



Your 2019 Guide to Healthcare & Wellness Benefits



Review
Compare
Choose

Making an Informed Choice



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Welcome

The Rio Grande Co. Benefits Program delivers comprehensive healthcare coverage and additional benefits for you and your family. This guide provides the information you need to make informed decisions about your 2019 benefits and information about default coverage (on page 33) if you do not make an active election.

Learn about your Options & Compare

Rio Grande Co. understands that comprehensive healthcare coverage is important to you and your family. The benefits we offer provide a sustainable healthcare program, while managing the rising healthcare costs that all companies face.

Managing cost is a partnership. Rio Grande Co. helps to manage costs by negotiating favorable rates from our vendor partners and investing in programs that help maintain or improve your health and that of your family members. You can help manage costs by staying informed and making cost-effective benefits and healthcare decisions that provide quality medical care – like choosing in-network doctors or purchasing generic drugs whenever possible.

Only you can decide which plans are best for you. You owe it to yourself and your eligible dependents to think about how you will use benefits in the coming year (e.g. annual physicals, medications) and determine which benefits options will help you maximize your budget while meeting your healthcare needs.

Rio Grande Co. ADP/HR Portal is Fast & Easy!

The Rio Grande Co. ADP Workforce Now/HR Portal gives you quick and convenient access to up-to-date information and resources you need to navigate your work life through areas such as Pay Statements, Requesting Time off, Benefits, Performance Appraisals, Company Spotlight/Announcements and other helpful information.

Visit today and make sure you are taking advantage of all that Rio Grande Co. has to offer!

Enrollment Timeframe

After you've read this guide and compared your options, log in to the ADP Workforce Now page to enroll (visit page 30 for more information).

- Active Employees: Enroll between **November 8, 2018 – November 16, 2018**.
- Newly-hired Employees: Enroll within 30 days of your hire date.

Remember: After the enrollment deadline, your benefits elections (or the default elections) will remain in effect for all of 2019. You will not be allowed to make a change unless you experience one of the following qualified life events (and you request a change within 30 days of that event):

- Marriage, legal separation, divorce, or termination of a domestic partnership
- Birth, legal adoption of a child or placement of a child with you for legal adoption
- Death of a spouse, domestic partner or dependent child
- Loss or gain of other coverage

It's that time ...
Benefits
OPEN
ENROLLMENT



What's New for 2019?



UNUM: New Provider for 2019

UNUM will be our new provider for Dental, Vision, Life, AD&D, Disability, Travel Assistance and provide us with a 100% confidential Employee Assistance Program.

Pet Insurance

Petplan never asks you to pay more for the comprehensive coverage your pets deserve. That's why our policy covers cancer, chronic and hereditary conditions as standard. So you can focus on your pet's care!

LifeLock

LifeLock helps you stay informed about the latest identity theft concerns and looks for use of your personal information, and with propriety technology, alerts you to a wide range of potential threats to your identify.

Increased Health Savings Account Contribution Limits

For 2019, the Health Savings Account (HSA) contribution limit for those who elect single coverage in the HDHP is \$3,500 (increased from \$3,450 in 2018). The limit for those who elect family coverage in the HDHP is \$7,000 (increased from \$6,900 in 2018). If you are age 55 or older you may contribute an additional \$1,000. As always, these limits are determined by the IRS and any unused amount at the end of the plan year rolls over to the next year. Visit page 11 for more information on Health Savings Accounts.

Increased Contribution Limits for Flexible Spending Accounts

For 2019, the Healthcare Flexible Spending Account (FSA) and Limited Purpose Flexible Spending Account (LPFSA) annual contribution limit will be \$2,700 (increased from \$2,600 in 2018). As always, any unused amount for a plan year will be forfeited if not used to pay for eligible expenses during the plan year. Read page 13 for more information about Flexible Spending Accounts.

Healthcare Benefits

Medical Plan

Enrollment in the medical plan includes medical and prescription coverage. The medical plan is administered by Kaiser Permanente.



ELIGIBILITY AND CHANGE OF STATUS:

Full-time employees working 30 or more hours per weeks are eligible to participate in the medical plan. Due to IRS regulations, once you have made you benefits elections for this plan year, you may not change your elections until the next Open Enrollment period. The only exception to this is if you have a qualified status change in your family or employment. Any such changes must be reported within 30 days of the event to the Human Resources Department.

Eligible dependents may include

- Your legal spouse
- Dependent child up to age 26
- Marriage or divorce

Some qualified status changes are

- Birth/adoption of a child
- Loss of other coverage
- Change in work status

Medical Plan Highlights – What You Pay

	HMO	HMO-HDHP	PPO
Benefits	In-Network*	In-Network*	In-Network
Calendar Year Deductible Type	Per Person	Per Person	Per Person
Individual/Family	\$1,000/\$3,000	\$3,000/\$6,000	\$1,000/\$3,000
Coinsurance	Plan pays 70% You Pay 30%	N/A	Plan pays 80% You Pay 20%
Calendar Year Out-of-Pocket Type	Per Person	Per Person	Per Person
Individual/Family	\$2,500/\$5,000	\$3,000/\$6,000	\$3,000/\$6,000

**Out-of-Pocket Max Do NOT Include: Premiums, balanced-billed charges, health care this plan doesn't cover; (certain other services may not apply to the out-of-pocket maximum)*

Find the Right Doctor for You

Kaiser Permanente makes it easy to find the doctor who's right for you – and you're free to change at any time, for any reason. Having a good relationship is important because your personal doctor is your biggest health advocate and works closely with you to make decisions about your health. Visit

www.kp.org/chooseyourdoctor to view physician biographies, education, specialties and more.

Your Member ID Card

Your Kaiser Permanente member ID card identifies you as a member and contains your unique health record number. Each family member is issued a member ID card. Please carry your member ID card with you at all times and present your card at each appointment. When you receive your card, check it for accuracy and report any errors on the card immediately to Member Services.

