

Employee Benefits & Retirement

Medical, dental and vision coverage, plus how our 401(k) works and what it can do for you.

Plan overview and employee discussion

Medical

Dental

Vision

401(k)



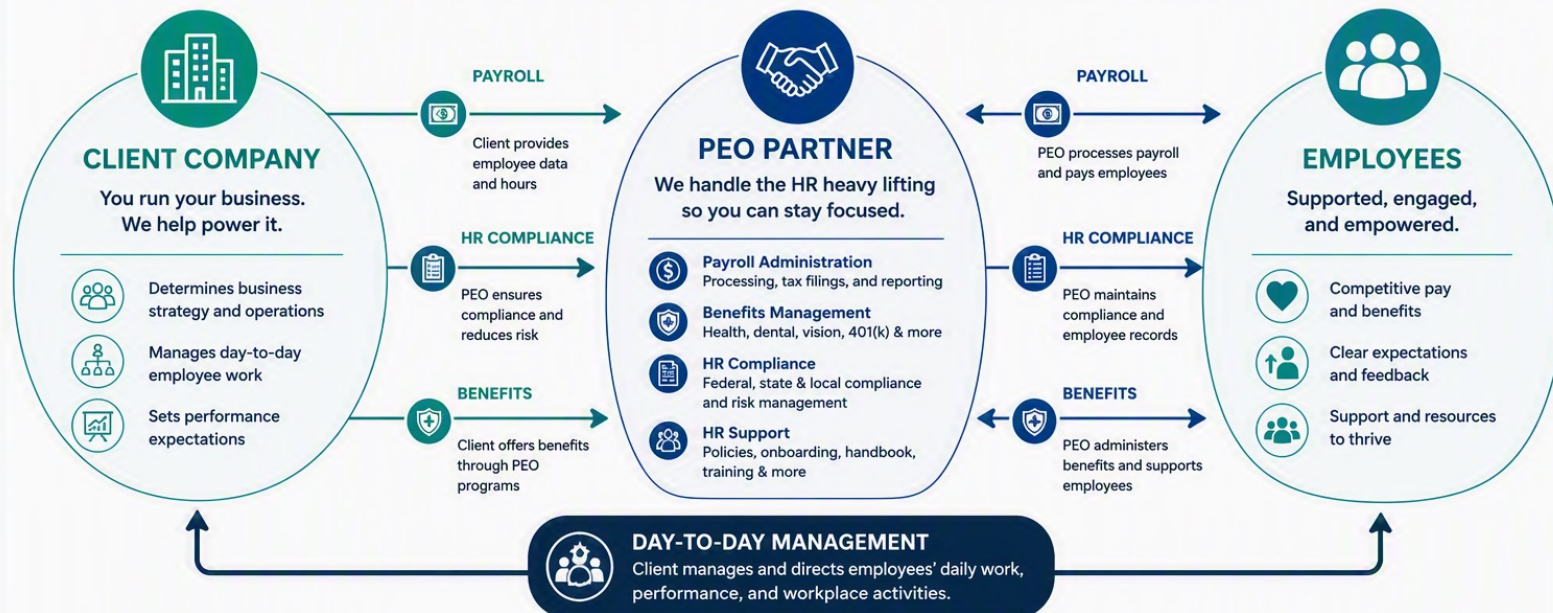
THE CO-EMPLOYMENT MODEL

How a Professional Employer Organization (PEO) Partnership Works



Shared Responsibility.
Stronger Business.
Better Outcomes.

In a co-employment relationship, the PEO and the Client Company share employer responsibilities to support the success of your business and your people.



THE POWER OF PARTNERSHIP

Stronger together.
Built for what's next.



REDUCE RISK

Stay compliant with changing laws and regulations.



SAVE TIME

Streamline HR, payroll, and benefits administration.



ACCESS BETTER BENEFITS

Leverage buying power for better coverage and rates.



ATTRACT & RETAIN TOP TALENT

Offer competitive benefits and a great employee experience.



