

Employee Benefits Guide

About This Guide

As a plan participant, you are entitled to a comprehensive description of your rights and obligations under the Covercraft Employee Insurance Benefits Program.

In order to conserve resources and make the required information as accessible as possible, we post this information to our employee benefits website. This site is available to you and your dependents at any time. In order to ensure that you fully understand the benefits available to you and your obligations as a plan participant, it is imperative that you familiarize yourself with the information contained on this site.

benefits.filice.com/covercraft

You are entitled to receive a paper copy of any of the below documents free of charge through the Covercraft Human Resources department.

- Summary Plan Descriptions (SPD)
- Women's Health and Cancer Right Acts
- Evidence/Certificates of Coverage
- Medicare Part D Creditable Coverage Notice
- Summary of Benefits and Coverage (SBC)
- Summary Plan Description (SPD) Wrap Document
- Notice for Employer-Sponsored Wellness Programs
- Uniformed Services Employment and Reemployment Rights Act (USERRA) Notice

- Special Enrollment Notice
- HIPAA Notices
- Health Exchange Model Notice
- COBRA Notices
- · Children's Health Insurance Program
- Summary Annual Report (SAR)
- Notice of Patient Protections
- Mental Health Parity & Addiction Equity Act (MHPAEA) Disclosure
- Newborns' and Mothers' Health Protection Act Notice

Every effort has been made to ensure that this guide is accurate and reflects the information that is current as of the issue date. If there are any discrepancies or inconsistencies between this guide and the official plan documents, the plan documents will govern.

This guide is intended to provide you with a general overview of your plans and benefits. This is not a guarantee of coverage, eligibility or employment.

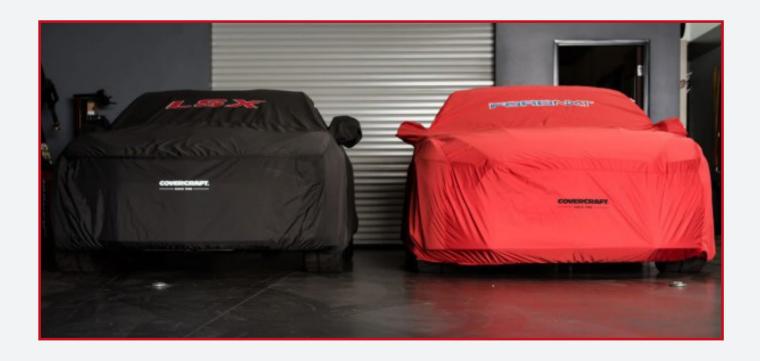
If you have questions regarding your benefits or the information contained in this guide, please contact:

Covercraft Benefits Team (877) 304-7354 covercraftbenefits@filice.com



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Eligibility & Enrollment

EMPLOYEE ELIGIBILITY

Covercraft is proud to offer a comprehensive benefits package to eligible, full-time active employees who work a minimum of 30 hours per week. The complete benefits package is briefly summarized in this booklet. You will receive plan documents, which will give you more detailed information about each of these benefits.

You share the costs of some benefits, such as medical, dental and vision coverage, and Covercaft provides other benefits at no cost to you (basic life & accidental death & dismemberment). In addition, there are voluntary benefits with reasonable group rates that you can also purchase.

The cost is deducted via a payroll deduction. Depending on the plan type, some deductions are pre-tax while others are deducted on a post tax basis. See the below chart for details.

BENEFIT	PRE-TAX	POST TAX	COMPANY-PAID
Medical & Pharmacy	✓		
Telemedicine			✓
Dental	✓		
Vision	✓		
Basic Life/AD&D			✓
Disability			/
Accident, Critical III- ness and Legal	✓		
Flexible Spending Accounts (FSA)	✓		

ADDITIONAL BENEFITS

- 401(k)
 Employee Assistance Program (EAP)
- Travel Assistance
 Home and Auto Discount

DEPENDENT ELIGIBILITY

You may cover your dependents under many of the benefit plans as long as they are one of the following:

- Your spouse or domestic partner
- · Your child(ren) up to age 26 regardless of student or marital status
- A dependent child, regardless of age, who was covered under the plan prior to reaching age 26 who is incapable of self-support. See policy documents for full information.

