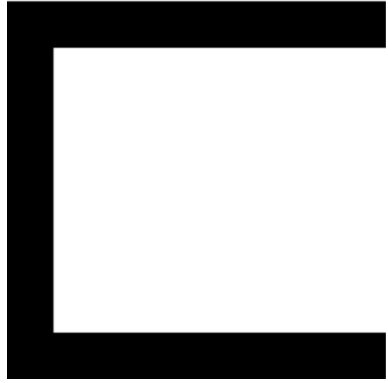
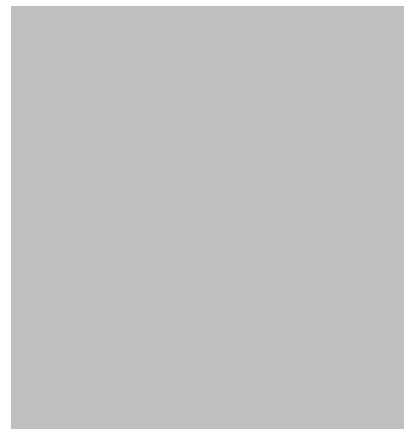


CAPCO



Summary of Employee Benefits



FORMING THE FUTURE OF FINANCE

CAPCO.COM

Welcome to your 2016 Employee Benefits Guide

We recognize the important role employee benefits play as a critical component of overall compensation. We continue to make every effort to target the best quality benefit plans for our staff and their families. Our program offers a range of plan options to meet the needs of our diverse workforce. We know that your benefits are important to you and your family. This program is designed to assist in providing for the health, well being and financial security of you and your covered dependents.

Benefits Guide Overview

Capco is proud to be able to offer a high quality menu of benefit choices, and the freedom to select coverage that will fit your insurance needs and your budget. This Benefit Guide, along with your benefit plan summaries provide an outline of the Capco benefits that are available to you and your family.

Please elect your benefits carefully since, in most cases, changes in your enrollment can only be made during the annual open enrollment period. The benefit elections you select during open enrollment remain in effect for the entire calendar year, unless you have an IRS qualified change in status. Qualifying events include a change in marital status, dependent status, employment status and other IRS defined events. You must make your new election within 30 days of the date of the qualifying event.

We are constantly striving to provide you and your families with a superior enrollment process and benefit packages. Please keep this book as an employee benefits reference guide. It contains general information regarding your benefits and important carrier information.

Eligibility

If you are a regular, full-time employee scheduled to work at least 30 hours a week, you are eligible for benefits on the first day of the month following your date of hire. This includes you, your legally dependent children, spouse and /or domestic partner.

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1 UNDERSTANDING YOUR MEDICAL PLAN

*Medical Questions? Need to Locate a Provider?
Contact United Healthcare
1-888-840-6010 or www.myuhc.com
Group #: 0700855
Plan Name: The Capital Markets Company*

Capco medical benefits are provided by United HealthCare. Employees may select either the HDHP with HSA plan, the Base Plan, the Buy Up Plan, or waive coverage altogether.

HOW TO LOCATE A NETWORK PROVIDER

Follow these easy steps to locate a doctor, hospital or health facility participating with United Healthcare.

STEP 1: Go to www.myuhc.com

Click on "Find a Physician, Laboratory or Facility."

STEP 2: Click on the link for "All UnitedHealthcare Plans" and select a network

- For the HDHP with HSA or the Buy Up Plan, select "Choice Plus"

- For the Base Plan, select "Choice"

STEP 3: Search for Physicians and Facilities by name, by location, or by specialty.

REGISTER AT MYUHC.COM and

- Track claims and account activity
- Review and compare prescription drug costs
- Get answers to coverage questions
- Find health advice
- And much more

Or, download the myuhc.com Health4Me app and access your account information through your Apple or Android smartphone.



2 UNDERSTANDING YOUR MEDICAL PLAN

Medical Questions? Need to Locate a Provider?

Contact United Healthcare

1-888-840-6010 or www.myuhc.com

Group #: 0700855

Plan Name: The Capital Markets Company

QUALIFIED HIGH DEDUCTIBLE HEALTH PLAN (HDHP with HSA)

