

2025

ENROLLMENT GUIDE



2025 ANNUAL ENROLLMENT

Annual Enrollment is your once-a-year opportunity to take advantage of the health and insurance benefits HBC offers. Don't miss out! Now is the time to make sure you have the benefits that are right for you and your family. Benefits elected during this enrollment period become effective January 1, 2025.¹

PLEASE VISIT [MYHBCBENEFITS.COM](https://myhcbenefits.com) FOR DETAILS ON HOW TO ENROLL.

REVIEW YOUR BENEFIT OPTIONS! Annual Enrollment is passive this year. While we recommend you review your benefit elections for 2025 to ensure they still meet your needs, there is no need to make any changes unless you have a Flexible Spending Account (FSA) or Health Savings Account (HSA). **FSAs and HSA will require a new election for 2025.**

HBC provides a full range of benefits that address your needs — now and in the future.

FOR YOUR HEALTH

- Medical Benefits
- Prescription Drug Benefits **(now through CVS)**
- Dental Benefits
- Vision Benefits
- Omada Health
- Maven Maternity and Menopause
- Emotional Wellbeing Solutions (EWS)

FOR YOUR WEALTH

- Life and AD&D Insurance
- Disability Insurance
- Health Savings Account
- Flexible Spending Accounts
- Commuter Benefits
- Adoption Assistance
- Surrogacy Assistance
- Fertility Assistance
- 401(k) Plan
- Banking & Investing Program

SUPPLEMENTAL INSURANCE

- Critical Illness Insurance
- Hospital Indemnity Insurance
- Accident Insurance
- Permanent Life Insurance
- Legal Insurance
- Identity Theft Protection

ELIGIBILITY

ASSOCIATE ELIGIBILITY

All full-time Associates working 30 or more hours per week are eligible for all benefits. Part-time Associates scheduled to work 20 or more hours per week are eligible for Dental, Vision, FSAs and supplemental benefits, which include Critical Illness, Accident Insurance, Hospital Indemnity, Permanent Life, Legal Insurance, EWS, Commuter Benefits, and Identity Theft Protection. Part-time Associates scheduled to work 20 or more hours per week with at least one year of service are also eligible for Adoption, Surrogacy and Fertility benefits.

Please Note: 401(k) has separate eligibility rules.

NEW HIRE WAITING PERIODS

Any benefits elected by a Salary or Hourly Associate become effective the 1st of the month following 30 days of continuous employment.

Full-time Hourly Associates become eligible for Short-Term² and Long-Term Disability the 1st of the month following 30 days of continuous service.

DEPENDENT ELIGIBILITY

- Your legal spouse or domestic partner (same-sex or opposite-sex)
- Your dependent children up to age 26 (age 22 for Child Life Insurance), regardless of marital or student status

Only those dependents meeting the eligibility requirements may be enrolled for coverage. Contact the HBC Benefits Service Center with questions regarding dependent eligibility.³ Social security numbers will be required to enroll dependents.

¹ Some elections may be subject to Evidence of Insurability (EOI).

² Eligibility rules for Statutory Disability & Benefits apply based on your work state.

³ Must complete a Certification of Marriage, Civil Union or Domestic Partnership. Access the form at myhcbenefits.com.

Legal notices can be accessed at myhcbenefits.com.

YOU HAVE A CHOICE IN HEALTH CARE

HBC's medical plan options give Associates flexibility to choose a coverage level that balances health care needs with budget. We offer two Consumer Driven Health Plans (CDHP) to choose from – Choice and Choice Plus. Both are offered with a Health Savings Account (HSA) that you can use to cover eligible out-of-pocket expenses.

There is also a PPO plan. A PPO carries a higher premium, but offers fixed copays for services like doctor visits, urgent care, and prescription drugs.

- For all plans, in-network preventive care, including an initial mental/behavioral health assessment and some preventive medications are covered at NO COST to you. Other preventive medications may be available with no deductible.
- The PPO plan pays benefits after a fixed copay or an annual deductible, depending on the type and place of service.
- With the Choice Plan (CDHP) and Choice Plus Plan (CDHP), you must meet the annual deductible before the plans pay benefits. CDHP plan participants can use Health Savings Account funds to cover these expenses or pay out-of-pocket and preserve their tax-free HSA funds for future use.

Benefit eligible Associates in the Wilkes Barre Distribution Center, have access to three Geisinger medical plan options. Visit myhbcbenefits.com for more information on these plans.

COMPARE THE MEDICAL PLANS

	CHOICE (CDHP)	CHOICE PLUS (CDHP)	PPO
PREMIUMS	\$	\$\$	\$\$\$
DEDUCTIBLE	\$\$\$	\$\$	\$
OUT-OF-POCKET MAXIMUM	\$\$\$	\$\$	\$
IN & OUT-OF-NETWORK COVERAGE	No	Yes	Yes
HSA COMPANY CONTRIBUTIONS*	Yes	Yes	No
ELIGIBLE FOR WELLNESS INCENTIVES**	Yes	Yes	Yes

* You must be eligible to participate in an HSA and your HSA must be open in order to receive contributions.