Domestic Partner Coverage

When an employer provides the same health insurance coverage for domestic partners or dependents of a domestic partner of an employee, federal tax law considers the fair market value of that coverage, including the employee's pre-tax contributions, as imputed income to the employee. This means that the value of the health insurance coverage must be included for federal tax purposes on your paycheck.

ENROLLMENT

Benefit elections are completed in the Employee Navigator benefits system. You will receive a registration email with instructions on how to setup your account. Enrollment forms are available as an alternative enrollment method.

As a new hire, your benefits will begin on the 1st of the month following day of employment. Your benefits cannot be activated until you have completed your enrollment.

If you do not elect within your new hire enrollment period, your next opportunity to enroll will be the following Open Enrollment unless you experience a Qualifying Life Event per IRS regulations.

Qualifying Life Events

Outside of the new hire eligibility period or the annual Open Enrollment period, the only time you may change your coverage is when you experience a Qualifying Life Event (QLE). You have 30 days from the date of the QLE to request the change and provide appropriate documentation. Changes submitted after 30 days will not be accepted.

Common examples of qualifying Life Events include the following:

- · Birth, adoption or placement of a child
- Marriage/divorce
- Death of your spouse/partner or child
- End in other group coverage (i.e., spouse's coverage)
- Medicare entitlement
- Certain changes in employment status

Medical Benefits—PPO Options

Covercraft is proud to offer two PPO medical plan options. Your medical plans are administered by Maestro Health and paired with the Cigna Choice Fund PPO network for your medical services. Maestro Health is the Third Party Administrator (TPA) for the medical plan. The Cigna PPO network provides access to a nation-wide network with over 900,000 providers and over 6.000 facilities.

Your pharmacy benefits are provided through Southern Scripts. They are the Pharmacy Benefits Manager for your medical plan. Maestro Health, Cigna and Southern Scripts work together as Covercraft's plan partners to bring you one comprehensive medical plan.

The benefit summary for our medical program is laid out over the next few pages. Before you read on, get to know the medical plan partners below.



MEDICAL PLAN PARTNERS

NAME	WHAT THEY DO	YOU CALL THEM WHEN
Maestro Health	 Verify eligibility and benefits, issue your ID card and process medical claims. 	You have questions regarding your claims or benefits.
Cigna	Provider Network	Cigna is the network that is paired with your plan. Your providers recognize the Clgna network by the logo printed on your card.
Southern Scripts	Pharmacy Benefit Manager	You or your pharmacy have questions regarding your prescription drug coverage.



Medical Plan Comparison



Medical Services	Cigna 500	Cigna 1500
Calendar Year Deductible		
Individual	\$500	\$1,500
Family	\$1,000	\$4,500
Out of Pocket Max.		
Individual	\$2,500	\$3,500
Family	\$5,000	\$10,000
Out of Network	Out-of-Network benefits are available benefits only. To review out-of-network plan documents.	
Office Visits / Specialist	\$20 / \$20	\$20 / \$40
Telehealth through MyTelemedicine	No cost	No cost
Preventive Care	No cost	No cost
Diagnostic Lab, X-Ray	No cost	No cost
Complex Radiology (CT, MRI, PET) *Requires pre-certification	20% coinsurance, after deductible	20% coinsurance, after deductible
Inpatient Hospital	20% coinsurance, after deductible	20% coinsurance, after deductible
Outpatient Surgery	20% coinsurance, after deductible	20% coinsurance, after deductible
Urgent Care	\$20	\$20
Emergency	\$100 copay, 20% coinsurance, after deductible	\$100 copay, 20% coinsurance, after deductible
Southern Scripts Retail Prescription (Rx) Drug Coverage: 1–30 Day Supply		
Generic	\$20	\$20
Preferred Brand	\$40	\$40
Non-Preferred Brand Name	\$60	\$60
Specialty	\$150	\$150

The pharmacy network is comprised of independent and chain pharmacies. First Choice pharmacies provide the greatest discounts on your prescriptions. The Southern Scripts Pharmacy Locator tool can be found via the web address: https://www.rxclearinghouse.com/pharmacylocationlocator.aspx.

