

2024

Employee Benefits Guide



Benefits Effective 1/1/2024 – 12/31/2024

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Eligibility

Who is Eligible?

- An active full-time employee working 30 or more hours per week

Your dependents are eligible if they are:

- Your legal spouse
- Your child(ren)* up to age 26
- Your disabled children up to any age (if disabled prior to age 19*)
 - * Includes natural, step, legally adopted/or a child placed for adoption, or a child under your legal guardianship.

Making Benefit Changes During the Plan Year

The benefit elections you make during your initial enrollment period will be in effect through the end of the plan year. If you have a “qualifying life event,” you may make changes to certain benefits if you apply for the change and provide supporting documentation to Human Resources within 30 days of the event. Proof of life events is subject to approval. Please reach out to your employer for specific documentation to be submitted for a qualified life event during the benefit year. Changes are effective prospectively unless the event is for birth, adoption, or placement for adoption.

Qualified Life Event		
Change in Marital Status	Change in Dependents	Change in Employment
• Marriage • Divorce • Death of your spouse	• Birth, adoption or placement for adoption of an eligible child (Retroactive to the date of the event) • Death of your covered dependent • Gain or loss of Medicare or Medicaid during the year	• Change in you or your spouse’s work status that affects benefits eligibility. • Your spouse’s Open Enrollment differs from yours • Relocation if the move impacts eligibility for the plan

Your Coverage

When Does Coverage Begin?

Benefits for new hires will become effective on the day after you have completed 30 days of service.

If you do not enroll during your eligibility period, you may enroll at the next open enrollment period.

Termination of Coverage

If you or a covered dependent no longer meet the eligibility requirements or if your employment ceases, your medical, dental, and vision coverage will end on the last day of the month in which you become ineligible.

Life Insurance, AD&D, short-term disability, long-term disability, flexible spending accounts, accident insurance, hospital indemnity insurance, critical illness insurance, legal and identity theft insurance will end on the day you become ineligible. Your life insurance coverages are convertible and, in some cases, may be portable.

You may be eligible to elect COBRA continuation coverage if when your coverage ends you are enrolled in the medical, dental, vision, healthcare FSA or limited purpose FSA plans.

You are responsible for informing Human Resources within 30 days if any of your dependents become ineligible for benefits.



Enrollment

When Can I Enroll in Benefits?

You can enroll for benefits:

- Within 30 days of first becoming eligible for benefits
- During the annual Open Enrollment period
- During the plan year, if you experience a Qualifying Life Event

How Do I Enroll?

You must actively enroll in all benefits that require employee contributions. You will be automatically enrolled in all Company paid benefits.

To enroll (or make changes) to your benefits, you must log onto **UKG** at ew42.ultipro.com

Annual Open Enrollment

This is a once-a-year opportunity to review your benefit plan elections and make adjustments that meet the needs of you and your family. Changes will go into effect January 1st.





How a Health Plan Works

A Note About Health Care Reform

If you choose to purchase individual coverage through the Marketplace, you should know that because Arcade Beauty's medical insurance meets specific ACA requirements, you may not be eligible to receive a federal subsidy.

Additional information is available at www.healthcare.gov.

Copays

A copay is a fixed amount you pay for a health care service and do not count toward your deductible but do count toward your annual out-of-pocket maximum.

Coinsurance

Once you've met your deductible, you and the plan share the cost of care, called coinsurance. For example, you pay 20% for services and the plan will pay 80% of the cost until you have reached your out-of-pocket maximum.

Deductible Amount

The amount you pay each year for eligible in-network and out-of-network charges before the plan begins to pay.

Out of Pocket Maximums

The most you will pay each year for eligible network services including prescriptions. After you reach your out-of-pocket maximum, the plan picks up the full cost of covered medical care for the remainder of the plan year.

What is a Premium?

A premium (also referred to as a contribution) is the cost you pay for health insurance, whether you use medical services or not. Premiums are deducted directly from your paycheck on a pre-tax basis. .

Medical Overview

We offer three (3) plans through United Healthcare with the following features:

- Option to receive care from in-network or out-of-network providers for the HDHP HSA and PPO plans; higher benefits are paid when using in-network **Choice Plus** providers.
- Preventive care is covered at 100% when using an in-network provider
- Includes prescription drug coverage through CVS/ Caremark administered by RxBenefits
- Deductibles and out-of-pocket maximums accumulate January 1st – December 31st.
- If you enroll in the HDHP HSA plan(s), you may be eligible to receive an employer contribution to a Health Savings Account (HSA) to help cover some of your medical plan costs (refer to HSA for more information).
- Employees share in the cost of medical/prescription benefits.
- For a comparison of the plans, please refer to the Medical Plans Comparison Chart.
- Please refer to the Summary Plan Description (SPD) and Summary of Benefits and Coverage (SBC) as well as the carrier contracts for information regarding specific benefit levels, exclusions and limitations for all policies.