FOCUS ON GROWTH

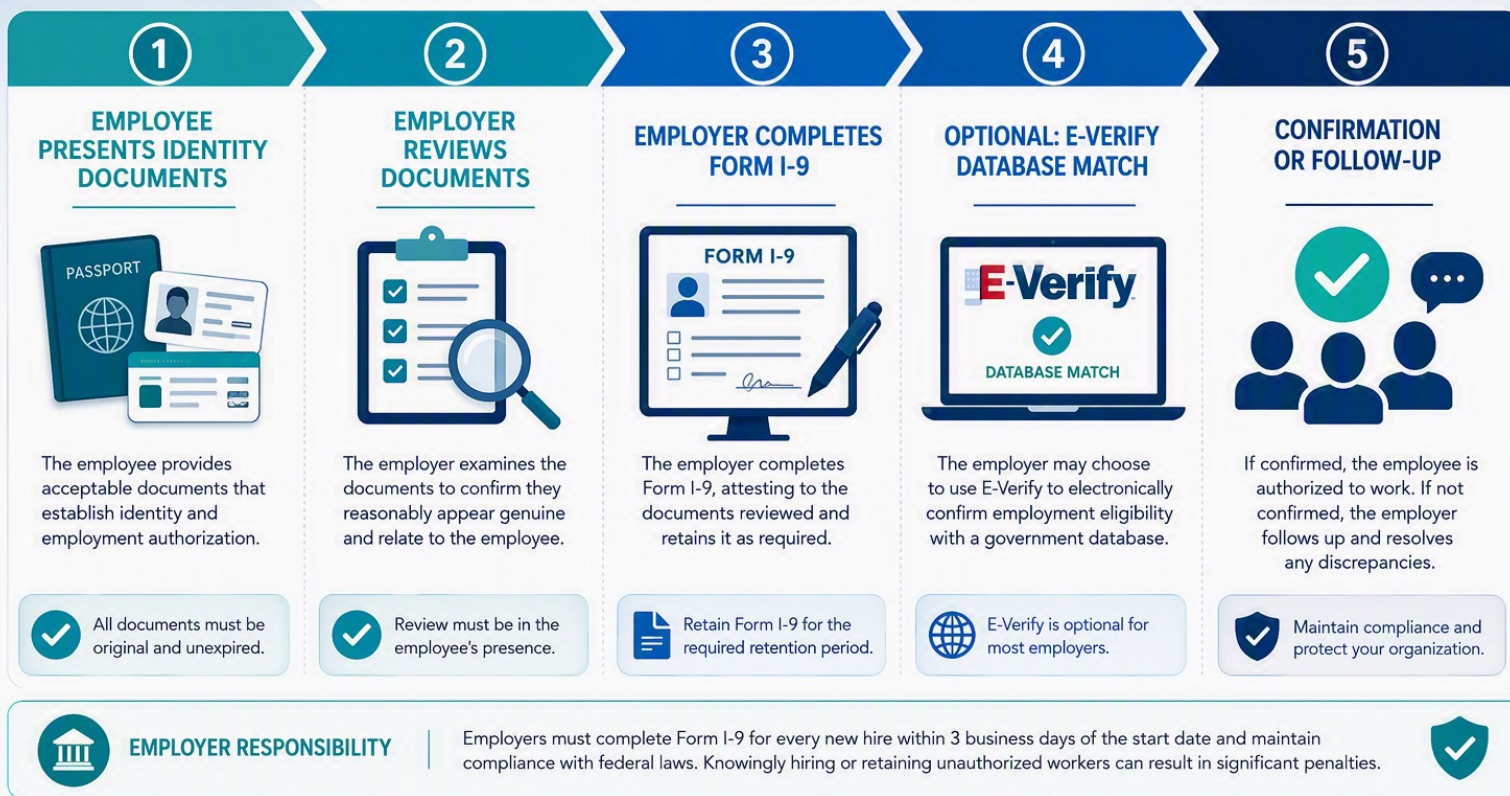
We'll handle HR—so you can grow your business.



EMPLOYMENT ELIGIBILITY VERIFICATION

A 5-STEP PROCESS TO CONFIRM WORK AUTHORIZATION

Employers must verify the identity and employment authorization of every new hire in the United States.

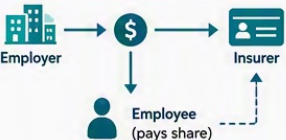




HEALTH INSURANCE SYSTEM ARCHETYPES ACROSS COUNTRIES

Four Distinct Models. Different Funding Flows. One Goal: Better Health Outcomes.