Maestro Health Member Portal

Your online benefits portal offers you flexibility and easy access to everything you need:

- An interactive dashboard—Your benefits at-a-glance
- · Health expenses summary—Your plan discount, payments, responsibilities and more
- Total out-of-pocket expenses summary—Progress towards your in-and out-of-network deductibles
- · Eligibility—The plans you're enrolled in are highlighted
- · Claims summary—Details of your five most recent claims
- · Claims history—Your past submitted claims
- HIPAA-compliant messaging—Easy and fast way to contact us





Download the mobile app.

Visit the Apple® App Store or Google Play™ Store to download **the Maestro Health mBENEFITS™ mobile app.**

Visit the Maestro Health My Benefits[™] web portal. Go to mybenefits.maestrohealth.com to access your benefits online.

Cigna Providers

Provider Search Tool



Three ways to find what you need

There are three ways to find a network provider:

- 1. If you're already enrolled, visit myCigna.com and log in using your User ID and Password
- 2. Visit Cigna.com and click "Find a Doctor, Dentist, or Facility." Be sure to select the "PPO, Choice Fund PPO" network.
- 3. Call your Maestro Health

Features on myCigna.com allow you to:

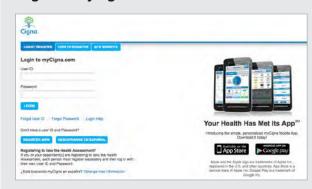
- Narrow your results by distance, specialty and more.
- Email a copy of your search results.
- Find doctors in 22 different medical specialties, who meet certain quality and cost-efficiency measures and have been awarded the Cigna Care Designation.
- Estimate procedure costs based on Cigna's historical data.

Cigna's extensive PPO Network gives you access to qualified health care professionals. Your good health is important, and we're here to help.

If you're looking for a mental health or substance abuse professional, visit CignaBehavioral.com.

On the landing page, select "Provider Directory" and then scroll down on the "Find a Therapist/ Psychiatrist" page to fill in your search criteria.

Option 1 Log in to myCigna.com



Option 2

- Visit Cigna.com click on "Find a Doctor" (upper right).
- 2. On the next page, click on "Plans through your employer or school" (Not a Cigna customer yet).
- 3. Click "Pick" (small orange box).
- 4. Click "PPO, Choice Fund PPO" in the pop-up box.



Medical Benefits— Kaiser HMO



For California employees who reside in the Kaiser service area, a third medical plan is available. The Kaiser plan is a Health Maintenance Organization (HMO) plan. Coverage through Kaiser provides the convenience of having many services under one roof. From doctors sharing information to coordinate your care, to digital tools that make it easy to manage your health, everything works together through Kaiser's centralized system.

You will need to desigante a primary care provider to manage your healthcare and refer you to specialists when needed. All services must be obtained within Kaiser as this plan does not provide out of network services or coverage except in emergency situations.

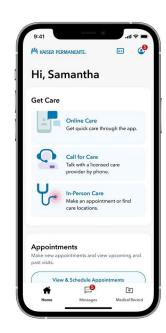
Medical Services	Kaiser HMO
Calendar Year Deductible	
Individual	\$0
Family	\$0
Out of Pocket Max.	
Individual	\$1,500
Family	\$3,000
Office Visits / Specialist	\$25 / \$25
Telehealth through Teladoc	No cost
Preventive Care	No cost
Diagnostic Lab, X-Ray	No cost
Complex Radiology (CT, MRI, PET) *Requires pre-certification	No cost
Inpatient Services	No cost
Outpatient Surgery	\$25 per procedure
Urgent Care	\$25
Emergency	\$50
Retail Prescription (Rx) Drug (Coverage: 1-30 Day Supply
Generic	\$15
Preferred Brand & Non-Preferred Brand	\$15
Specialty	\$15

To find Kaiser locations and Kaiser doctors visit:

www.kp.org

Select Doctors & Locations from the toolbar.

