

Benefit Enrollment Guide

It's time to think about your 2025 workplace benefits. Information you'll need to make optimal decisions!

Hourly Employees (New hires have 30 days to enroll)

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Welcome To Your **2025 Open** Enrollment!

What You Need To Know

- Review this entire booklet.
- Determine which benefits are best for you and your family.
- Log into the Mauser Packaging Solutions Benefits Portal at <u>https://digital.alight.com/mauserpackaging</u> or via the Alight mobile app during your enrollment window.
- It is your responsibility to log into the Benefits Portal and make your elections during your allowed time frame.
- If you have questions about the benefits you are offered or need assistance enrolling, contact the Benefits Service Center at 1-833-793-0802. Representantes que hablan español disponibles. Dostępni przedstawiciele mówiący po polsku.

Learn, Decide, Enroll...

Review this guide in detail for a brief overview of the benefits offered to you as a Mauser Packaging Solutions employee. Further details for plans can be found by:

- Logging into the Benefits Portal at <u>https://digital.alight.com/mauserpackaging</u>
- Registering on the Alight Mobile app
- Registering on the insurance company websites
- Downloading the insurance company smartphone app (if available)
- Calling the insurance company directly (see page 23)

Qualifying Life Events

Changes throughout the year can only be made within 30 days of a qualifying life event. Examples of a qualifying life event include:

- Marriage or divorce
- Birth or adoption of a child
- Medicare eligibility
- Death of a covered dependent
- Loss of coverage elsewhere

To report a life event, log into the Benefits Portal. Documentation for one of the above qualifying events must be provided.

ATTENTION ALL MEDICARE RECIPIENTS: If you

(and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, Federal Law gives you more choices about your prescription drug coverage. Please see Special Notices for details.

Your Open Enrollment

At Mauser Packaging Solutions, our success depends on our most vital asset – our employees. That's the reason we invest so much into a Benefits Package that helps protect your health, your income, and so much more. It is important for you to learn about the options we offer and consider how they can help you live a healthy life and build a secure future.

We offer a valuable, high-quality benefits package that's designed to help you with:

- Advancing your overall physical, financial, and emotional well-being
- Maximizing the advantages of pre-tax deductions through a Health Savings Account (HSA) and/or Flexible Spending Accounts (FSAs)
- Protecting your income and reducing your financial exposure from a serious illness or injury

For these and other reasons, we strive to provide you with benefit options that can help you thrive at work, at home, and in your community, today – and tomorrow!

This guide provides an overview of your 2025 benefit options and explains how to enroll. Review this enrollment guide to make the best choices for you and your family – it's time well spent!

ACTION REQUIRED!

Open Enrollment runs November 4 –15, 2024. Review your benefits in this booklet and complete enrollment by going to http://digital.alight.com/mauserpackaging, registering via the Alight mobile app, or by calling 1-833-793-0802. All employees are strongly encouraged to review all benefit options and make selections as necessary. If you do not take action during the annual open enrollment period, most benefits will carry over as of January 1, 2025.

Exception: Health Savings Account (HSA) and Flexible Spending Accounts (FSAs) elections <u>do</u> <u>not</u> carry over year-to-year. You must elect to contribute during open enrollment each year. Remember to:

- Update or add beneficiaries
- Print your enrollment confirmation and keep with your important documents
- Provide an email address so that you can stay on top of the latest benefits information
- Verify your address is correct. Benefit confirmation statements are sent to your address in the Mauser system. Address change forms are available in the enrollment portal or from HR.

What's New?

- HSP/HSA annual deductibles have been amended per the IRS, and your Mauser employer contribution to your HSA/Wellness Incentive will continue through Personify Health, formerly Virgin Pulse (see pages 10 & 11). **Note:** No change to out-of-pocket maximums in 2025.
- Health Savings Account (HSA) and Flexible Spending Account (FSA) annual maximum contributions have been amended per the IRS (see page 10).
- Virgin Pulse is now Personify Health. See page 11 to learn more about the Wellness Program.
- Active & Fit Direct is a new discounted gym membership program. See page 20 to learn more.
- Beginning in 2025, Telemedicine benefits cannot be paid before the deducible under a high deductible health plan.
 - Physical, Speech and Occupational Therapy coverage is increasing to 60 visits per year.

The Benefits We Offer

Mauser Packaging Solutions is committed to providing comprehensive and competitive benefits to meet your needs. We provide a full range of coverage from Medical, Dental, and Vision Insurance to Life, Accident, and Short-Term Disability coverage to Flexible Spending Accounts. Your benefits can help you to live well and build a secure future. The Mauser Packaging Solutions health care year is from January 1 – December 31. Unless otherwise noted, benefits elected during Open Enrollment become effective on January 1, 2025.

Health & Wellbeing

- Medical and Prescription Plan
- Health Savings Account
- Personify Health Wellness Program
- Dental Insurance
- Vision Insurance
- Flexible Spending Accounts
- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance
- Employee Assistance Program (EAP)

Income Security

- Basic Life and AD&D Insurance
- Supplemental Life Insurance
- Short-Term Disability Insurance
- Business Accident Insurance

Retirement & Lifestyle

- 401(k) Retirement Savings Plan
- Legal Insurance
- Identity Theft Protection and Insurance
- HealthChampionsM (health advocacy services)
- BenefitHub (employee discounts and perks)

Who We Cover

All regular, full-time Mauser Packaging Solutions employees working at least **30** hours per week are eligible for benefits. Temporary and leased employees, interns, and independent contractors are not eligible. New hire benefits are effective the first of the month following 30 days of service. You have until the day before the effective date to enroll, however, we encourage you to enroll between day 7 and day 30 from your hire date.

Your Dependents May Include:

- Your legal spouse
- Your children up to age 26 (children may include biological, adopted, step-children, and children for whom you have legal guardianship)
- Your unmarried children over age 26 who are not able to support themselves due to a physical or mental disability that occurred prior to age 26 (must be enrolled prior to age 26)

If you are enrolling a dependent, you will be prompted to submit dependent verification documentation by the deadline provided. Failure to provide the required certification documents will result in your dependents being dropped from coverage.

See the Summary Plan Description (SPD) for more details on eligibility and enrollment.

Enrollment Resources





LOG INTO:

Mauser Benefits Portal



DOWNLOAD AND LOG INTO THE ALIGHT MOBILE APP





CONTACTS

Mauser Benefits Portal

How to Enroll

Mauser's Benefits Portal (Alight) offers different ways to enroll to give you the level of support that is best for you. Remember, Open Enrollment takes place November 4 – 15, 2024.



Mauser's Benefits Portal: Online and Mobile App — Available 24/7, visit <u>https://digital.</u> <u>alight.com/mauserpackaging</u> or download the Alight mobile app to register or log in, and follow the prompts to complete your enrollment. See your Enrollment Instructions for details. For the best user experience, use Google Chrome when enrolling online.



Benefits Service Center by Phone — Call **1-833-793-0802** to speak with a Benefits Counselor who will explain your options, answer your questions, help you with benefit decisions, and take your elections over the phone. See your Enrollment Instructions for details. Available Monday through Friday from 8 a.m. to 6 p.m. (CT)

Alight

Mauser's Benefits Portal (Alight) is your easy-to-use enrollment site. With options to access Online, via Mobile App, or by Phone, you are provided with an intuitive experience and helpful guidance to make enrollment easy.

Take advantage of your Enrollment Resources, as well as, useful tools and resources within the site. If you need help while enrolling, use Your Virtual Assistant, available 24/7, that you can access by clicking the chat bubble along the right side of each page. Or, for more personalized support, speak to a Representative who can help you understand your options and take your elections over the phone. Multi-language representatives and TTY services are available.

If you experience a Qualifying Life Event that prompts you to make a change to your benefit elections, you have **30 days** from the event date to log into the Benefits Portal and request a change. Even if you wish to waive all other benefits, ensure you add your beneficiary for company paid life insurance.

How To Log In: Online And Mobile App

- Go to <u>https://digital.alight.com/mauserpackaging</u>, or download the Alight mobile app from the App Store, Google Play, or scan the QR code below.
- The first time logging in, choose the **New User?** link.
- Identify yourself using the last 4 digits of your SSN and DOB.
- Establish your security questions and answers (choose 5).
- Create a User ID (must be at least 8 characters long and is not case sensitive).
- Create a **Password** (must be at least 10 characters long and contain 3 out of 4 of the following: a capital letter, lower case letter, number, and special character).
- Retain your User Name and Password for future logins. If logging in from an unknown device, you may be asked to answer your security questions.

The Dashboard

Once you are logged in, you will have access to the Mauser Benefits Portal. The Benefits Portal is your **yearround** resource for your Mauser Packaging Solutions benefits. You are able to login throughout the year to:

- View your benefit election summary.
- Make a change to your benefits, if you experience a Qualifying Life Event.
- Access benefit overviews, plan documents, forms & flyers, important employee notices, and much more!