Online Tools to Help You Live Well

With the online wellness programs, you'll get advice, encouragement, and tools to help you create positive changes in your life. The complimentary programs include:

- Lose weight
- Eat healthier
- Quit smoking
- Reduce stress
- Manage ongoing conditions such as diabetes or depression

Mobile App

- View most lab and test results
- Refill most prescriptions
- Email your doctor with non-urgent questions
- Schedule and cancel appointments
- Print vaccination records for schools, sports, and camp
- Check your plan's benefits, view claims, or estimate costs
- Pay your medical bills



Financial Services

Medical Financial Counseling Services

If you have questions about costs related to care you receive at a Kaiser Permanente medical office, you can speak with a medical financial counselor. They offer free medical financial advice, price estimates for services and procedures, and payment plan options. Simply visit www.kp.org/costestimate. You can also call: Denver/Boulder: **303-338-3025**



For information on your costs, claims summaries, and out-of-pocket expenses, log on to www.kp.org for your personalized account information.

Pay for Services

Paying your Kaiser Permanente medical bills is easy. Make payments at any medical office, or view and manage the entire payment process right from the website. The easy-to-use bill payment feature allows you to securely make payments online at no extra charge. Visit www.kp.org/paymedicalbills to learn more.

Preventative Care

Preventative care is key to keeping you healthy and catching health issues before they become serious. When you register at kp.org, you'll get automatic reminders when you're due for a screening. Many preventative visits are covered at no cost to you, once per benefit year when indicated. These include:

- Bone mineral density tests
- Cholesterol tests
- Fasting blood sugar test for type 2 diabetes
- Hemoglobin A1C testing
- Mammography screening for breast cancer
- Pap, and when indicated, HPV testing
- Prescription statins
- Prostate blood test
- Routine childhood immunizations
- Screening for select sexually transmitted diseases
- Stool test for colon cancer screening
- Tuberculosis skin test

Pharmacy

Clinical pharmacists and specialists work with your doctors and health care team to help with disease management, transitioning your prescriptions to Kaiser Permanente, and medication education.

Filling Prescriptions

- By mail – You can order prescriptions through the mail order pharmacy with no shipping costs at www.kp.org/rxrefill or by calling the 24-hour automated phone line at 1-866-938-0077. It takes 7-10 days to process and ship the order, but most orders are delivered much sooner.

- By phone – Each medical office has a 24-hour refill phone number
- Online – Order refills online at www.kp.org/rxrefill to request pick-up at a medical office of your choice.
- Text alerts – Ask the pharmacy to send you alerts when your prescription is ready for pick up, or sign up on the pharmacy center on www.kp.org
- Transition prescriptions – Transition current prescriptions to Kaiser Permanente by logging on to www.kp.org/newmember and clicking “Transition prescriptions”

Pharmacy Contacts:

Clinical Pharmacy Call Center

303-338-4503/1-8866-244-4119

Monday through Friday 8:00 am to 6:00 pm

Automated Mail Order Refill Service

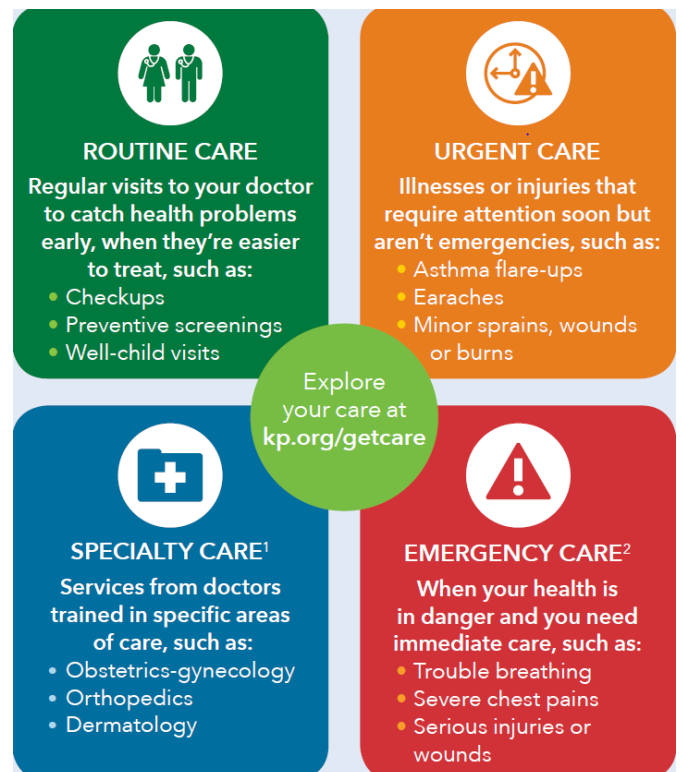
1-866-938-0077

24 hours a day, 7 days a week

Mail Order Pharmacy

1-866-523-6059

Monday through Friday 8:00 am to 6:00 pm



Vision and Eye Care

Get the eye care you need to stay healthy. Check your Evidence of Coverage or Membership Agreement to see if vision and eye care services, including eye exams and glasses/contacts are covered in your plan or are available on a fee-for-service basis.



Behavioral Health

Behavioral health services are provided to children, adolescents, families, adults and seniors. Services include: counseling for chemical dependency, eating disorders, geriatric psychiatry, and behavioral health. Call 303-471-7700, Monday through Friday 8:30 am to 5:00 pm. No referral is needed.

Complimentary Care

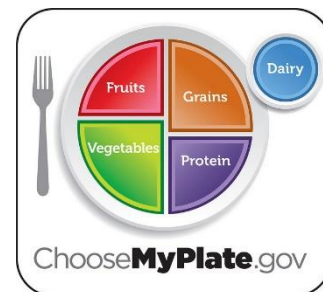
Supportive Care Services

Coping with a serious illness is difficult and often a challenging time for patients and their loved ones. The Supportive Care Team can guide you and provide assistance so you're comfortable and confident in your care – at any age or stage of serious illness. Our team of physicians, nurses, social workers, and other caregivers are here to help you and those close to you:

- Clarify goals and choices of treatment
- Address fears and concerns
- Manage difficult symptoms
- Understand additional programs and resources available to you, including information on advance care planning

Nutrition Services

Do you have ongoing health conditions that may be improved with better nutrition? If so, visit www.kphealthyme.com to find valuable nutrition education and counseling resources.