**PPO Wellness Incentives are contributed to a General Purpose Health Care FSA.



MEDICAL INSURANCE

Each person's health care needs are different. That's why our medical plan offers multiple options so that you can choose the coverage level best-suited to you and your family. You have three plans to choose from — Choice (CDHP), Choice Plus (CDHP) and PPO. These plans are administered by Cigna using the Cigna Open Access Plus (OAP) network. Prescription drug coverage will now be managed through CVS Caremark. Visit myhbcbenefits.com for more information on the change to CVS Pharmacy.

CIGNA MEDICAL BENEFITS					
	Choice Plan (CDHP)	Choice Plus Plan (CDHP)		PPO Plan	
	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible					
Individual with Single coverage	\$4,000	\$2,500	\$6,250	\$1,750	\$7,000
Individual with Family coverage	\$6,550	\$5,000	\$12,500	\$2,000	\$8,000
All Family members combined	\$8,000	\$5,000	\$12,500	\$3,500	\$14,000
Out-of-Pocket Maximum					
Individual with Single coverage	\$6,350	\$5,000	\$12,500	\$5,000	\$15,000
Individual with Family coverage	\$6,550	\$6,550	\$20,000	\$6,000	\$16,000
All Family members combined	\$12,700	\$10,000	\$25,000	\$10,000	\$30,000
HEALTH SAVINGS ACCOUNT (HSA)					
Annual HSA Company Contribution ¹	\$250 single / \$500 family	\$250 single / \$500 family		N/A	
HSA/FSA Annual Wellness Incentives ²	up to \$250 single / \$500 family in HSA	up to \$250 single / \$500 family in HSA		up to \$250 single / \$500 family in FSA	
WHAT THE PLAN PAYS (COPAY/COINSURANCE)					
Preventive Care	100%	100%	60% after deductible	100%	60% after deductible
Primary Care (PCP) Office Visit	70% after deductible	80% after deductible	60% after deductible	\$45 copay / \$90 for Mental Health Visit	60% after deductible
Specialist Office Visit	70% after deductible	80% after deductible	60% after deductible	\$90 copay	60% after deductible
Hospitalization	70% after deductible	80% after deductible	60% after deductible	80% after deductible	60% after deductible
Outpatient Services	70% after deductible	80% after deductible	60% after deductible	80% after deductible	60% after deductible
Urgent Care	70% after deductible	80% after deductible	80% after deductible ⁴	\$90 copay	60% after deductible
Emergency Room	70% after deductible	80% after deductible	80% after deductible ⁴	100% after \$200 copay	100% after \$200 copay ⁴
All Other Expenses	70% after deductible	80% after deductible	60% after deductible	80% after deductible	60% after deductible
CVS PRESCRIPTION DRUG COVERAGE					
Deductible ³	Combined with medical	Combined with medical		N/A	
Retail					
Generic	\$10 copay	\$10 copay		\$10 copay	
Brand Formulary	Plan pays 70% (\$200 max)	Plan pays 70% (\$200 max)		Plan pays 70% (\$200 max)	
Brand Non-formulary	Plan pays 50% (\$400 max)	Plan pays 50% (\$400 max)		Plan pays 50% (\$400 max)	
Mail Order					
Generic	\$20 copay	\$20 copay		\$20 copay	
Brand Formulary	Plan pays 70% (\$400 max)	Plan pays 70% (\$400 max)		Plan pays 70% (\$400 max)	
Brand Non-formulary	Plan pays 50% (\$800 max)	Plan pays 50% (\$800 max)		Plan pays 50% (\$800 max)	

1. Your Health Savings Account (HSA) must be open to receive contributions. PPO Wellness Incentives are contributed to a General Purpose Health Care Flexible Savings Account (FSA).
2. If you cover a spouse or domestic partner on an HBC medical plan, you are both individually eligible for the Wellness Incentive (up to \$250 each).
3. Deductible does not apply to preventive drugs.
4. Out-of-Network Urgent Care and Out-of-Network Emergency Service Charges are covered as in-network but may be subject to balance billing by the provider. Please see the Plan Summary for details.

A NOTE ON PREMIUMS

Spousal Surcharge: If your spouse has access to coverage through their employer, and you choose to cover them on an HBC plan, you will incur a \$25 surcharge on your weekly medical premium.

Non-Tobacco Use Discount: If you certify that you have not used tobacco and/or nicotine delivery products for 12 months or more, you will be eligible to receive a discount on your medical plan premium. Tobacco and nicotine users will have a \$15 per week surcharge across all medical plans.

Please visit myhbcbenefits.com for more plan details and premiums.



HEALTH RELATED PROGRAMS

HBC provides free support programs for medical plan participants that enhance your benefits and save you money.

OMADA HEALTH

Omada Health is a digital behavioral medicine company that inspires and enables people to change the habits that put them most at risk for chronic conditions like heart disease and type 2 diabetes. Omada Health combines proven behavioral science, the power of professional health coaches and peer groups, connected technology, and world-class design to provide at-risk individuals with the knowledge, tools, and social support proven to improve health. Eligible HBC medical plan members can enroll in the Omada program at no cost.

MAVEN MATERNITY & MENOPAUSE

HBC has partnered with Maven to offer on-demand maternity, postpartum, and return-to-work support to all full-time, benefits eligible Associates. Maven is a maternity and family health benefit that is fully covered by HBC. The Maven Maternity Program is available to parents during pregnancy and up to 6 months postpartum. Upon sign up, you'll get a dedicated concierge who will stay with you throughout the program to help you navigate your HBC benefits, provide in-person referrals, and assist you in accessing Maven's curated practitioner network. Maven also offers Menopause Services. Menopause support anytime, anywhere! We know that menopause can sometimes feel isolating, but you're never alone with Maven where you have 24/7/365 support from dedicated providers who specialize in the menopause journey like OB-GYNs, pelvic floor physical therapists, mental health providers, and more.