Medical Insurance Plans: HSP/HSA

The HSP/HSA Plan is a High Deductible Health Plan (HDHP). HDHPs offer lower premiums, but carry a higher deductible, which you pay out-of-pocket before the plan will share in the cost of services. Less comes out of your paycheck, but the amount you pay for services can vary. HDHPs are an option for those that want to keep more of their pay each month and generally need fewer medical services. With the HSP/HSA Plan, there are multiple ways to help offset the higher deductible such as contributing to an HSA, or electing supplemental benefits like Accident, Critical Illness, or Hospital Indemnity Insurance to help cover the cost of a major medical event. HSP/HSA annual deductibles and out-of-pocket maximums have been amended in order to comply with IRS inflation-adjusted limits, and your Mauser employer contributions to your HSA/Wellness Incentive will continue through Personify Health, formerly Virgin Pulse.

To search the provider networks for your plan, simply visit <u>www.myuhc.com</u> or call the number on the back of your ID card. The Plan name is: Choice Plus.

HSP/HSA Plan

UHC's website contains valuable tools and resources for you to access 24/7. Register to track claims, search for network providers, learn more about your benefits and the additional health resources available to you with the Mauser Packaging Solutions health plan:

- Go to <u>www.myuhc.com</u>.
- Click on Register>.
- Enter the information on the registration page. Then, **Continue** to enter a username, password, and email to **Create my ID**.
- You can also use your website login on the mobile app, by searching **United Healthcare** in the App Store or Google Play.

The HSP/HSA medical plan includes other convenient ways to help you control your health care costs, such as:

- Virtual Visits: A virtual visit lets you see a doctor via your smartphone, tablet, or computer by visiting <u>www.myuhc.com</u>.
- **Quit For Life (\$0):** UHC's Tobacco Cessation Program provides tools and support to help you tackle tobacco. Call **1-866-784-8454** or visit <u>www.quitnow.net</u> for more information.

The Costs You Pay With The HSP/HSA Plan:

	In-Network You Pay	Out-of-Network You Pay
Annual Deductible (Individual/Family)	\$3,300 / \$6,600	\$6,600 / \$13,200
Out-of-Pocket Maximum (Individual/Family)	\$6,000 / \$12,000	\$12,000 / \$24,000
Coinsurance	20%	50%
Preventive Care	\$0 covered at 100%	Not covered (you pay 100%)
Primary Care Physician	20% after deductible	50% after deductible
Specialist	20% after deductible	50% after deductible
Virtual Visit ¹	20% after deductible	Not covered (you pay 100%)
Hospital Inpatient	20% after deductible	50% after deductible
Hospital Outpatient	20% after deductible	50% after deductible
Urgent Care	20% after deductible	50% after deductible
Emergency Room	20% after deductible	20% after deductible
Pre-Existing Condition Limitations	None	None

¹Virtual Visits by a Designated Virtual Network Provider. No Virtual coverage for out-of-network. Beginning in 2025, Telemedicine benefits cannot be paid before the deductible under a high deductible health plan.

Remember: Getting care from an in-network medical provider always saves you money.

Medical Insurance Plans: PPO

Mauser Packaging Solutions has added a Preferred Provider Organization (PPO) plan through United Healthcare (UHC). PPOs carry a higher premium, but offer fixed copays. PPOs are an option for those that don't mind having a little more taken out of their paycheck to spend less accessing care. There is less risk because you know your fixed costs and deductible amounts are lower than the HSP/HSA Plan.

To search the provider networks for your plan, simply visit <u>www.myuhc.com</u> or call the number on the back of your ID card. The Plan name is: Choice Plus.

PPO Plan

UHC's website contains valuable tools and resources for you to access 24/7. Register to track claims, search for network providers, learn more about your benefits and the additional health resources available to you with the Mauser Packaging Solutions health plan:

- Go to www.myuhc.com.
- Click on Register>.
- Enter the information on the registration page. Then, **Continue** to enter a username, password, and email to **Create my ID**.
- You are also able to use your website login on the mobile app, by searching **United Healthcare** in the App Store or Google Play.

The PPO medical plan includes other convenient ways to help you control your health care costs, such as:

- Virtual Visits: A virtual visit lets you see a doctor via your smartphone, tablet, or computer by visiting <u>www.myuhc.com</u>.
- **Quit For Life (free):** UHC's Tobacco Cessation Program provides tools and support to help you tackle tobacco. Call **1-866-784-8454** or visit <u>www.quitnow.net</u> for more information.

The costs you pay with the PPO Plan:

	In-Network You Pay	Out-of-Network You Pay
Annual Deductible (Individual/Family)	\$1,500 / \$3,000	\$3,000 / \$6,000
Out-of-Pocket Maximum (Individual/Family)	\$4,500 / \$9,000	\$9,000 / \$18,000
Coinsurance	20%	50%
Preventive Care	\$0 covered at 100%	Not covered (you pay 100%)
Primary Care Physician (PCP)	\$30 copay	50% after deductible
Specialist	\$50 copay	50% after deductible
Virtual Visit ¹	\$20 copay	Not covered (you pay 100%)
Hospital Inpatient	20% after deductible	50% after deductible
Hospital Outpatient	20% after deductible	50% after deductible
Urgent Care	\$100 copay	50% after deductible
Emergency Room	\$400 copay / 100%	\$400 copay / 100%
Pre-Existing Condition Limitations	None	None

¹Virtual Visits by a Designated Virtual Network Provider. No Virtual coverage for out-of-network.

Remember: Getting care from an in-network medical provider always saves you money.

NOTE: Your medical plan options must offer certain preventive care benefits to you in-network without cost sharing and these preventive care benefits generally are updated annually. Under the Affordable Care Act, the medical plans generally may use reasonable medical management techniques to determine frequency, method, treatment or setting for a recommended preventive care service. Review the Summary Plan Description (SPD) for a list of preventive care services.

Where To Go Guide

The cost for care and time you wait can vary greatly depending on where you go. Below is a simple guide to choosing the right place to go for health care. If you are unsure where to go for treatment, call the number found on the back of your ID card to speak with an Advocate who can further assist and direct you to the right place for care.

	Conditions Treated*	Your Cost & Time
Emergency Room		
For the immediate treatment of critical injuries or illness. If a situation seems life-threatening, call 911 or go to the nearest emergency room. Open 24/7.	 Sudden numbness, weakness Uncontrolled bleeding Seizure or loss of consciousness Shortness of breath Chest pain Head injury/major trauma Blurry or loss of vision Severe cuts or burns Overdose 	 Costs are highest No appointment needed Wait times may be long, averaging over four hours
Urgent Care Center		
For conditions that are not life threatening. Staffed by nurses and doctors and usually have extended hours.	 Minor cuts, sprains, burns, rashes Fever and flu symptoms Headaches Chronic lower back pain Joint pain Minor respiratory symptoms Urinary tract infections 	 Costs are lower than an ER visit No appointment needed Wait times vary
Doctor's Office		
The best place to receive routine or preventive care, track medications, or get a referral to see a specialist.	 General health issues Preventive services Routine checkups Immunizations and screenings 	 Costs subject to deductible and/or coinsurance (HSP/ HSA) or copay (PPO) Appointment usually needed May have little wait time
Convenience Care Clinic		
Staffed by nurse practitioners and physician assistants. Treat minor medical concerns that are not life threatening. Located in retail stores and pharmacies, they're often open nights and weekends.	 Common cold/flu Rashes or skin conditions Sore throat, earache, sinus pain Minor cuts or burns Pregnancy testing Vaccinations 	 Costs are same or lower than office visit No appointment needed Wait times typically 15 minutes or less
Virtual Visits		
Virtual visits with a doctor anytime 24/7/365 via computer with webcam capability or smartphone mobile app.	 Cold and flu symptoms such as a cough, fever and headaches Allergies Sinus infections Family health questions 	 Costs are the same or lower than an office visit No appointment needed Immediate, private, and secure visits

*List is not all inclusive. To find a specific health care facility or doctor, go to your UHC's website at <u>www.myuhc.com</u> or call the number on your ID card. The information provided here is for informational purposes only. During a medical emergency, you should always visit the nearest hospital or call 911 for assistance.



Prescription Plan and HealthChampion

When you enroll in either medical plan, you are automatically enrolled in prescription drug coverage. The prescription plan will now be administered by OptumRx (a subsidiary of UnitedHealth Group).

Prescription drug coverage is one of the most valuable, but also one of the most expensive benefits offered. Always discuss lower cost alternatives with your physician, and because periodically drugs can change from one tier to another, you are encouraged to register and check the OptumRx website for the most recent Prescription Drug List (PDL) at <u>www.optumrx.com</u>.