Support for Ongoing Conditions

If you have a condition such as diabetes, asthma, or COPD you're automatically enrolled in a disease management program for personal coaching and support when you see a Kaiser Permanente Physician. With a well-rounded approach, backed by proven best practices and advanced technology, we'll help you get the care you need to continue living life to the fullest.

Kaiser Permanente doctors, nurses, and other specialists are connected to each other – and to you – through your electronic health record, so they know important things about you and your health, like when you're due for a screening and what medications you're taking.

Understanding a High Deductible Health Plan (HDHP) & Health Savings Account (HSA)

The HDHP and HSA work together to help you manage your health care expenses, while also offering you the opportunity to save money on a tax-free basis.

The HDHP provides you with lower insurance premiums, coverage for preventative care at limited costs and protects you against excessive out-of-pocket expenses in the event of an unexpected health condition or emergency.

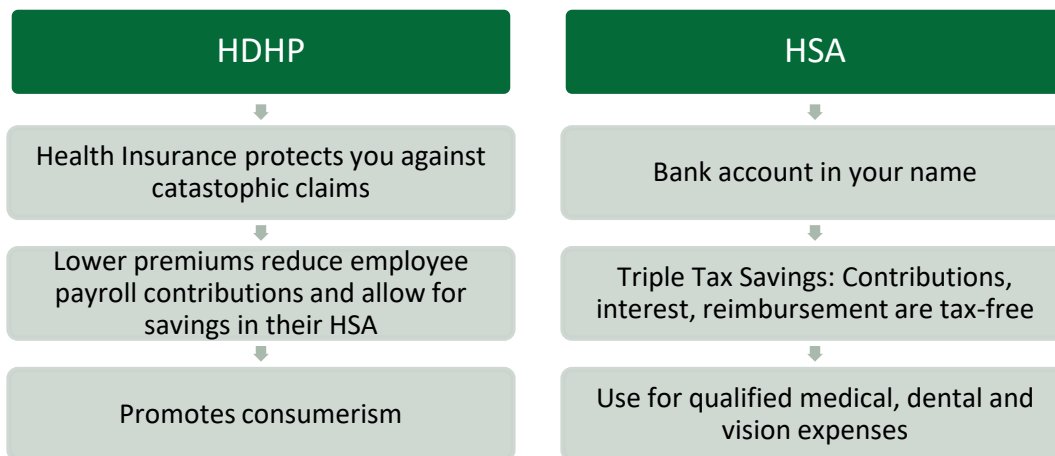
The HSA is a tax-advantage bank account which can be opened if you are enrolled in a qualified HDHP and meet all other IRS regulated eligibility criteria. Deposits can be made on a tax-free basis and the money you deposit has a tax-advantage growth opportunity. HSA funds can be used to pay for qualified out-of-pocket medical expenses, as well as qualified dental and vision expenses. You can even pay some insurance premiums, such as long-term care and COBRA premiums with HSA funds. If you do not use the funds in your HSA, the money is yours to keep and rolls forward from year to year. HSAs are not subject to the “use it or lose it” rule.

HSAs are designed to provide eligible individuals with triple federal tax benefits:

- HSA contributions are tax-free
- Interest and investment earning accrued in your HSA are not taxable
- Amounts withdrawn from your HSA for qualified expenses are tax-free

HSAs have flexibility

- Open the account at any time
- Start and stop contributions
- Increase or decrease the amount you contribute up to the federal limit



Health Savings Account (HSA)



WHO IS ELIGIBLE TO OPEN AND CONTRIBUTE TO AN HSA?

You must:

- Be enrolled in a qualified HDHP
- Not be enrolled in any other medical insurance, except what's permitted by the IRS
- Not be enrolled in Medicare or receiving VA benefits
- Not be claimed as a dependent on another individual's tax return
- Not be eligible for Health Reimbursement Account (HRA)
- Not be enrolled in a Standard Flexible Spending Account (FSA); additionally your spouse may not be enrolled in a Standard FSA

	Individual	Family
2019 Federal Contribution Limits	\$3,500	\$7,000
Catch-up Contributions (Age 55 and older)	\$1,000	

Helpful HSA Information

How do I make contribution into my HSA?

Contact your Human Resources Department for the options available to you. Typically contributions can be made throughout the year through a pre-tax payroll deferral, or in a lump sum. If you do make a contribution in a lump sum and do not remain enrolled in a HDHP, you will need to withdraw any excess contributions to avoid paying tax and penalties.

What if I exceed the maximum contribution amount?

Excess contributions are subject to income taxes and an additional penalty tax. Regardless of the contribution source, you're responsible for making sure you don't exceed the maximum amount allowed by the IRS.

What are qualified expenses I can use my HSA funds for?

You can use your HSA funds for qualified expenses as determined by the IRS. Some examples include: deductibles and co-insurance expenses for medical and dental care, prescriptions, vision care, LASIK eye surgery, etc. You can also use HSA funds for some insurance premiums, such as long-term care and COBRA premiums. You can find detailed information about qualified expenses in Section 213(d) of the Internal Revenue Code and IRS Publication 502.

Can I use my HSA to pay for non-health care related expenses?

Yes. You may withdraw money for your HSA for items other than qualified expenses, but the amount you withdraw will be subject to income tax and an additional 20% tax penalty will be applicable.

What happens if I change health plans?

All the money in your HSA is yours to keep. If you are no longer enrolled in a qualified HDHP you will not be able to make any more contributions to the account, but you can still use the money that has accumulated to pay for qualified expenses. If you enrolled in a HDHP midyear and contributed the IRS contribution limit amount, you may be subject to additional taxes and penalties if you do not maintain your HSA eligibility throughout the following tax year.

