

2025 Benefits Enrollment Guide

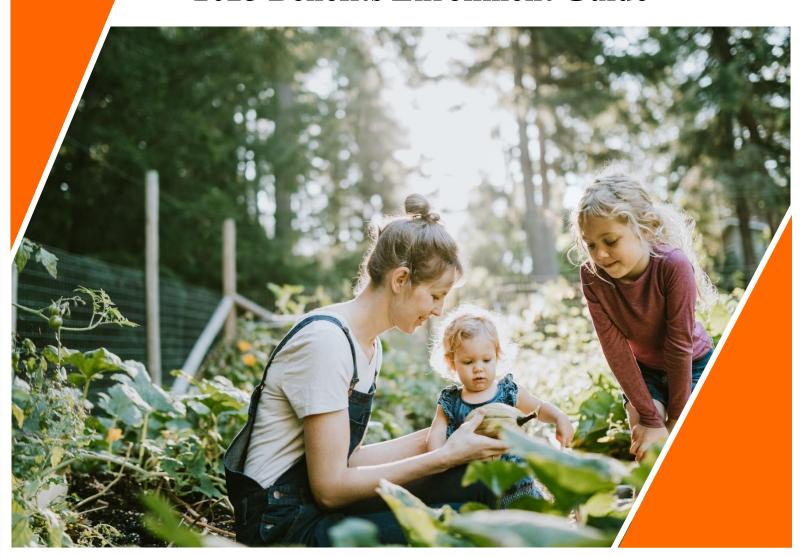


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A Message from HR at Gebruder Weiss, Inc.

At Gebruder Weiss, Inc., we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs, we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access, and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

You can also view overviews of our benefit plans by accessing our website, www.gw-worldusahr.com.

Sincerely,

Sandra Musielak Human Resources Manager

Eligibility

Eligible Employees

You may enroll in the Gebruder Weiss, Inc. Employee Benefits Program if you are a full-time employee working at least 30 hours per week.

Eligible Dependents

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse, domestic partner, and children up to age 26. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided. Children may include natural, adopted, stepchildren and children obtained through court-appointed legal guardianship, as well as children of same sex state-registered domestic partners.

When Coverage Begins

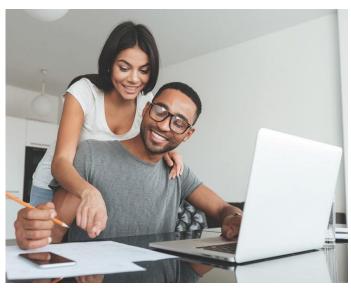
The effective date for your benefits is **January 1, 2025**. Newly hired employees and dependents will be effective in Gebruder Weiss, Inc.'s benefits programs 1st of the month following date of hire. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a change in family status event.

Family Status Change

A change in family status is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits. Examples of some family status changes include:

- Change of legal marital status (i.e., marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e., birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in your having to wait until the next open enrollment period to make your change. Please contact Human Resources to make these changes.



NOTE: This will be an **Active Enrollment for all Benefits**. You must actively enroll in order to have coverage for the 2025 plan year.

*** If you are enrolled in FSA, you must select your 2025 contributions. These contributions will not rollover.

HSA contributions will rollover, but we encourage you to review.

If you are waiving benefits, you are encouraged to waive directly in Paycor.

Medical Insurance

Gebruder Weiss, Inc. will offer medical coverage through Blue Cross Blue Shield of Illinois. The comparison below is a brief outline of what is offered. Please refer to the Summary of Benefits & Coverage / summary plan description for complete plan details. To access Network Providers Click Here.

