: none"> <li>Individual (2019/2020)</li> <li>Family (2019/2020)</li> </ul>	N/A	\$3,500/\$3,550 \$7,000/\$7,100	\$3,500/\$3,550 \$7,000/\$7,100

## Save with an HSA

If you choose an HSA compatible plan, you can contribute pre-tax dollars into an HSA. Your HSA funds earn tax-free interest, and can be used to pay for qualified medical, prescription drug, dental and vision expenses. HSAs are similar to retirement accounts in that the funds:

- Rollover year-to-year,
- Remain yours if you change jobs or retire, and
- Can be invested in mutual funds.

An HSA account through CraftWorks Holdings allows you to lower your premium cost, contribute to a healthcare savings account and take advantage of a company match benefit. It's a great way to save!

## Winning with an HSA

### Funds Rollover

Your funds do not expire at the end of the year. Instead, they rollover, allowing you to use funds whenever you need them!

### Paying for your Medical

Use your HSA as an option to pay for your medical expenses on a pre-tax basis. A debit card is provided to you to make paying easier.

### Tax-Deferred Deposits

HSA contributions are automatically deducted from your paycheck on a pre-tax basis.

### Retirement Planning

Contribute to your HSA pre-tax up to \$3,500 per year for a team member or \$7,000 for a team member and child(ren) (including company contributions). Contributions that roll over from other HSA's do not count towards the annual maximums. If age 55 or older, you can contribute up to an additional \$1,000 annually.

### Already have an HSA Account?

If you currently have an HSA account through your prior employer, you will be given the opportunity to transfer your HSA account to Discovery Benefits after enrollment.

# Reliance Standard Medical Plan

Available for Team Members and their Families

The Reliance Standard BasicCare Program combines the BasicAdvantage Total Plan and the Essential Care Plan to provide you with ACA-compliant Minimum Essential Coverage. Your acceptance into this program is guaranteed - you cannot be turned down as long as you elect coverage during Open Enrollment and remit premiums. These plans are bundled; when you elect this coverage you will be automatically enrolled in both plans.

*If you elect any combo of Medical, Dental and Vision plans your premium deduction will be automatically bundled into one lump-sum payment each payroll. For example, if you elect Employee-Only Medical coverage at \$17.07 per week and Employee-Only Vision coverage at \$1.77 per week, your combined total weekly deduction will be \$18.44.*

## **BasicAdvantage Total Plan Highlights:**

- Visit any doctor or hospital.
- Enrolled and approved dependents receive the same coverage as you.
- No pre-existing conditions exclusions or limitations.
- BasicAdvantage Total Plan enrollees also receive these added non-insurance benefits:
  - Prescription Drug Card offering discounts at participating pharmacies.
  - VSP Access Plan membership offering discounts on eye exams and prescription glasses at network doctors.
  - 24-Hour Nurse Helpline.
  - On-line Wellness Assistance.
  - Vitamins & Nutritional Supplements Plan.
  - On Call Travel Assistance.

## **Essential Care Plan Highlights:**

The Essential Plan is intended to provide minimum essential coverage under the Affordable Care Act. It provides you and your enrolled dependents with preventive care only and helps you meet the requirements of the Affordable Care Act.

Below is a list of a few common preventive health services the plan covers:

- Annual Preventive Care Visits – physicals & history
- Immunizations – diphtheria, tetanus and pertussis, hepatitis & influenza
- General Health Screenings – blood pressure, cholesterol & diabetes
- Prescription contraceptives for women
- Well Child Exams – physical exams & vision acuity
- Assessments – developmental & behavioral
- Screenings – hearing loss, lead poisoning and depression

## **Summary of Benefits and Coverage**

A Summary of Benefits and Coverage (SBC) has been designed to assist you with better understanding the coverage being offered to you, and to allow you to compare coverage options.

The SBC is available on [www.craftworksbenefits.com](http://www.craftworksbenefits.com). A paper copy is also available, free of charge, by calling 1-877-368-6053 or emailing [craftworks@piperjordan.com](mailto:craftworks@piperjordan.com).

**BasicAdvantage Total Plan****Plan Benefit**

New Patient Office Visit	\$75/day for 1 day
Established Patient Office Visit	\$60/day for 3 days
Emergency Room Sickness	\$50/day for 3 days
Emergency Room Accidental Injury	\$500/day for 2 days
Urgent Care Facility	\$50/day for 1 day
Surgery Benefit	\$500/procedure/day
Heart Attack	\$1,500/day for 1 day
Hospital Admission - Accidental Injury	\$1,000/day for 1 day
Stroke	\$1,000/day for 1 day
Childbirth	\$1,000/day for 1 day
Anesthesia	\$100/day
Pathology Benefits	\$40/day for 2 days
Prescription Drug Benefits	\$25 per generic/7 fills

**Essential Plan****Plan Benefit**

Copays	\$0 (\$50 for brand-name contraceptives)
Deductible	\$0
Benefit Paid by Plan	100%
Plan Annual Maximum	Unlimited

**Combined Medical  
Plan Rates****Weekly Premium**

Employee-Only	\$17.07
Employee + Spouse	\$33.57
Employee + Child(ren)	\$40.87
Family	\$58.15



# Dental Plan

## Reliance Standard Dental PPO

Our vendor for our Dental Plan is Reliance Standard!