Download the Kaiser mobile app to access your information, tools and schedule appointments.



Telehealth

Medical plan members have alternative options available when seeking care, aside from the traditional in-person office visit. These alternative care services are a safe and convenient way to get the care you need for non-urgent medical needs.

Telehealth

Telehealth is recommended when possible and appropriate for your situation. The use of telehealth/virtual visits can help prevent the spread of illnesses. The use of telehealth does not replace your primary care physician; however, this service can provide you with convenient and no cost healthcare when you need it most.

Telehealth is available to you and your family, and can be used in a variety of ways:

- During weekends, holidays or after business hours
- When you can't attend a medical appointment, such as when traveling or at work.
- If you need a prescription medication or refill for a common condition.

Common Conditions

- Cold & Flu Symptoms
- Sinus Problems
- Far Infection
- Allergies
- Urinary Tract Infection
- Nausea
- · Pink eye
- Stomach Virus
- Infections
- Rashes
- And much more

Cigna Members: Access Telehealth through MyTelemedicine. See your ID card for information.

Kaiser Members: Register on www.kp.org to use Kaiser's video visit services.



FLEXIBLE SPENDING ACCOUNTS



The FSA plans are administered through Advantage Benefits Plus. Funds you set aside in the FSA can be used to pay for qualified medical, dental, vision, and dependent care expenses with pre-tax dollars through the FSA.

Contributions to your FSA come out of your paycheck before any taxes are taken out. This means that you don't pay federal income tax, Social Security taxes, and state and local income taxes on the portion of your paycheck you contribute.

You should contribute only the amount you expect to pay out of pocket for eligible expenses. You have 90 days to submit your expenses for reimbursement once the Plan Year ends. You must spend your balance no later than December 31st. Any remaining funds will be forfeited.

Plan Features	Healthcare FSA	Dependent Care FSA
Maximum Election	\$3,050 per year For 2023 Plan Year	\$5,000 per household For 2023 Tax Year
Rollover? Yes. You can rollover up to \$570 from 2022 to 2023 and up to \$610 from 2023 to 2024.		No.
Pre-funded by Employer	Yes. Full election is available for your use on the first day of the Plan Year.	No. You may only claim what you have contributed at the time the claim is filed.
Rollover?	Not available	Not available
How to Access Your Funds	Master Card	Master Card
Eligible Expenses	Medical, Prescription, Dental & Vision	Childcare for children under age 13 while parent is at work, looking for work or going to school. Adult Dependent Care.
OTC Medications	Eligible without a prescription.	Not eligible.
Household Items	 First Aid Kits / Supplies Sunscreen Hearing Aid Batteries Heating Pads & Wraps Thermometers Vaporizers & Inhalers Pregnancy & Fertility Test 	Not applicable.

2023 Contribution Limits: Healthcare FSA: \$3,050

Dependent Care FSA: \$5,000

To best manage your FSA, file claims online and sign up for direct deposit, register on the member portal

www.abplusonline.com

Shop online through the www.fsastore.com

DENTAL & VISION



DENTAL INSURANCE

Dental coverage is provided for you and your family members through MetLife. A PPO plan offers you the most flexibility when choosing a dentist as you can seek services in and out of network.

Dental Services	In Network	Out of Notwork
Delital Services	PDP Plus Network	Out of Network
Preventive Care – Type A (Deductible does not apply) (exams, cleanings, x-rays)	100%	100% UCR*
Basic Care - Type B (basic fillings, extractions, repairs, complex)	90%	80% UCR*
Major Care - Type C (oral surgery crowns, inlays, on-lays, bridges, den- tures)	60%	50% UCR*
Deductible	\$50 Individual / \$150 Family	\$50 Individual / \$150 Family
Maximum Benefit Per Plan Year	\$1,5	500

Find Metlife contracted dental providers www.metlife.com. Be sure to select the PDP Plus network.