We also offer a Medical Expense Reimbursement Plan (MERP) through The Difference Card. A MERP is a Gebruder Weiss funded benefit that reimburses employees for qualified medical expenses throughout the year. The MERP is ONLY applicable to In-Network claims.

| | BCBSIL MIEEE4024 with \$5,500 / \$11,000 Difference Card Benefit GOLD PLAN | |
|--|---|-----------------------|
| | In-Network | Out-of-Network |
| Annual Deductible | Embedded | |
| Individual | \$7,500 The Difference Card Pays first \$5,500 | \$15,000 |
| Family | \$15,000 The Difference Card Pays first \$11,000 | \$30,000 |
| Coinsurance | 100% | 100% |
| Maximum Out-of-Pocket | | |
| Individual | \$7,500 The Difference Card Pays first \$5,500, bringing the OOP Max to \$2,000 | \$15,000 |
| Family | \$15,000 The Difference Card Pays first \$11,000, bringing the OOP Max to \$4,000 | \$30,000 |
| Physician Office Visit | | |
| Primary Care | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Specialty Care | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Preventive Care | | |
| Adult Periodic Exams | 100% | 100% after deductible |
| Well-Child Care | 100% | 100% after deductible |
| Diagnostic Services | | |
| X-ray and Lab Tests | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Complex Radiology | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Urgent Care Facility | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Emergency Room Facility Charges | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Inpatient Facility Charges | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Outpatient Facility and Surgical Charges | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Retail Pharmacy (30 Day Supply) | | |
| Preferred/Non-Preferred Generic | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Preferred/Non-Preferred Brand | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |
| Preferred/Non-Preferred Specialty | 100% after deductible The Difference Card Pays first \$5,500 / \$11,000 | 100% after deductible |

| | BCBSIL MIEEE4024 with \$3,500 / \$7,000 Difference Card Benefit SILVER PLAN | |
|--|--|-----------------------|
| | In-Network | Out-of-Network |
| Annual Deductible | Embedded | |
| Individual | \$7,500 The Difference Card Pays first \$3,500 | \$15,000 |
| Family | \$15,000 The Difference Card Pays first \$7,000 | \$30,000 |
| Coinsurance | 100% | 100% |
| Maximum Out-of-Pocket | | |
| Individual | \$7,500 The Difference Card Pays first \$3,500, bringing the OOP Max to \$4,000 | \$15,000 |
| Family | \$15,000 The Difference Card Pays first \$7,000, bringing the OOP Max to \$8,000 | \$30,000 |
| Physician Office Visit | | |
| Primary Care | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Specialty Care | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Preventive Care | | |
| Adult Periodic Exams | 100% | 100% |
| Well-Child Care | 100% | 100% |
| Diagnostic Services | | |
| X-ray and Lab Tests | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Complex Radiology | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Urgent Care Facility | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Emergency Room Facility Charges | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Inpatient Facility Charges | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Outpatient Facility and Surgical Charges | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Retail Pharmacy (30 Day Supply) | | |
| Preferred/Non-Preferred Generic | The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Preferred/Non-Preferred Brand | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |
| Preferred/Non-Preferred Specialty | 100% after deductible The Difference Card Pays first \$3,500 / \$7,000 | 100% after deductible |

| | BCBSIL MIEEE4024 \$4,200 / \$8,400 Difference Card Benefit HSA PLAN | |
|--|---|-----------------------|
| | In-Network | Out-of-Network |
| Annual Deductible | Embedded | |
| Individual | \$7,500 You pay first \$3,300, DC pays the last \$4,200 | \$15,000 |
| Family | \$15,000 You pay first \$6,600, DC pays the last \$8,400 | \$30,000 |
| Coinsurance | 100% | 100% |
| Maximum Out-of-Pocket | | |
| Individual | \$7,500 You pay first \$3,300, DC pays the last \$4,200 | \$15,000 |
| Family | \$15,000 You pay first \$6,600, DC pays the last \$8,400 | \$30,000 |
| Physician Office Visit | | |
| Primary Care | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Specialty Care | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Preventive Care | | |
| Adult Periodic Exams | 100% | 100% after deductible |
| Well-Child Care | 100% | 100% after deductible |
| Diagnostic Services | | |
| X-ray and Lab Tests | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Complex Radiology | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Urgent Care Facility | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Emergency Room Facility Charges | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Inpatient Facility Charges | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Outpatient Facility and Surgical Charges | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Retail Pharmacy (30 Day Supply) | | |
| Preferred/Non-Preferred Generic | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Preferred/Non-Preferred Brand | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |
| Preferred/Non-Preferred Specialty | 100% after deductible You pay first \$3,300 / \$6,600 DC pays last \$4,200 / \$8,400 | 100% after deductible |