	 1 VOLUNTARY EMPLOYER-BASED COVERAGE	 2 GOVERNMENT-RUN PUBLIC COVERAGE	 3 SOCIAL INSURANCE (MANDATORY CONTRIBUTIONS)	 4 REGULATED COMPULSORY PRIVATE INSURANCE
 OVERVIEW	Coverage is optional and provided by employers to attract and retain talent. Employees may opt in and pay a share of premiums.	The government provides health coverage and manages financing, benefits, and delivery for all or most residents.	Mandatory contributions from workers and employers fund health insurance through non-profit public or quasi-public insurers.	Individuals are required to purchase coverage from licensed private insurers in a regulated market.
 WHO IS COVERED?	 Employees of firms that offer coverage (and their dependents)	 All citizens or residents	 Workers and their dependents in covered sectors	 All residents (subject to exemptions or affordability rules)
 WHO PAYS & HOW MONEY FLOWS				
 WHO MANAGES & DELIVERS?	 Private insurers compete for enrollees. Providers are private (for-profit or non-profit).	 Government agencies manage funding and benefits. Providers may be public or private.	 Non-profit public or quasi-public insurers manage funds. Providers are mixed.	 Private insurers (highly regulated). Providers are private (regulated).
 EXAMPLES	 United States (employer plans), Canada (voluntary plans), Australia (voluntary cover)	 United Kingdom (NHS), Canada (Medicare), Spain, Sweden, Brazil (SUS)	 Germany, France, Japan, South Korea, Switzerland	 Netherlands, Singapore, Switzerland (basic insurance), Massachusetts (USA)
 KEY STRENGTHS	 - Choice and flexibility - Strong employer engagement - Innovation and competition	 - Universal coverage - Equity and risk pooling - Administrative simplicity - economies of scale	 - Sustainable funding - Shared responsibility - Comprehensive benefits with solidarity	 - Universal participation - Regulated competition - Consumer choice of plans
 KEY CHALLENGES	 - Uneven access and affordability - Tied to employment - Higher administrative costs	 - Fiscal pressure - Potential wait times - Limited consumer choice	 - Complex administration - High payroll taxes - Demographic pressures	 - Affordability concerns - Risk selection - Regulatory complexity



THE BOTTOM LINE

No single model is perfect. Countries design systems based on their values, economies, and history—balancing access, choice, cost, and quality.



PEOPLE
Who is covered



PAYMENT FLOW
How funds move



INSTITUTION
Who manages



OUTCOMES
Why it matters

Medical Plan Premiums & Contributions

Monthly amounts | Employer (ER) vs. Employee (EE)
Numbers may be off ~\$7.54/month

PLAN 1 EPO 8700-100 Solid care • most services cheap • low hard limits			
TIER	PREMIUM	EMPLOYER	YOU PAY
EE	\$323.80	\$323.80	\$0.00
ES	\$711.96	\$400.00	\$311.96
EC	\$647.20	\$400.00	\$247.20
FAM	\$1,003.37	\$400.00	\$603.37

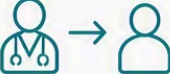
PLAN 2 MC QHDHP 5950-100 High deductible • designed to pair with an HSA			
TIER	PREMIUM	EMPLOYER	YOU PAY
EE	\$362.97	\$362.97	\$0.00
ES	\$798.70	\$400.00	\$398.70
EC	\$725.95	\$400.00	\$325.95
FAM	\$1,125.30	\$400.00	\$725.30