	HSP/HSA Plan In-Network	PPO Plan In-Network
Retail: 30-day supply	COPAY	СОРАҮ
Tier 1	\$15 copay after deductible	\$15 copay
Tier 2	\$40 copay after deductible	\$40 copay
Tier 3	\$75 copay after deductible	\$75 copay
Mail Order: 90-day supply		
Tier 1	\$30 copay after deductible	\$30 copay
Tier 2	\$80 copay after deductible	\$80 copay
Tier 3	\$150 copay after deductible	\$150 copay

HealthChampion^s[™]

Employees of Mauser Packaging Solutions have access to HealthChampion. This program is designed to help you and your family navigate health care and insurance-related issues. You will have unlimited access and support from HealthChampion specialists, who can guide you through your health care options and assist you throughout administrative and clinical concerns.

They can help you by:

- Offering an easy-to-understand explanation of your benefits
- Providing step-by-step guidance on billing issues and claims
- Referring financial resources and support groups
- Reviewing your health concerns and needs on a one-on-one basis
- · Preparing you for upcoming doctor's visits, lab work, and more
- Negotiating fees and payment plans for non-covered services
- And more

HOME

You may contact HealthChampion 24 hours a day, 7 days a week by calling 1-800-327-1850.

Health Savings Account (HSA)

When you elect to enroll in the HSP medical plan, you have the opportunity to contribute **pre-tax dollars** deducted from your paycheck and deposited into a Health Savings Account (HSA) through Optum Bank. You are the owner of this bank account, and unlike a traditional Flexible Spending Account, your funds can rollover from year-to-year and build over time with potential interest earned. Use your HSA funds to pay for current health care expenses, or save them for future expenses – including those you have during retirement or if you leave Mauser. If you're turning age 55 or older in 2025, you can contribute an additional \$1,000 per year.

As part of your HSA/Wellness Incentive, Mauser Packaging Solutions will contribute to employee HSA accounts up to \$1,000 (single) or \$2,000 (family) for **FULL YEAR** participants. Of this amount, enrollees as of Jan. 1 will receive seed funding of \$250 (single) or \$500 (family) employer contribution deposited by the end of January. Remaining HSA dollars are tied to wellness activities and will be coordinated through Personify Health, formerly Virgin Pulse. Once HSA contributions are earned, they will be deposited to active employee accounts on or around the 15th of April, July, October and December.



Paying for eligible health care expenses out of your HSA is easy with your HSA debit card or you can submit a claim for reimbursement (up to the available balance in your account).

Tips On Managing Your HSA:

- Try not to use your HSA for routine expenses. If you can pay out-of-pocket, leave your HSA funds alone because they may grow for when you need them in the future.
- Consider electing supplemental medical plans to cover big ticket expenses from unexpected serious injuries or accidents and ensure they don't deplete your HSA.
- A balance over \$2,100 allows for investment options to grow your fund further. Monitor your HSA funds as they earn interest through investments.
- You may not contribute to an HSA if you are enrolled in Medicare in 2025 or in a PPO medical plan.

HOW MUCH CAN YOU CONTRIBUTE?	ANNUAL IRS CONTRIBUTION LIMIT	MAXIMUM ANNUAL EMPLOYER CONTRIBUTION	YOUR MAXIMUM CONTRIBUTION AMOUNT
Individual Coverage	\$4,300*	\$1,000	\$3,300**
Family Coverage	\$8,550*	\$2,000	\$6,550**

*Total IRS contribution limits for 2025 are cumulative of Mauser Packaging Solutions funding. Amounts change yearly per IRS guidelines. ** Individuals age 55 or older can make an additional \$1,000 in "catch up" contributions.

If you are new to the HSA, an account will be opened when you elect the Health Savings Account through the Benefits Portal.

NOTE: Due to the Patriot Act, Optum Bank may reach out to you via email to verify your identity and request supporting documentation. If no email is received, communication will be sent to you by mail. If you receive a request, you MUST reply in a timely manner so that your account can be opened to be able to receive the Mauser Packaging Solutions contributions, any contributions you decide to elect, and any HSA dollars earned through wellness activities. Failure to open your HSA may result in forfeiture of employer HSA contributions.

To determine how much you should contribute to your Health Savings Account, estimate your tax savings, and see how your savings may grow over time visit <u>www.openenrollment123.com</u>.

HSAs Deliver Triple Tax Savings

- **1.** You don't pay federal taxes on the contributions you make to your HSA.
- **2.** You don't pay taxes on the interest you earn in your account.
- **3.** You don't pay taxes when you use the money to pay for eligible health care expenses.

Personify Health: Wellness Program

Mauser Packaging Solutions is committed to your wellbeing and helping you be your best selves through our wellness program administered through Personify Health (formerly Virgin Pulse). The program encourages participants to become, or stay, engaged in their own health. Personify Health is **completely voluntary and confidential** and is available to employees who enroll in the Mauser Packaging Solutions medical plan. The best part, employees enrolled in Personify Health have the opportunity to earn Health Savings Account (HSA) Dollars or Rewards Cash!

HSP/HSA Plan participants may earn **\$\$ deposited to their HSA** (Health Savings Account) with Personify Health points from January 1 through November 30. Points equate to dollars that will be contributed to your HSA. Please see the points and levels chart below.*

LEVELS & POINTS:	LEVEL 1 7,500	LEVEL 2 15,000	LEVEL 3 22,500	LEVEL 4 30,000	TOTAL:
HSA Rewards (Single coverage)*:	\$75	\$150	\$225	\$300	\$750
HSA Rewards (employee plus or Family coverage)*:	\$150	\$300	\$450	\$600	\$1,500

Employees 65 and older may participate if they are not enrolled in Medicare in 2025.

PPO Plan participants may earn up to \$300 in Rewards Cash from January 1 to November 30. Rewards Cash can be redeemed in the Personify Health store for health and wellness items, gift cards, or charitable donations.**

LEVELS & POINTS:	LEVEL 1 7,500	LEVEL 2 15,000	LEVEL 3 22,500	LEVEL 4 30,000	TOTAL:
PPO Rewards (all coverage levels)**:	\$25	\$50	\$100	\$125	\$300

New To The Program?

- Start by making a commitment to healthier living and sign up on or after January 1 at join.personifyhealth.com/mauser or by downloading the mobile app for IOS or Android.
- Track your steps and earn points automatically: Redeem your FREE Max Go. Max Go[™] is a sleek and water-resistant daily activity tracker designed to work exclusively with your Personify Health account. Or, you can connect your own device & apps such as Apple Health, Google Fit, Fitbit, Garmin, etc.
- Participate in Health Assessments and Screenings, engage in Challenges, and use your personal page to choose other ways to earn points.
- Earn rewards every time you reach a level.

How To Redeem Your Free Max Go:

Access the Personify Health Store From Your Desktop:

- After you have registered, log into your Personify Health account at <u>member.personifyhealth.com</u>.
- Hover over your profile picture and a drop-down menu will appear.
- Click on the block labeled Store. Go to Products>Fitness Tracker Accessories>Max Go and choose Max Go.

Or Access the Personify Health Store From Your Smartphone:

- After you have downloaded the app, log into your Personify Health account.
- On the lower right hand side of your home screen, select More. On the next screen, select Store.
- Select the magnifying glass to search for: Max Go.

*Employees must be actively employed with Mauser Packaging Solutions on the day of deposit to receive any earned rewards. Earned rewards are deposited on or around the 15th of April, July, October and December.

**Federal tax law does not include a specific exemption for wellness program incentives; non-HSA wellness incentives are subject to the same tax rules as any other employee rewards or prizes.



Scan here beginning January 1 to get started with Personify Health

Dental Plan

Mauser's dental benefits, available through Guardian, offer you and your family coverage for maintaining your oral health. Regular dental cleanings and check-ups are extremely important to your overall health and you are encouraged to take advantage of your preventive care benefits.

Our plan provides for exams and cleanings every six months. You may seek care from any dentist, but by choosing in-network providers, you will lower your out-of-pocket costs. To find an in-network dentist, call toll-free at **1-800-541-7846** or go to <u>www.guardianlife.com</u> and select **Connect with us>Find a Provider** to select plan type and search by location or name. You may also download the Guardian dental mobile app to search for dentists and view your ID cards.

	In-Network	
Calendar Year Maximum	\$1,500	
Annual Deductible (Individual/Family)	\$50 / \$150	
Preventive Services	Plan pays 100%, deductible waived	
Basic Services	Plan pays 80% after deductible	
Major Restorative Services	Plan pays 50% after deductible	
Orthodontia (Children up to age 26)	Plan pays 50% after deductible	
Orthodontia Lifetime Maximum	\$1,500	
Fluoride Treatment (All ages)	Plan pays 100%, deductible waived	
ViziLite Cancer Screening	Plan pays 100%, deductible waived	

What Does Preventive Dental Care Typically Cover?

Every dollar spent on preventive care can save you money later on procedures that are more urgent, complex, and costly.



