



BENEFITS GUIDE

January 1 - December 31, 2022

Your Health
Your Family
Your Life



Click to
explore your
benefit options

Welcome

Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you

Eligibility

Full-time employees who are regularly scheduled to work 30+ per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- Your legally married spouse
- Your registered domestic partner (RPD) and/or his/her children
- Your children who are your natural children, step-children, adopted children for whom you have legal custody up to the age of 26

When Coverage Begins

- **New Hires:** You will be eligible the 1st of the month following 60 days of employment. You must complete the enrollment process within 30 days of your date of eligibility.
- **Part-Time to Full-Time:** You will be eligible the 1st of the month following 60 days from the date you became full-time. You must complete the enrollment process within 30 days of your date of eligibility.
- **Open Enrollment:** Changes made during Open Enrollment are effective January 1st of the following year.

Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, RDP, or child
- Change in child custody
- Change in coverage election made by your spouse/RDP during his/her employer's Open Enrollment period
- You lose coverage under your spouse's/RDP's plan

Making Changes

To make changes to your benefit elections, you must **contact Human Resources within 31 days of the qualified life event (including newborns)**. Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next

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Enrollment

Visit www.cochr.online
You will find detailed information about the plans available and instructions for enrolling.

Medical Plan

We are proud to offer you a medical plan that provides comprehensive medical and prescription drug coverage. The plan also offer many resources and tools to help you maintain a healthy lifestyle. The following is a brief description the of plan.

United Health Care PPO

The PPO plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the united Health Care Network. There are no referrals required to see a specialist. The calendar year deductible must be met before certain services are covered.

The following is a high-level overview of the coverage available. For complete coverage details, please refer to the Summary of Benefits (SOBs)



Services		In-Network	Out of Network
Calendar Year Deductible:	Single / Family:	\$2,000 / \$4,000	\$4,000 / \$8,000
Out-of-Pocket Maximum	Single / Family:	\$6,500 / \$13,000	\$13,000 / \$26,000
Preventative Services		\$0	50% after deductible
Coinsurance	United Health Care / Member:	80% / 20%	50% / 50%
Physician Office Visits	Primary / Specialist:	\$60 / \$60	50% after deductible / 50% after deductible
	Virtual Visit:	\$0	50% after deductible
Routine Lab/X-ray		\$30	50% after deductible
Complex Diagnostic (MRI/PET)*		20% after deductible	50% after deductible
Urgent Care*		\$50	50% after deductible
Emergency Room		\$500 co-pay	\$500 co-pay
Outpatient Surgery		20% after deductible	50% after deductible
Inpatient Hospital		20% after deductible	50% after deductible
Prescription Drugs (Tier 1/Tier 2/Tier3/Tier 4)			
Pharmacy Deductible:	Individual / Family:	No Rx Deductible	No Rx Deductible
Retail Pharmacy		\$10 / \$45 / \$110 / \$500	\$10 / \$45 / \$110 / \$500

United Health 24/7 Virtual Visits

United Health Virtual Visits

When you need care — anytime, day or night — or when your primary care provider is not available, virtual visits, also known as telehealth, can be a convenient option. From treating flu and fevers to caring for migraines and allergies, you can chat with a provider 24/7.

Conditions Commonly Treated Through a Virtual Visit:

- Cold/Flu
- Fever
- Sinus Infections
- Allergies
- Bladder/Urinary Tract Infection
- Bronchitis
- Migraine/Headache
- Sore Throat
- Family Health Questions

Enroll for free at myuhc.com or on the mobile app when you are ready to see a doctor

How to use Virtual Visits:



1

Register in
2 minutes



2

Copay processed
by credit card



3

Review doctor
profiles



4

Choose a doctor and
enter pharmacy infor-
mation



5

Consultation with
board-certified doctor
within 3 minutes



6

Doctor diagnoses. If
Rx is prescribed, it is
sent to patient's pre-
ferred pharmacy



7

UHC sends conver-
sation summary to
patient



8

Claim is sent to insur-
ance or processed
by credit card

Urgent care vs Emergency Room

Urgent Care...Quickly

Urgent care centers are designed for patients whose illness or injuries don't present as life threatening, but who cannot wait until a primary care physician can treat them. Things typically treated at an urgent care facility include:

- ▶ UTI's
- ▶ Sprains
- ▶ Flu/Cold
- ▶ Sinus infection
- ▶ Pink eye
- ▶ Minor cuts/burns
- ▶ Earache
- ▶ Sore throat
- ▶ STDs
- ▶ Rashes
- ▶ Fractures
- ▶ Vomiting

Emergency Room (ER)...Now

ERs should be reserved for true emergencies. Is your life in danger or are you facing a permanent disability? Things typically treated at an ER include:

- ▶ Difficulty breathing
- ▶ Seizures
- ▶ Severe chest pain
- ▶ Broken bones
- ▶ Poisoning
- ▶ Head/eye injuries
- ▶ Loss of conscious-ness
- ▶ Uncontrolled bleeding
- ▶ Severe wounds
- ▶ Stroke

Dental and Vision Plans

We are proud to offer a PPO dental and vision plan to you and your eligible dependents.

Ameritas : This plan offers you the freedom and flexibility to use the dentist of your choice with no waiting periods. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist or doctor who participates in the Anthem network.

Dental



Key Dental Benefits	In-Network	Out-of-Network
Deductible (per plan year)		
Individual / Family	\$50 per person (max of 3 per family) Basic and major services only	\$50 per person (max of 3 per family) Basic and major services only
Benefit Maximum (per plan year); preventative, basic and major services combined		
Per Individual	\$1,500	\$1,500
Covered Services		
Preventive Services	0%	0%
Basic Services	20% after deductible	20% * after deductible
Major Services	50% after deductible	50% * after deductible
Child Orthodontia	\$1,000 lifetime maximum 50%	\$1,000 lifetime maximum 50%*

Coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying

* All non-network reimbursements are based on usual and customary charges. Balance billing may apply

Vision



Key Vision Benefits	In-Network	Out-of-Network Reimbursement
Exam (once per 12 months)	\$10 co-pay	\$10 co-pay
Standard Lenses (once per 12 months)	\$25 co-pay	\$25-\$45 allowance
Frames—Elective (once per 24 months)	\$130 allowance	\$105 allowance
Frames—Medically Necessary	Covered in full	\$210 allowance
Contacts* (once per 12 months)	\$60 allowance	No benefit

* Contacts may be chosen in-lieu of glasses to be eligible for the allowance

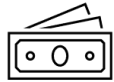
Laser Vision Correction Surgery

Glasses or contacts may not be the answer for everyone. That's why the vision plan offers further savings with discounts on refractive surgery. Pay a discounted amount per eye for LASIK Vision correction at participating facilities. For more information, please contact Ameritas directly.

Supplemental Benefits

Employee Assistance Program

The following benefit is provided by UHC and available to employees enrolled in the UHC health plan. 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. You may also get a referral for 3 no-cost visits with a behavioral health provider for those who qualify



No –cost call

When EAP is included in your health plan, The call costs nothing



Confidential

Your personal information is kept completely private



Personal Service

Whatever your specific situation specialists are there to help!

A Licensed Professional Counselor can you with:

- ▶ Stress, depression, anxiety
- ▶ Relationship issues, divorce
- ▶ Job stress, work conflicts
- ▶ Family and Parenting problems
- ▶ Anger, grief and loss
- ▶ Substance use issues
- ▶ Legal advice
- ▶ Financial advice
- ▶ And much more

Call 1-888-887-4114 to get started

401(k) Retirement Savings Plan

Make the most of your employer-sponsored retirement plan by contributing to your 401(k) account. COC Consulting teams with T. Rowe Price to offer you a wealth of guidance and the ability to meet your financial goals. COC's 401(k) plan offers various investment options.

Eligibility

You will be eligible to contribute one the first day of the month after one year of full-time employment.

Company Match

COC will match 100% of the first 3% the employee contributes and 50% of the next 2% the employee contributes for a total match of 4% with immediate vesting.