Access to Your Healthcare

After you are enrolled in an Arcade Beauty medical plan, log onto www.myuhc.com and register to access self-service tools and resources to help manage your medical benefits.

Finding In-Network Providers

To search for in-network medical providers, log onto www.myuhc.com . When prompted to select a plan, click on Choice or Choice Plus.

Medical Plan Options

United Healthcare (Network)	HDHP HSA Plan (Choice Plus)	In Network Plan (Choice)	PPO Plan (Choice Plus)
Calendar Year Company HSA Contribution (Individual / Family)	\$600 / \$1,200	N/A	N/A
In-Network	You Pay	You Pay	You Pay
Calendar Year Deductible (Individual / Family)	\$3,000 / \$6,000	\$2,000 / \$5,000	\$1,000 / \$2,500
Coinsurance	20%	20%	10%
Calendar Year Out-of-Pocket Max ¹ (Individual / Family)	\$4,000 / \$8,000	\$4,000 / \$10,000	\$5,080 / \$12,700
Preventive Care	0%	0%	0%
Primary Care Office Visit	20% after deductible	\$35 co-pay	\$35 co-pay
Specialty Care Office Visit	20% after deductible	\$50 co-pay	\$50 co-pay
Virtual Visits (must use Designated Virtual Network doctors)	Covered in full	Covered in full	Covered in full
Urgent Care Facility	20% after deductible	\$50 co-pay	\$50 co-pay
Emergency Room Care	20% after deductible	\$100 co-pay	\$250 co-pay
Inpatient Hospital	20% after deductible	20% after deductible	10% after deductible
Outpatient Surgery	20% after deductible	20% after deductible	\$100 co-pay; then 10% after deductible
Outpatient Radiology / Lab	20% after deductible	20% after deductible	10%
Advanced Radiology (MRI, MRA, CAT, PET Scan)	20% after deductible	20% after deductible	10%
Out-of-Network	You Pay	You Pay	You Pay
Calendar Year Deductible (Individual / Family)	\$6,000 / \$12,000	N/A	\$3,500 / \$7,000
Coinsurance	50%	N/A	30%
Calendar Year Out-of-Pocket Max ¹ (Individual / Family)	\$8,000 / \$16,000	N/A	\$7,000 / \$17,500

Limitations and maximums may apply. Please refer to the plan summaries and Summary of Benefits and Coverage for more information.

¹ Plan Year Out-of-Pocket Maximum includes deductibles, copays and coinsurance

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Prescription Drugs

When you enroll in a medical plan, you receive comprehensive prescription drug coverage through **RxBenefits and CVS Caremark.**

Some medications may be subject to prior authorization, quantity limits or step therapy requirements to be approved for coverage. For a list of approved drugs, log onto www.caremark.com and select **Standard Control with Advanced Control Specialty Formulary**

RxBenefits and CVS Caremark	HDHP HSA Plan	In Network Plan	PPO Plan
Retail (up to 30-day supply)	You Pay*	You Pay	You Pay
Pharmacy Deductible (individual/ family)	Combined with medical	\$50/\$100	\$50/\$100
Generic copay	\$10	\$10	\$10
Preferred Brand copay	\$35	\$35	\$35
Non-Preferred Brand copay	\$70	\$70	\$70
Mail Order (up to 90-day supply)	You Pay*	You Pay	You Pay
Generic/ Preferred/ Non- Preferred copays	\$20 /\$70 /\$140	\$20 /\$70 /\$140	\$20 /\$70 /\$140
Specialty	\$10/\$35/\$70	30%	30%

* Please note, any retail or mail order copays listed for the HSA-qualified plan apply only after the medical plan deductible is met. The deductible will not apply to certain medications classified as preventive in accordance with the approved prescription drug list.

Three Ways to Obtain Prescription Drugs

1

RxBenefits Retail Pharmacy
(up to 30-day supply)

www.caremark.com
1.800.334.8134

- ✓ Locate a participating retail pharmacy
- ✓ View a list of approved drugs

2

RxBenefits Mail Order
(up to 90-day supply)

www.caremark.com
1.800.334.8134

- ✓ Use for maintenance drugs such as medication for high blood pressure, arthritis or diabetes
- ✓ Pay less than retail pharmacy for a 90-day supply
- ✓ No additional cost for delivery

3

Caremark Specialty Pharmacy
(30-day supply)

www.caremark.com
800.318.6108

- ✓ Medications used to treat complex conditions like multiple sclerosis, hepatitis C and rheumatoid arthritis
- ✓ Prescription can only be filled once every 30 days

Where to Seek Care

Virtual Visits

Each medical plan includes virtual visits, which provide 24-7-365 access to board-certified primary care doctors and pediatricians by secure video chat or phone. **For an illness or injury that is not an emergency**, United Healthcare's virtual care program offers a **convenient, cost-effective alternative** to hospital emergency rooms and urgent care clinics.