This is a Dental PPO plan, so you can go to any dentist you like. However, you will receive a better negotiated rate if you use an in-network provider. This difference in cost is due to contracted rates and/or reasonable customary.

*If you elect any Reliance Standard Medical, Dental or Vision plans your premium deduction will be automatically bundled into one lump-sum payment.*

*For example, if you elect Employee-Only Medical coverage at \$17.07 per week and Employee-Only Vision coverage at \$1.77 per week, your combined total weekly deduction will be \$18.44.*

## Reliance Standard Dental Plan

In & Out-of-Network

Plan Type	PPO
Individual Deductible	\$50, not waived for preventive
Preventive Services (no waiting period)	80% coverage
Basic Services (3-month waiting period)	60% after deductible
Major Services (12-month waiting period)	50% after deductible
Orthodontia Services	Not covered
Calendar Year Benefit Maximum	\$1,000



## Dental Rates

## Weekly Premium

Employee-Only	\$4.45
Employee + Spouse	\$9.39
Employee + Child(ren)	\$10.10
Family	\$14.95

# Vision Plan

## Reliance Standard Vision Plan

	In-Network	Out-of-Network
Annual Eye Exam	\$10 copay	Up to \$35
<b>Lenses</b>	\$25 copay	
Single Vision	Covered in full	N/A
Bifocal	Covered in full	
Trifocal	Covered in full	
Lenticular	Covered in full	
Frames	\$130 allowance	Up to \$65
<b>Contact Lenses</b>		
Fit & Follow-up	Up to \$40 or 10% off	No benefit
Elective	Up to \$130 allowance	Up to \$104
Medically Necessary	Paid in full	Up to \$200

## Reliance Standard Vision Plan

Our vendor for our Vision Plan is Reliance Standard.

This Vision plan allows you to visit any eye doctor you want while still providing you benefits even if you're out-of-network.

*If you elect any Reliance Standard Medical, Dental or Vision plans your premium deduction will be automatically bundled into one lump-sum payment.*

*For example, if you elect Employee-Only Medical coverage at \$17.07 per week and Employee-Only Vision coverage at \$1.77 per week, your combined total weekly deduction will be \$18.44.*

## Vision Rates

### Weekly Premium

Employee-Only	\$1.77
Employee + Spouse	\$3.49
Employee + Child(ren)	\$3.22
Family	\$4.94



# Work-Life Benefits

## Hospital Indemnity Plan

This plan pays a \$1,000 benefit when you are admitted to the hospital for a covered hospital stay. You will receive an additional \$100 per day for days 2-30 of a standard confinement or an additional \$200 per day for an ICU confinement.

Hospital Indemnity	Defined Benefit	Hospital Indemnity Rates	Weekly Premium
Initial Confinement	\$1,000/1 day per year	Employee-Only	\$2.74
Daily Confinement	\$100/days 2-30	Employee + Spouse	\$6.53
Daily ICU Confinement	\$200/days 2-15	Employee + Child(ren)	\$4.96
Outpatient Phy. Therapy	25 day/Up to 15 days	Family	\$8.75



## Short-Term Disability Plan

Disability insurance helps replace your income when you lose your paycheck due to a covered disability. Chubb's Short-Term Disability plan will replace a portion of your income to help pay for important expenses like:

- Car Payments
- Credit Card Debt
- Student Loans
- Household Costs
- College Tuition
- Saving for Retirement

### Short-Term Disability Rates

Employee-Only \$2.73

### Weekly Premium

### Short-Term Disability

### Description

Accident Elimination Period	7 Days
Sickness Elimination Period	7 Days
Income Replacement	60% of your income up to \$125 per week
Benefit Period	6 Months
Day 1 Income Replacement	Elimination period is waived for hospitalization or outpatient surgery



# Work-Life Benefits

## Accident Plan

Group voluntary accident coverage from Chubb pays cash benefits for expenses associated with an accidental injury and can help protect your finances should an accidental injury occur. Our benefits correspond with treatment for accidental injuries including hospitalization, emergency treatment, intensive care, ambulance, fractures, medical expenses, plus more.