Covered Services and Frequency Limitations

Type A - Preventive	<u>How Many/How</u> Often:	
Oral Examinations	2 in 12 months	
- Full Mouth X-rays	1 in 60 months	
Bitewing X-rays (Adult/Child)	1 in 12 months	
Prophylaxis - Cleanings	2 in 12 months	
Topical Fluoride Applications	1 in 12 months - Children to age 18	
Sealants Space Maintainers	1 in 60 months - Children to age 15 No limit - Children up to age 15	
Space Maintainers	No littic - Ciliaren ap to age is	
Type B - Basic Restorative	<u>How Many/How</u> Often:	
Amalgam and Composite Fillings	1 in 24 months.	
Emergency Palliative Treatment		
Type C - Major Restorative Crowns/Inlays/Onlays	How Many/How Often: 1 per tooth in 84 months	
Prefabricated Crowns	1 in 84 months	
Repairs	1 in 24 months	
Endodontics Root Canal	1 per tooth in 24 months	
Periodontal Surgery	1 in 36 months per quadrant	
Periodontal Scaling & Root Planing	1 in 24 months per quadrant	
Periodontal Maintenance	2 in 1 year, includes 2 cleanings	
Oral Surgery (Simple Extractions)		
Oral Surgery (Surgical Extractions)		
Other Oral Surgery		
Bridges	1 in 60 months	
Dentures	1 in 60 months	
General Anesthesia	1 10 10 10 11 11 11	
Consultations	1 in 12 months	
Implant Services	1 service per tooth in 84 months - 1 repair per 84 months	

^{*}Usual, Customary and Reasonable Fee (UCR): A usual fee is the amount which an individual dentist regularly charges and receives for a given service or the fee actually charged, whichever is less. For more information see your plan documents.





Choose from a large network of ophthalmologists, optometrists and opticians, from private practices to retailers like Costco® Optical, Walmart, Sam's Club and Visionworks.

Metlife Vision	In-Network	Out-of-Network
	Metlife Vision PPO Network	Reimbursement
Office Visit / Examination and Glasses (every 12 months)	 \$20 Includes Single vision, bifocal and lined trifocal lenses. Polycarbonate lenses for children 	Exam: up to \$45Lenses: \$30-\$100
Lens Enhancements	Price varies depending on enhancement. Call member services for details.	Applied to the allowance for the applicable corrective lens
Frame Allowance (every 12 months)	\$120 Allowance + 20% savings on amount over Allowance. \$20 eyewear copay	Up to \$55
Contact Lenses Allowance (in lieu of glasses, every 12 months)	\$120 Includes contact lens fitting	Up to \$105
Retinal Screening	Up to \$39 copay	Applied to the allowance for the eye examination

Find MetLife contracted providers visit:

www.metlife.com



LIFE & DISABILITY



EMPLOYER-PAID BASIC LIFE/AD&D and DISABILITY

Covercraft provides Basic Life and Accidental Death and Dismemberment (AD&D) and Disability insurance through MetLife and pays 100% of the cost. Eligible employees are automatically enrolled in these plans upon eligibility.

Plan	Benefit Amount	Description
Basic Life/AD&D	1x Annual Salary up tp \$450,000	In the event of your death, the plan pays this benefit to your beneficiary(ies). If your death is accidental, this plan will pay an amount equal to 2x the life benefit.
Short Term Disability (STD)	60% of your pre-disability earnings, up to weekly max of \$2,000	Benefits begin after 7-day Elimination Period and will be paid up to a maximum period of 26 weeks.
Long Term Disability (LTD)	60% of your pre-disability earnings, up to monthly max of \$10,000	Benefits begin after 180-day Elimination Period and can be paid until Social Security Retirement Age

- · You can change your Beneficiary designation at anytime through Employee Navigator.
- Disability benefits are offset by income from other sources, including State Disability Insurance (if applicable) or Workers' Compensation.