Routine dental checkups and cleanings should be

scheduled every six months. Your dentist may recommend more frequent or fewer visits, depending on your dental health history.



Professional fluoride

treatments can be a key defense against cavities if you're at high risk for decay. Professional fluoride treatments have significantly more fluoride than tap water or toothpaste, and take only a few minutes to apply.

Dental sealants go a

step beyond fluoride by providing a thin, plastic coating to the chewing surface of your teeth. Most dental plans cover sealants as preventive care for children under 16 on their unrestored permanent molars.



X-ray images of your mouth may be taken by your dentist or dental hygienist to better evaluate your oral health. These images go beneath the surface to provide a more detailed look inside your teeth and gums.

Vision Plan

Mauser offers you vision benefits through EyeMed to ensure that you and your family have access to quality, affordable eye care. Your routine vision exams, eyeglasses, or contact lenses are available through EyeMed's network of vision care providers. To find an in-network provider, go to <u>www.eyemed.com</u> and click **Find an Eye Doctor** or call **1-844-225-3107**.

	In-Network	
Eye Examination Copay (every 12 months)	\$10 copay	
Lenses (every 12 months)		
Single Vision	\$15 copay	
Bifocal	\$15 copay	
Trifocal	\$15 copay	
Frames (every 2 years)	Plan pays 100% up to \$150, 20% off amount over \$150	
Contact Lenses (once per 12 months in lie	eu of eyeglass lenses)	
Conventional	\$150 allowance, then 15% off amount over \$150	
Disposable	\$0 copay, 100% of balance over \$150	
Lucit on DDK from U.C. Lucon Not could	15% off retail or 5% off promo price;	
Lasik or PRK from U.S. Laser Network	call 1-800-988-4221 for more information	

In addition to your EyeMed benefits, you can also take advantage of discounts through vision retailers like LensCrafters and Target Optical, including Freedom Pass. Once enrolled, you'll receive details in your member Welcome Kit on how to take advantage of these special savings.

For more information, visit the EyeMed Virtual Benefit Fair at <u>https://eyemedvirtualbenefitfair.com/</u> and enter password LM5387MV.

Eyemed Hearing Benefits

As an EyeMed member, you'll also have access to hearing tests and discounts through Amplifon Hearing Health Care. Call **1-877-203-0675** or visit <u>www.eyemed.com</u> and click **EyeMed Perks** for more information.

5 Tips for a Lifetime of Healthy Vision

- Quit Smoking. Smoking increases your risk of
 developing macular degeneration, optic nerve damage, and cataracts.
- Practice safe wear and care of contact lenses.
 Keep them clean and follow the recommendations for use and wear.
- Schedule yearly eye exams. Visiting your eye doctor regularly helps you see your best, protect your sight, and even detect serious health conditions such as diabetes.
- 2. Protect your eyes against UV rays. No matter what the season, it is important to wear sunglasses. When selecting and purchasing sunglasses, be sure to confirm they offer 100% UVA/UVB protection.
- Give your eyes a break from digital devices.
 Digital screens emit a specific type of blue and violet light which can negatively impact eye health and cause digital eye strain.



Flexible Spending Accounts (FSAs)

FSAs are a great way to save because they let you set aside pre-tax dollars to pay for out-of-pocket health care expenses, such as deductibles, copays, and coinsurance, as well as, dependent care expenses. Please note: Employees are only eligible to enroll in the Health Care FSA plan if they enroll in the PPO medical plan or waive medical coverage through Mauser Packaging Solutions.

Health Care – \$3,200* Annual Maximum

Based on your estimated amount of medical outof-pocket expenses, the annual amount you elect is evenly deducted out of each paycheck throughout the year. Once you have elected your FSA amount, you may not change it without a Qualifying Life Event. Please be aware that any unused balance will be forfeited back into the plan. If employment is terminated, you have until the end of the month to use your balance. You can incur expenses only during the plan year you are enrolled (January 1 through December 31) , and the claim filing deadline is 90 days after the end of the plan year on December 31.

HEALTH CARE FSA CALCULATION WORKSHEET	AMOUNT SPENT IN AVERAGE YEAR
Doctor visits?	
Hospital services?	
X-rays, lab exams, tests?	
Glasses/contacts and cleaning supplies?	
Eye doctor visits?	
Prescriptions?	
Dental expenses?	
Total: regular expenses (max. yearly contribution = \$3,200)	
 Number of paychecks you receive each year 	
= Amount to deposit into your health care reimbursement plan each pay period	

Dependent Care – \$5,000* Annual Maximum – A Dependent Care FSA is available to employees who have a dependent child under the age of 13 or parent for which they pay expenses such as day care, preschool, or after school care. Funds in the Dependent Care FSA are not to be used for medical care. It is advised that you seek advice from your tax preparer.

DEPENDENT CARE FSA CALCULATION WORKSHEET	AMOUNT SPENT IN AVERAGE YEAR
Last year's tax credit-eligible day care expenses?	
Day care/preschool programs?	
After-school programs?	
Adult day care or elder care?	
+ Any fee increases?	
Total: regular expenses (max. yearly contribution = \$5,000)	
÷ Number of paychecks you receive each year	
= Amount to deposit into your dependent care reimbursement plan each pay period	

reimbursement plan each pay period

Limited Purpose - \$3,200* Annual Maximum Works with the HSP/HSA medical plan to cover dental and vision expenses. The Limited Purpose FSA functions the same as a Health Care FSA. Any unused balance will be forfeited back into the plan.

*2024 Annual Maximums. Upon publication, 2025 Annual Maximums for Health Care, Limited Purpose, and Dependent Care were not yet known.

USE IT OR LOSE IT: Be sure to calculate your FSA contributions carefully; FSAs are useit-or-lose-it accounts. Also, the funds won't rollover from year-to-year, and you will have to actively re-enroll on a yearly basis. You will not automatically be re-enrolled.

FSA Reminders

- You cannot use money from the Health Care or Limited Purpose FSA to cover expenses eligible under the Dependent Care FSA or vice versa.
- Save your receipts. No matter how you access your FSA Funds, be sure to keep your receipts to validate your reimbursements.
- You must re-enroll each year if you wish to continue funding the account(s).
- Your entire Health Care or Limited Purpose FSA balance, even money you have not yet contributed, is available as of January 1.
- Dependent Care funds are only available as you contribute to them through payroll deductions.

New Jersey Parking & Transit – \$315 Monthly Maximum – Residents of NJ have the option to set aside pre-tax dollars to pay for certain expenses incurred for work-related parking and transit. For more information on how this benefit works, contact Optum Bank at 1-877-311-7849.

WHAT'S AN ELIGIBLE EXPENSE?

Health Care & Limited Purpose FSA - to learn more, see IRS Publication 502 at www.irs.gov

Dependent Care FSA - to learn more, see IRS Publication 503 at <u>www.irs.gov</u>

Critical Illness Insurance

Protect yourself and your family from the unexpected costs of a covered critical illness with Group Critical Illness Insurance.

Even the most generous medical plan does not cover all of the expenses of a critical illness like a heart attack or cancer. Critical Illness Insurance pays a full lump sum benefit as elected, based on the condition, directly to you (unless otherwise assigned) if you are diagnosed with a covered critical illness. The benefit is paid in addition to any other insurance coverage you may have. You can choose a coverage amount when you enroll: **\$10,000, \$20,000, \$30,000 or \$40,000**. See the Mauser Benefits Portal for additional information.

Covered Critical Illnesses Include:

- Heart Attack
- Stroke
- Cancer
- Major Organ Failure
- End Stage Renal (Kidney) Failure
- Alzheimer's Disease

Plan Features:

- Guaranteed Issue: There are no health questions or physical exams required.
- **Family Coverage:** You can elect to cover your spouse and children.*

Health Screening Benefit: The plan provides a \$75 benefit per covered employee and spouse (benefit is not payable for dependent children) per calendar year for having a covered health screening test such as a mammogram, blood test for triglycerides, serum cholesterol test to determine level of HDL and LDL, and more.

How Critical Illness Insurance Works

When Sam had a stroke, they were grateful their doctors were able to stabilize their condition, but they learned there was some permanent damage to their vision requiring additional medical care. They began to see their out-of-pocket costs adding up quickly. The good news is they received a lump sum payment of \$10,000 to help cover these expenses from the Critical Illness coverage they elected during Open Enrollment.



Portable Coverage: You can take your plan with you if you change jobs or retire.

Why We Offer Supplemental Benefits

Medical insurance may not prevent all of the financial strain of a major illness or injury.

Many families may not have enough in their savings to cover the deductible and coinsurance of a major medical event. Supplemental benefits can help cover this out-of-pocket cost.

The benefits are paid directly to you, allowing you to use the funds however you choose. You receive the full benefit even if you have other insurance.

Please note: These plans are not replacements for medical insurance.