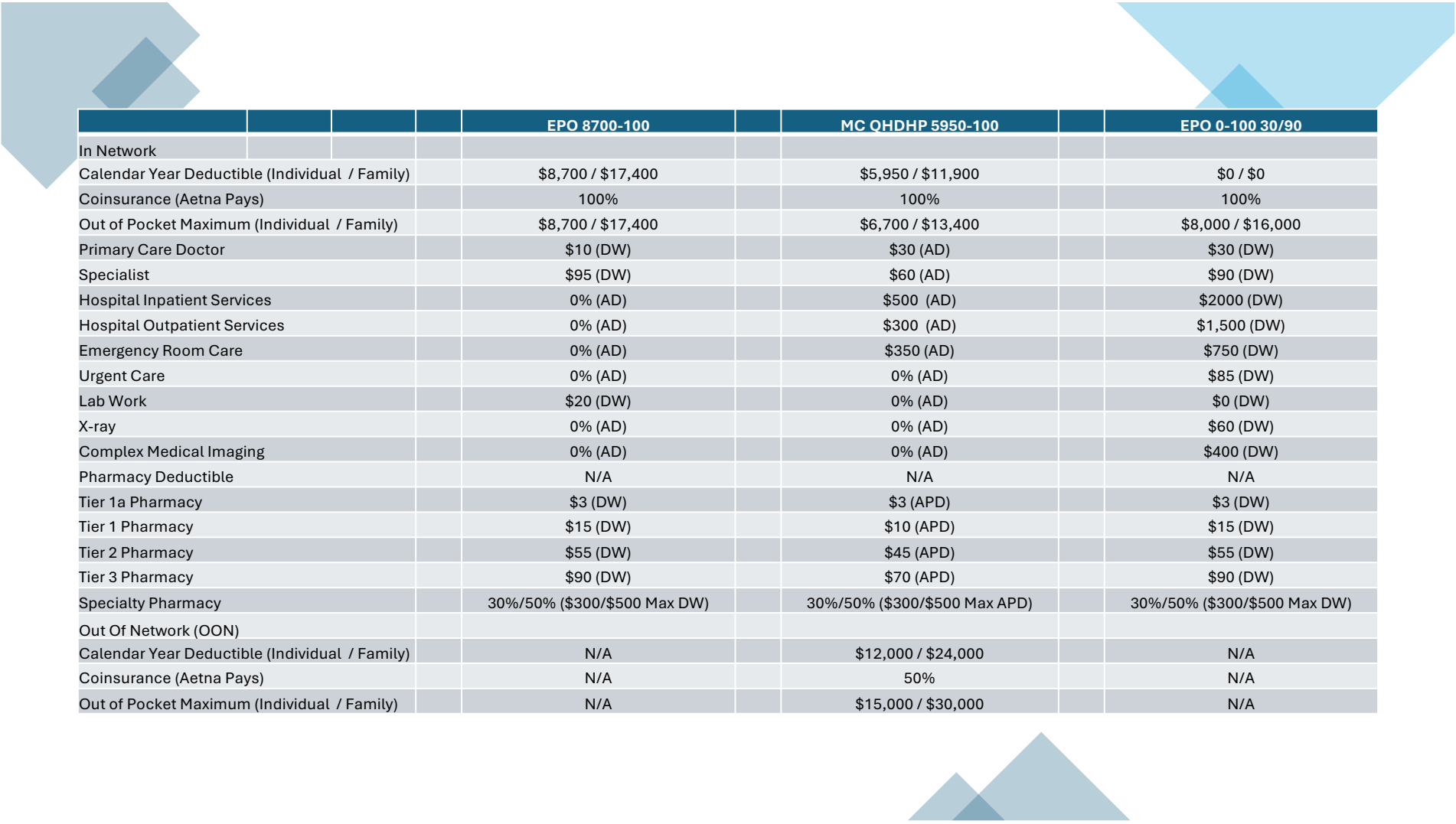
PLAN 3 EPO 0-100 30/90 Deluxe plan (Brenda)			
TIER	PREMIUM	EMPLOYER	YOU PAY
EE	\$710.76	\$400.00	\$310.76
ES	\$1,563.42	\$400.00	\$1,163.42
EC	\$1,421.11	\$400.00	\$1,021.11
FAM	\$2,203.02	\$400.00	\$1,803.02

VISION • MetLife Low			
TIER	PREMIUM	EMPLOYER	YOU PAY
EE	\$7.54	\$7.54	\$0.00
ES	\$12.05	\$7.54	\$4.51
EC	\$12.30	\$7.54	\$4.76
FAM	\$19.83	\$7.54	\$12.29

How the plans differ	
EPO 8700-100	Solid care. Most services cheap, low hard limits.
MC QHDHP 5950-100	High deductible. Designed to pair with an HSA.
EPO 0-100 30/90	Deluxe plan (Brenda).

2 critical rules — EPO 8700	
1	Do not go out of network.
2	Do not use an Emergency Room for urgent care. Use an Urgent Care clinic instead.

HEALTH PLAN NETWORK COMPARISON Understanding your options to choose the right fit.	 EPO Exclusive Provider Organization	 HMO Health Maintenance Organization	 PPO Preferred Provider Organization
 PROVIDER NETWORK Where you can receive care.	 Care must be received from providers in the plan's network, except in an emergency.	 Care must be received from providers in the plan's network.	 See any provider. Higher savings when you use providers in the network.
 REFERRALS Do you need a referral to see a specialist?	 NO Referrals are not required.	 YES You need a referral from your primary care provider (PCP).	 NO Referrals are not required.
 OUT-OF-NETWORK CARE What happens if you see a provider outside the network?	 NOT COVERED Except for emergency care. You pay 100% of the cost.	 NOT COVERED Except for emergency care. You pay 100% of the cost.	 COVERED You pay more for out-of-network care (deductibles, co-insurance).
 FLEXIBILITY & COST TRADEOFFS Balancing freedom of choice and out-of-pocket costs.	 BALANCED FLEXIBILITY • No referrals • In-network care only • Lower premiums • Lower out-of-pocket costs	 MORE STRUCTURE, LOWER COST • Referrals required • In-network care only • Lowest premiums • Lowest out-of-pocket costs	 MAXIMUM FLEXIBILITY • No referrals • In-network or out-of-network care • Higher premiums • Higher out-of-pocket costs
 AT A GLANCE Quick summary.	 Good balance of flexibility and cost savings when staying in-network.	 Most affordable option with a structured, in-network approach.	 Most choice and flexibility with higher potential costs.
 Emergency care is covered at in-network rates for all plan types.  Check your plan documents for specific costs, rules, and network details.			