Please refer to carrier coverage booklet for complete details.





VOLUNTARY LIFF/AD&D

Employees who want to supplement their Basic Life and AD&D benefits may purchase additional Voluntary Life/AD&D coverage. When you enroll yourself and your dependents in this benefit, you pay the full cost through an after-tax payroll deduction. You can purchase coverage for yourself, your spouse/domestic partner or child(ren) as outlined below. Evidence of Insurability is required for applied amounts that exceed Guaranteed Issue, and for applications submitted after your initial new hire eligibility period.

Coverage	Voluntary Life/AD&D
Employee	 \$10,000 increments up to the lesser \$500,000 or 5x your salary. Guaranteed Issue Amount = \$100,000
Spouse	 \$5,000 increments up to \$100,000 Guaranteed Issue Amount = \$25,000 Maximum benefit for Spouse coverage is Lesser of \$100,000 or 50% of employee's approved amount
Child(ren)	 \$1,000 increments per child up to \$10,000. Child coverage cannot exceed 100% of Employee Amount.

The table below illustrates the rates for employees and spouses by age range. Reference these rates to calculate your post-tax monthly premium amounts using the tables on the next page.

	Voluntary Life Rates			
Age Band	Employee Rate Per \$1,000 of Coverage	Spouse Rate Per \$1,000 of Coverage	Dependent Child Life/AD&D	
<30	\$0.044	\$0.044		
30-34	\$0.056	\$0.056		
35-39	\$0.081	\$0.081	Dependent Child Life:	
40-44	\$0.115	\$0.115	\$0.240 per \$1,000	
45-49	\$0.170	\$0.170	ψο.240 per ψ1,000	
50-54	\$0.265	\$0.265	\$2.40 per \$10,000	
55-59	\$0.416	\$0.416		
60-64	\$0.578	\$0.578		
65-69	\$0.906	\$0.906		
70+	\$1.489	\$1.489		
		Spouse rates are based on		
		employee's age		

Voluntary AD&D per \$1,000

Employee & Spouse \$0.030 Child \$0.050

VOLUNTARY BENEFITS



Voluntary benefits are a cost-effective solution to help offset out-of-pocket medical expenses by paying you the plan benefits directly instead of your healthcare provider. Covercraft provides employees with a comprehensive program through Colonial Life. You can choose from Accident, Critical Illness, Hospital Indemnity as well as additional Disability coverage. You choose the plan(s) that meets the needs for you and your family. Then, if you are faced with a period of unexpected sickness or off-the-job injury, you will receive cash benefits to use as you see fit. This could include medical treatments, daily living expenses and more.

ACCIDENT INSURANCE

Covercraft offers the option to enroll in the Voluntary Accident Benefits which provides you with income protection from unexpected expenses related to an accident. Benefits are paid directly to you and this product is portable.

Coverage is Guarantee Issue upon hire and during the annual enrollment period each year, meaning you are not required to provide evidence of insurability.

Service	Benefit
Emergency Treatment	\$150
Follow up doctor visit	\$50
Accidental Death - Employee	\$50,000
Ground Ambulance	\$300
2nd-degree burns	\$1,000
Coma	\$10,000
Ankle dislocation	\$1,200
Emergency dental extraction	\$100
Eye injury	\$300
Leg fracture	\$1,800
Hospital admission	\$1,000



For full benefit details and costs, visit your benefits website at benefits.filice.com/covercraft.

CRITICAL ILLNESS INSURANCE



You also have the option to enroll in the Voluntary Critical Illness benefit which provides you with income protection from unexpected expenses related to a critical illness and certain conditions. Benefits are paid directly to you and this product is portable. There are two levels of benefits that you can choose from: \$10,000 or \$20,000. Benefits are paid directly to you for the following conditions:

- Brain tumor
- Heart attack
- Stroke
- Kidney failure
- Sudden cardiac arrest

*See Benefit Summaries for additional information.