TELEHEALTH

When you can't get to your doctor, HBC's Health Plans provide access to MDLIVE[®] through the Cigna TeleHealth Connection program. You can connect with a board-certified doctor by phone or secure, online video chat 24 hours a day, 7 days a week, 365 days a year. Televisits cost less than going to a convenience care or urgent care clinic, and significantly less than a visit to the emergency room, and they are available for physical and behavioral/emotional health concerns. PPO Plan participants have no copay for Televisits. CDHP plan participants pay the Telehealth visit rates negotiated by Cigna.

To learn more about these programs, visit myhbcbenefits.com.

HEALTH SAVINGS ACCOUNT

HOW THE HEALTH SAVINGS ACCOUNT (HSA) WORKS

A Health Savings Account, or HSA, is a special tax-advantaged savings account set up specifically for you and your family. This account is automatically set up when you enroll in the Choice or Choice Plus medical plan options, but you MUST provide documentation for the account to be activated. You may pay for health-related expenses (like doctor visits and hospital services) out of your HSA.

When you enroll in the Choice or Choice Plus plans, HBC will make an initial contribution to your HSA. You will also have the opportunity to earn a Wellness Incentive contribution by completing wellness requirements.*

You can enroll or make changes to your HSA anytime during the year, as long as the total of HBC and Associate contributions combined does not exceed annual IRS limits.**

	Associate Only Coverage	Associate + Spouse/Domestic Partner, Associate + Child(ren) or Family Coverage
HSA Company Contribution*	\$250	\$500
Wellness Incentive*	\$250	Up to \$500 (up to \$250 each)
Total HBC Contribution	\$500	Up to \$1,000
Maximum Total Tax-Free HSA Contributions (includes any company contributions)	Up to \$4,300 (\$5,300 if age 55 or older)	Up to \$8,550 (\$9,550 if age 55 or older)

Even better, if you don't spend all of the money in your HSA in 2025, the money stays (rolls over) in your account, giving you even more money to use in future years. The less you use, the bigger your account gets.

The account is yours to keep, even if you leave HBC. This gives you a head start on creating a nest egg for large medical expenses that might come down the road, for funding medical care after you stop working, or even for Long-Term Care expenses. For common questions and answers on HSAs, visit myhcbbenefits.com.

*Associates and/or spouses/domestic partners must complete a Health Assessment and an annual exam to be eligible for the Wellness Incentive. If you cover a spouse/domestic partner on an HBC medical plan, you can both complete the requirements on an individual basis to be eligible for the Wellness Incentive, independent of one another. HBC HSA contributions are only available to Associates enrolled in the Choice and Choice Plus Plan. Wellness Incentive HSA contributions are available to Associates enrolled in the Choice Plan and Choice Plus Plan.

**For 2025: \$4,300 for single coverage; \$8,550 for family coverage; plus an additional \$1,000 "catch up" contribution for individuals age 55 and older.

TRIPLE TAX ADVANTAGE OF AN HSA

1. All contributions made through payroll into your HSA are made before income taxes are calculated. That means you don't pay income tax on the Company's contribution or the contributions you make into the account.
2. There is no tax on the interest or earnings that accrue in the account.
3. You pay no taxes on the funds you use to pay for eligible medical expenses.

HSA IS ADMINISTERED BY OPTUM THROUGH WEX

Optum and WEX have collaborated to provide integrated, seamless HSA administration. If you are newly participating, Optum will send you a welcome packet and Health Savings Account Debit MasterCard. You can use the debit card to access account funds for direct payment at a doctor's office, dentist, pharmacy, or health care facility that accepts MasterCard debit cards. You may also use the debit card to settle bills received from a physician or health care facility. You will have 24/7 web access for online claims processing, direct deposit reimbursement, online bill pay, and electronic statements – all through myhcbbenefits.com.

DENTAL

Maintaining good oral health is essential to maintaining good overall health. The HBC Dental Plans provide coverage for a wide range of dental services and supplies through Cigna. You may choose from one of three coverage options. Plan highlights are provided below for the Core and Buy-Up plans. For a list of costs per service under the DHMO Plan, see the Cigna Dental benefit schedule, which can be found at myhbcbenefits.com.

CIGNA DENTAL BENEFITS					
	Core Dental Plan		Buy-Up Dental Plan		DHMO Plan
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network Only
Deductible (single/family)	\$50 / \$150	\$150 / \$450	\$25 / \$75	\$75 / \$225	None
Annual Maximum (per person)	\$1,500		\$2,000		None
Preventive Services	100%	80%	100%	80%	Copay, coinsurance or fee schedule
Basic Services	80%	60%	90%	70%	
Major Services	50%	50%	60%	50%	
TMJ	N/A	N/A	N/A	N/A	
Bleaching and Whitening (max \$600 per year)	N/A	N/A	50%	50%	N/A
Orthodontia (child & adult)	N/A	N/A	50%	50%	50% up to 24 months
Orthodontia Lifetime Maximum	N/A	N/A	\$2,000 per person		None

VISION

The HBC Vision Plan provides access to vision care through VSP. You have the option to participate in a Vision Buy-Up Plan for additional coverage.