| Medical Employee Contributions (Monthly) | |
|--|-------|
| GOLD Plan With \$5,500 / \$11,000 Difference Card Benefit | |
| Employee | \$238 |
| Employee & Spouse | \$653 |
| Employee & Child(ren) | \$594 |
| Employee & Spouse & Child(ren)/Family | \$832 |
| SILVER Plan With \$3,500 / \$7,000 Difference Card Benefit | |
| Employee | \$82 |
| Employee & Spouse | \$495 |
| Employee & Child(ren) | \$440 |
| Employee & Spouse & Child(ren)/Family | \$715 |
| HSA Plan With \$4,200 / \$8,400 Difference Card Benefit | |
| Employee | \$100 |
| Employee & Spouse | \$550 |
| Employee & Child(ren) | \$500 |
| Employee & Spouse & Child(ren)/Family | \$750 |



BCBSIL Resources



Blue Access for Members (Member Website)

Get information about your health benefits, anytime, anywhere. Use your mobile phone, or computer to access www.bcbsil.com, Blue Access for Members (BAM). Click on Register Now (if you are a new member) and use the information on your BCBSIL ID card to complete the registration process. You can text BCBSILAPP to 33633 to get the BCBSIL app as well. BAM gives you a selection of tools to get the most out of your medical plans. With BAM you can:

- Check the status or history of a claim along with the Explanation of benefits (EOB).
- Request a new ID card or print a temporary one.

Provider Finder

Use the Provider Finder tool, a reliable and convenient way to locate doctors and hospitals in your network. Sort search results by provider type, specialty, zip code, language, and gender. Go to www.bcbsil.com and click on Find a Doctor or Hospital.

- The improved search experience means you need fewer clicks and required fields to get the results!
- Estimate the cost of hundreds of procedures, treatments, and tests, as well as your out-of-pocket expenses, based on the plan you enroll in.
- Review providers certifications and recognitions and review patient feedback or add your review for a provider.

24/7 Nurseline (800-299-0274)

24/7 Nurseline can help you identify options when you or a family member have a health problem or concern. This service should be utilized if you're not sure whether you should seek primary care.

Well onTarget

Well on Target can give you the support you need to make healthy choices — while rewarding you for your hard work. The heart of Well on Target is the member portal, available at www.wellontarget.com. It links you to a suite of inviting programs and tools:

- Health Assessment (HA)
- Self-Management Programs
- Wellness Coaching

- Online Wellness Coaching
- Health and Wellness Content
- Blue Points Program

Start earning and access your rewards today:

Log in or register on www.wellontarget.com.

Participate in challenges and programs to earn blue points.

Redeem points in the online shopping mall.

Questions? Call 888-762-2583





WELCOME TO YOUR DIFFERENCE CARD BENEFITS!

The Difference Card is a benefit funded by your employer that helps you save money on your medical costs.



Hi I'm Danny! I'm here to help you understand how to use your Difference Card benefits with your health insurance.

GETTING STARTED

MOBILE APP

Using your smart phone's camera, scan this to download mobile app.

With The Difference Card Smart Mobile App, you can:

- Snap a picture to easily submit your claim
- Find the cheapest place to buy your prescriptions
- Compare cost and search for providers
- View your account balance
- Check claim status
- Sign up for Direct Deposit

LEARN MORE

Visit us online at <u>DifferenceCard.com</u>.

Questions? Our Customer Care Team is available Monday - Friday, from 8AM to 11PM ET.

Call us at (888) 343-2110





HOW TO SWIPE YOUR DIFFERENCE CARD



1. When visiting his doctor or a pharmacy, Danny gives them his Insurance Card first.



3. For prescriptions Danny can swipe his Difference Card for the full cost. For medical services, once charged, Danny may use his Difference Card for payment.



2. The pharmacy provider tells Danny the amount due for his costs. Danny's medical provider's should bill him for the services received.



4. The amount requested is now satisfied using The Difference Card. It's that easy!

If Danny receives a substantiation request, he will just want to submit his carrier **explanation of benefits** into The Difference Card and link to the transaction needing attention.