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible		
<i>Individual</i>	\$1,500	\$3,000
<i>Family*</i>	\$3,000	\$6,000
Annual Out-of-Pocket Maximum (Includes Deductible and all co-pays)		
<i>Individual</i>	\$4,000	\$6,000
<i>Family*</i>	\$8,000	\$12,000
<i>*The Family Deductible and Family Out-of-Pocket Maximum are now embedded. No one family member enrolled in the HDHP plan will be responsible for more than the individual deductible or individual out-of-pocket maximum.</i>		
Lifetime Maximum Benefit	Unlimited	Unlimited
Primary Care Physician Office Visits	100% after deductible	80% after deductible
Specialist Office Visits	100% after deductible	80% after deductible
Urgent Care	100% after deductible	80% after deductible
Emergency Room	100% after deductible	100% after deductible
Maternity Physician Services	100% after deductible	80% after deductible
Hospital Inpatient Expenses	100% after deductible	80% after deductible
Hospital Outpatient Expenses	100% after deductible	80% after deductible
Outpatient Therapies (ex: physical, speech and occupational)	100% after deductible	80% after deductible
Chiropractic Care	100% after deductible	80% after deductible
Mental Health/Behavioral Treatment Services	100% after deductible	80% after deductible
Durable Medical Equipment <i>Limited to 1 type of DME (including repair/replacement) every 3 years</i>	100% after deductible	80% after deductible <i>(Pre-authorization required for charges over \$1,000)</i>
Prescription Drugs <i>*Please note that you must first meet your medical deductible before any Rx co-pays will be applied.*</i>		
Retail Pharmacy (31 day supply)	\$10 for Tier 1 drugs \$35 for Tier 2 drugs \$60 for Tier 3 drugs	\$10 for Tier 1 drugs \$35 for Tier 2 drugs \$60 for Tier 3 drugs
Mail Order Maintenance Drug (90 day supply)	\$25 for Tier 1 drugs \$87.50 for Tier 2 drugs \$150 for Tier 3 drugs	Not covered
Semi - Monthly Contributions	Pre Tax	Post Tax
<i>Employee</i>	\$57.61	\$0.00
<i>Employee + 1</i>	\$110.95	\$0.00
<i>Family</i>	\$173.61	\$0.00
<i>Domestic Partner (DP)*</i>	\$0.00	\$53.34
<i>DP & DP Child(ren)*</i>	\$0.00	\$116.00

*In addition to the post tax contributions, a portion of the premium for DP and dependents of DP will be taxable income to the employee. These amounts are \$198.50 for DP coverage only and \$431.69 for DP and dependent coverage (per semi monthly pay period).

3 UNDERSTANDING YOUR MEDICAL PLAN

Medical Questions? Need to Locate a Provider?
Contact United Health Care
1-888-840-6010 or www.myuhc.com
Group #: 0700855
Plan Name: The Capital Markets Company

CHOICE PLUS BASE PLAN		
BENEFIT	IN-NETWORK ONLY	
Annual Deductible		
<i>Individual</i>	None	
<i>Family</i>	None	
Annual Out of Pocket Maximum (Includes all co-pays)		
<i>Individual</i>	\$1,250	
<i>Family</i>	\$3,750	
Lifetime Maximum Benefit		
Unlimited		
Primary Care Physician Office Visits		
\$20 co-pay per visit		
Specialist Office Visits		
\$40 co-pay per visit		
Urgent Care Center		
\$50 co-pay per visit		
Emergency Room		
\$100 co-pay (Waived if admitted)		
Maternity Physician Services		
\$20 co-pay (First office visit only)		
Hospital Inpatient Expenses		
\$500 co-pay per inpatient stay		
Hospital Outpatient Expenses		
Plan pays 100%		
Outpatient Therapies (ex: physical, speech and occupational) <i>60 visit maximum per calendar year</i>		
\$20 co-pay		
Chiropractic Care		
\$20 co-pay		
Mental Health/Behavioral Treatment Services		
Inpatient: \$500 co-pay per inpatient stay Outpatient Services: \$20 co-pay per visit		
Durable Medical Equipment <i>Limited to 1 type of DME (including repair/replacement) every 3 years</i>		
Plan pays 100%		
Prescription Drugs		
Retail Pharmacy (31 day supply)	\$10 for Tier 1 drugs \$30 for Tier 2 drugs \$50 for Tier 3 drugs	
Mail Order Maintenance Drug (90 day supply)	\$25 for Tier 1 drugs \$75 for Tier 2 drugs \$125 for Tier 3 drugs	
Semi - Monthly Contributions	Pre Tax	Post Tax
<i>Employee</i>	\$64.73	\$0.00
<i>Employee + 1</i>	\$124.65	\$0.00
<i>Family</i>	\$195.05	\$0.00
<i>Domestic Partner (DP)*</i>	\$0.00	\$59.92
<i>DP & DP Child(ren)*</i>	\$0.00	\$130.32

*In addition to the post tax contributions, a portion of the premium for DP and dependents of DP will be taxable income to the employee. These amounts are \$277.26 for DP coverage only and \$494.24 for DP and dependent coverage (per semi monthly pay period).