What happens if I leave my current employer?

The HSA will remain open and available to use for qualified expenses. However, you can only continue to contribute to the account if you are enrolled in an HDHP. You are responsible for any applicable fees should you maintain the account.

What happens to my HSA when I die?

The HSA will automatically transfer to your beneficiary. If that person is your surviving spouse, they will not be subject to applicable taxes. If the HSA is transferred to a designated beneficiary other than your spouse, the funds are considered taxable income.

Are there any forms I need to file with my taxes?

Yes. The IRS requires that you complete the Form 8889 with your tax return. The HSA bank that administers your account will send you an end of year statement with all required information.

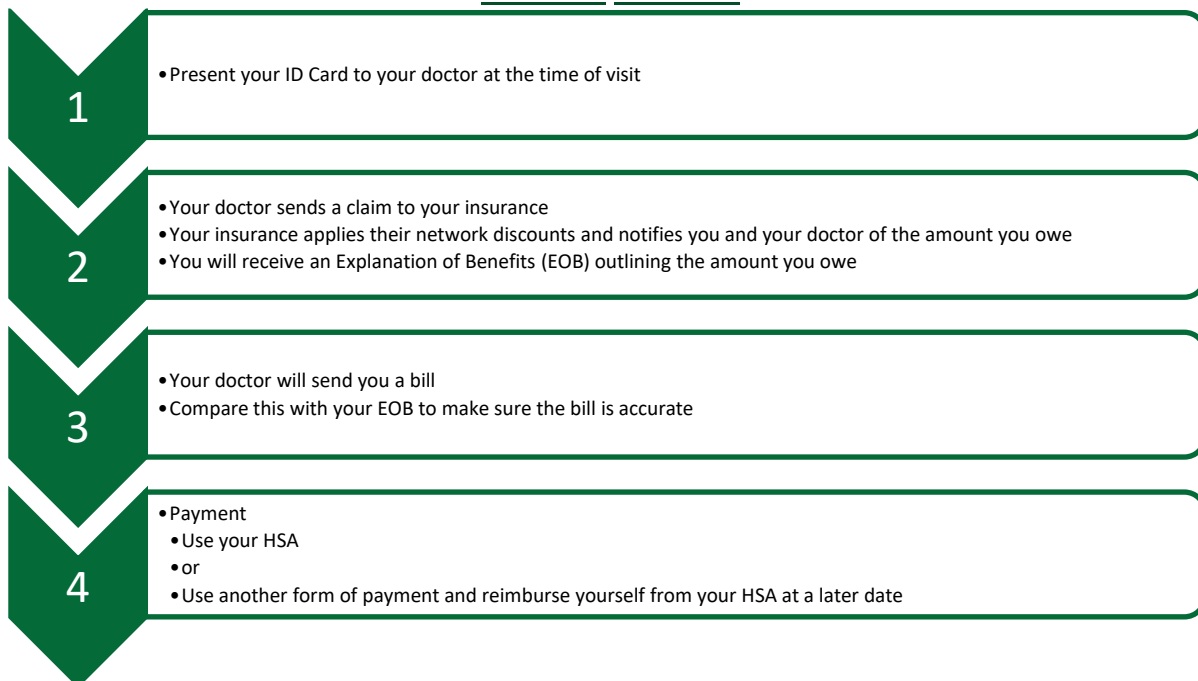
Who will be the “bookkeeper” for my HSA?

It is your responsibility to keep track of your deposits and expenditures and keep all of your receipts in case of an IRS audit.

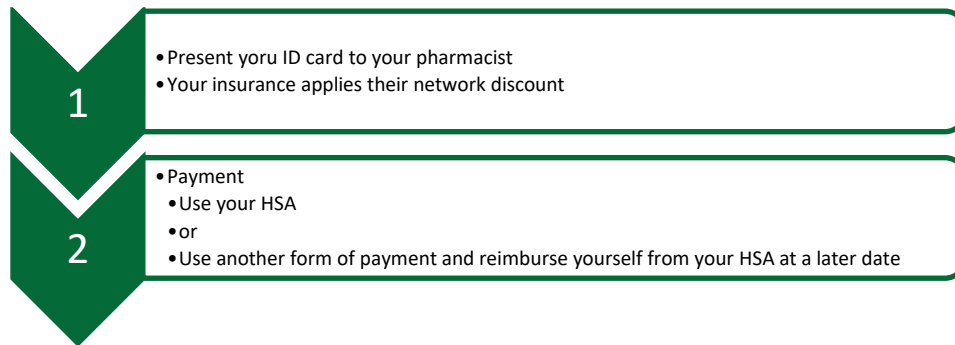
How do I use my HSA?

Follow the step-by-step instructions:

Medical Services



RX Services



Flexible Spending Accounts (FSA)

Rio Grande Co. offers two flexible spending accounts (FSAs) to full-time employees: a Health Care FSA for reimbursement of out-of-pocket health care expenses for you and your eligible dependents, and a Dependent Care FSA for reimbursement of qualifying child care expenses such as daycare. Your participation is optional and you may contribute to one account or both.

An FSA allows you to set aside money from your paycheck on a pretax basis, to be used for eligible medical or child care expenses. By spending pre-tax dollars, you reduce your taxable income by the amount you contribute and therefore pay less federal income and Social Security taxes for the year.

If you choose to enroll in an FSA, you authorize Rio Grande Co. to deduct a specific amount of pretax dollars from your paycheck in equal increments for each pay period during the calendar year. The amount deducted from your pay is automatically credited to your Health Care FSA and/or Dependent Care FSA.

When you incur an eligible health care or dependent care expense, you pay for the expense then submit a claim for reimbursement from your FSA. You receive tax-free money from your account to reimburse yourself for your expenses. Participants in the Health Care FSA will also receive a set of debit cards to directly access funds from their account.