*If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child.

If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.

Accident Insurance

Group Accident Insurance provides cash benefits directly to you (unless otherwise assigned) that help with medical and non-medical out-of-pocket expenses associated with treatment in the event of a covered accident. The benefit amount is calculated based on the type of injury, its severity, and what medical services are required in treatment and recovery. The plan covers a wide variety of injuries and accident-related expenses, including:

Ambulance	\$500
Eye Injury	\$300
Medical Testing	\$150
Concussion	\$500
Hospital Admission	\$1,000

The plan includes an Organized Sports Activity Benefit Rider that increases your benefit amount by 25% for injuries resulting from an accident that occurs while participating in an organized sports activity.

Plan Features

\bigotimes	Guaranteed Issue: There are no health questions or physical exams required.
\bigotimes	Family Coverage: You can elect to cover your spouse and children.*
\bigotimes	24/7 Coverage: Benefits are paid for accidents that happen on and off the job.
\bigotimes	Portable Coverage: You can take your plan with you if you change jobs or retire.

Health Screening Benefit: The plan provides a \$75 benefit per covered person per calendar year if you, your covered spouse, or your covered child completes a covered wellness test such as an annual physical exam, mammogram, pap smear, eye exam, and more.

How Accident Insurance Works

Pat loves working in the backyard garden on the weekends. One day while carrying some supplies, they trip and sprain their ankle and break their big toe!

The accident requires not only a trip to the emergency room, but also physician follow-up visits, and physical therapy treatments. Fortunately, Pat has **Accident Insurance** which helps cover the out-of-pocket medical costs, including the deductible and coinsurance.

How Pat's Accident Benefit Was Calculated:

Medical Service	Sample Benefit
Emergency Room	\$ 300
Fracture Benefit	\$ 480
Physician Follow-Up Visits (3)	\$ 300 (\$100 per visit)
Physical Therapy Visits (10)	\$ 500 (\$50 per visit)

Total Sample Benefit

\$1,580

See the Mauser Benefits Portal for additional information.

This plan is not a replacement for medical insurance.

CONTACTS

*If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child.

If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.



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Hospital Indemnity Insurance

Receive lump sum payments to help cover the cost of a hospital stay for you and your family.

If you are admitted into a hospital, it doesn't take long for the out-of-pocket costs to add up. Group Hospital Indemnity Insurance pays lump sum benefits directly to you (unless otherwise assigned) if you are admitted into a hospital for care due to a covered sickness or injury. Benefits are paid even if you have other coverage.

You receive a benefit for hospital admission and then an additional benefit based on the number of days you are confined to the hospital.

Plan Features

Guaranteed Issue: There are no health questions or physical exams required.

Family Coverage: You can elect to cover your spouse and children.*

Payroll Deduction: Premiums are paid through convenient payroll deductions.

Portable Coverage: You can take your plan with you if you change jobs or retire.

Health Screening Benefit: The plan provides a \$75 benefit per covered person per calendar year if you, your covered spouse, or your covered child completes a covered wellness test such as a mammogram, pap smear, immunization, and more.

TREATMENT	BENEFIT	
Hospital Admission	\$500 per calendar year	
Hospital Confinement	\$100 per day	



How Hospital Indemnity Insurance Works

Taylor is injured in a car accident and is in the hospital for four days. They are then moved to a rehabilitation unit for three additional days. Taylor has Hospital Indemnity Insurance. They receive a benefit for being admitted into the hospital and a benefit for each day of their in-patient and rehab stays.

How Taylor's Hospital Indemnity Benefit Was Calculated:

Medical Service

Hospital Admission Hospital Confinement Inpatient Rehabilitation Unit

Sample Benefit	Total
\$500 per admission	\$500
\$100 per day <i>(4 days)</i>	\$400
\$100 per day <i>(3 days)</i>	\$300

\$1,200

Total Sample Benefit

See the Mauser Benefits Portal for additional information.

This plan is not a replacement for medical insurance.

*If you elect coverage for your dependent children, you must provide notification to your employer when all of your dependent children exceed the dependent child age limit or no longer otherwise meet the definition of a dependent child.

If you elect coverage for your spouse, you must provide notification to your employer if your spouse no longer meets the definition of a spouse.







Did You Know?

A child's Social Security number gives ID thieves a fraudulent "clean slate."

Monitor your child's credit report as often as your own.

Identity Theft and Legal Protection

Identity Protection, Restoration, and Reimbursement

Digital thieves constantly discover new ways to extract your personal information, open credit accounts in your name, sell your sensitive data on the dark web, and take over your financial accounts.

Allstate Identity Protection delivers the Connect+ plan which is designed with proactive measures to help you avoid identity theft. With security services activated, you can protect and monitor your identity, accounts, and credit. In the event you become a victim of identity fraud, there is full-service remediation support to restore your identity and insurance up to \$1,000,000*. All family members are managed under the primary member's account, which requires an email address.

AWARENESS

- Secure portal access
- Identity Health Status
- Monthly e-newsletter
- Rapid alerts
- Credit fraud alerts

MONITORING

- Allstate Digital Footprint
- High-risk transaction monitoring
- Financial transaction monitoring
- Dark-web monitoring
- Data breach notifications

RESTORATION

- U.S.-based, 24/7 customer care
- Full-service remediation support
- Identity theft expense coverage*
- Stolen funds reimbursement*
- Lost wallet assistance

Learn more at <u>www.aip.com</u>.

Allstate Identity Protection is offered and serviced by InfoArmor, Inc., a subsidiary of The Allstate Corporation.

*Identity Theft Insurance underwritten by insurance company subsidiaries or affiliates of Assurant. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

Legal Protection

LegalShield provides you and your family direct access to a dedicated provider law firm who can review and prepare legal documents (such as Wills) and assist with other personal legal matters (such as speeding tickets, neighbor disputes, and family related matters including adoption). A sample of covered services includes document review and preparation, advice and consultation, court representation for covered matters and demand letters and phone calls made on your behalf. This plan also provides up to 20 hours of coverage for an uncontested divorce.* Log into the Benefits Portal to access a brochure that outlines all the coverage this benefit provides. 100% of matters are covered in-network.

For more information, please visit <u>https://www.shieldbenefits.com/mauserpackaging</u>.

If you enroll in LegalShield you will receive a letter in the mail when your benefit becomes effective. Follow the instructions included to access your benefits.

* If the Divorce, Separation, or Annulment is contested, up to twenty (20) hours of the lawyer's time is paid in full. If the Divorce, Separation, or Annulment is uncontested the lawyer's time is paid in full.

Employee Assistance Program and 401(K)

We offer a variety of other benefits that give you options beyond health care and income protection.

The Hartford GuidanceResources® Employee Assistance Program (EAP)

There are times in life when you might need a little help coping or figuring out what to do. Take advantage of the Employee Assistance Program (EAP) which includes CONFIDENTIAL Counseling Services and Telephonic Support, available to you and your household members at no cost 24/7. Receive professional support and consultation with issues including:

- Work/life support support with personal and family matters, as well as, stressors associated with life's milestones or circumstances.
- **Personal Convenience Services** on child care, elder care, education, moving /relocation, etc.
- Legal Services for information from licensed staff attorneys on family law, bankruptcy, real estate, estate planning, and adoption.
- **Financial Services** from expert CPAs and CFPs on budgeting, investments and credit matters.

Services now include five face-to-face counseling sessions per occurrence per year. Call **1-800-327-1850** or visit <u>www.guidanceresources.com</u> for support. If you're a first-time user, enter Web ID: **HLF902** in the Organization Web ID field. In the Company Name field at the bottom of the personalization page, enter: **MAUSE**. After selecting Mauser Packaging Solutions, create your own confidential username and password.

401(k) Retirement Plan

Financial security is an important part of your overall financial wellness. Because of this, Mauser Packaging Solutions offers a robust 401(k) retirement plan through Vanguard.