Effective January 1, 2024, virtual visits will be **covered in full** when you use a **Designated Virtual Provider** regardless of the plan in which you are enrolled. .

Virtual care is not intended to replace your relationship with your doctor, but rather provides access to healthcare when reaching the doctor is difficult or inconvenient.

Doctors in the **Designated Virtual Provider network** can diagnose, recommend treatment and write short-term prescriptions for minor, non-life-threatening conditions including, but not limited to:

- Acne
- Allergies
- Arthritic Pain
- Bronchitis
- Pink Eye
- Ear Infections
- Sore Throat
- Insect Bites
- Sinus Infections
- Nausea/Stomach Aches
- Cold/Flu Symptoms
- Skin Infections
- Headaches/Migraines
- Upper Respiratory Infections



Benefits of Virtual Care Visits

- Less time away from work
- No travel expenses or time
- Less interference with child or elder care responsibilities
- No exposure to other potentially contagious patients

How to Use Virtual Care

1. Download the **United Healthcare** app, go online www.myuhc.com/virtualvisits or call **1.855.615.8335**
2. Register and complete your account profile, including a brief medical history, for you and your enrolled family members.
3. Video chat or talk with a doctor from home, work or when traveling.

Where to Seek Care (continued)

Emergency Care vs. Urgent Care

When you need help in a hurry, you have choices. Of course, when it's a **life-threatening problem, you should call 911 or go straight to the nearest hospital emergency room (ER).**

In the ER, true emergencies are treated first, so unless your life is in danger, you'll wait – sometimes for hours. The ER is also the most expensive option for care.

For non-life-threatening problems, call your doctor, access virtual care services or go to an urgent care center.



Go to Emergency Room

Heart attack or stroke

Chest pain or intense pain

Shortness of breath

Severe abdominal pain

Head injury or other major trauma

Loss of consciousness

Major burns or severe bleeding

One-sided weakness or numbness

Open fractures

Poisoning or suspected overdose

or



Go to Urgent Care

Moderate fever

Colds, cough or flu

Bruises and abrasions

Cuts and minor lacerations

Minor burns and skin irritations

Eye, ear, or skin infections

Sprains or strains

Possible fractures

Urinary tract infections

Respiratory infections

How To Save \$\$\$\$!

When Using Your Medical and Prescription Plans

Use In-Network Doctors

By using in-network doctors, clinics, hospitals and pharmacies, you pay the lowest cost for care. When you visit out-of-network doctors, our health plan covers less of the cost.

Choose the Right Type of Care

When you need care, know your options. Urgent care centers, virtual visits or a call to the medical plan nurse line can help save time and money.

Use freestanding imaging centers for MRIs, CT scans and other imaging.

Use Your Preventive Care Benefits

Most preventive care services are covered at 100% when you use in-network providers. Getting regular exams, screenings and immunizations can save you a lot of money in the long run by catching problems early or preventing them altogether.

Use RxBenefits Mail Order

Rather than visiting a pharmacy month after month, save time by having the medication delivered to your home.

Through RxBenefits you can save money by getting up to a 90-day supply for less than what you would pay through a retail pharmacy. And because shipping is free, you'll also save on gas money!

** If you use GoodRx vs. the RxBenefits pharmacy benefits, or if you pay the lower cash price, the amount you pay will not apply toward your deductible or out-of-pocket maximum.*



Ask Your Doctor for Generic Drugs

The next time you need a prescription, ask your doctor if it is appropriate to use a generic drug rather than a brand name drug. Generic drugs contain the same active ingredients, are identical in dose, form and administrative method AND are less expensive than their brand name counterparts.

If you must take a brand name drug, ask your doctor for samples or coupons. Also check the drug manufacturer's website for available rebates and discounts.

Search GoodRx for Cheaper Prices

Drug prices sometimes vary significantly between pharmacies. GoodRx collects and compares prices for every FDA approved prescription drug at more than 70,000 pharmacies.

Access GoodRx at www.goodrx.com to find the lowest price pharmacy near you and/or print FREE coupons. You can also get coupons on-the-go through GoodRx's mobile app – just show your phone to the pharmacist.*

Ask Pharmacy for the Cash Price

Call and ask your pharmacy for the cash price* of a prescription drug. Sometimes these prices are lower than the prescription drug plan copay.

Additional Programs in our Medical Plans

One Pass Select (New for 2024)

One Pass Select is a subscription-based fitness and well-being program that supports that supports a healthier lifestyle. It provides you with access to an extensive network of gyms nationwide at discounted prices. This program offers you various membership tiers to choose from based on your unique fitness goals - along with additional benefits, including:

- no long-term contracts or annual gym registration fees
- flexible fitness options with the ability to change tiers monthly
- multi-location access nationwide with no waiting period
- the ability to add up to 4 family members age 18+ at a 10% discount
- a grocery delivery subscription

Memberships range in cost from \$10 per month for a Digital membership to \$144 per month for an Elite membership, with several options in-between. Participating gyms include Anytime Fitness, Planet Fitness, Orangetheory, Crunch Fitness, LA Fitness and many more.