				EPO 8700-100		MC QHDHP 5950-100		EPO 0-100 30/90
In Network								
Calendar Year Deductible (Individual / Family)				\$8,700 / \$17,400		\$5,950 / \$11,900		\$0 / \$0
Coinsurance (Aetna Pays)				100%		100%		100%
Out of Pocket Maximum (Individual / Family)				\$8,700 / \$17,400		\$6,700 / \$13,400		\$8,000 / \$16,000
Primary Care Doctor				\$10 (DW)		\$30 (AD)		\$30 (DW)
Specialist				\$95 (DW)		\$60 (AD)		\$90 (DW)
Hospital Inpatient Services				0% (AD)		\$500 (AD)		\$2000 (DW)
Hospital Outpatient Services				0% (AD)		\$300 (AD)		\$1,500 (DW)
Emergency Room Care				0% (AD)		\$350 (AD)		\$750 (DW)
Urgent Care				0% (AD)		0% (AD)		\$85 (DW)
Lab Work				\$20 (DW)		0% (AD)		\$0 (DW)
X-ray				0% (AD)		0% (AD)		\$60 (DW)
Complex Medical Imaging				0% (AD)		0% (AD)		\$400 (DW)
Pharmacy Deductible				N/A		N/A		N/A
Tier 1a Pharmacy				\$3 (DW)		\$3 (APD)		\$3 (DW)
Tier 1 Pharmacy				\$15 (DW)		\$10 (APD)		\$15 (DW)
Tier 2 Pharmacy				\$55 (DW)		\$45 (APD)		\$55 (DW)
Tier 3 Pharmacy				\$90 (DW)		\$70 (APD)		\$90 (DW)
Specialty Pharmacy				30%/50% (\$300/\$500 Max DW)		30%/50% (\$300/\$500 Max APD)		30%/50% (\$300/\$500 Max DW)
Out Of Network (OON)								
Calendar Year Deductible (Individual / Family)				N/A		\$12,000 / \$24,000		N/A
Coinsurance (Aetna Pays)				N/A		50%		N/A
Out of Pocket Maximum (Individual / Family)				N/A		\$15,000 / \$30,000		N/A

SECTION

Additional Benefits

The Employee Assistance Program — help with the things insurance does not cover

Employee Assistance Program

One of the reasons we picked Engage — real people, on call, for far more than counseling

24/7 EMERGENCY HOTLINE

A hotline you can call at any hour for a family or personal emergency. The responders are trained in stress debriefing and crisis resolution, and they also handle non-emergency questions about insurance and finding a doctor.

WORK-LIFE SUPPORT

Professional counseling plus practical resources for the complicated situations that arrive without warning: legal trouble, money worries, childcare and elder care.

TAKE THE HASSLE OUT OF HEALTHCARE

An advocate does the legwork

- Locate in-network doctors and other providers, and make the appointments for you
- Clarify what your coverage actually includes and answer benefits questions
- Research and resolve medical claims and medical billing problems

EXPERT SUPPORT AT YOUR FINGERTIPS

Website and mobile app

- Connect to an advocate instantly, without waiting on hold
- Access health and well-being information whenever you need it
- View your open cases in real time
- Upload forms and documents straight from your phone

EXPERT CLINICAL DECISION SUPPORT

Help with the hard medical calls

- Explain a diagnosis and walk you through the treatment options
- Coordinate clinical services, handle pre-authorizations and transfer records
- Identify leading specialists and Centers of Excellence for second opinions

The point of an EAP is that you do not have to work out who to call — you call one number and they take it from there.

Services are delivered by Engage and its partners; availability and scope are set by the program documents.

Work-life support, in practice

Four areas where the program will do the research and the legwork for you



Childcare

Counseling plus a researched list of local options

Child care centers, family child care homes, nanny agencies, summer camps, babysitter tips, and community resources.



Eldercare

Counseling plus a researched list of local options

Nursing homes, assisted-living and independent living facilities, home healthcare, hospice, respite care, geriatric care managers, senior centers, adult day care centers, and community services.



Legal

Counseling plus a researched list of local options

Family law issues, real estate, criminal matters, estate planning, motor vehicle, and elder law.