HOW TO GET HELP WITH YOUR MEDICAL BILLS



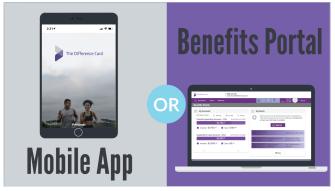
1. When Danny goes to the doctor, he does not pay for some services up front like major medical services.



2. Instead, he will present his Insurance Card to the medical provider and will get a bill and an insurance statement* later.



3. Danny will get his insurance statement* either through the Insurance Provider's website or in the mail.



4. Danny then logs into his account online or through the mobile app to upload his insurance statement* to submit his claim.



5. Claims on average are processed in 2 business days. If Danny's claim is eligible for reimbursement, his funds will be direct deposited or mailed to his home.



6. Danny compares the medical bill to the insurance statement and pays the amount he owes. *Danny may have to pay a portion out of pocket before he is eligible for reimbursement.

*An Insurance Statement, sometimes called an Explanation of Benefits (EOB), describes what costs your Insurance Provider will cover for medical care.

WAYS TO SUBMIT YOUR CLAIM









MOBILE

Download the
Difference Card Smart
Mobile App to submit
your claim with a
picture.

ONLINE

Login to your account at DifferenceCard.com to submit your claim online.

MAIL

Fill out a Reimbursement Form and submit your documents via mail.

FAX

Fill out a Reimbursement Form and submit your documents via fax.



DIRECT DEPOSIT

The fastest way to get your money.

Money will come back to you via direct deposit if you select that as your Reimbursement Preference.

TOOLS ON THE GO

Scan this code with your camera app to get helpful resources at your fingertips.





Dental Insurance

| | Blue Cross Blue Shield Blue Care Dental PPO | |
|--------------------------------|--|----------------|
| | In-Network | Out-of-Network |
| Annual Deductible | | |
| Individual | \$50 | \$50 |
| Family | \$150 | \$150 |
| Waived for Preventive Care? | Yes | Yes |
| Annual Maximum | | |
| Per Person | \$2,000 | |
| Preventive | 100% | 100% |
| Basic | 80% | 80% |
| Major | 50% | 50% |
| Implants | 50% | 50% |
| Orthodontia | | |
| Benefit Percentage | 50% | 50% |
| Adult and Dependent Child(ren) | Adults and Children to age 19 | |
| Lifetime Maximum | \$2,000 | |

| Employee Contributions (Monthly) | |
|---------------------------------------|---------|
| Blue Care Dental PPO | |
| Employee | \$0.00 |
| Employee & Spouse | \$40.97 |
| Employee & Child(ren) | \$43.20 |
| Employee & Spouse & Child(ren)/Family | \$84.16 |

Dental Benefits

Gebruder Weiss, Inc. will offer the dental with Blue Cross Blue Shield of Illinois. Utilizing Network providers results in a higher benefit level and no balance billing. To access Network Providers Click Here.



Vision Insurance

| Vision Service Plan | | |
|---|--|--|
| Сорау | | |
| Routine Exams (Annual) | \$10 copay | |
| Vision Materials | | |
| Materials Copay | \$25 copay | |
| Lenses | Benefit varies by type of lens. Covered every 12 months | |
| Contacts Covered in lieu of frames. Medically necessary contacts may be covered at a higher benefit level | Elective contacts covered Up to \$60 copay every 12 months | |
| Frames | Covered at \$150 allowance;\$170 allowance for featured brands every 24 months | |

| Employee Contributions (Monthly) | |
|---------------------------------------|---------|
| Vision | |
| Employee | \$6.85 |
| Employee & Spouse | \$10.96 |
| Employee & Child(ren) | \$11.18 |
| Employee & Spouse & Child(ren)/Family | \$18.03 |

Vision Benefits

Gebruder Weiss, Inc. provides Vision coverage through Vision Service Plan (VSP). Using non-network providers will result in higher out-of-pocket expenses after reimbursement. To access Network Providers <u>Click Here</u>.



Life and AD&D

Gebruder Weiss, Inc. provides Basic Life and AD&D benefits to eligible employees. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

| Lincoln Financial Group Life & AD&D | | |
|-------------------------------------|----------|--|
| Benefit Maximum | \$50,000 | |
| Guaranteed Issue | \$50,000 | |

The above benefits will begin to decrease at age 65.