- ELIGIBILITY: Employees (including interns) are eligible to participate upon date of hire.
- AUTOMATIC ENROLLMENT IN THE FIRST YEAR: Unless you elect otherwise on the Vanguard site, after 30 days of service, an automatic contribution of 2% of your eligible compensation will be deducted from your paycheck on a **pre-tax** basis and contributed to your Mauser Packaging Solutions 401(k) Plan account. Your plan number is **092237**.
- AUTOMATIC ANNUAL CONTRIBUTION INCREASE: Unless you elect otherwise, after completion of one year of service your contribution will automatically increase by 1% of your eligible compensation each year until your contributions reach 6%.
- **COMPANY MATCH:** After one year of service, Mauser Packaging Solutions will match 100% on the first 4% of eligible compensation you contribute.
- ANNUAL CONTRIBUTION LIMITS: Go to <u>www.vanguard.com/contributionlimits</u> for your 401(k) contribution limits.
- CATCH-UP CONTRIBUTIONS: If you are age 50 or older you may be eligible to make an additional "catch-up contribution." For more information please go to <u>www.vanguard.com/contributionlimits</u>.
- **PRE OR POST TAX CONTRIBUTIONS:** To maximize your options, you have a choice as to whether you contribute to the plan on a **pre-tax or after-tax basis**.
- **INVESTMENT OPTIONS:** Unless you elect otherwise, all contributions will be invested in the default Vanguard Target Date Fund closest to the date year you reach age 65. You have a variety of investment options to choose from and can change your investment choices at any time directly through Vanguard.
- **BENEFICIARIES:** Please review your beneficiary elections regularly by logging into your Vanguard account at <u>www.vanguard.com/retirementplans</u>.
- WEB REGISTRATION: Log on to your account at <u>www.vanguard.com/retirementplans</u> to check your balance, conduct transactions, research investments, update investments, use financial planning tools, and more. To register for secure online account access, you will need your plan number: 092237.
- DOWNLOAD THE MOBILE APP: Go to <u>www.vanguard.com/bemobile</u>, to access your account on the go.



Tuition Assistance, Travel Insurance, and Employee Discounts

Tuition Assistance Program

Mauser Packaging Solutions encourages a continuous learning environment and supports such learning through tuition assistance for job related educational courses. The Tuition Reimbursement Program is intended to cover courses offered by accredited local educational institutions.

Employees are eligible to begin a class after one year of service and coursework must be approved in advance by the Department Manager and Human Resources. This program will provide a maximum annual reimbursement of \$3,000/year for certificate programs, \$5,250/year for high school and undergraduate programs, and \$8,250/year for graduate or masters programs. Please contact your local Human Resources Representative for a copy of the Tuition Reimbursement Policy and application form.

Business Travel Accident Insurance

If you suffer a covered loss in an accident while traveling on Mauser Packaging Solutions business, Business Travel Accident Insurance, with New York Life, will be payable in addition to any of your other life insurance benefits. You are covered for \$200,000 effective your first day of active employment, with Mauser Packaging Solutions paying for the full cost of coverage. New York Life also offers pre-trip planning, assistance while traveling, and emergency medical transportation benefits for covered persons traveling 100 miles or more from home. To learn more, call **1-888-226-4567**.

BenefitHub – Employee Discount Program

Find local offers, save money on thousands of national brands, and earn rewards through the BenefitHub Discount Marketplace. Shopping categories include clothing and shoes, electronics, restaurants, entertainment, and more. To register, go to https://mauserpackaging.benefithub.com, and enter referral code UBMA3L, and create an account to complete your registration.

NEW! Active & Fit Direct – Gym Membership Discount Program

Membership includes access to 12,700+ standard gyms and/or 8,700+ exercise studios, on demand workout videos, activity tracking, wellness coaching, and more. Once enrolled, you can enroll your spouse or domestic partner. To register, go to https://digital.alight.com/mauserpackaging.

Disability Insurance

Whether you are totally disabled and unable to work due to an accident or illness, Mauser Packaging Solutions provides disability benefits. Mauser Packaging Solutions pays the full cost of coverage for these benefits. Disability benefits will be provided once you satisfy the waiting period based on whether you experience an accident or illness. If your absence is scheduled, such as a hospital stay, it is recommended to contact The Hartford 30 days prior to your last day of work. If your absence is not scheduled, contact The Hartford as soon as possible, but not more than 3 days from absence, by calling **1-888-899-3891**.

Short-Term Disability Insurance (STD)

Short-Term Disability Insurance replaces a portion of your income if an injury or illness forces you out of work for an extended period of time.

COVERAGE	BENEFITS	
Waiting Period	Accident: 0 days / Illness: 7 days	
Benefit	\$400 per week	
Benefits Payable	Up to 13 weeks	



It is recommended you provide Short-Term Disability documentation to The Hartford as soon as possible to limit any disruption regarding pay or benefits.



Life and AD&D Insurance

Basic Term Life and Accidental Death and Dismemberment Insurance

Life and Accidental Death & Dismemberment (AD&D) Insurance provide coverage to help you preserve your family's lifestyle and enable them to live comfortably in the future. Mauser Packaging Solutions provides each employee with Basic Life and Basic AD&D Insurance through MetLife, and pays for the full cost of coverage. Coverage is calculated based on your hourly rate multiplied by 2,080 hours per year. The Basic Life and AD&D benefits reduce based on age: age 70 - receive 50%; age 75 - receive 40%; age 80 - receive 30%. Should you receive the unfortunate diagnosis of a terminal illness, an accelerated benefit of up to 75% of the face value is included in this plan. Mauser Packaging Solutions also provides Dependent Life Insurance for your spouse and dependent children up to age 26 at no cost to you if the dependent is documented in the Mauser Benefits Portal. This benefit can be converted upon termination.

- Hourly rate x 2,080 hours per year Life Insurance, AD&D
- \$4,000 for your spouse Life Insurance
- \$2,500 for each dependent child Life Insurance

Supplemental Life Insurance

You have the option to supplement your Basic Life Insurance by purchasing additional after-tax amounts of coverage through MetLife up to five times your annual base salary to a combined maximum of \$2,000,000 for Basic and Supplemental Life coverage. Amounts over \$1,250,000 require Evidence of Insurability at initial enrollment. Should you receive the unfortunate diagnosis of a terminal illness, an accelerated benefit of up to 75% of the face value is included in this plan. The policy is portable if you leave Mauser Packaging Solutions and follows the same benefits reduction schedule outlined in the Basic Life section above. Supplemental Life Insurance reduces based on age, similar to the above Basic Life Insurance reductions.

You also have access to Will Preparation and Estate Resolution Services when you purchase Supplemental Life Insurance through MetLife. Will Preparation fully covers legal fees by a Network Attorney for preparing or updating a will, living will or power of attorney. Estate Resolution fully covers attorney fees by a Network Attorney to settle an estate.

Contact a representative for more information by calling MetLife at 1-800-638-6420.



Contact Information

BENEFIT/INSURANCE COMPANY	GROUP #	PHONE NUMBER	WEBSITE
401(k) Retirement – Vanguard	092237	1-800-523-1188 1-800-828-4487 (Spanish)	www.vanguard.com/ retirementplans
Accident, Critical Illness & Hospital Indemnity Insurance – MetLife	9235264	1-800-438-6388	www.metlife.com/mybenefits
Benefits Service Center	N/A	1-833-793-0802 (9am-6pm CT, M-F)	https://digital.alight.com/ mauserpackaging
Business Travel Accident – New York Life	ABL667894	Contact Local Human Resources	Contact Local Human Resources
Dental – Guardian	400175	1-800-541-7846	www.guardianlife.com
Disability/FMLA – The Hartford	681997	1-888-899-3891	https://mybenefits. thehartford.com
EAP - The Hartford Guidance Resources & HealthChampion	Org. Web ID: HLF902 Company Name: MAUSE	1-800-327-1850	www.guidanceresources.com
Employment Verification – The Work Number	16978	1-800-367-2884	www.employees. theworknumber.com
Flexible Spending Accounts (Health Care, Limited Purpose, Dependent Care, NJ Parking & Transit) – United Healthcare	711193	1-877-311-7849 (To request additional or new cards, call 1-866-755-2648)	www.myuhc.com
Health Savings Account – Optum Bank	707605	1-866-234-8913	www.optumbank.com
Identity Theft – AllState Identity Protection	N/A	1-800-789-2720	www.aip.com
Legal Plan – LegalShield	N/A	1-888-807-0407	www.shieldbenefits.com/ mauserpackaging
Life Insurance – MetLife	235264	1-800-638-6420	www.metlife.com/mybenefits
Medical – United Healthcare	707605	1-866-734-7670	www.myuhc.com
Medicare Questions	N/A	1-800-MEDICARE (1-800-633-4227)	www.medicare.gov
Quit For Life Tobacco Cessation Program – United Healthcare	707605	1-866-784-8454	www.quitnow.net
Prescription Plan – OptumRx	N/A	1-800-848-4954	www.optumrx.com
Vision – EyeMed	1034422 – Small Packaging 1034423 - NCG 1034424 - ICS 1034425 – Large Packaging	1-844-225-3107	www.eyemed.com
Wellness Program – Personify Health	N/A	1-888-671-9395 (8am-9pm ET)	join.personifyhealth.com/mauser



For more information, visit the Mauser Benefits Portal at <u>https://digital.alight.com/</u> <u>mauserpackaging</u>



BENEFITS SERVICE CENTER

Call **1-833-793-0802** to speak with a representative Monday – Friday 9:00 a.m. – 6:00 p.m. (CT)

номе

Employee Contributions

Salary-Based Contributions For Medical Coverage

Your health insurance cost is based on plan type, your salary band, and the tier for your specific level of coverage needed.