VISION SERVICE PLAN (VSP)				
	Core Vision Plan		Buy-Up Vision Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Exam (once every 12 months)	\$10 copay	Up to \$40 allowance	\$10 copay	Up to \$40 allowance
Standard Glass or Plastic Lenses (once every 12 months)				
Single Vision	\$10 copay	Up to \$30 allowance	\$10 copay	Up to \$30 allowance
Lined Bifocal	\$10 copay	Up to \$52 allowance	\$10 copay	Up to \$52 allowance
Lined Trifocal	\$10 copay	Up to \$65 allowance	\$10 copay	Up to \$65 allowance
Lens Options				
Standard Anti-Reflective	\$41	N/A	\$41	N/A
Standard Polycarbonate	\$31	N/A	\$31	N/A
Standard Scratch-Resistant	\$17	N/A	\$17	N/A
Frames	\$10 copay up to \$150 allowance (once every 24 months)	Up to \$60 allowance	\$10 copay up to \$250 frame allowance (once every 12 months)	Up to \$60 allowance
Contact Lens Exam (fitting & evaluation)	\$10 copay	Up to \$130 combined allowance	\$10 copay	Up to \$130 combined allowance
Contact Lenses (once every 12 months; in lieu of frame and lenses)	Up to \$130 allowance		Up to \$130 allowance	
VSP Easy Options (choose from one of these covered enhancements)	N/A		\$250 frame allowance, or \$200 contact lens allowance, or anti-reflective lenses or photochromic lenses, or progressive lenses	

Please visit myhbcbenefits.com for more information, including plan premiums.

CRITICAL ILLNESS INSURANCE

Critical Illness Insurance reduces the financial impact of a major illness. The policy pays a lump sum benefit directly to you once you or a covered family member is diagnosed with a covered condition. The Critical Illness policy premium is based upon your age as of January 1, 2025 and updates as you age. This coverage is portable, so you can take your policy with you if you change jobs or retire. You do not have to be terminally ill to receive benefits.

You choose the benefit amount when you enroll, from \$5,000 to \$40,000 (in \$5,000 increments).

COVERED ILLNESSES MAY INCLUDE

- Heart Attack
- Major Organ Transplant
- End Stage Renal (Kidney) Failure
- Invasive Cancer
- Stroke

PLAN HIGHLIGHTS

- When you elect coverage for yourself, eligible children are automatically enrolled at 50% of the Associate amount elected. Spouse coverage is also available.
- A Health Screening Benefit is included, which pays an annual \$50 benefit if you or a covered spouse receive a health screening test (blood test, stress test, colonoscopy, chest X-ray, mammogram, biometric screening, etc.). You can even use the same annual exam from your Wellness Incentive requirements to qualify for this benefit.

HOSPITAL INDEMNITY INSURANCE

Hospital Indemnity Insurance can help protect your finances by providing payments to help cover eligible expenses associated with a hospital stay. You can use this benefit however you choose – deductibles, coinsurance or even non-medical expenses, such as rent/mortgage, car payments or child care. Benefits are paid in addition to any other insurance you may have. You can also elect coverage for your spouse and children (Associate must elect coverage).

PLAN HIGHLIGHTS

- No pre-existing condition limitations.
- Benefits do NOT reduce as you get older.

MAKING CHANGES TO YOUR COVERAGE

ACTION:	When Can I Make the Change?				
	During Annual Enrollment	New Hire Enrollment	With a Qualifying Life Event	Anytime Throughout the Year	Special Considerations
Critical Illness Insurance					
Enroll for Coverage	Allowed	Allowed (up to \$40,000 in \$5,000 increments)	Allowed	Not Allowed	No EOI Required
Increase Coverage	Yes, by \$5,000 (max of \$40,000)	N/A	Allowed	Not Allowed	
Hospital Indemnity Insurance					
Enroll for Coverage	Allowed	Allowed	Allowed	Not Allowed	No EOI required

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations, including a pre-existing condition clause, that may affect any benefits payable.

ACCIDENT INSURANCE

Accidents happen. You can't always prevent them, but you can take steps to reduce the financial impact.

Accident Insurance is designed to help cover the out-of-pocket medical expenses and extra bills you may incur as a result of an accident. The plan pays benefits directly to you — not a doctor or hospital — for injuries and accident-related expenses. You can use the money however you choose.

Benefit amounts are based on the type of injury and treatment needed.

COVERED INJURIES AND ACCIDENT-RELATED EXPENSES INCLUDE

- Fractures / Dislocations
- Hospitalization
- Death Benefit
- Emergency Care Treatment
- Ambulance Transport
- Physical Therapy

PLAN FEATURES

- Benefits are paid for accidents that occur on or off the job, so you have 24-hour coverage.
- You can elect coverage for your spouse and children.
- There are no health questions or physical exams required to enroll.
- If you change jobs or retire, you can take your policy with you.

MAKING CHANGES TO YOUR COVERAGE

	When Can I Make the Change?				
ACTION:	During Annual Enrollment	New Hire Enrollment	With a Qualifying Life Event	Anytime Throughout the year	Special Considerations
Enroll for Coverage	Allowed	Allowed	Allowed	Not Allowed	No EOI required

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.