Financial

Counseling plus a researched list of local options

Debt management, budgeting, college funding, retirement strategies, and life insurance needs.

All four areas include unlimited telephone and web-based consultation — there is no cap on how often you use it, but 3 calls per crisis.

Services are delivered by Engage and its partners; availability and scope are set by the program documents.

Working Advantage

A free discount marketplace that comes with the program — no premium, no enrollment cost

WHAT YOU CAN SAVE ON

Thousands of negotiated offers in one place



Travel and hotels

Hotel savings of up to 60%, flights, car rentals



Live events

Concerts, sports, Broadway and Las Vegas shows



Retail and electronics

Apparel, appliances, home improvement, flowers



Theme parks

Disney, Universal, Six Flags, SeaWorld and more



Movie tickets

AMC, Regal, Showcase and other national chains



Everyday essentials

Meal kits, subscriptions and routine purchases

HOW TO GET SIGNED UP

1

Go to workingadvantage.com and register with your personal email address.

2

Enter the company code we will circulate before open enrollment closes.

3

Start browsing on the website or the mobile app — that is the whole process.

FUNLIFE REWARDS

Points accrue automatically on hotels and events — 100 points is worth \$1 off a future booking.

Free to you and free to us — it is bundled in, not a line on your paycheck.

Nothing here is insurance. Use it or ignore it; there is no downside either way.

A small perk, but a real one — if you were buying park tickets or booking a hotel anyway, check here first.

Offers, brands and savings levels are set by Working Advantage and change over time.

CompareMedsRx

Before you fill a prescription, spend thirty seconds finding out what it should actually cost

STEP 1

Search your medication

Enter the drug name and your exact dosage, then set your location — prices vary a lot by area.

STEP 2

Compare the options

It scans 20+ discount cards across 70,000+ pharmacies and shows the cash price at each one near you.

STEP 3

Pick the best price

Choose on price, on your preferred pharmacy, or on the card that wins for that particular drug.

STEP 4

Show the digital card

Present it at the counter and pay the discounted price. No paperwork and no insurance needed.

20+

Discount cards compared

Instead of guessing which single card is cheapest, it checks them all at once.

70,000+

Pharmacies covered

Major chains and local independents, so you are not forced to change where you go.

85%

Top advertised savings

Biggest on common generics — the everyday maintenance drugs most of us actually fill.

The catch: a discount-card price is a cash price. It usually will not count toward your deductible, so on a high-deductible plan compare both ways.

There is also a tool for comparing the cost of imaging and procedures against your plan benefits — useful before an MRI or a scheduled procedure.

Free to use, no insurance required, and it works whether or not you enroll in one of our medical plans. Worth checking any time a pharmacy quotes you a price that seems high.

Take the two minutes. The same generic can differ by tens of dollars between two pharmacies a mile apart.

Savings figures are advertised by CompareMedsRx. Availability, pricing and participating pharmacies are set by the vendor.

We are offering, but not subsidizing, dental insurance

Four MetLife dental plans are available through the group — the premium is 100% employee-paid, with \$0 employer contribution.

COVERAGE TIER	MetLife DMO	MetLife Low DPPO 1000	MetLife Mid DPPO 2000	MetLife High DPPO 4000
EE — Employee only	\$16.66	\$29.80	\$42.56	\$56.06
ES — Employee + spouse	\$29.30	\$60.60	\$86.57	\$114.06
EC — Employee + children	\$34.84	\$65.40	\$93.43	\$123.12
FAM — Family	\$49.98	\$84.59	\$120.83	\$159.21

Monthly premium per employee — the full amount is deducted from your pay.

What “not subsidized” means

The company sponsors the plan and negotiates the group rate, but contributes \$0 toward the premium. Your cost is the full monthly amount shown above.

Why it is still worth a look

Group rates are typically lower than what you would pay on your own, premiums come out through payroll, and there is no medical underwriting to qualify.

What to do next

Pick a plan tier and enroll during open enrollment, or decline dental coverage. Choices are locked in for the plan year outside a qualifying life event.

Bottom line: dental coverage is available to everyone — the cost simply sits with the employee rather than the company.

Rates shown are monthly and may change at renewal. Plan documents govern in all cases.

Flexible Spending Account (FSA)

Pay routine medical costs with money that never gets taxed — as long as you actually spend it

WHAT IT IS

Pre-tax money set aside

You choose an amount at enrollment, it comes out of your paycheck before income tax, and you spend it on medical costs during the year.