Important Reminder!

Be sure to assign a beneficiary or living trust in Paycor to ensure your assets are distributed according to your wishes.

Voluntary Offerings

In addition to the employer paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life insurance and voluntary accidental death and dismemberment insurance to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to medical questions and evidence of insurability.

Voluntary Life Insurance

You may purchase additional Life insurance with Lincoln Financial Group if you want more coverage. Your

contributions will depend on your age and the amount of coverage you elect.



You may elect coverage in \$10,000 increments; subject to a maximum of Five times Basic Annual Earnings (rounded to the next higher \$10,000). Coverage is subject to a minimum of \$10,000 and an overall maximum of \$500,000 with a guarantee issue of \$150,000. Any amount above the guarantee issue requires evidence of insurability/medical questions. If you initially become insured after attaining age 70 your benefit is subject to a maximum of \$50,000.

For your spouse, you may elect coverage in \$5,000 increments; subject to a maximum of 50% of your Life Insurance Benefit (rounded to the next higher \$5,000). Coverage is subject to a minimum of \$5,000 and an overall maximum of \$250,000 with a guarantee issue of \$30,000. Any amount above the guarantee issue requires evidence of insurability/medical questions.

For your child(ren), you may elect coverage in \$2,500 increments. Coverage is subject to a minimum of \$2,500 and an overall maximum of \$10,000 with a guarantee issue of \$10,000.

Voluntary AD&D Insurance

You may purchase additional AD&D (Accidental Death & Dismemberment) insurance with Lincoln Financial Group if you want more coverage. Your contributions will depend on your age and the amount of coverage you elect.

You may elect coverage in \$10,000 increments; subject to a maximum of Five times Basic Annual Earnings (rounded to the next higher \$10,000). Coverage is subject to a minimum of \$10,000 and an overall maximum of \$500,000.

For your spouse, you may elect coverage in \$5,000 increments; subject to a maximum of 50% of your Life Insurance Benefit (rounded to the next higher \$5,000). Coverage is subject to a minimum of \$5,000 and an overall maximum of \$250,000.

For your child(ren), you may elect coverage in \$2,000 increments. Coverage is subject to a minimum of \$2,000 and an overall maximum of \$10,000.

Short-Term Disability Insurance

Gebruder Weiss, Inc. offers a short-term disability option through Lincoln Financial Group. This benefit covers 60% of your weekly base salary up to \$1,000/week. The benefit begins after 8 days for injury or illness and lasts up to 13 weeks. Please see the summary plan description for complete plan details.

Long-Term Disability Insurance

Gebruder Weiss, Inc. offers long-term income protection through Lincoln Financial Group in the event you become unable to work due to a non-work-related illness or injury. This benefit covers 60% of your monthly base salary up to \$6,000/month. Benefit payments begin after 90 days of disability. See Certificate of Coverage for benefit duration. Please see the summary plan description for complete plan details.

Employee Assistance Plan (EAP)

Life does not always go smoothly. All of us experience times when a personal problem or crisis affects the way we function at work or home. Your Employee Assistance Program (EAP) is a problem-solving resource available to you and your household members. A professional counselor will assist you in assessing your situation, finding options, making choices, or locating further help.

It's free...Your employer covers the cost of initial assessment, additional problem-solving sessions, and referral services. If there is a need for further counseling or treatment, your counselor will help you explore various options.

It's confidential...Your EAP has been set up with ComPsych through Lincoln Financial Group, an outside counseling resource to assure confidentiality. No one at work will know you have chosen to seek help unless you choose to tell them. Nothing concerning your use of EAP will appear in your personnel file.

ComPsych is only a phone call away at 888-628-4824 or <u>www.GuidanceResources.com</u>. (username = LFGsupport; password = LFGsupport1)

Voluntary Accident

With accident insurance from Lincoln, you can expand your benefits package and promote peace of mind among your employees. Lincoln Accident Insurance helps deliver financial security for the unexpected—allowing you to help your employees protect their budgets against unforeseen expenses if they suffer an accidental injury. Employees can use the cash benefits from this coverage to help meet copayments and other expenses while they recover, or any other way they see fit.