LIFE INSURANCE

Your family depends on your income for a comfortable lifestyle and for the resources necessary to make their dreams — such as a college education — a reality. Like anyone, you don't like to think of the scenario where you're no longer there for your family. However, you do need to ensure their lives and dreams can continue if the worst does happen.

HBC knows how difficult it can be to provide this peace of mind on your own, which is why we have made it a priority to give you the ability to assemble a complete life insurance portfolio.

BASIC TERM LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

HBC provides eligible Associates with Basic Term Life and AD&D coverage at no cost to you and enrollment is automatic.

Basic Term Life: The benefit is equal to one time your annual earnings to a maximum of \$1,000,000. Associates may elect to limit coverage to \$50,000 to avoid taxable imputed income.

AD&D: If you are seriously injured or lose your life in an accident, you will be eligible for a benefit equal to one time your annual earnings, to a maximum of \$1,000,000. This benefit is separate from, and paid in addition, to the Basic Term Life benefit.

SUPPLEMENTAL TERM LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

You may also choose to purchase Supplemental Life Insurance and/or Supplemental AD&D Insurance in addition to the company-paid benefit. You pay the total cost of this benefit through convenient payroll deductions.

SUPPLEMENTAL TERM LIFE INSURANCE

Associate: You can elect one to five times your annual earnings, to a maximum of \$2,000,000. Newly eligible Associates can enroll in coverage up to \$500,000 Guaranteed Issue, without Evidence of Insurability (EOI). If you are currently enrolled in Supplemental Life Insurance and have a Qualifying Life Event, you can increase coverage up to one times your earnings with no EOI. For all other increases in coverage, satisfactory EOI is required before that increase will become effective. If previously eligible, but electing for the first time, EOI is required at all levels. Costs vary based on your age as of January 1, 2025, coverage level, and tobacco and nicotine use.

Spouse/Domestic Partner: You can elect coverage of \$10,000 or \$25,000 up to \$250,000 (in \$25,000 increments) for your spouse or domestic partner, not to exceed the Associate Life Insurance amount. Amounts above \$25,000, and amounts not elected when your Spouse first became eligible, will require EOI. Costs vary based on age as of January 1, 2025, coverage level, and tobacco and nicotine use.

Child(ren): You can elect \$5,000 or \$10,000 in child life coverage.

SUPPLEMENTAL AD&D

Associate: You can elect one to five times your annual earnings, to a maximum of \$2,000,000 Guaranteed Issue.

MAKING CHANGES TO YOUR COVERAGE

ACTION:	When Can I Make the Change?				
	During Annual Enrollment	New Hire Enrollment	With a Qualifying Life Event	Any Time Throughout the Year	Special Considerations
Enroll for Coverage	Allowed (\$10,000)	Allowed (up to \$100,000 in \$10,000 increments)	Allowed	Not Allowed	No EOI Required
Increase Coverage	Allowed, by \$10,000 (max of \$100,000)	N/A	Allowed	Not Allowed	

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

Note: If you are not actively at work on the date your Life and AD&D Insurance would become effective, including Supplemental Life Insurance, your coverage will become effective on the first day you return to active work at HBC.



PERMANENT LIFE INSURANCE

Can your family maintain their lifestyle without you? Permanent Life Insurance helps ensure they can.

Permanent Life Insurance is an individual insurance policy designed to provide a death benefit to your beneficiaries if something should happen to you. It can also build cash value that you can utilize while you are still living. At an affordable premium, you can have the added financial protection you and your family may need during times of uncertainty.

PLAN FEATURES

- You can purchase coverage for yourself, your spouse, and your children.
- Permanent Life Insurance is voluntary, which means you purchase the amount of coverage that is right for your needs.
- The benefit is Guaranteed Issue, so no physical exams are required to apply for coverage as a newly eligible Associate.
- Up to \$100,000 (in \$10,000 increments).
- As the policy builds cash value, you can eventually use it to make premium payments or to pay urgent expenses while you are still living.
- You can take your policy with you if you leave the company or retire.

CHOOSE A PLAN FOR A LIFETIME

Permanent Life Insurance never expires. You keep the policy as long as you make the payments, which means the premiums will not go up. Lock in a lower premium NOW and save thousands of dollars in the future!

Cost varies based on age, coverage level, and tobacco and nicotine use.

MAKING CHANGES TO YOUR COVERAGE

ACTION:	When Can I Make the Change?				
	During Annual Enrollment	New Hire Enrollment	With a Qualifying Life Event	Anytime Throughout the year	Special Considerations
Enroll for Coverage	Allowed (\$10,000)	Allowed (up to \$100,000 in \$10,000 increments)	Allowed	Not Allowed	No EOI Required
Increase Coverage	Allowed, by \$10,000(max of \$100,000)	N/A	Allowed	Not Allowed	

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable.

DISABILITY INSURANCE

A disabling injury or illness that keeps you out of work could have a devastating impact on your income, jeopardizing your ability to cover normal household expenses. With the right disability insurance, your income is protected, relieving you of the anxiety of depleting your savings to pay your bills.

SALARY CONTINUATION BENEFIT

Salary continuation replaces a portion of your income if an injury or illness forces you out of work for an extended period of time. HBC provides salary continuation benefits at no cost to you and enrollment is automatic. If you are also eligible for a mandatory Short-Term Disability Insurance benefit under state law, HBC's salary continuation benefit will coordinate with that benefit.