WHAT IT SAVES

Roughly your tax rate

Every dollar routed through the FSA skips income tax. At a 25% rate, putting \$1,000 through the account saves about \$250.

WHAT IT COVERS

Ordinary out-of-pocket costs

Copays, deductibles, prescriptions, dental work, glasses and contacts — the everyday costs insurance does not pay in full.

The catch: use it or lose it. An FSA is not an HSA.

Whatever is left in the account at the end of the plan year is forfeited. It does not roll over, and you do not get it back in your paycheck.

An HSA is yours permanently and follows you between jobs. An FSA is a completely different account with completely different rules — do not assume they behave the same way.

Our recommendation: do not enroll without a concrete plan for spending the money. If you know you have recurring prescriptions or a dental crown coming, a modest amount is a genuine tax saving. A guessed number is not.

There is also a dependent care FSA of up to \$7,500 a year for childcare or eldercare costs. It is a real benefit and worth knowing exists — but it only helps if you are actually paying for dependent care.

Small and deliberate beats large and hopeful — an unused FSA dollar is simply money you gave away.

Plan documents and IRS rules govern in all cases. Tax savings shown are illustrative and depend on your own tax rate.

Short-term and long-term disability

Both available for 2027 — the employee pays 100% of the premium

SHORT-TERM DISABILITY

If you are out for weeks

Replaces part of your paycheck while you recover from something that keeps you out of work for a short stretch — surgery, a serious injury, childbirth recovery.

Our pick: Option 1

LONG-TERM DISABILITY

If you are out for months or years

Picks up where short-term leaves off and can pay for years. This is the one that protects you against the rare event that ends your ability to earn a living.

Our pick: Option 1

One thing we are still confirming

You may see all four plan options when you register, or only the one we selected. We are checking which.

Either way, Option 1 is our recommendation for both the short-term and the long-term plan.

Because you pay the full premium, treat these as optional: they matter most if a few months without income would be a genuine problem for your household.

Short-term covers the setback. Long-term covers the disaster

Coverage details, waiting periods and benefit amounts are set by the plan documents and the insurer.

Life insurance — buy your own, not ours

Term life is cheap, simple, and it should not be tied to your job

HOW TERM LIFE WORKS

You rent coverage for a fixed number of years

You buy a set term — commonly 20 or 30 years



Die inside the term and your family receives the full amount, tax-free.

Reach the end and the policy simply stops. No payout, no refund — that is why it is cheap.

WHY NOT THE EMPLOYER POLICY

It ends when the job ends

Leave, get laid off, or retire and the coverage usually walks out the door with you.

It is rarely enough

Employer cover is typically a small multiple of salary — nowhere near what a family actually needs.

You re-buy it older

Replacing it later means new pricing at your new age and health, which is exactly when it gets expensive.

Our recommendation: buy a level term policy in your own name

Size it to what your household would actually need — often around ten times income while children are at home.

Because you own it, it follows you to your next job and the premium is locked for the whole term.

If someone depends on your income, own the policy yourself. If nobody does, you may not need life insurance at all.

General guidance only, not insurance advice. Coverage amounts and pricing depend on your age, health and insurer.

Two more options on the menu

Both are entirely optional and paid for by the employee

FRESH BENIES

Fresh Benies

Telehealth plus a bundle of basic insurance benefits

- Gives you doctor visits by phone or video, alongside a set of simple, low-level insurance benefits.
- It makes sense mainly for part-time employees, who are not eligible for our medical plans.
- If you are enrolled in one of our medical plans, everything it offers you already have.

PET INSURANCE

MetLife group pet insurance

Vet cover for cats and dogs at group rates

- A MetLife group policy offered through the company, so you get group pricing rather than retail.
- The employee pays the full premium — there is no company contribution toward it.
- Worth a look if a large unexpected vet bill would genuinely hurt; otherwise it is easy to skip.

Neither of these is a core benefit. Look at them last, once you have settled your medical, dental, vision, disability and retirement choices.

Optional extras — useful for the right person, easy to decline for everyone else.

Availability, pricing and covered services are set by the providers and their plan documents.

SECTION

401(k) Discussion

Why investing matters, Traditional vs. Roth, and the rules of our plan

Why invest at all?

The same \$5,000 saved every year for 30 years — the only difference is where you put it



Why stocks, not savings

- A savings account protects your money but barely grows it — over 30 years it roughly doubles.
- Stocks are part-ownership of real companies. They swing year to year, but over decades they have grown far faster.
- Time is what makes it work: 30 years of growth on growth is what creates the gap above.

And taxes matter

Both stock columns own the same investments. The middle one just pays tax on dividends and gains along the way — that alone costs about \$70,000 over 30 years.