You may enroll in an FSA while submitting your benefit elections, by the first of the month following one full month of full-time employment. Once enrolled, your contributions cannot be changed or canceled unless you experience a qualifying event. If desired, you must enroll or re-enroll in an FSA annually during the open enrollment period; enrollment for the next plan year is not automatic.

Health Care FSA

- Standard FSA: Eligible employees, not enrolled in the HDHP, may participate in the standard FSA. You may contribute to this account on a pre-tax basis to pay for qualified medical, dental and vision expenses.

- **Limited Purpose FSA (LPFSA):** If you are enrolled in the HDHP with an HSA you may participate in the LPFSA. You may contribute to this account on a pre-tax basis to pay for qualified dental and vision expenses.

Dependent Care FSA

The Dependent care FSA allows you to set aside money from your paycheck on a pre-tax basis for eligible dependent daycare or elder care expenses. The Dependent Care FSA is *not* to be used for reimbursement of dependent medical expenses.

Eligible dependents include any child under age 13 or a dependent who is age 13 or older and residing in your home who is physically or mentally unable to care for themselves.

Both the health care and dependent care FSA plans are subject to the “use it or lose it” rule, which means unused funds at the end of the plan year do not roll forward and are forfeited. You may change your election during the plan year without a qualifying event. Anything over that amount is subject to the “use it or lose it” rule.

Reimbursing Expenses


To be reimbursed from an FSA, eligible expenses must be incurred during the year for which it is set up. For example, to be reimbursed by your FSAs for 2019, eligible expenses must be incurred from January 1, 2019 through December 31, 2019. To receive a reimbursement from an FSA for 2019, you must submit claims by May 31, 2020.

	Health Care FSA	Dependent Care FSA
Calendar Year Maximum Elections	\$2,700	\$5,000 per household if married, filing jointly or head of household \$2,500 if married, filing separately

FSA
Use a Visa debit card to access FSA funds to pay for eligible healthcare expenses including:

- ✓ Copays/deductibles
- ✓ Prescriptions
- ✓ Dental services: cleanings, orthodontia, dentures
- ✓ Physical exams
- ✓ Vision care: exams, new glasses, laser eye surgery
- ✓ Medical equipment: blood pressure monitor, thermometers
- ✓ Chiropractor or acupuncturist
- ✓ Hearing exams and aids
- ✓ Smoking cessation programs

HSA
Securely access HSA funds on a Visa debit card and use to pay for medical expenses now or continue to contribute and save money for later – either to cover large unexpected or expected eligible healthcare expenses, or save for retirement³



Comparing Savings & Spending Accounts



Health Savings Account	Flexible Savings Account
<p>Remaining funds at the end of the year will automatically carry over to the following year. You may use your Health Savings Account to save for medical expenses in the future</p>	<p>Use-it or Lose-it</p>
<p>Payment can be made now on eligible expenses or you can reimburse yourself later when funds are available</p> <p>Note: If you reimburse yourself, it is beneficial for you to save the receipts from your transactions</p>	<p>For healthcare and limited purposes FSAs, the full plan year contribution amount is available from January 1st</p> <p>For the dependent care FSA, payments can be made only with a then-existing balance</p>
<p>Funding level can be changed at any time during the year</p>	<p>Funding level is set during Open Enrollment and you cannot change your FSA election until next year (unless you have a qualifying life event)</p>

Comparing Savings & Spending Accounts

Key Features of Each Plan	HSA	Healthcare FSA	Limited Purpose FSA	Dependent Care FSA
Eligible Plan	HDHP	PPO or HMO	HDHP	All or waived medical coverage
Funding Maximums (Determined by the IRS)	<ul style="list-style-type: none"> \$3,500 individual \$7,000 individual +1/family Rio Grande Co. makes a monthly contribution Rio Grande Co. contribution and your contribution both count toward the annual limit 	You fund with before tax dollars, up to a maximum of \$2,700 per plan year	You fund with before tax dollars, up to a maximum of \$2,650 per plan year	You fund with before tax dollars, up to a maximum of: <ul style="list-style-type: none"> \$5,000 if you and your spouse both work and file taxes together @,500 if you and your spouse both work and file taxes separately
Making Changes	You can enroll in, increase or decrease your contribution at any time during the year	You may make a change during the year only if you have a qualified life event		
Funds Availability	Funds cannot be used until contributions are actually made, but you can reimburse yourself at a later date once funds are available	Entire amount elected for the plan year is available for use on January 1, regardless of when the funds are withheld from your pay		Funds cannot be used until funds are withheld from your pay
Covered Expenses	<ul style="list-style-type: none"> Eligible healthcare, dental and vision expenses Withdrawals are taxable and subject to a 20% penalty if used for non-eligible expenses 	Healthcare FSA: Can be used for all eligible healthcare expenses	Limited Purpose FSA: Can only be used for eligible dental and vision expenses	Eligible expenses incurred during the year for qualified dependents, including: <ul style="list-style-type: none"> Children younger than age 13 (older if disabled) Your spouse (if they are not able to care for themselves) Your parents, if they live with you and are mentally or physically incapable of caring for themselves
Portability	You can take your HSA with you if you leave the Company or change plans. At age 65, you can use the funds for non-qualified medical expenses with no penalties (subject to normal income tax)	You cannot take your FSA with you if you leave the Company		You cannot take your FSA with you if you leave the Company
Carryover	Any unused funds in the account at the end of the year will carry over to the next year	Any unused funds at the year will be forfeited		

Dental

The dental plan offered provides members with in-network and out-of-network benefits. Members will incur the least amount of out-of-pocket expenses by using a network dentist because of their discounted fee arrangement. When using providers out-of-network, you will be responsible and billed for charges above the carriers reimbursement allowance.