Salaried Associates

After you are declared disabled, you will receive 100% of your weekly earnings for up to eight weeks, 75% for up to the next 8 weeks and 50% of weekly earnings for up to the next 10 weeks.

Hourly Associates

After you are declared disabled, you will receive 60% of your weekly earnings. Benefits will continue for up to 26 weeks.

LONG-TERM DISABILITY INSURANCE

HBC also provides salary continuation to protect your finances when your disability continues beyond the period covered by the Short-Term Disability Plan.

Salaried Associates

HBC provides Salaried Associates with a core Long-Term Disability benefit at NO COST to you. You will receive 40% of your monthly covered earnings, up to a maximum of \$12,500 per month (\$100 minimum or 10% of monthly benefit). Salaried Associates can also elect to enroll in the Buy-Up Long Term Disability plan, which pays 60% (an additional 20%) of your monthly earnings (\$12,500 per month maximum, \$100 minimum or 10% of monthly benefit). You pay the cost of the Buy-Up benefit through convenient payroll deductions. You also have the option to pay taxes on the company-paid premium to allow a tax-free benefit in the event you become disabled. Rates are based on your age as of January 1 each year.

Hourly Associates

Hourly Associates can choose to enroll in Core or Buy-Up Long-Term Disability coverage. You will receive 40% of your monthly covered earnings under the core plan, or 60% of your monthly earnings under the Buy-Up plan (\$12,500 per month maximum, \$100 minimum or 10% of monthly benefit for both Core and Buy-Up). You pay the cost of these benefits through convenient payroll deductions. Rates are based on your age as of January 1 each year.

MAKING CHANGES TO YOUR COVERAGE

ACTION:	When Can I Make the Change?			Special Considerations
	During Annual Enrollment	With a Qualifying Life Event	Anytime Throughout the year	
Enroll for Coverage in Hourly Core LTD	Allowed	Allowed	Not Allowed	No Evidence of Insurability Required; Coverage is subject to pre-existing condition limitations
Enroll for Coverage in Salaried Buy-Up LTD	Allowed	Allowed	Not Allowed	
Increase my coverage from Hourly Core LTD to Hourly Buy-Up LTD	Allowed	Allowed	Not Allowed	
Drop Core (Hourly) or Buy-Up LTD	Allowed	Allowed	Not Allowed	

FLEXIBLE SPENDING ACCOUNTS

Flexible Spending Accounts (FSAs) allow you to set aside money on a pre-tax basis to pay for qualified out-of-pocket health care or dependent care expenses. Because the money is deducted from your paycheck on a pre-tax basis, you will reduce the amount of your taxable income.

HBC offers a Limited Purpose Health Care FSA, a General Purpose FSA, and a Dependent Care FSA. These accounts are separate — you cannot use money from a Health Care FSA to cover expenses eligible under the Dependent Care FSA or vice versa.

If you elect the PPO Plan medical plan and earn Wellness Incentives, they are contributed to a General Purpose FSA. Unlike an HSA, these funds do not roll over and you must use them by the end of the year.

HOW FLEXIBLE SPENDING ACCOUNTS WORK

1. Each year you decide how much to set aside for health care and/or dependent care expenses.
2. Your contributions are deducted from your paycheck on a pre-tax basis in equal installments throughout the calendar year.
3. As you incur health care or dependent care expenses throughout the year, the Health Care FSA has a payment card that you can use at point of sale for these eligible expenses. If you use the card to pay for eligible medical expenses you will not have to file a claim for reimbursement, as you have not had any out-of-pocket cost. However, you should retain your receipts as you may be required to provide them to substantiate your expenses. If you are not using your payment card, you will need to submit a claim form for reimbursement. Your claim will be processed, and you will be reimbursed from your FSA account.

**YOU MUST ACTIVELY RE-ENROLL IN FSA COVERAGE EACH YEAR.
YOU ARE NOT AUTOMATICALLY RE-ENROLLED.**

PLAN	ELIGIBILITY	ANNUAL MAXIMUM CONTRIBUTION	EXAMPLES OF COVERED EXPENSES*
Limited Purpose Health Care FSA	Any Associate enrolled in a CDHP with HSA	\$3,300	Dental and vision expenses only
General Purpose Health Care FSA	Any Associate NOT enrolled in a CDHP with HSA	\$3,300	Medical, dental, vision and all other eligible health care expenses, including copays, deductibles, prescription drugs, orthodontia, etc.
Dependent Care FSA	All Associates	\$5,000 (\$2,500 if married and filing separate tax returns)	Daycare, nursery school, elder care, etc.

*See IRS Publications 502 and 503 for a complete list of covered expenses.

NOTE: If your employment terminates you have 90 days to file FSA claims for expenses incurred while you were employed. Any amounts not claimed will be forfeited under IRS rules.