\$150,000 put in → \$431,874 out

The point: leaving long-term money in a savings account is a decision too — and over 30 years it is an expensive one.

Illustrative example only. Assumes \$5,000 invested at the end of each year at a constant rate; actual returns vary and can be negative.

Traditional 401(k) vs. Roth 401(k)

Same \$5,000 of pre-tax pay each year, same 6% growth, 30 years — the only difference is when you pay the tax

Traditional — no tax in, taxed on the way out

What goes in each year \$5,000 (full pre-tax amount)

Tax paid today \$0

Balance after 30 years at 6% \$395,291

Tax when you withdraw 35% — about \$138,352

What you actually keep **\$256,939**

Traditional wins when your tax rate in retirement is lower than it is today.

Roth — taxed on the way in, no tax on the way out

What goes in each year \$3,750 (\$5,000 less 25% tax today)

Tax paid today \$1,250 a year

Balance after 30 years at 6% \$296,468

Tax when you withdraw \$0

What you actually keep **\$296,468**

Roth wins when your tax rate in retirement is higher — as in this example, 25% now vs. 35% later.

In this scenario the Roth comes out about \$39,500 ahead — because the tax bill was paid at 25% instead of 35%.

Illustrative example only, not tax advice. Assumes a flat 25% rate today, 35% at withdrawal, and 6% annual growth.

How our plan works

The rules that apply to everyone — and the one decision we need from you

CONTRIBUTION LIMIT

\$7,000 per year for everyone on the plan.

The only exceptions are Jeff and John P.

EMPLOYER MATCH

No match in 2027.

A 4% match is planned to start in 2028, with a 4-year vesting schedule.

AUTOMATIC ENROLLMENT

You are enrolled unless you opt out.

Enrollment is opt-out, not opt-in — doing nothing means you are saving.

Default savings rate — it steps up automatically each year

Year 1

3%

Year 2

4%

Year 3

5%

Year 4

6%

...

...

Caps at

10%

Want a different number? Set your own contribution rate at any time.

Prefer not to participate? You can opt out entirely — just tell HR before the enrollment deadline.

You only need to make one choice on amounts: accept the default, pick your own rate, or opt out.

Plan documents and IRS rules govern in all cases. The 2028 match is planned, not guaranteed.

Option 1 — the easy portfolio

One age-appropriate Vanguard Target Date Fund, and nothing else to manage

The formula: 2091 – your age, rounded up to the nearest 5

STEP 1

2091 – your age

Subtract your age from 2091. A 34-year-old gets $2091 - 34 = 2057$.

STEP 2

Round up to the nearest 5

2057 becomes 2060. Target date funds only come in five-year steps.

STEP 3

100% into that one fund

For our 34-year-old: Vanguard Target Retirement 2060. That is the whole portfolio.

Quick reference — find your age, that is your fund

Age 25

2070

Age 30

2065

Age 35

2060

Age 40

2055

Age 45

2050

Age 50

2045

Age 55

2040

Age 60

2035

One fund already holds thousands of stocks and bonds worldwide — you are diversified on day one.

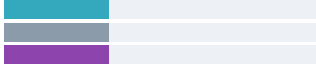
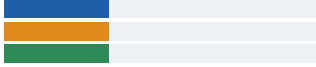
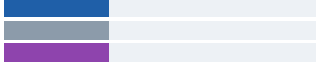
It rebalances itself and gets more conservative as the target date approaches. No maintenance.

If you do not want to think about investing at all, this single fund is a complete portfolio.

Illustrative guidance only, not investment advice. Fund availability and the 2091 rule of thumb are specific to our plan.

Option 2 — colour-coded by what each fund is

Every bar carries three stripes: where it invests, how it invests, and who runs it

Fund	Allocation and profile	Weight
iShares MSCI EAFE International Index		30%
Vanguard Small Cap Value Index		20%
Vanguard Total Stock		20%
American EuroPacific Growth		10%
Vanguard Real Estate Index		10%
T. Rowe Price All-Cap Opportunities		10%

THE THREE COLOUR PAIRS

60 / 40

Where it invests

Stripe 1

 Domestic
60%

 International
40%

1 / 3

How it invests

Stripe 2

 Value tilt
30%

 Blend / growth
70%

80 / 20

Who runs it

Stripe 3

 Passive index
80%

 Active manager
20%

Read a row left to right: how much you hold, and three stripes telling you exactly what kind of fund it is.

Illustrative guidance only, not investment advice. Percentages describe the target portfolio on the previous slide.