Sign in to your myuhc.com account to access One Pass Select.



Health Savings Account (HSA)

Only available for those enrolled in the **HDHP HSA Plan**.

A Health Savings Account (HSA) is a tax-advantaged savings vehicle available to individuals covered by a High Deductible Health Plan (HDHP). Funds in the account are used to pay for qualified medical, dental and vision expenses.

An HSA is a great way to save for the future. You can set aside money from each paycheck now and save funds to cover healthcare expenses that come up later. Plus, your contributions are free from federal income tax, so you're stretching your healthcare dollars while lowering your taxable take-home pay amount.

Arcade Beauty will also make contributions to your HSA if you enroll in the **HDHP HSA Plan**. This is "free money" for you to use to pay for eligible healthcare expenses.

HSA funds can only be used for yourself, your spouse and your taxable dependents. Expenses for dependents who do not qualify as tax dependents are not reimbursable under the HSA.



Advantages of an HSA

- Balance rolls over each year so you won't lose your contributions
- Triple tax savings – you do not pay federal tax* on:
 - Contributions to the account
 - Spending on qualified expenses
 - Interest that accrues
- Account is portable, so the funds are yours even if you change medical plans next year or leave the Company
- Use the funds (now or in the future) for eligible medical, dental or vision expenses, including coinsurance costs, prescriptions, glasses, orthodontia and more
- Money left in the savings account earns tax-free interest*
- Once your account balance reaches \$1,000, you may move any balance above that amount into mutual funds and direct your investment strategy

*Tax treatment of HSAs for state tax purposes may vary by state.

Health Savings Account (HSA) (continued)

Funding and Enrolling in an HSA

You have the option to contribute to your HSA through pre-tax payroll contributions if you enroll in an HSA through **Optum Bank**. You can change the amount you contribute to your HSA at any time during the plan year.

To enroll in an HSA, you must enroll in the HDHP HSA Plan. Arcade Beauty will have your Optum Bank HSA opened on your behalf. You will receive instructions following enrollment on how to activate your account and establish a login and password. It is important to note that expenses are not eligible for reimbursement until your HSA has been established.

Once your HSA is opened, remember to designate a beneficiary for this account.

** You also can choose to open an HSA through another financial institution. However, you would have to make after-tax contributions; they would not be automatically deducted from your paycheck, and you would need to claim those contributions as a tax deduction when you file your taxes.*

Who Can Open an HSA?

You can contribute to an HSA if you:

- Are covered under an HSA-qualified high deductible health plan (HDHP).
- Are not enrolled in Medicare*, TRICARE or TRICARE for Life.
- You are not covered by another major medical plan, including the plan of your spouse or parent.
- Cannot be claimed as a dependent on someone else's tax return.
- Have not received Veterans Affairs (VA) benefits within the past 3 months
- You (or your spouse) do not contribute to a Health Care FSA.

* Enrollment in Medicare Part A may be retroactive by up to 6 months when you begin taking Social Security retirement after your Social Security Normal Retirement Age (SSNRA). This may affect your HSA eligibility.

Other restrictions and exceptions may also apply. For more information, visit www.irs.gov/publications/p969/.

2023 HSA Contributions & Limits

Each year, you can contribute up to the IRS annual limit for HSAs which includes Arcade Beauty's contribution. Arcade Beauty will contribute to your HSA by funding full amount in February. Those employees enrolling mid year the Arcade Beauty contribution amount will be prorated.

	2024 IRS Contribution Limit	Arcade Beauty will contribute	Pre-tax limit you can contribute*
Employee Only	\$4,150	\$600	\$3,550
Employee + Dependents	\$8,300	\$1,200	\$7,100

* If you are age 55 or older, you may contribute an additional \$1,000 in catchup contributions.

IMPORTANT! If you use your HSA funds for non-qualified expenses, the purchase amount will be subject to tax, plus a 20% penalty if you are younger than age 65. To view a list of qualified expenses, visit www.optumbank.com.

Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSA) allow you to set money aside for certain eligible expenses and draw from it throughout the year to pay for those expenses. The money is set aside pre-tax, reducing your taxable income. Three types of FSAs are available:

- Health Care
- Limited Purpose Health Care (HSA plan participants only)
- Dependent Care

Money cannot be transferred between the accounts (i.e., you cannot use money from your Health Care FSA to pay for dependent care expenses and vice versa).

Health Care FSA

Not available to HSA plan participants

This FSA allows you to submit eligible **medical, dental and vision** expenses for reimbursement. You can deposit up to **\$3,200** to the Health Care FSA for the **2024** calendar year.