Key coverage highlights

- Premiums remain the same for employees of all ages
- No medical questions or proof of good health (evidence of insurability) is required for employees to receive coverage
- Cash benefits paid directly to the insured in addition to any medical benefit received
- Employees can keep coverage if they ever leave the company
- Survivor portability for spouse and children of a deceased employee
- Provide additional protection—benefits are available to help protect children under 18 who experience an accident during an organized sports activity
- The policy pays multiple cash benefits for each injury and covered treatment when an insured individual sustains more than one injury in the same accident

| Employee Contributions (Monthly) | |
|----------------------------------|---------|
| Employee | \$17.47 |
| Employee and Spouse | \$28.76 |
| Employee and Child(ren) | \$30.83 |
| Family | \$41.97 |

Voluntary Hospital Indemnity

Lincoln hospital indemnity insurance helps deliver financial security for the unexpected, allowing you to help your employees protect their budgets against unforeseen expenses if they suffer an accidental injury or sickness. Employees can use the cash benefits from this coverage to help meet copayments, to pay for recovery expenses or in any way they see fit. Built with your business in mind, our hospital indemnity insurance options are flexible and affordable.

| Voluntary Hospital Indemnity | | |
|------------------------------|--|--|
| Hospital Admission | \$1,000 1 day per calendar year for sickness/injury | |
| Intensive Care Admission | \$2,000 1 day per calendar year for sickness/injury | |
| Hospital Confinement | \$200 up to 30 days per calendar year for sickness/injury. | |
| | Benefit begins on day 2 of confinement | |
| Intensive Care Confinement | \$400 up to 30 days per calendar year for sickness/injury. | |
| | Benefit begins on day 2 of confinement | |

| Employee Contributions (Monthly) | | |
|----------------------------------|---------|--|
| Employee | \$29.55 | |
| Employee and Spouse | \$63.10 | |
| Employee and Child(ren) | \$45.50 | |
| Family | \$82.44 | |

Voluntary Critical Illness

Critical illness insurance from Lincoln lets you expand your benefits package while helping your employees protect their budgets from the unexpected expenses that can come with a critical illness. Your employees will receive cash benefits when diagnosed with a covered critical illness, and they can use their benefit however they wish, for medical or personal expenses.

- Employee coverage amount: Option(s) of \$10,000, \$15,000, \$20,000
- Employee guarantee issue: \$20,000
- Spouse coverage amount: Option(s) of \$5,000, \$7,500, \$10,000 not to exceed 50% of the employee benefit amount
- Spouse guarantee issue: \$10,000
- Child(ren) coverage amount: Option(s) of \$5,000, \$7,500, \$10,000 not to exceed 50% of the employee benefit amount.

| Voluntary Critical Illness | | |
|--------------------------------------|-----------------|--|
| Covered Conditions | Adult Benefit % | |
| Heart Attack | 100% | |
| Arterial / vascular disease | 25% | |
| Stroke | 100% | |
| Major organ failure | 100% | |
| End stage renal (kidney) failure | 100% | |
| Invasive cancer | 100% | |
| Non-invasive cancer/cancer in situ | 25% | |
| Skin cancer (paid once per lifetime) | \$250 | |

| Employee Contributions (Monthly) | Employee Monthly per \$1,000 | Spouse Monthly per \$1,000 |
|--|---------------------------------|-------------------------------|
| Under 29 | \$0.253 | \$0.253 |
| 30-39 | \$0.512 | \$0.512 |
| 40-49 | \$1.185 | \$1.185 |
| 50-59 | \$2.416 | \$2.416 |
| 60-69 | \$4.481 | \$4.481 |
| 70+ | \$9.709 | \$9.709 |
| Child(ren) monthly rate per \$1000 of coverage | \$0.371 | |

Flexible Spending Accounts

The Flexible Spending Account (FSA) plan with Flexible Benefit Administrators, Inc. allows you to set aside pretax dollars to cover qualified expenses you would normally pay out of your pocket with post-tax dollars for the "GOLD" and "SILVER" plans. The plan is comprised of a health care spending account and a dependent care account. You pay no federal or state income taxes on the money you place in an FSA.