## Term Life Plan

You work hard to provide a good life for your family. However, what if something happens to you? Chubb LifeTime Benefit Term provides the help you and your family needs to help pay for things like:

- Mortgage and Rent
- College and Education Expenses
- Retirement
- Household Expenses
- Long-Term Care
- Childcare
- Family Debt
- Burial

You can find the personalized rates for this plan on [www.craftworks.bswift.com](http://www.craftworks.bswift.com). Note: Rates vary based upon age, coverage amount.

Plan Features	Description
First Accident	\$100
Accidental Death	\$80,000
Emergency Room	\$200
Hospital Admission	\$1,000
Hospital Confinement	\$150 day/365 days
Urgent Care	\$100
X-Ray/MRI	\$40/\$200
Surgery	\$1,500

Accident Rates	Weekly Premium
Employee-Only	\$2.80
Employee + Spouse	\$6.74
Employee + Child(ren)	\$8.28
Family	\$10.80

Employee Age Band	Defined Benefit
Employee-Only Ages 19-70	\$10,000   \$25,000 \$50,000   \$100,000
Employee-Only Ages 71-80 <i>(subject to underwriting)</i>	\$10,000   \$25,000 \$50,000

Spouse and child coverage is also available.

# Work-Life Benefits

## Critical Illness Plan

Critical Illness coverage can be elected in \$10,000 or \$20,000 increments and provides cash benefits for out-of-pocket expenses related to covered critical illnesses. This coverage also offers a \$50 benefit for certain preventive screenings. There is also a recurrence benefit of up to 100% for cancer, heart attacks or strokes

*Note: Rates vary based upon age, coverage amount and tobacco usage. You can find the rates for this plan on [www.craftworks.bswift.com](http://www.craftworks.bswift.com).*

Plan Feature	Description
Guaranteed Issue Coverage	10,000   \$20,000
Heart Attack/Stroke/End Stage Renal Failure/Major Organ Failure/Invasive Cancer/Benign Brain Tumor	100%
Recurrence Benefit	100% (1 time)
Wellness Benefit	\$50/year

## Decision to Enroll in Voluntary (Work-Life) Benefits

Whether you choose to enroll in any of these programs is completely optional and Voluntary.

CraftWorks Holdings does not make a contribution towards the cost of these programs and employees pay the full cost of premiums on an after-tax basis.

CraftWorks Holdings does not sponsor, maintain, endorse, recommend, or promote these Work-Life programs. CraftWorks Holdings' involvement regarding these Work-Life insurance programs is strictly limited to allowing the insurer access to employees to publicize these programs and CraftWorks Holdings may perform certain ministerial functions such as payroll deduction and forwarding employee premium payments to the insurer.

CraftWorks Holdings does not receive any consideration in the form of cash or otherwise in connection with the program, other than reasonable compensation, excluding any profit, for administrative services actually rendered in connection with payroll deductions. Accordingly, these Work-Life insurance programs are not subject to ERISA and related regulations. All questions or claims regarding these programs should be directed to the insurer.

# Commuter Benefits

If you rely on the train, subway, bus, ferry, trolley, or vanpool to get to work, or if you pay for parking, you can save money on your commute! The CraftWorks Holdings's Commuter Benefits plan allows you to set aside up to \$265 each month in pretax dollars for qualified transit and vanpooling expenses. You can enroll on a monthly basis, or simply choose to let your election roll over each month.

Once enrolled:

- Discovery Benefits will send you a debit card that you can use to pay your transit expenses directly at the time of service.

- You can pay out of pocket and submit a reimbursement request through your Discovery Benefits online account or Mobile App. To receive your reimbursement as quickly as possible, be sure to sign up for direct deposit.
- In cities that offer smart cards, you can easily transfer funds from your Discovery Benefits commuter account directly to your smart card.

Visit [www.discoverybenefits.com](http://www.discoverybenefits.com) to enroll at any time and view your balance.

# 401(k) Retirement Plan

At CraftWorks, we know that planning for the future is important to you. That's why we offer a valuable opportunity to save through the CraftWorks Retirement Savings Plan. The plan allows you to contribute a percentage of your gross pay through the year on a pre-tax basis.

For 2019, the maximum contribution a team member can make to their account is \$19,000. If you are age 50 and over, an additional \$6,000 may be contributed. You can actually make the catch up contributions while you are 49 and if you are turning 50 during the year.

These maximum contribution amounts are announced by IRS each year. Please check the Portal during the fall of 2019 for any new announcements for 2020.

## Eligibility Requirements

To become eligible for the plan, you must meet all criteria:

- Be at least 21 years of age
- Have 12 months of service with at least 1,000 hours worked

Enrollment opportunities for newly eligible team members are held after one year of service. Once eligible, you will be informed of how to enroll online through Empower's Retirement website. Once enrolled, you can manage your investments and deferral percentage online and change them anytime.