Limited Purpose Health Care FSA

Available only to HSA plan participants.

Using this account in conjunction with the HSA gives you the opportunity to save additional pre-tax money. You can use the Limited Purpose Health Care FSA for eligible **dental and vision** expenses only. You can contribute up to **\$3,200** for the **2024** calendar year in this account.

Health Care FSA Roll Over

If you enroll in a Health Care FSA, you have the option to carry forward up to **\$640** to the following plan year. These funds will not count against your future FSA election plan contribution limit. **Any unused balances in excess of \$640 at the end of 2024 will be forfeited.**

Dependent Care FSA

Available to all benefit eligible employees

Dependent Care FSAs are used to pay for the costs of dependent care that enable you to work. This care may be for a child under the age of 13 and for older dependents, including children, spouses and parents who are physically or mentally unable to care for themselves and who live with you for more than half the year. Eligible expenses include daycare, before-school and after-school care, babysitters and elder daycare. For the **2024** calendar year, you can deposit up to **\$5,000** to a Dependent Care FSA (\$2,500 if you are married and filing separately).

How the FSA Works

As a new hire (and annually during Open Enrollment), you select the amount of money you wish to deposit into the Health Care (or Limited Purpose Health Care) Account and/or the Dependent Care Account for the entire plan year. The plan year for the FSA benefit is **January 1 to December 31**. The total amount is equally divided by the number of pay periods remaining in that year and that amount is deducted from each paycheck. The money is set aside in your FSA account(s).

As you incur eligible expenses, you file a simple claim form (along with copies of your receipts) and are reimbursed for such expenses from the account. Employees who enroll in the Health Care (or Limited Purpose Health Care) FSA will receive an FSA debit card to pay for qualified purchases, eliminating the need to submit a paper claim and wait for reimbursement.

The FSA plans are administered by **United Healthcare**. To register and log into your FSA account(s), go to <https://member.uhcbs.com>

Dental

Arcade Beauty offers two dental plans through **United Healthcare**. Your choice of dentists can determine the cost savings you receive. In-network providers are paid directly by United Healthcare and agree to accept negotiated fees as “payment in full” for services rendered. When you use out-of-network providers, United Healthcare will apply the applicable percentage of the allowed amount and you are responsible for paying the balance of the bill.

In-network coverage is provided when you use PPO or DHMO providers. To search for in-network providers, go to www.myuhc.com and click on **Find a Dentist**. The PPO network is National Options PPO 30. The DHMO network is National Select Managed Care.

Employees pay the full cost of dental benefits.

New for 2024 – The PPO plan includes Preventive Max Multiplier which covers preventive dental care without counting those claims towards the plan’s annual maximum, helping to stretch your annual maximum dollars to use toward other costlier expenses.

United Healthcare	PPO		DHMO
	<u>In-Network</u>	<u>Out-of-Network</u>	<u>In-Network</u>
Calendar Year Maximum* (plan pays)	\$2,000		Unlimited
	You Pay	You Pay	You Pay
Calendar Year Deductible* (applies to Basic and Major Services)	\$50 Individual/ \$150 Family		\$0 Individual / \$0 Family
	Plan Pays	Plan Pays	Plan Pays
Preventive Services (no deductible)	100%	100%	See Fee Schedule
Basic Services (after deductible)	80%	80%	See Fee Schedule
Major Services (after deductible)	50%	50%	See Fee Schedule
Orthodontia (to age 19)	50%	50%	Not Covered
Orthodontia Lifetime Maximum (per person)	\$1,000	\$1,000	N/A

* Plan deductibles and maximums accumulate on a **calendar year** (January 1 - December 31). These amounts reset on January 1 of each year.



Vision

Routine eye exams are important for maintaining good vision and can also provide early warning of other health conditions. The United Healthcare vision plan provides coverage for exams, glasses and contact lenses, as shown below.

In-network coverage is provided when you use **United Healthcare** providers. To search for providers, log onto www.myuhcvision.com and select **United Healthcare vision plans**.

No ID card will be provided; members must print cards on www.myuhcvision.com

Employees pay the full cost of the vision plan.



United Healthcare	Frequency	In-Network	Out-of-Network
		You Pay	Plan Allowance
Routine Eye Exam*	Once every 12 months	\$10 co-pay	Up to \$40
Eyeglass Lenses	Once every 12 months	\$10 co-pay	
-Single Vision			Up to \$40
-Lined bifocals			Up to \$60
-Lined Trifocals			Up to \$80
-Lenticular			Up to \$80
Frame	Once every 12 months	Amount over \$130 retail allowance	Up to \$45
Contact Lenses (in lieu of glasses)	Once every 12 months	\$10 co-pay (Includes up to 4 boxes) Amount over \$130 allowance \$10 co-pay	Up to \$130 (elective)
-Elective Formulary			
-Elective Non-Formulary			Up to \$210
-Medically Necessary			
Contacts—instead of glasses	Once every 12 months	Amount over \$130 allowance	Up to \$130

* Enhanced maternity and pediatric benefits: 2 exams are covered each plan year for mothers-to-be and children up to age 13.