Alpha Dental Plan

Benefits	Substantial pre-negotiated discounts with all plan providers. Not Insurance
Calendar Year Benefit Maximum	No Maximum
Calendar Year Deductible	No Deductible
Type 1: Preventative Care (limits/frequency may apply)	Save up to 100%
Type 2: Basic Care	Save up to 80%
Type 3: Major Care	Save up to 60%
Orthodontia (children to age 19)	Save up to 23% of the normal full fee



UNUM Dental

Benefits	In-Network DenteMax	Non-Participating
Calendar Year Benefit Maximum	\$2,000 per person	
Calendar Year Deductible	\$50 per Individual to a maximum of \$150 per Family	
Type 1: Preventative Care (limits/frequency may apply)	100%	Deductible then 10%
Type 2: Basic Care	Deductible then 20%	Deductible then 20%
Type 3: Major Care	Deductible then 50%	Deductible then 50%
Orthodontia (children to age 19)	50% up to \$1,000 lifetime max, up to age 19, no deductible applies	
Carryover Benefit	Included*	Not Included

***UNUM Carryover Benefit** (not available on the Beta Health Dental Plan)

Each benefit year a member must have:

- One Cleaning,
- One Regular Exam, **and**
- Total Dental Claims paid during the year below the threshold limit.

If all three criteria above are met, a portion of the annual maximum will carry over to the next year.

Base Plan Annual Maximum	Threshold Limit	Carryover Amount	Carryover Account Maximum	Total Potential Annual Maximum
\$2,000	\$800	\$400	\$1,500	\$3,500

Other specifications:

- Each covered family member receives their own carryover benefit
- Group carryover benefit rider must be in effect for one benefit year before any members can utilize carryover benefits.
- A member must be on the plan for a minimum of 4 months before accruing carryover benefits.
- Carryover benefit cannot be used towards orthodontia
- A member's carryover account will be eliminated and the accrued carryover benefits loss if the insured has a break in coverage for any length of time or any reason



Vision

Vision is offered through UNUM. Your out-of-pocket expenses will be lower if you utilize an in-network provider. Network provided by EyeMed.

Vision			
EyeMed			N/A
Benefits	Frequency	In-Network	Out-of-Network
Exam	12 Months	\$10 Copay	Out-of-Network benefits are available; you must submit a claim for reimbursement
Lenses Single/Bifocal/Trifocal	12 Months	\$25 Copay	
Frames	24 Months	\$130 Allowance	
Contact lens (in lieu of contacts)	12 Month	\$130 Allowance	



Employee Assistance Program (EAP)



Help, when you need it most

With your Employee Assistance Program and Work/Life Balance services, confidential assistance is as close as your phone or computer.



Always by your side

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver™
— helps you save on medical bills



Who is covered?

Unum's EAP services are available to all eligible employees, their spouses or domestic partners, dependent children, parents and parents-in-law.



Employee Assistance Program — Work/Life Balance

Toll-free 24/7 access:

- 1-800-854-1446
(multi-lingual)
- www.unum.com/lifebalance



Turn to us, when you don't know where to turn.

Employee Assistance Program (EAP)

Your EAP is designed to help you lead a happier and more productive life at home and at work. Call for confidential access to a Licensed Professional Counselor™ who can help you.

A Licensed Professional Counselor can help you with:

- Stress, depression, anxiety
- Family and parenting problems
- Relationship issues, divorce
- Anger, grief and loss
- Job stress, work conflicts
- And more

Work/Life Balance

You can also reach out to a specialist for help with balancing work and life issues. Just call and one of our Work/Life Specialists can answer your questions and help you find resources in your community.

Ask our Work/Life Specialists about:

- Child care
- Financial services, debt management, credit report issues
- Elder care
- Even reducing your medical/dental bills!
- Legal questions
- And more
- Identity theft

Help is easy to access:

- Online/phone support: Unlimited, confidential, 24/7.
- In-person: You can get up to 3 visits available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support.

Life Insurance and AD&D

Life and AD&D

All eligible employees are provided basic life and accidental death and dismemberment (AD&D) insurance and your employer pays the full cost of the premium. Please see Human Resources to update your beneficiary designation.

Life and AD&D	
Employee Benefit	\$15,000

Voluntary Life and AD&D

Eligible employees may purchase additional life and AD&D insurance on a voluntary basis. Employees must purchase voluntary life and AD&D for themselves in order to purchase for their spouse or child(ren). **During this open enrollment, you are eligible up to the guarantee issue amount. Anything over the guarantee issue will require medical underwriting. Any amounts currently in force with Lincoln Financial that are over the guarantee issue amount will be Grandfathered over to UNUM and no medical underwriting will be required for that amount. If you elect more than the Grandfathered amount medical underwriting would be required.**

Voluntary Life and AD&D	
Employee Benefit	Increments of \$10,000 up to 5x annual salary to a maximum of \$500,000 Guarantee Issue: \$130,00
Spouse Benefit	Increments of \$5,000 up to \$500,000 or 100% of employee amount Guarantee Issue: \$25,000
Child(ren) Benefit	\$10,000 (6 months to age 26) Live Birth to 6 months: \$1,000
Evidence of Insurability (EOI)	Any purchase or increase in benefits, which does not take place within 31 days of employee's or dependent's original eligibility effective date is subject to approval from the insurance carrier before benefits are effective.