IMPORTANT FSA REMINDERS:

- Consider your contributions. Be sure to calculate your expenses conservatively when making your 2025 FSA elections. IRS regulations require that you forfeit any money left in your account after the claims submissions deadline.
- Limited Purpose Health Care FSA Reminder: You may wish to consider making contributions to your HSA first. The HSA may also cover dental and vision expenses and does not have a risk of forfeiture if amounts go unused.
- 2024 Health Care General or Limited FSA Contributions: You may use 2024 funds for expenses incurred January 1, 2024 – March 15, 2025 and can submit reimbursement for 2024 incurred claims through June 15, 2025.
- 2024 Dependent Care FSA Contributions: You may use 2024 funds for expenses incurred January 1, 2024 – December 31, 2024 and can submit reimbursement for 2024 incurred claims through June 15, 2025.

OTHER BENEFITS

HBC tries to meet the needs of our diverse population by providing programs and services necessary to maintain a successful balance between work and personal lives. Some of the additional voluntary benefits available to HBC Associates are described below. For more details on each benefit, visit myhbcbenefits.com.

EMOTIONAL WELLBEING SOLUTIONS (EWS)

HBC offers all Associates and their family members access to the Optum Emotional Wellbeing Solutions (EWS) to help you cope with personal problems affecting you at work or at home. The EWS provides up to five confidential sessions with a counselor, at no cost to you, for assistance with a wide variety of work/life concerns, including:

- Depression, anxiety and stress management
- Alcohol, drug or gambling addictions
- Family conflict, parenting concerns and relationship problems
- Child and elder care
- Financial or legal concerns

LEGAL INSURANCE

Affordable legal assistance can sometimes be difficult to find. With legal insurance, through MetLife Legal, you have access to comprehensive legal assistance, advice and discounted representation on many different legal services, including:

- Divorce
- Child custody
- Traffic tickets
- Buying a home
- Wills and much more!

The cost for the plan covers you and your eligible dependents.

IDENTITY THEFT PROTECTION

Identity Theft Protection, from InfoArmor, helps protect you and your family from the fastest growing personal financial threat in the United States. Protect yourself from identity theft concerns like lost wallet protection, social media account takeover, credit score tracking, and more.

COMMUTER BENEFITS PROGRAM

HBC offers commuter benefits that reduce your cost of getting to and from work. With the Commuter Benefits Program, you can pay for eligible public transportation expenses on a pre-tax basis. You can set aside up to \$325/month for public transportation costs and up to \$325/month for parking costs. Take advantage of the Commuter Benefits Program and reduce your commuting expenses.

Note: Enrollment/changes can be done anytime during the year.

ADOPTION ASSISTANCE PROGRAM

Thinking about adopting? The HBC Adoption Assistance Program provides financial assistance if you adopt a child under the age of 16. You may be eligible for reimbursement of certain adoption costs, up to \$5,000 per child for up to two children. Visit myhbcbenefits.com for more information and to access an Adoption Assistance Claim Form.

SURROGACY ASSISTANCE

HBC will provide reimbursement for qualifying Surrogacy Expenses up to \$5,000 per surrogacy. Visit myhbcbenefits.com for more information and to access a Surrogacy Assistance Claim Form.

FERTILITY ASSISTANCE

HBC will provide reimbursement for qualifying Fertility Expenses up to \$5,000. Visit myhbcbenefits.com for more information and to access a Fertility Assistance Claim Form.

Cigna Medicare Concierge Services

When the time comes to start considering Medicare, the options can be overwhelming. Should you continue HBC coverage or consider full Medicare benefits even if you choose to work? Cigna's Medicare Concierge Services can help eligible Associates navigate the health plans best for them – at no cost to you.

Medicare Options

1. Medicare doesn't have to be confusing
2. Be informed about the many Medicare options that are available
3. Licensed Benefit Advisor can provide specific details on Medicare Advantage plans, Medicare Part D, drug plans and Medicare Supplement plans (Medigap) so you can make a well-informed decision.

Contact our licensed insurance agents who can help you navigate the Medicare options

A licensed benefit advisor from Cigna can help you evaluate Medicare Advantage plans, Medicare Part D drug plans, and Medicare Supplemental plans available in your area.

Visit www.CignaMedicare.com or call 1-866-317-4116
Monday – Friday from 8:30am to 8:30pm EST



HBC 401(k) RETIREMENT SAVINGS PLAN

Building a healthy financial future is just as important as taking care of your health needs today. Putting money aside for your future is easy with the HBC 401(k) Retirement Savings Plan.

- **Eligibility:** Associates are eligible to begin deferring to the plan the first of the month following three months of service and must be at least 21 years of age.
- **Auto Enrollment:** Newly hired Associates are automatically enrolled into the plan the first of the month following 3 months of service at a 3% contribution rate.
- **Auto Increase:** For those that are auto enrolled into the plan, your contributions will automatically be increased by 1% on each anniversary of the enrollment (capped at 6%). You can also elect to have your contributions automatically increased in the amount and at the time that you choose.
- **Contributions:** You can choose between deferring on a Pre-tax or Roth basis (or both)
 - Pre-tax contributions allow eligible Associates to defer income on a pre-tax basis. This reduces your taxable income, allowing your investments to grow on a tax- deferred basis. Any earnings are still considered taxable at the time of withdrawal.
 - Roth contributions allow eligible Associates to defer income on an after-tax basis. This does not reduce taxable income but allows for earnings to accrue on a tax free basis provided that the assets remain in a Roth plan for at least 5 years.
- **Catch-Up Contributions:** If you are 50 or older, you have the opportunity to save more in your retirement plan. These contributions can also be on a Pre-tax or Roth basis.
- **Company Match:** All contributions are eligible for matching after you complete one year of service plus 1,000 hours and are at least age 21. Company match is discretionary and will be determined annually.
- **Vesting:** You are always 100% vested in contributions that you make to the 401(k) plan. You become 100% vested in the HBC matching contributions after completing three years of service. A year of service is defined as a Plan year during which you are credited with at least 1,000 service hours.
- **Contribution Limits*:** \$23,000 combined Pre-Tax and Roth. \$7,500 combined Pre-Tax and Roth Catch-Up**

*Benefit limits are subject to IRS regulations.