Life Insurance

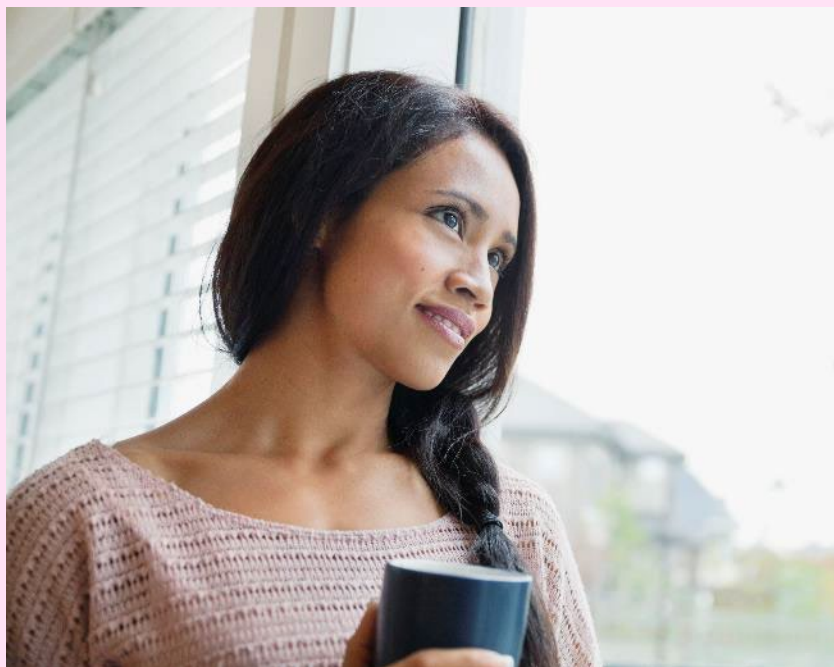
Having appropriate life insurance coverage is a critical part of planning for your family's current and future financial needs. Proceeds from life insurance can help with salary replacement, mortgage protection, cost of childcare, debt repayment and children's education expenses.

Arcade Beauty provides Basic Life insurance coverage equal to 1 x your annual base pay. This coverage includes an Accidental Death and Dismemberment (AD&D) provision that also pays in the event of accidental death and certain other conditions. Basic Life and AD&D insurance is insured by **Reliance Standard** and is paid for in full by Arcade Beauty. You are automatically enrolled in these benefits.

(According to federal law, only the first \$50,000 of employer-paid life insurance is not taxable. Premium paid by Arcade Beauty for coverage levels over \$50,000 will be taxable to you and will be included on your year-end W-2 statement.)

What is Life Insurance?

- A lump sum payment distributed to beneficiaries upon death of the insured or insureds.
- Reassurance that your loved ones would be financially secure if you passed away unexpectedly. Average funeral cost is \$10,000.



Reminder! Update your Beneficiaries!

Plan for your expected and unexpected life changes by ensuring you and your family are protected. Update your beneficiaries now and keep them current each year.

Voluntary Life Insurance and AD&D

Voluntary Life

As a new hire, you can purchase Voluntary Life insurance through Reliance Standard for you, your legal spouse and dependent children **without providing medical information up to certain guarantee issue (GI) amounts** (see chart). If you leave the company, this coverage can be taken with you.

If you elect employee and spouse benefit amounts over the GI limit, you will be required to provide Evidence of Insurability (EOI) for review and approval by Reliance Standard.

Benefit amounts reduce at age 65. Please refer to the benefit summary for details.

If you elect not to enroll when you are first eligible, you will still be able to purchase coverage in the future. However, ALL amounts elected will be subject to the EOI requirement. If at that time, your EOI is not satisfactory to Reliance Standard, you may be denied coverage.

Voluntary AD&D

You may also purchase Voluntary AD&D for you, your spouse and dependent children. The benefit amounts, increments and maximums are the same as Voluntary Life, but you do not have to elect a matching amount of coverage. All amounts of Voluntary AD&D are guaranteed, so no EOI is required.

Employees pay the full cost of these plans on an after-tax basis.

Voluntary Life/ Voluntary AD&D Amounts Available	
Employee	1, 2, 3, 4 or 5 x your salary Maximum: \$750,000 Guarantee Issue*: \$200,000
Spouse	\$10,000, \$25,000, \$50,000 or \$100,000 Maximum: 50% of employee amount Guaranteed Issue*: \$25,000
Child (to age 26)	\$5,000 or \$10,000 Guarantee Issue*: \$10,000

To enroll in Voluntary Spouse and/or Child Life, you must be enrolled in Voluntary Employee Life.