Wellness Benefit:

Enrolled participants will receive a \$100 wellness benefit payable once per year per covered person for wellness screenings such as Pap smear, mammogram, coloscopy, PSA, chest X-ray and more.

Coverage:

• \$10,000 or \$20,000 benefit amount for Employee, Spouse + Child coverage

VOLUNTARY DISABILITY INSURANCE

You can purchase an additional disability policy to supplement your employer-paid policy. Colonial Life offers policies with 3 or 6-month benefit period with monthly benefit amounts between \$1,000 and \$3,000.

GROUP HOSPITAL INDEMNITY

Group Medical Bridge insurance can help with medical costs associated with a hospital stay that your health insurance may not cover. These benefits are available for you, your spouse and eligible dependent children. Waiver of premium is available.

Maximum of 365 days per covered person per confinement. Re-confinement for the same or related condition within 90 days of discharge is considered a continuation of a previous confinement.

ADDITIONAL BENEFITS



Employee Assistance Program (EAP)

Some days it can be tough to manage the competing priorities in our lives and keep it all running smoothly. If you need help with an everyday issue that's becoming a little hard to handle, your Employee Assistance Program (EAP) is here for you.

The MetLife Assist program is our comprehensive Employee Assistance Program that is there for you when you need it.

This confidential and round-the-clock service offers support and resources, whether your issues are parenting, work situations, a troubled relationship, substance abuse or even just a desire for self-improvement. And, this program is available to you and others in your household as a Long-Term Disability plan member. For a monthly fee conveniently paid through payroll deduction, an expert is on your side as long as you need them.

EAP includes three face-to-face counseling sessions a year with an EAP network provider. That's up to three visits a year for you and also for members of your household.

Just a call or click away, we can confidentially discuss your situation and help you get information and education, as well as referrals to local counselors if you want face-to-face visits.

Common issues

- Mental health and well-being
- · Substance abuse
- Personal and professional relationships · Family life

Visit website below for information on emotional or work-life counseling, financial information, legal support and resources and health and benefit services.

24/7 Support

The EAP is available 24 hours a day, 7 days a week, either by phone or online. If it's not convenient to call, you can find resources and self-help tools for your personal, family and workrelated concerns on the FAP website.

There is no charge to you or your family for using the program. However, if you choose to use any referrals to additional resources, their charges, if any, would be your responsibility.

> Contact your EAP 24/7: 1-888-319-7819 www.metlifeeap.lifeworks.com

> > **User Name: Metlifeeap**

Password: eap

MetLaw - Prepaid Legal Services



MetLife Legal Plans gives you access to the expert guidance and tools you need to handle the broad range of personal legal needs you might face throughout your life. This could be when you're buying or selling a home, starting a family, dealing with identity theft or caring for aging parents.

Network attorneys are available in person, by phone or by email and online tools to do-it-yourself — the plan makes it easy to get legal help. You can choose one from our network of prequalified attorneys, or use an attorney outside of our network and be reimbursed some of the cost.

MetLaw's Covered Legal Services

You have unlimited access to attorneys for all legal matters covered under the plan.

Money Matters	 Debt Collection Defense LifeStages Identity Restoration Services³ 	Identity Theft Defense Negotiations with Creditors Personal Bankruptcy	Promissory Notes Tax Audit Representation Tax Collection Defense
Home & Real Estate	Boundary or Title DisputesDeedsEviction DefenseForeclosure	 Home Equity Loans Mortgages Property Tax Assessments Refinancing of Home	Sale or Purchase of HomeSecurity Deposit AssistanceTenant NegotiationsZoning Applications
Estate Planning	CodicilsComplex WillsHealthcare ProxiesLiving Wills	Powers of Attorney (Healthcare, Financial, Childcare, Immigration)	Revocable & Irrevocable Trusts Simple Wills
Family & Personal	 Adoption Affidavits Conservatorship Demand Letters Divorce (20 hours) Garnishment Defense Guardianship Immigration Assistance 	Juvenile Court Defense, Including Criminal Matters Name Change Parental Responsibility Matters Personal Property Protection	Prenuptial Agreement Protection from Domestic Violence Review of ANY Personal Legal Document School Hearings
Civil Lawsuits	Administrative HearingsCivil Litigation Defense	Disputes Over Consumer Goods & Services Incompetency Defense	Pet Liabilities Small Claims Assistance
Elder-Care Issues	Consultation & Document Review for your parents: Deeds Leases	 Medicaid Medicare Notes Nursing Home Agreements	Powers of AttorneyPrescription PlansWills
Vehicle & Driving	 Defense of Traffic Tickets⁴ Driving Privileges Restoration 	License Suspension Due to DUI	Repossession