How an FSA works

- Choose a specific amount of money to contribute each pay period, pre-tax, to one or both accounts during the year.
- The amount is automatically deducted from your pay at the same level each pay period.
- As you incur eligible expenses, you may use your flexible spending debit card to pay at the point of service OR submit the appropriate paperwork to be reimbursed by the plan.

Important rules to keep in mind

- The IRS has a strict "use it or lose it" rule. If you do not use the full amount in your FSA, you will lose any remaining funds.
- Once you enroll in the FSA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one FSA to another.

Please plan your FSA contributions carefully, as any funds not used by the end of the year will be forfeited. Reenrollment is required each year.

| MAXIMUM ANNUAL ELECTION | | |
|-------------------------|--|--|
| Health Care FSA | \$3,300 | |
| Limited Purpose FSA | \$3,300 | |
| Dependent Care FSA | \$5,000 (\$2,500 if married, filing separately) | |



Limited Purpose FSA (Available with the "HSA" plan – Dental and Vision Services ONLY)

Funds contributed to your Health Savings Account (HSA) can be used as a means for reimbursement for medical, dental, and vision expenses. When you are covered by an HSA eligible plan and you know you may be required to pay higher amounts for the medical expenses you incur, it especially makes sense to contribute towards your Limited FSA for dental and vision expenses that you plan on incurring, that way you can preserve HSA contributions to be used for medical expenses. In the instance you don't have many medical expenses, your HSA balance can grow, tax-free, and you are still able to pay for your dental and vision expenses with tax-free funds through your Limited FSA.

Health Savings Account (HSA)

When you are enrolled in a Qualified High Deductible Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to an HSA Account. Gebruder Weiss offers one QHDHP Plan, the "HSA" plan for 2025. Open a Health Savings Account (HSA) with the bank of your choice! Please note that Gebruder Weiss will not be processing your HSA contributions through payroll deductions.

What is a Health Savings Account (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no "use it or lose it" rule; your balance carries over year to year. You get extra tax advantages with an HSA because:

- Money you deposit into an HSA is exempt from federal income taxes.
- Interest in your account grows tax free; and
- You don't pay income taxes on withdrawals used to pay for eligible health expenses. (If you withdraw funds for non-eligible expenses, taxes and penalties apply).
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

Are you eligible to open a Health Savings Account (HSA)?

Although everyone can enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet these requirements, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP)
- You must not be covered by another non-QHDHP, such as a spouse's PPO plan.
- You are not enrolled in Medicare.
- You are not in the TRICARE or TRICARE for Life military benefits program.
- You have not received Veterans Administration (VA) benefits within the past three months.
- You are not claimed as a dependent on another person's tax return.
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse's FSA. (Enrollment in a limited purpose health care FSA is allowed).

2025 HSA Contributions

You can contribute to your Health Savings Account on a pre-tax basis through payroll deductions up to the IRS statutory maximums. The IRS has established the following maximum HSA contributions FOR THE 2025 TAX YEAR:

Individual: \$4,300Family: \$8,550

If you are age 55 and over, you may contribute an extra \$1,000 catch up contribution.

How do I get reimbursed for my eligible expenses?

The easiest way to use your HSA dollars is by using your HSA Debit Card at the time you incur an eligible expense. Or you can withdraw money from an ATM. But keep your receipts! You must be able to prove that you were reimbursing yourself for an eligible expense if you are audited. If you use your HSA funds for non-eligible expenses, you will be charged a 20% penalty tax (if under age 65) as well as federal income taxes.