**Guarantee issue is the amount of coverage you or your dependents can elect up to without medical questions. Guarantee issue is only available to newly benefit eligible employees.*

Reminder! Update your Beneficiaries!

Plan for your expected and unexpected life changes by ensuring you and your family are protected. Update your beneficiaries now and keep them current each year.

Disability Insurance

If you were to be out of work due to an injury or illness, could you and your family survive without a paycheck? Disability insurance is essentially “paycheck” insurance, ensuring you will receive a portion of your income if you were out of work due to injury or illness. Short-Term Disability (STD) provides a weekly benefit, while Long-Term Disability (LTD) pays a monthly benefit after STD insurance has been exhausted.

Arcade Beauty provides you with LTD and Core STD* insurance at no cost, therefore your benefit while out on disability will be taxable. You are automatically enrolled in these plans insured by Reliance Standard.

You also have the option to purchase Buy-Up STD if you wish to increase your benefit. Your cost for this additional coverage will be deducted from your pay on an after tax. As a result, that additional portion of the benefit will not be taxable when received.

*Residents of NY and NJ have the state mandated Short Term Disability plan as their Core STD plan.

Short-Term Disability

STD benefits become payable when you are unable to work due to an injury or illness unrelated to work.

When do the benefits start?

8th day of accident or illness

How much would the benefit pay?

Core: 66.7% of base weekly pay to \$500 per week

Buy-Up: 66.7% of base weekly pay to \$2,000 per week

How long will the benefit pay?

Up to 25 weeks

Are there any pre-existing exclusions?

3 months prior / 12-month exclusion (applies to buy-up only)

STD benefits integrate with state mandated disability plans.

Long-Term Disability

Long-Term Disability (LTD) benefits are provided as income protection in the event you become disabled for an extended period. Proof of disability is required.

When do the benefits start?

After 180 days of qualified disability

How much would the benefit pay?

60% of basic monthly earnings to \$10,000 per month

How long will the benefit pay?

Social Security Normal Retirement Age (SSNRA)

Are there any pre-existing exclusions?

3 months prior / 12 month exclusion

A pre-existing condition is any accident or illness for which you have received medical advice, care or treatment in the months prior to your coverage effective date and will be excluded from benefit for the month exclusion period listed.

Optional Protection Benefits

Arcade Beauty offers voluntary benefit plans through SunLife. These plans are not medical insurance and do not replace your medical coverage, but rather pay cash directly to you in addition to any benefits you receive from your health plan. The cost of these plans is deducted from your pay on an after-tax basis.

All SunLife benefit plans are portable, which means you can take these benefits with you if you leave the Company.

Please refer to the SunLife benefit plan summaries for details and rates.

All the plans provide an annual cash benefit each calendar year for completing an eligible health screening or prevention measure.

Critical Illness insurance

Helps protect you from financial loss by providing a lump-sum cash benefit directly to you following the diagnosis of a covered critical illness or event, including (but not limited to) heart attack, end stage kidney disease, stroke, major organ failure, invasive cancer, blindness, etc.

You can purchase coverage for you, your spouse and dependent children.

Hospital Indemnity Insurance

Hospital Indemnity insurance can help by paying lump-sum benefits to help you manage expenses that arise if you or an eligible family member ends up in the hospital.

There are no copays, deductibles, coinsurance or network requirements. These benefits aren't reduced because you receive a payment from any other coverage you have, such as medical, accident or critical illness insurance.

You can purchase coverage for you, your spouse and dependent children.

Accident insurance

Pays a cash benefit when you or your covered family members suffer injuries sustained in an accident. Covered injuries include fractures, burns, concussions, tears, lacerations, broken teeth and eye injuries. Additional benefits may be paid, including ambulance, emergency care, testing and therapy.

Arcade Beauty pays 100% of the cost of Employee Only coverage. You have the option to purchase coverage for your family.

What Can I Do with the Money I Receive?

- Cover cost of copays, deductibles, and coinsurance
- Reimburse yourself for lodging and transportation costs
- Help with childcare and other domestic expenses
- Assist with home health care cost
- Make up for lost wages
- Pay everyday expenses, such as rent, utilities, and groceries

Additional Benefits

Identity Theft Protection

Identity theft is when thieves steal your personal information in order to take over or open new accounts, file fake tax returns, rent or buy properties or commit other crimes in your name.

IDShield can help you avoid identity theft and, in the worst-case scenario, get your life back after a breach of your secure personal information.

This plan includes identity consultation services, security monitoring and identity restoration.

You can purchase coverage for you or for your family. Your cost is deducted from your pay on an after-tax basis.

Please refer to the benefit summary for details and rate

Group Legal Insurance

LegalShield gives you convenient and affordable access to a highly qualified network of attorneys by phone, online or in person for a wide variety of legal services.