## Employer Match

CraftWorks will match 25% up to 6% of your salary. To receive the full match, you must be contributing at least 6%. The match is calculated each pay period and applied to participant accounts following each quarter end. Employer match amounts are subject to change on quarterly basis at the discretion of CraftWorks.



# Important Benefit Contacts

Carrier	Member Services Telephone Number	Carrier Website	Plan Number
Medical - Cigna	1-800-244-6224 (1800Cigna24)	<a href="http://www.myCigna.com">www.myCigna.com</a>	3342788
Telemedicine - MDLIVE (Cigna Medical Plan)	1-888-726-3171	<a href="http://MDLIVEforCigna.com">MDLIVEforCigna.com</a>	-
Pharmacy (Cigna Medical Plan)	1-855-371-9778	<a href="http://www.magellanrx.com">www.magellanrx.com</a>	RxBIN: 017449 RxPCN: 6792000 RxGRP: PRXCWH Issuer (80840): 9151014609
Health Savings Account (HSA)	1-866-451-3399	<a href="http://www.discoverybenefits.com">www.discoverybenefits.com</a>	-
Medical - Reliance Standard	1-866-375-0775	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>	-
Dental	1-866-375-0775	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>	-
Vision	1-800-351-7500	<a href="http://www.reliancestandard.com">www.reliancestandard.com</a>	-
Life Insurance	1-855-241-9891	<a href="http://www.chubb.com">www.chubb.com</a>	-
Short Term Disability Insurance	1-866-445-8874	<a href="http://www.combinedinsurance.com">www.combinedinsurance.com</a>	-
Accident	1-866-445-8874	<a href="http://www.combinedinsurance.com">www.combinedinsurance.com</a>	-
Hospital Indemnity	1-855-672-3231	<a href="https://info.visit-aci.com/logans/">https://info.visit-aci.com/ logans/</a>	-
Critical Illness	1-866-445-8874	<a href="http://www.combinedinsurance.com">www.combinedinsurance.com</a>	-
Employee Assistance Program	1-800-538-3543	<a href="http://www.signalap.com">www.signalap.com</a>	-
Benefits Service Center	1-877-368-6053	<a href="http://www.craftworksbenefits.com">www.craftworksbenefits.com</a>	-

# Important Missed Premium Information

If you miss a premium for any of your Reliance Standard coverages (medical, dental or vision), you have 45 days from the date of the missed deduction to remit premium.

**NOTE: If you haven't had a claim during the time of no payroll deductions, you DO NOT need to remit premium; If you had any medical, dental or vision service, you have 45 days to pay premium to include pay period claim was incurred through current time period.**

## How do you know if you missed a premium?

- Look at your paystub.
- If you do not see a deduction for your medical, dental and/or vision coverage, follow the steps below:
  - Determine the weekly deduction amount for your coverage. You can find your current elections and deduction amounts on your Benefit Confirmation Statement on <http://craftworks.bswift.com>
  - Need Login Assistance? If you have forgotten your password or are having trouble logging in, please click on the Forgot Password link to reset, using the security question you have already provided. If you are still unable to log in, contact the CraftWorks Holdings Benefits Service Center at (877) 368-6053. Representatives are available Monday through Friday from 8:00 a.m. to 7:00 p.m. CST.

Reliance Standard deductions are combined in your payroll check. This means, if you have medical, dental and vision coverages, they come out of your paycheck as ONE deduction. The deduction amount for each coverage is added together to create ONE amount. For example:

- Medical Deduction - \$40.00
- Dental Deduction - \$10.00
- Vision Deduction \$10.00
- TOTAL Reliance Standard weekly deduction = \$60.00  
( $\$40.00 + \$10.00 + \$10.00 = \$60.00$ )
- Fill out a Missed Premium Payment Form.
  - Missed Premium Payment Forms can be found in the Library section on the microsite ([www.craftworksbenefits.com](http://www.craftworksbenefits.com)), or
  - We have also included a copy of a Missed Premium Payment form for your convenience on page 3 of this notice.
- Include payment for your benefits with the Missed Premium Payment form.
  - You must remit the full amount of the premiums missed (medical, dental and vision deductions are combined) in order for your coverage to remain in force and claims paid on your behalf. In the example provided in Step 2, the amount owed and due with the Missed Premium Payment Form would be \$60.00.

## What happens if you do not remit payment?

If you do not pay the full amount missed via payroll deductions, you will have a gap in coverage for that coverage period. As a result, prescriptions and doctor's office visits made during that period of time will not be covered. Additionally, if you miss one month or more of premium payments, your IRS 1095 form will reflect that you did not have medical coverage during that month. If you have questions regarding your coverage with Reliance Standard, please contact 866-375-0775. You can also access information about your plan via [www.helpwithmyplan.com](http://www.helpwithmyplan.com).