To learn more about your coverages, view our attorney network or grant your dependents access, create an account at members.legalplans.com or call 800.821.6400 Monday – Friday 8:00 am to 8:00 pm (ET).

Your account will also give you access to our self-help document library to complete simple legal forms. The forms are available to you, regardless of enrollment.

ADDITIONAL BENEFITS

MetLife Home & Auto Savings

You have access to auto and home insurance from MetLife Auto & Home. This program provides you with special savings, outstanding customer service and a full suite of products to meet your diverse insurance needs. In addition to auto and homeowners insurance, we offer a variety of other policies and discounts including:

- Condo/renters
- Personal excess liability
- Boat
- Motorcycle
- RV
- Personal property
- A group discount of up to 15%
- Automatic payment discount
- Good driving rewards
- A loyalty discount for your years of service
- Multi-policy discounts
- Multi-vehicle savings
- 24/7 superior service

401(k) - Retirement

A 401(k) plan can be a powerful tool in promoting financial security in retirement. The Covercraft 401(k) plan helps eligible employees save and invest for retirement while receiving certain tax advantages.

Employees are eligible the 1st of the quarter after 90 days of employment for those that are age 21 and older.

Travel Assistance

MetLife provides 24-hour, 365-days-a-year travel assistance whenever you or your family members are travelling domestically or internationally 100+ miles from home. Services include but are not limited to:

- Emergency medical assistance such as transportation, evacuation, referrals to doctors / dentists / facilities, and prescription assistance.
- Emergency cash
- Translation and interpretation services
- Locating legal services
- Assistance with lost or stolen baggage
- Pre-trip assistance (obtaining visas or required documentation, consulate / embassy locations, currency exchange rates and more!)

Before you travel, you can obtain general information:

Within the U.S.: (800) 454-3679

Outside the U.S.: (312) 935-3783 (collect)

www.metlife.com/travelassist



CARRIER CONTACT INFORMATION

Plan	Phone #	Website / Email	Policy #		
Medical: Maestro Health	800-403-4098	mybenefits.maestrohealth.com	6952		
Pharmacy: Southern Scripts	800-710-9341	southernscripts.com	0302		
Telehealth: MyTelemedicine *Cigna members only	800-611-5601	https://portal.mytelemedicine.	N/A		
Medical: Kaiser HMO	800-464-4000	www.kp.org	101436		
Dental: MetLife	800-942-0854	www.metlife.com	5974731		
Vision: Metlife	855-638-3931	www.metlife.com	5974731		
Life & Disability: MetLife	800-421-0344	www.metlife.com	5974731		
Employer Assistance Program (EAP)	888-319-7819	www.metlifeeap.lifeworks.com User Name: Metlifeeap Password: eap	N/A		
Flexible Spending Accounts (FSA)	800-809-6574	www.abplusonline.com info@abplusonline.com	N/A		
All other questions, contact your Filice Insurance Service Team:					

877-304-7354 covercraftbenefits@filice.com

ACCESS YOUR PLAN DOCUMENTS

All legal plan documents and notices, such as the Summary of Benefits and Coverage (SBC), Summary Plan Description (SPD), HIPAA Privacy Notice and carrier-issued policy documents are available electronically on the <u>Covercraft Employee Benefits Website</u>. You may request a printed copy of the Plan Documents by contacting Human Resources. A copy will be provided to you free of charge.

URL: benefits.filice.com/covercraft



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