**Must be age 50 or older during the year to make additional catch-up contributions.

To enroll, make changes to your contribution rate and/or investments, contact Bank of America Merrill at 1-888-335-8218 or view your account online at www.benefits.ml.com.

Remember to review your 401(k) beneficiary information.

BANKING AND INVESTING PROGRAM

Bank of America offers HBC Associates special access to enroll in the Bank of America Preferred Rewards Program with Gold tier benefits, such as:

- A special bundle of no-fee banking services on qualified checking and savings accounts. To take advantage of this, all you have to do is set up a Bank of America account as your HBC payroll direct deposit and then complete your enrollment into Preferred Rewards either online or via mobile banking.
- A fixed fee reduction on a new mortgage with Bank of America.
- Rate discounts on auto loans and home equity lines of credit
- Rewards bonuses on purchases with an eligible Bank of America credit card.
- Help to achieve financial goals through free financial education, available online or in person.

Plus, you can take advantage of a full suite of investment solutions from Merrill, including access to the people, tools, and personalized advice and guidance you may need to put your investing ideas into action.

NEED MORE INFORMATION?

Visit the Banking and Investing Program for HBC webpage at <https://promo.bankofamerica.com/BIP/#/hbc> for more details.

WHO DO I CALL?

Below is a summary list of important benefit carrier contact information. For a more detailed list, visit myhcbenefits.com.

BENEFIT	CARRIER	PHONE NUMBER	HOURS	WEBSITE
All Benefit Information	HBC Benefits Service Center	1-800-498-8705	M-F, 8:30 - 7:00 pm (ET)	myhcbenefits.com
Medical – Cigna	Cigna	1-855-281-1206	24/7	www.mycigna.com
Prescription Drug – CVS	CVS Pharmacy	1-833-896-1967	24/7	www.caremark.com
Medical – Geisinger	Geisinger	1-800-504-0443	M-F, 7:00 - 7:00 pm (ET) Sat., 8:00 – 2:00 pm (ET)	www.geisinger.org
Prescription Drug - Geisinger	Geisinger	1-800-988-4861	M-F, 8:00 – 5:00 pm (ET)	www.geisinger.org
Dental	Cigna	1-855-281-1206	24/7	www.mycigna.com
Vision	VSP	1-800-877-7195	M-F, 9:00 – 8:00 pm (ET) Sat., 9:00 – 8:00 pm (ET)	www.vsp.com
Health Savings Account (HSA)	Optum	1-866-234-8913	24/7	www.optumbank.com
Flexible Spending Accounts (FSA)	WEX	1-800-498-8705	M-F, 8:30 – 7:00 pm (ET)	Benefits Enrollment Portal
Emotional Wellbeing Solutions (EWS)	Optum	1-866-248-4094	24/7	www.liveandworkwell.com Access Code: HBC
TeleHealth	MDLIVE	1-855-281-1206	24/7	www.mycigna.com
Report Disability, FMLA, STD or LTD	Matrix Absence Management (to report a disability or family medical leave - FMLA)	1-877-202-0055	24/7	www.matrixabsence.com
Commuter Benefits	WEX	1-800-498-8705	M-F, 8:30 – 7:00 pm (ET)	Benefits Enrollment Portal
Life and AD&D (Basic and Voluntary)	MetLife	1-800-638-5433	Mon-Thurs, 8:00 – 8:00 pm (ET) Fri-Sun, 8:00 – 5:00 pm (ET)	www.metlife.com
Permanent Life Insurance	Aflac	1-800-433-3036	M-F, 9:00 – 7:00 pm (ET)	www.aflacgroupinsurance.com
Accident Insurance	Cigna	1-800-754-3207	Daily 8:00 – 8:00pm (ET)	www.suphealthclaims.com
Critical Illness Insurance	Cigna	1-800-754-3207	Daily 8:00 – 8:00pm (ET)	www.suphealthclaims.com
Hospital Indemnity Insurance	Cigna	1-800-754-3207	Daily 8:00 – 8:00pm (ET)	www.suphealthclaims.com
Legal Benefits	MetLife	1-800-821-6400	M-F, 8:00 – 9:00 pm (ET)	www.legalplans.com
ID Theft Protection	Allstate Identity Protection	1-800-789-2720	24/7	www.myaip.com
COBRA	WEX	1-800-498-8705	M-F, 8:30 – 7:00 pm (ET)	COBRA Enrollment Portal
Retirement 401(k)	Bank of America Merrill	1-888-335-8218	M-F, 8:00 – 11:00 pm (ET)	www.benefits.ml.com
Banking & Investing	Bank of America	1-888-383-7200	M-F, 8:00 – 8:00 pm (ET)	https://promo.bankofamerica.com/BIP/#/hbc

REQUIRED NOTICES

Required legal notices are available at myhcbenefits.com