Common legal services include estate documents (wills and trusts), real estate matters, identity theft defense, traffic offenses, contract/document review, adoptions, name changes, trial defense for civil litigations, and debt collection defense.

You can purchase coverage for you or for your family*. Your cost is deducted from your pay on a post-tax basis.

Please refer to the benefit summary for details and rates.

*Covered family members include employee, spouse, never married dependent children under age 26 living at home, dependent children under age 18 for whom the employee is legal guardian, never married dependent children who are full-time college students up to age 26, and physically or mentally disabled children living at home.



Additional Benefits

Employee Assistance Program (EAP)

We understand how challenging it can be to balance your work and personal life, and we are committed to helping you do just that.

Provided at no cost to you, experienced consultants are available 24/7 for confidential support, guidance and resources to help you navigate small questions and big problems related to a range of issues, including:

- Relationship problems
- Workplace conflicts
- Parenting and family issues
- Stress, anxiety and depression
- Elder care support
- Legal and financial concerns

The EAP provides up to 3 sessions with an experienced consultant for each issue or problem at no cost to you, and the benefit renews each calendar year.

Call for personal support: (800) 622-7276

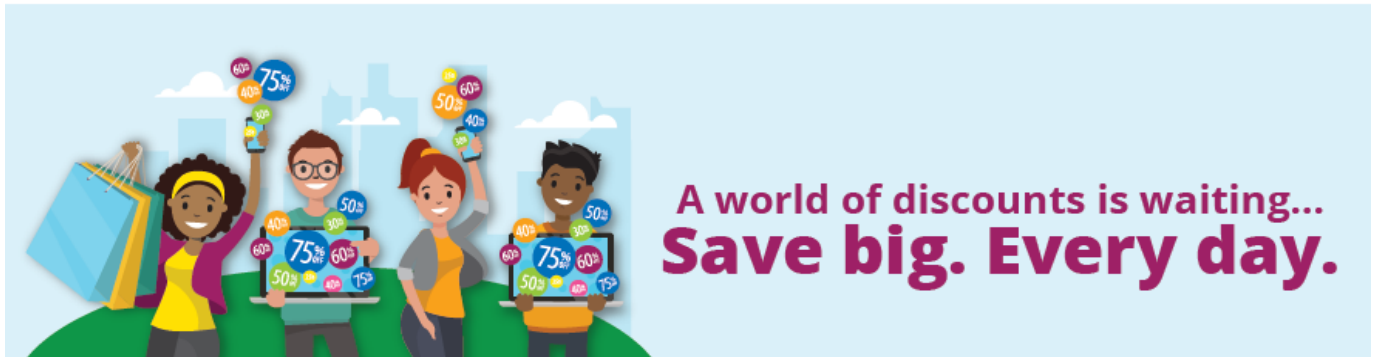
Online resources are available at <https://www.liveandworkwell.com>

Company Access Code: arcadeb



Additional Benefits

Discount Marketplace - Benefit Hub



Welcome to the Arcade Beauty BenefitHub Employee Perk Program

You have exclusive access to amazing discounts and cash back offers on thousands of the brands you love. Take advantage of savings in a variety of categories including:

- Travel
- Auto
- Electronics
- Apparel
- Local Deals
- Education
- Entertainment
- Restaurants
- Health and Wellness
- Beauty and Spa
- Tickets
- Sports & Outdoors



It's easy to access and start saving!



Contact Information

Benefit	Partner	Website / Phone
Accident, Hospital Indemnity, Critical Illness Group # 948417	SunLife	www.sunlife.com (800) 247-6875
Dental Insurance Group # 925616	United Healthcare	www.myuhc.com (877) 816-3596
Disability Insurance Policy # STD 169815; LTD 134178	Reliance Standard	www.rslclaims.com (800) 351-7500
Discount Marketplace	Benefit Hub	https://arcadebeautyperks.benefit-hub.com (866) 664-4621
Flexible Spending Accounts (FSA)	United Healthcare	www.myuhc.com (888) 641-9141
Group Legal Insurance Group # 47924	Legal Shield	www.legalshield.com (800) 654-7757
Health Savings Account (HSA)	Optum Bank	www.optumbank.com (866) 314-2320
Identity Theft Group # 47924	Legal Shield	www.legalshield.com (800) 654-7757
Life/AD&D Insurance Policy # GL166306	Reliance Standard	www.rslclaims.com (800) 351-7500
Medical Insurance Group # 925616	United Healthcare	www.myuhc.com (888) 641-9141
Prescription Drug Plan	RxBenefits (CVS Caremark)	www.caremark.com (800) 334-8134
Vision Insurance Group # 925616	United Healthcare	www.myuhcvision.com (800) 638-3120
Human Resources	Mike Rundle	mike.rundle@arcadebeauty.com (423) 463-6289

Benefits Effective: January 1, 2024 – December 31, 2024

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