Voluntary Life and AD&D

Benefit Amount	Voluntary Life and AD&D Monthly Premium							
	<29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
\$10,000.00	\$1.30	\$1.40	\$2.00	\$2.60	\$4.00	\$5.80	\$8.50	\$13.70
\$20,000.00	\$2.60	\$2.80	\$4.00	\$5.20	\$8.00	\$11.60	\$17.00	\$27.40
\$30,000.00	\$3.90	\$4.20	\$6.00	\$7.80	\$12.00	\$17.40	\$25.50	\$41.10
\$40,000.00	\$5.20	\$5.60	\$8.00	\$10.40	\$16.00	\$23.20	\$34.00	\$54.80
\$50,000.00	\$6.50	\$7.00	\$10.00	\$13.00	\$20.00	\$29.00	\$42.50	\$68.50
\$60,000.00	\$7.80	\$8.40	\$12.00	\$15.60	\$24.00	\$34.80	\$51.00	\$82.20
\$70,000.00	\$9.10	\$9.80	\$14.00	\$18.20	\$28.00	\$40.60	\$59.50	\$95.90
\$80,000.00	\$10.40	\$11.20	\$16.00	\$20.80	\$32.00	\$46.40	\$68.00	\$109.60
\$90,000.00	\$11.70	\$12.60	\$18.00	\$23.40	\$36.00	\$52.20	\$76.50	\$123.30
\$100,000.00	\$13.00	\$14.00	\$20.00	\$26.00	\$40.00	\$58.00	\$85.00	\$137.00
\$110,000.00	\$14.30	\$15.40	\$22.00	\$28.60	\$44.00	\$63.80	\$93.50	\$150.70
\$120,000.00	\$15.60	\$16.80	\$24.00	\$31.20	\$48.00	\$69.60	\$102.00	\$164.40
\$130,000.00	\$16.90	\$18.20	\$26.00	\$33.80	\$52.00	\$75.40	\$110.50	\$178.10
<i>Note: See contract for more details regarding applicable reduction of benefits upon reaching age 65</i>								
Benefit Amount (per child)	Child(ren) Voluntary Life and AD&D Monthly Premium							
\$10,000	\$2.30							

Short Term Disability & Voluntary Long Term Disability

All eligible non-exempt employees are provided with the opportunity to enroll in short term disability benefits and your employer pays the full cost of the premium. Voluntary Long Term Disability is paid for by the employee.

	SHORT TERM DISABILITY	VOLUNTARY LONG TERM DISABILITY
Benefit	60% of salary to a maximum of \$750 per week	60% of salary to a maximum of \$10,000 per month
Benefit Begins	On the 8 th days of Accident or Illness	After 90 Days
Benefit Duration	Up to 12 Weeks	Up to Social Security Normal Retirement Age
Pre-Existing	Not Applicable	3 Months Prior / 12 Months Post

How to Calculate your Voluntary Long Term Disability Monthly Premium
Annual Salary / 12 = Monthly Earnings x \$.00678 = Monthly Premium
Example: \$40,000 / 12 = \$3,333.33 x .00678 = \$22.60

Accident Insurance

Eligible employees have the option to purchase Accident Insurance. This benefit provides a lump sum benefit based on the type of injury (or covered accident) you sustain or the type of treatment you need. Please review the plan summary for more details and pricing. Examples of a few paid benefits include:

<ul style="list-style-type: none"> • Initial Physician Office Visit/Emergency Room Visit \$50/\$150 • Appliance \$25 up to \$350 • Ambulance/Air Ambulance \$150/\$600 • Hospital Admission \$1,000 • Buy up Health Assessment option offers a \$50 reimbursement, one time per year, per insured member, when completing one of the tests specified in the contract. Some examples include but are not limited to: Colonoscopy, Mammography, Pap Smear, EKG, PSA, HDL/LDL, fasting blood glucose and bone density screening. <p><i>This benefit also includes TravelConnect at no additional cost.</i></p>	
Monthly Premiums without Health Assessment: Employee Only: \$3.95 Employee + Spouse: \$5.74 Employee + Child(ren): \$6.77 Family: \$9.17	Monthly Premiums with Health Assessment: Employee Only: \$6.16 Employee + Spouse: \$10.14 Employee + Child(ren): \$9.53 Family: \$14.24

Rio Grande Co. Profit Sharing Plan



Rio Grande Co. Profit Sharing Plan



All eligible employees participate in the Rio Grande Co. Profit Sharing Plan, which is comprised of two pieces.

Profit Sharing

Rio Grande Co. at its discretion may elect annually to share profits with all eligible employees by making a financial contribution to each eligible employee's Profit Sharing account. Profit Sharing contributions are calculated by taking the Profit Sharing amount (in percentages) times the eligible employee's gross compensation for the year. For example, if an employee made \$35,000 gross wages in the calendar year and Profit Sharing is 5% then the employee would receive a \$1,750 company contribution into their Profit Sharing account. Company contributions are typically funded no later than September of the following year.

401(k)

The Profit Sharing Plan also offers a 401(k) component that encourages you to accumulate savings for retirement through convenient pretax and Roth (after-tax) payroll deductions. Rio Grande Co. at its discretion may provide 401(k) matching contributions of 50% on up to 6% of your gross wages. Company matching funds are typically funded no later than September of the following year.

As a full or part-time employee, you are eligible to participate in the Profit Sharing Plan when you have completed **90 days of service and are age 18**. The Profit sharing Plan offers a wide array of investment funds from which to choose, including stock, bonds and blended (target date) funds.

For additional eligibility requirements please request a copy of the Profit Sharing Plan documents.

	401(k) Plan	Profit Sharing Plan
Eligibility	After 3 months of continuous service	After 1 year of continuous service
Annual Maximum Employee Contribution	Up to \$19,000 < 50 years of age Up to \$25,000 > 50 years of age	N/A
Discretionary Company Match	\$0.50 per \$1.00 up to 6% of your income	Fully Company Funded
Vesting Cycle	6 years graded vesting	6 years graded vesting

Additional Benefits & Discounts

Voluntary Supplemental & Discounted Benefits

www.LifeCare.com



All eligible employees have the option to purchase supplemental insurance and leverage group discounts. Independent special offers are available, such as:

- | | | |
|------------------------|----------------------------|--------------------|
| Child Care | Car Buying | Computers |
| Education | Automotive Services | Cell Phones |
| Senior Care | Financial & Legal Products | Theme Park Tickets |
| Gyms | Travel | Movie Tickets |
| Nutrition Plans | Car Rental | Clothing |
| Furniture & Appliances | Hotels | Flowers |
| Pet Insurance | Restaurants | Grocery Coupon |