401(k) Limits

Employee Contributions

You are able to contribute between 1% and 75% of your pay in pretax deferrals; up to the 2022 contribution limit of \$20,500 if under 50 years old or \$27,000 if 50 year or older

We encourage employees to make their own contribution and investment decisions; please visit www.troweprice.com to make enroll or make changes at any time throughout your employment



T.RowePrice®
INVEST WITH CONFIDENCE

Time Off

Paid Time Off (PTO)

COC Consulting believes that employees should have opportunities to enjoy time away from work to help balance their lives. Our Paid Time Off benefit allows our employees to manage their need to cover vacation other situations that require time away from work, while recognizing their individual responsibility to manage their paid time off.

Eligibility

Full time employees will start to accrue PTO upon hire. They will be eligible to use their PTO after 90 days of employment.

Accrual

Full-time employees accrue at the rate of 3.07 hours per pay period, which is equivalent to approximately 10 days per calendar year.

Sick time

Sick time is separate from PTO and may be used by an employee to care for themselves or if an employee needs to provide care for a family member who is ill. Sick days may also be used if an employee needs time off for scheduled medical procedures

Eligibility

All employees will start to accrue sick time upon hire. They will be eligible to use their accrued sick time after 90 days of employment.

Accrual

State	Sick hours accrual rate
Arizona	1 hour per 30 hours worked (approx. 70 hours per year for full-time employee)
California	1 hour per 30 hours worked (approx. 70 hours per year for full-time employee)
Nevada	0.01923 hours per hour worked (approx. 40 hours per year for full-time employee)
Oregon	1 hour per 30 hours worked (approx. 70 hours per year for full-time employee)
Washington	1 hour per 40 hours worked (approx. 52 hours per year for full-time employee)

Holidays

Exempt Employees: the following company holidays are paid (regardless of working or not):

- New Year's Day (January 1st)
- Memorial Day (Last Monday in May)
- Independence Day (July 4th)
- Labor Day (1st Monday in September)
- Thanksgiving (4th Thursday in November)
- Family Day (Day after Thanksgiving)
- Christmas Day (December 25th)

Non-exempt Employees: the following company holidays will receive holiday premium pay if they work:

- New Years Day (January 1st)
- Independence Day (July 4th)
- Thanksgiving (4th Thursday in November)
- Christmas Day (December 25th)

Holiday Premium Pay

For each hour of work on a holiday, non-exempt employees receive holiday premium pay. Holiday premium pay equals half of an employee's rate of hourly basic pay. Employees who are required to work on a holiday receive their rate of basic pay, plus holiday

Cost of Benefits

Your contributions toward the cost of benefits are automatically deducted from your paycheck before taxes. The amount will depend upon the plan you select and if you choose to cover eligible family members. **Please refer to the separate rate sheet for your medical contributions.**

DENTAL COVERAGE

Coverage Tier	Total Premium	Company Pays per Month	Employee Pays per Month	Employees Bi-Weekly Rate
Employee	\$41.16	\$20.58	\$20.58	\$9.50
Employee & Spouse	\$90.36	\$20.58	\$69.78	\$32.21
Employee & Child(ren)	\$108.88	\$20.58	\$88.30	\$40.75
Employee & Family	\$152.08	\$20.58	\$131.50	\$60.69

VISION COVERAGE

Coverage Tier	Total Premium	Company Pays per Month	Employee Pays per Month	Employees Bi-Weekly Rate
Employee	\$8.40	\$4.20	\$4.20	\$1.94
Employee & Spouse	\$16.84	\$4.20	\$12.64	\$5.83
Employee & Child(ren)	\$14.72	\$4.20	\$10.52	\$4.86
Employee & Family	\$23.08	\$4.20	\$18.88	\$8.71

Contact Information

If you have questions you can contact human resources, the plan carriers or Comstock Insurance

Coverage	Carrier	Group Number	Telephone Number	Website/E-mail
Medical Insurance	United Health Care	1380500	866-414-1959	www.myuhc.com
Dental	Ameritas	53274	800-487-5553	https://explore.ameritas.com/associates/dental/
Vision	Ameritas	53274	800-487-5553	https://explore.ameritas.com/associates/vision
401(k) Retirement Plan	T.Rowe Price	N/A	800-638-7890	https://rps.trowprice.com
Claims Assistance	Comstock Insurance	N/A	775-853-9424	www.comstockins.com

DISCLAIMER: The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern. **Annual Notices:** ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The Company will distribute all required notices annually.