Your salary band is based on your annual base salary (i.e. not inclusive of overtime or other pay) at the time of enrollment. NOTE: A change to your annual base salary occurring during the health care year and that results in a different salary band, won't be updated/reflected until the following year.

Medical

HSP/HSA PLAN MONTHLY COSTS		PPO PLAN MONTHLY COSTS	
SALARY < \$50,000		SALARY < \$50,000	
Employee Only	\$160.00	Employee Only	\$196.00
Employee + Spouse	\$401.00	Employee + Spouse	\$490.00
Employee + Child(ren)	\$352.00	Employee + Child(ren)	\$433.00
Family	\$420.00	Family	\$514.00
			150 000

SALART \$50,000 - \$150,000		SALART \$50,000 - \$150,000	
Employee Only	\$173.00	Employee Only	\$212.00
Employee + Spouse	\$432.00	Employee + Spouse	\$529.00
Employee + Child(ren)	\$379.00	Employee + Child(ren)	\$460.00
Family	\$453.00	Family	\$555.00

SALARY \$150,000+		SALARY \$150,000+	
Employee Only	\$186.00	Employee Only	\$229.00
Employee + Spouse	\$466.00	Employee + Spouse	\$573.00
Employee + Child(ren)	\$403.00	Employee + Child(ren)	\$484.00
Family	\$489.00	Family	\$602.00

*If your spouse is offered medical coverage through his/her employer, but you choose to cover on Mauser's medical plan, there will be a \$100 pre-tax monthly surcharge added to your medical premiums.

**Tobacco is proven to increase medical costs; employees who choose to use tobacco will have a monthly surcharge added to their medical premiums of \$25 (Employee Only) and \$59 (Employee + and Family).

VOLUNTARY PLANS

MONTHLY COST (POST-TAX)	ACCIDENT INSURANCE	HOSPITAL INDEMNITY
Single	\$9.62	\$8.54
Employee + Spouse	\$18.11	\$19.20
Employee + Child(ren)	\$22.53	\$13.87
Family	\$26.95	\$25.48

Dental & Vision

MONTHLY COST (PRE-TAX)	DENTAL	VISION
Employee	\$21.49	\$5.32
Employee + Spouse	\$34.80	\$10.11
Employee + Child(ren)	\$31.73	\$10.64
Family	\$38.89	\$15.64

ID Theft

MONTHLY COST (POST-TAX)	
Single	\$4.00
Family	\$12.00

Legal Plan

MONTHLY COST (POST-TAX)	
Full Coverage	\$22.25

(includes employee + spouse + child(ren) up to age 26)

BASIC LIFE

Mauser Packaging Solutions provides Basic Life Insurance and pays the full cost of coverage.

CRITICAL ILLNESS

Critical Illness rates are based on age, coverage amounts, and tobacco use. Your cost for coverage can be calculated when making elections in the Benefits Portal.

DISABILITY INSURANCE

Mauser Packaging Solutions provides Disability and pays the full cost of coverage.

SUPPLEMENTAL LIFE

Supplemental Life rates are based on age and coverage amounts. Your cost for coverage can be calculated when making elections in the Mauser Benefits Portal.

Important Notices

About This Guide

This guide highlights your benefits. Official plan and insurance documents govern your rights and benefits under each plan. For more details about your benefits, including covered expenses, exclusions, and limitations, please refer to the individual Summary Plan Descriptions (SPDs), plan document, and/or certificate of coverage for each plan. Your SPDs can be obtained by logging into the Mauser Packaging Solutions Benefits Portal. If you are unable to access these for any reason, contact the Benefits Service Center for a printed copy.

Enclosed are important notices about your rights under your health and welfare plan (United Healthcare medical plans), the "Plan." The information in the accompanying guide provides updates to your existing SPDs as of 1/1/2025 and is intended to be a Summary of Material Modification.

If any discrepancy exists between this guide and the official documents, the official documents will prevail. Mauser reserves the right to amend or terminate any of its plans or policies, make changes to the benefits, costs, and other provisions relative to benefits at any time with or without notice, subject to applicable law.

Reminder of Availability of Privacy Notice

This is to remind plan participants and beneficiaries of the Mauser United Healthcare medical plans (the "Plan") that the Plan has issued a Health Plan Privacy Notice that describes how the Plan uses and discloses protected health information (PHI). You can obtain a copy of the Mauser United Healthcare medical plans Privacy Notice upon your written request to the Human Resources Department, at the following address:

Mauser Packaging Solutions, Human Resources 1515 W. 22nd St., Suite 1100 Oak Brook, IL 60523

If you have any questions, please contact the Mauser Human Resources Office at **1-630-203-4087**.

Patient Protection Notice

United Healthcare medical plans generally allows the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members.

For information on how to select a primary care provider, and for a list of the participating primary care providers, contact the United Healthcare at **1-866-734-7670**.

For children, you may designate a pediatrician as the primary care provider.

You do not need prior authorization from United Healthcare medical plans or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in-network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a preapproved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact the United Healthcare at 1-866-734-7670.

Women's Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. If you would like more information on WHCRA benefits, call your plan administrator at **1-866-734-7670**.

Newborns' and Mothers' Health Protection Act Disclosure

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

USERRA

Your right to continued participation in the Plan during leaves of absence for active military duty is protected by the Uniformed Services Employment and Reemployment Rights Act (USERRA). Accordingly, if you are absent from work due to a period of active duty in the military for less than 31 days, your Plan participation will not be interrupted, and you will continue to pay the same amount as if you were not absent.

If the absence is for more than 31 days and not more than 24 months, you may continue to maintain your coverage under the Plan by paying up to 102% of the full amount of premiums. You and your dependents may also have the opportunity to elect COBRA coverage. Contact United Healthcare medical plans for more information.

Also, if you elect not to continue your health plan coverage during your military service, you have the right to be reinstated in the Plan upon your return to work, generally without any waiting periods or pre-existing condition exclusions, except for service-connected illnesses or injuries, as applicable.

Important Notice from Mauser About Your Prescription Drug Coverage and Medicare

Medicare Part D Notice of Creditable Coverage

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Mauser Packaging Solutions and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. Mauser has determined that the Mauser prescription drug coverage option(s) listed below is, on average, for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage.

Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage If You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Mauser coverage generally will not be affected.

Your Mauser coverage pays for other medical expenses in addition to prescription drugs. You or your covered family members who join a Medicare prescription drug plan will be eligible to continue receiving prescription drug coverage and these other medical benefits.

If Mauser pays primary to Medicare, for example with active employees and spouses of active employees who are Medicare eligible due to age, Medicare will pay after the Mauser prescription drug plan pays. In limited instances, Mauser will pay after Medicare pays; for example, Medicare pays before your employer provided coverage for certain individuals who have been permanently disabled subject to the Medicare Secondary Payer rules. You will not be dis-enrolled from the Mauser prescription drug plan if you enroll in a Medicare drug plan. However, you should be aware that Mauser will not reimburse you for any Medicare prescription drug premium that may apply if you join a Medicare drug plan.

If you or any covered dependents do decide to join a Medicare drug plan be aware that you and/or your dependents will not be able to get primary prescription drug coverage from Mauser back subject to mid-year enrollment rules (for example, at next year's annual enrollment).

When your creditable prescription drug coverage ends, you will be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan. Note that you may pay a higher premium (a penalty) if you join a Medicare drug plan outside of this SEP.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Mauser and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information

Web: digitalalightcom/mauserpackaging

Please address any written correspondence to: Mauser Packaging Solutions 1515 W. 22nd St Suite 1100, Oak Brook IL, 60523

Note: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Mauser Packaging Solutions changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage:

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance
 Assistance Program for personalized
 help. See the inside back cover of
 your copy of the "Medicare & You"
 handbook for their telephone number.

Call 1-800-MEDICARE

 (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help:

- Visit Social Security on the web at www.socialsecurity.gov, or
- Call 1-800-772-1213. TTY users should call 1-800-325-0778.

Remember: Keep this Creditable

Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: October 1, 2024 Name of Entity/Sender: Mauser Packaging Solutions Contact: Susanne Furlan Address: 1515 W. 22nd St., Suite 1100, Oak Brook, IL 60523 Phone Number: 1-630-203-4087

Notice Regarding Wellness Program

Reasonable Alternative Standard Notice for Health Contingent Wellness Programs Your health plan is committed to helping you achieve your best health. Rewards

for participating in a wellness program

are available to employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact Personify Health at (855) 924-1768 or email support@personifyhealth.com to develop another way for you to qualify for the wellness incentive reward. **EEOC Notice Regarding Wellness Program**

Mauser's wellness program through Personify Health is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employersponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic

Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. Monetary incentives may be available for employees who participate in certain health-related activities or achieve certain health outcomes. If you are unable to participate in any of the healthrelated activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting Personify Health at (855) 924-1768 or emailing support@personifyhealth.com. Protections From Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and Mauser may use aggregate information it collects to design a program based on identified health risks in the workplace, Personify Health will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment. Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is a registered nurse/ health coach in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately. You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Mauser Packaging and request to speak to the Benefits Department by calling **1-800-527-2267.**

HIPAA Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in the Mauser group health plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage). In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption. To request special enrollment or obtain more information, contact The Benefit Service Center at 833-793-0802 9 am - 6 pm CST, M-F..

Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **www.healthcare.gov**.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available. If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employersponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2024. Contact your State for more information on eligibility –

- 1. ALABAMA Medicaid Website: http://myalhipp.com/ Phone: 1-855-692-5447
- ALASKA Medicaid The AK Health Insurance Premium Payment Program Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: https://health.alaska.gov/dpa/Pages/defa ult.aspx
- 3. ARKANSAS Medicaid Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)
- 4. **CALIFORNIA** Medicaid Health Insurance Premium Payment (HIPP) Program Website: http://dhcs.ca.gov/hipp Phone: 916-445-8322 Fax: 916-440-5676 Email: hipp@dhcs.ca.gov
- COLORADO Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+) Health First Colorado Website:

https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/State Relay 711 CHP+: https://hcpf.colorado.gov/childhealth-plan-plus

CHP+ Customer Service: 1-800-359-1991/State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.mycohibi.com/ HIBI Customer Service: 1-855-692-6442

- FLORIDA Medicaid Website: https://www.flmedicaidtplrecovery.com/fl medicaidtplrecovery.com/hipp/index.html Phone: 1-877-357-3268
- GEORGIA Medicaid GA HIPP Website: https://medicaid.georgia.gov/healthinsurance-premium-payment-programhipp Phone: 678-564-1162, Press 1

GA CHIPRA Website:

https://medicaid.georgia.gov/programs/th ird-party-liability/childrens-healthinsurance-program-reauthorization-act-2009-chipra Phone: 678-564-1162. Press 2

- INDIANA Medicaid Health Insurance Premium Payment Program All other Medicaid Website: https://www.in.gov/medicaid/ http://www.in.gov/fssa/dfr/ Family and Social Services Administration Phone: 1-800-403-0864 Member Services Phone: 1-800-457-4584
- 9. IOWA Medicaid and CHIP (Hawki) Medicaid Website: https://hhs.iowa.gov/programs/welcomeiowa-medicaid Phone: 1-800-338-8366 Hawki Website: https://hhs.iowa.gov/programs/welcomeiowa-medicaid/iowa-health-link/hawki Hawki Phone: 1-800-257-8563 HIPP Website:

https://hhs.iowa.gov/programs/welcomeiowa-medicaid/fee-service/hipp HIPP Phone: 1-888-346-9562

- 10. KANSAS Medicaid Website: https://www.kancare.ks.gov/ Phone: 1-800-792-4884 HIPP Phone: 1-800-967-4660
- 11. KENTUCKY Medicaid Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/membe r/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPP.PROGRAM@ky.gov KCHIP Website: https://kynect.ky.gov Phone: 1-877-524-4718 Kentucky Medicaid Website: https://chfs.ky.gov/agencies/dms
- 12. LOUISIANA Medicaid Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)
- 13. MAINE Medicaid Enrollment Website: https://www.mymaineconnection.gov/ben efits/s/?language=en_US Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Webpage: https://www.maine.gov/dhhs/ofi/applicati ons-forms Phone: 1-800-977-6740 TTY: Maine relay 711
 14. MASSACHUSETTS - Medicaid and CHIP Website:

https://www.mass.gov/masshealth/pa Phone: 1-800-862-4840 TTY: 711 Email:

masspremassistance@accenture.com

- MINNESOTA Medicaid Website: https://mn.gov/dhs/health-carecoverage/ Phone: 1-800-657-3672
- MISSOURI Medicaid Website: http://www.dss.mo.gov/mhd/participants/ pages/hipp.htm Phone: 573-751-2005
- 17. **MONTANA** Medicaid Website: http://dphhs.mt.gov/MontanaHealthcareP rograms/HIPP Phone: 1-800-694-3084 Email: HHSHIPPProgram@mt.gov
- NEBRASKA Medicaid Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178
- 19. NEVADA Medicaid Website: http://dhcfp.nv.gov Medicaid Phone: 1-800-992-0900
- 20. **NEW HAMPSHIRE** Medicaid Website: https://www.dhhs.nh.gov/programsservices/medicaid/health-insurancepremium-program Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext. 15218 Email:
- DHHS.ThirdPartyLiabi@dhhs.nh.gov 21. **NEW JERSEY** – Medicaid and CHIP Medicaid Website: http://www.state.nj.us/humanservices/dm ahs/clients/medicaid/ Phone: 1-800-356-1561 CHIP Premium Assistance Phone: 609-631-2392
 - CHIP Website:

http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710 (TTY: 711)

- 22. NEW YORK Medicaid Website: https://www.health.ny.gov/health_care/me dicaid/ Phone: 1-800-541-2831
- 23. NORTH CAROLINA Medicaid Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100
- 24. NORTH DAKOTA Medicaid Website: https://www.hhs.nd.gov/healthcare Phone: 1-844-854-4825
- 25. **OKLAHOMA** Medicaid and CHIP Website: http://www.insureoklahoma.org Phone: 1-888-365-3742
- 26. OREGON Medicaid Website: http://healthcare.oregon.gov/Pages/index .aspx Phone: 1-800-699-9075
- 27. **PENNSYLVANIA** Medicaid and CHIP Website: https://www.pa.gov/en/services/dhs/appl y-for-medicaid-health-insurance-premiumpayment-program-hipp.html Phone: 1-800-692-7462 CHIP Website: https://www.pa.gov/en/agencies/dhs/res ources/chip.html

CHIP Phone: 1-800-986-KIDS (5437)

- 28. RHODE ISLAND Medicaid and CHIP Website: http://www.eohhs.ri.gov/ Phone: 1-855-697-4347, or 401-462-0311 (Direct RIte Share Line)
- 29. SOUTH CAROLINA Medicaid Website: https://www.scdhhs.gov Phone: 1-888-549-0820
- 30. SOUTH DAKOTA Medicaid Website: http://dss.sd.gov Phone: 1-888-828-0059
- TEXAS Medicaid Website: https://www.hhs.texas.gov/services/finan cial/health-insurance-premium-paymenthipp-program Phone: 1-800-440-0493

- 32. UTAH Medicaid and CHIP Medicaid Utah's Premium Partnership for Health Insurance (UPP) Website: https://medicaid.utah.gov/upp/ Email: upp@utah.gov Phone: 1-888-222-2542 Adult Expansion Website: https://medicaid.utah.gov/expansion/ Utah Medicaid Buyout Program Website: https://medicaid.utah.gov/buyoutprogram/
- CHIP Website: https://chip.utah.gov/ 33. VERMONT – Medicaid Website: https://dvha.vermont.gov/members/medic aid/hipp-program Phone: 1-800-250-8427
- 34. VIRGINIA Medicaid and CHIP Website: https://coverva.dmas.virginia.gov/learn/pr emiumassistance/famis-select https://coverva.dmas.virginia.gov/learn/pr emium-assistance/health-insurancepremium-payment-hipp-programs Medicaid/CHIP Phone: 1-800-432-5924
- 35. WASHINGTON Medicaid Website: https://www.hca.wa.gov/ Phone: 1-800-562-3022
- 36. WEST VIRGINIA Medicaid and CHIP Website: https://dhhr.wv.gov/bms/ http://mywvhipp.com/ Medicaid Phone: 304-558-1700 CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)
- 37. WISCONSIN Medicaid and CHIP Website: https://www.dhs.wisconsin.gov/badgercar eplus/p-10095.htm Phone: 1-800-362-3002
- 38. WYOMING Medicaid Website: https://health.wyo.gov/healthcarefin/medi caid/programs-and-eligibility/ Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since July 31, 2024, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration www.dol.gov/agencies/ebsa 1-866-444-EBSA (3272) U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services www.cms.hhs.gov 1-877-267-2323, Menu Option 4, Ext. 61565

NOTE: Actual plan provisions for Mauser Packaging ("the Company") benefits are contained in the appropriate plan documents, including the Summary Plan Description (SPD) and incorporated benefit/carrier booklets. The Benefit Enrollment Guide is a summary only and does not describe each benefit option. This Benefit Enrollment Guide provides updates to your existing SPD as of the first day of plan year, which describes your health and welfare benefits in greater detail. Until the Company provides you with an updated SPD, this guide is intended to be a Summary of Material Modification (SMM) and should be retained with your records along with your SPD. As always, the official plan documents determine what benefits are available to you. If any discrepancy exists between this guide and the official documents, the official documents will prevail. The Company reserves the right to amend or terminate any of its plans or policies, make changes to the benefits, costs, and other provisions relative to benefits at any time with or without notice, subject to applicable law.



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