Petplan

Employees have the option to purchase Pet insurance and receive a 10% employee discount. This discount is not available in TN and FL and limited to 5% online discount in HI. Cats get sniffles. Dogs eat rocks. If your dog or cat gets sick or injured, Petplan helps pay those unexpected vet bills. Once enrolled, just take your pet to a licensed vet in the U.S. or Canada and submit a one-page, pre-filled claim form (or you can send it from your smartphone using the Petplan App). They will send your reimbursement directly to you in just a few days. Coverage includes treatment of all accidents and illnesses and you have a choice of deductible and reimbursement. This benefit is a direct bill and not payroll deducted. You can go directly to www.petplanbenefits.com to enroll. Enter Rio Grande Co so you can get the 10% employee discount. You can also call the 24-hour call center and mention Rio Grande Co and the promo code (**please ask HR for this code**) to receive the 10% employee discount.

policy benefits	
vet expenses	Choice of \$2,500 to unlimited
coverage	Treatment of all accidents and illnesses*
deductible	Choice of \$100 to \$2,500
reimbursement	Choice of 70%, 80% or 90%


Verizon Wireless

Rio Grande Co. has partnered up with Verizon Wireless to offer employees an 18% discount on eligible plans and services. Please see the Verizon Wireless representative at the annual Benefits Fair or contact Human Resources for additional information.

Sam's Club Membership



Sign up for a Sam's Club Membership at the annual Benefits Fair to receive additional savings on items throughout the store.

 Satisfaction guaranteed or your money back

<p>Best Value</p> <p>Plus membership</p> <p>\$100</p> <p>per year</p> <ul style="list-style-type: none">✓ Earn Cash Rewards*✓ Free shipping every day <p>Select Plus</p>	<p>Club membership</p> <p>\$45</p> <p>per year</p> <ul style="list-style-type: none">✓ Exclusive prices on quality brands✓ Complimentary household membership <p>Select Club</p>
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529 Plan for College Savings

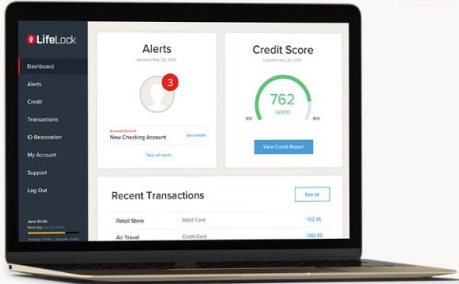
A 529 plan is a tax-advantaged savings plan designed to encourage saving for future education costs. 529 plans, legally known as “qualified tuition plans,” are sponsored by states, state agencies, or educational institutions and are authorized by Section 529 of the Internal Revenue Code.

There are two types of 529 plans: prepaid tuition plans and education savings plans. All fifty states and the District of Columbia sponsor at least one type of 529 plan. In addition, a group of private colleges and universities sponsor a prepaid tuition plan. Please visit <https://www.sec.gov/reportspubs/investor-publications/investorpubsintro529htm.html> for more information about the 529 Plan.

LifeLock

In today's world of online shopping, using public Wi-Fi and giving out Social Security numbers as a form of ID, our personal information can be exposed. Unfortunately, free credit monitoring simply alerts you to credit issues. LifeLock not only has proprietary technology to detect a variety of identity threats, if you do have an identity theft problem, LifeLock's US based team of specialist can help fix it at 1-800-416-0599 or visit www.lifelock.com

Why LifeLock is a leader in identity theft protection.




Alert screen modified for demonstration purposes.

- DETECT & ALERT**
Our proprietary technology scans millions of transactions every second for threats to your identity.†
- RESTORE**
A dedicated U.S.-based Identity Restoration Specialist will work to resolve your identity theft problem.
- STOLEN FUNDS REIMBURSEMENT**
We'll reimburse up to \$25,000 to \$1 million to replace stolen funds depending on your level of your plan.‡

Travel Assistance

For all employees that **enroll in Voluntary Long Term Disability** you will be eligible for Travel Assistance provided by UNUM. Whenever you travel 100 miles or more from home – to another country or just another city – be sure to pack your worldwide emergency travel assistance phone number. Travel assistance speaks your language, helping you locate hospitals, embassies and other “unexpected” travel destinations. Add the number to your cell phone contacts, so it's always close at hand. Just one phone call connects you and your family to medical and important services 24 hours a day.



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Reference Number:
01-AA-UN-762490

With the Assist America Mobile App, you can:

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- Access pre-trip information and country guides
- Search for local pharmacies (U.S. only)
- Download a membership card
- View a list of services
- Search for the nearest U.S. embassy
- Read Assist Alerts

Time Off

Holidays

Rio Grande Co. observes the following holidays as days off with pay:

- New Year’s Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

You must work the day before and the day after, unless on vacation, to be paid. When a holiday falls on a Saturday, it is observed on the preceding Friday. When the holiday falls on a Sunday, it is observed the following Monday. Holiday time is counted as hours worked in the computation of overtime. Full time employees receive eight hours of holiday pay at their regular rate of pay.

Vacation

All vacation must be scheduled in advance with your supervisor’s approval. Vacations are scheduled in a manner that minimizes interruptions to company operations. Upon termination, employees receive pay for earned unused vacation. See employee handbook for further details regarding vacation time off policy. Full time employees currently earn paid vacation after completing continuous service as described below:

Vacation Granted per Year	Length of Service
1 week	After 6 months of continuous employment
2 weeks	After 1 through 7 years of continuous employment
3 weeks	After 7 or more years of continuous employment

Bereavement

Full time employees are currently eligible for paid leave of up to three days to attend the funeral of an immediate family member. Immediate family member is defined as your spouse, parents, children, sisters, brothers, grandparents, grandchildren, and your mother and father-in-law.

Jury Duty

Rio Grande Co. recognizes jury duty as a civic responsibility of everyone. When summoned for jury duty, you are granted leave to perform your duty as a juror. If you are excused from jury duty during your regular work hours, we expect you to report to work promptly. You receive regular pay for the first three days of jury duty if you were scheduled to work and you submit a juror service certificate.