Zomo Health Wellness Program



Our health is our most important asset. Our goal at Gebruder Weiss, Inc. is to help you make informed decisions about your health by providing the tools and resources you need to succeed in achieving a healthier lifestyle. Through Zomo Health we are providing programing to inspire you to maintain or improve your wellness. Gebruder Weiss is pleased to reward employees for their participation in the Wellness Program. Complete various wellness activities throughout the year and accumulate points to win prizes! Gebruder Weiss will organize corporate challenges for a chance to be entered into a raffle.



| PROGRAM ACTIVITIES | POINT VALUE |
|------------------------------|-----------------------------------|
| PreventionCloud Registration | 10 Points |
| Physician Form | 100 Points |
| Health Risk Assessment | 50 Points |
| Tobacco Affidavit | 50 Points |
| Age/Gender Preventive Care | 50 Points |
| My Plan | 25 Points |
| Challenges | 25 Points Each |
| Webinars | 5 Points Each (100 Points Max) |
| Emotional Well-being Videos | 5 Points Each (100 Points Max) |
| Fitness Videos | 5 Points Each (100 Points Max) |

Participation in the Wellness Program is completely voluntary and open to all employees. If it is unreasonably difficult for you to participate due to a medical condition, or it is medically inadvisable for you to attempt to participate, a reasonable alternative will be provided for you to earn the incentive. Please contact support@preventioncloud.com should you need a reasonable alternative.

| WELLNESS REWARD LEVELS | INCENTIVE |
|------------------------|-----------------|
| 100 Points | \$10 Gift Card |
| 200 Points | \$25 Gift Card |
| 300 Points | \$50 Gift Card |
| 350+ Points | \$100 Gift Card |

Get Started Now!

- 1. Go to www.preventioncloud.com
- 2. Create your username-FIRSTLASTNAMEBIRTHYEAR (ex/ JOHNSMITH1972)
- 3. Create your password BIRTHDATE (MMDDYYYY)

Having issues logging in?

Click reset password and you will receive further login instructions to your Gebruder Weiss email account. If you continue to experience issues, contact the HR department.

Changes in Benefit Elections

Open Enrollment

With a few exceptions, Open Enrollment is the only time of year when you can make changes to your benefits plan. All elections and changes take effect on the first day of the plan year. During Open Enrollment, you can:

- Add, change, or delete coverage.
- Add, or drop dependents from coverage.
- Enroll, or re-enroll in dependent or health care flexible spending accounts. To continue your FSA benefits, you must re-enroll each plan year.

NOTE: This will be an **Active Enrollment for all Benefits**. You must actively enroll in order to have coverage for the 2025 plan year.

*** If you are enrolled in FSA, you must select your 2025 contributions. These contributions will not rollover. HSA contributions will rollover, but we encourage you to review.

If you are waiving benefits, you are encouraged to waive directly in Paycor.

Contact Information

Benefit Resource Center

The Benefit Resource Center (BRC) is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

The specialists in the Benefit Resource Center are available Monday through Friday 8:00am to 5:00pm Central Standard Time at 855-874-0829 or via e-mail at BRCMidwest@usi.com. If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Contact the HR Team

460vtusaheadofficehr@gw-world.com

1020 N. Wood Dale Road Wood Dale, IL 60191 +1-847-795-4300

Human Resources Manager Sandra Musielak

Carrier Customer Service

Additional information regarding benefit plans can be found below. Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

| | CARRIER | PHONE NUMBER | WEBSITE |
|---|--|----------------|---------------------------|
| GOLD Medical Plan | Blue Cross of Illinois | 1-800-538-8833 | www.bcbsil.com |
| SILVER Medical Plan | Blue Cross of Illinois | 1-800-538-8833 | www.bcbsil.com |
| HSA Medical Plan | Blue Cross of Illinois | 1-800-538-8833 | www.bcbsil.com |
| Dental PPO | Blue Cross of Illinois | 1-800-538-8833 | www.bcbsil.com |
| Vision | Vision Service Plan | 1-800-877-7195 | www.vsp.com |
| Basic and Voluntary Life/AD&D | Lincoln Financial Group | 1-800-487-1485 | www.lincolnfinancial.com |
| STD, LTD, Accident, Critical Illiness, and Hospital Indemnity | Lincoln Financial Group | 1-800-487-1485 | www.lincolnfinancial.com |
| Employee Assistance Program (EAP) | ComPsych | 1-888-628-4824 | www.GuidanceResources.com |
| Flexible Spending Account | Flexible Benefit Administrators, Inc. | 1-847-807-8281 | www.flexiblebenefit.com |

This brochure summarizes the benefit plans that are available to Gebruder Weiss, Inc.'s eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. The information provided in this brochure is not a guarantee of benefits.