4 UNDERSTANDING YOUR MEDICAL PLAN

Medical Questions? Need to Locate a Provider?
Contact United Health Care
1-888-840-6010 or www.myuhc.com
Group #: 0700855
Plan Name: The Capital Markets Company

CHOICE PLUS BUY UP PLAN		
BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible		
<i>Individual</i>	None	\$1,000
<i>Family</i>	None	\$2,000
Annual Out of Pocket Maximum <i>(Includes all co-pays)</i>		
<i>Individual</i>	\$1,250	\$4,000
<i>Family</i>	\$3,750	\$8,000
Lifetime Maximum Benefit	Unlimited	Unlimited
Primary Care Physician Office Visits	\$20 co-pay per visit	Plan pays 80% after Deductible
Specialist Office Visits	\$40 co-pay per visit	Plan pays 80% after Deductible
Urgent Care	\$50 co-pay per visit	Plan pays 80% after Deductible
Emergency Room	\$100 co-pay (Waived if admitted)	\$100 co-pay (Waived if admitted)
Maternity Physician Services	\$20 co-pay (First office visit only)	Plan pays 80% after Deductible
Hospital Inpatient Expenses	\$500 co-pay per inpatient stay	Plan pays 80% after Deductible
Hospital Outpatient Expenses	Plan pays 100%	Plan pays 80% after Deductible
Outpatient Therapies <i>(ex: physical, speech and occupational)</i> <i>60 visit maximum per calendar year</i>	\$20 co-pay per visit	Plan pays 80% after Deductible
Chiropractic Care	\$20 co-pay per visit	Plan pays 80% after Deductible
Mental Health/Behavioral Treatment Services	Inpatient: \$500 co-pay per stay Outpatient: \$20 co-pay per visit	Plan pays 80% after Deductible
Durable Medical Equipment <i>Limited to 1 type of DME (including repair/replacement) every 3 years</i>	Plan pays 100%	Plan pays 80% after Deductible <i>(Pre-authorization required for charges over \$1,000)</i>
Prescription Drugs		
Retail Pharmacy <i>(31 day supply)</i>	\$10 for Tier 1 drugs \$30 for Tier 2 drugs \$50 for Tier 3 drugs	\$10 for Tier 1 drugs \$30 for Tier 2 drugs \$50 for Tier 3 drugs
Mail Order Maintenance Drug <i>(90 day supply)</i>	\$25 for Tier 1 drugs \$75 for Tier 2 drugs \$125 for Tier 3 drugs	Not Covered
Semi - Monthly Contributions	Pre Tax	Post Tax
<i>Employee</i>	\$96.28	\$0.00
<i>Employee + 1</i>	\$185.44	\$0.00
<i>Family</i>	\$290.12	\$0.00
<i>Domestic Partner (DP)*</i>	\$0.00	\$89.16
<i>DP & DP Child(ren)*</i>	\$0.00	\$193.84

*In addition to the post tax contributions, a portion of the premium for DP and dependents of DP will be taxable income to the employee. These amounts are \$217.87 for DP coverage only and \$473.88 for DP and dependent coverage (per semi monthly pay period).

5 UNDERSTANDING YOUR HSA

If you enroll in the QHDHP plan, you are eligible to set-up an individual Health Savings Account (HSA) at the bank or investment company of your choice. You can deposit money into your HSA and lower your taxable income at time of filing.

An HSA is an employee-owned account that allows you to set aside money for eligible medical expenses (including vision and dental expenses) incurred this year or in future years. Your contributions to the account are tax-exempt, so you can save on taxes when you participate. Unlike a Flexible Spending Account, any unused balance in your HSA rolls over from year to year—there is no “use it or lose it” rule. **We recommend that you see your tax advisor for additional information on the tax advantages this account may offer you.**

You must be enrolled in the Qualified High Deductible Health Plan in order to contribute to an HSA. In future years, if you decide to dis-enroll from the QHDHP, you can continue to use any money in your HSA for qualified medical expenses, but you are ineligible to contribute any additional funds to the account.

If you ever withdraw funds from the account for non-medical expenses, you will be subject to a penalty. At age 65, however, any unused funds in your HSA can be withdrawn without penalty for non-medical purposes. If you withdraw the funds from your HSA after age 65, you would be subject to normal income tax on the money in the account, but you would not be limited to using the money for just medical expenses.

There are limits to how much you can contribute to your HSA each calendar year. For 2016, the contribution limits are:

		Age 55+ (\$1,000 Catch up)
Individual	\$3,350	\$4,350
Family	\$6,750	\$7,750

If you enroll in the QHDHP and open an HSA, you will **not** be eligible to enroll in the medical portion of the Flexible Savings Account (FSA). **You will be able to participate in other portions of the plan such as parking and transit and dependent care reimbursement.**

Please use the list on the next page as a guide to help you determine whether a medical expense is qualified or not for an HSA distribution.



6 UNDERSTANDING YOUR HSA

The following items are qualified medical expenses and may be paid using your HSA:

• Ambulance	• Breast Reconstruction	• Eye Surgery (including laser eye surgery)	• Orthotic Inserts
• Annual Physical	• Christian Science (fees to practitioners for care)	• Eyeglasses	• Osteopath
• Artificial Limb	• Cold/Hot Pack for medical care	• Fertility Enhancement	• Out-of-Network charges
• Artificial Teeth	• Condoms	• First Aid Supplies	• Oxygen for medical condition
• Nursing Home (for medical care)	• Contact Lenses and supplies	• Flu Shot	• Physical Examination
• Thermometers	• Contraceptives	• Guide Dog (including maintenance costs)	• Pregnancy Test Kit
• Abortion	• Crutches	• Gynecologist	• Prosthesis
• Acupuncture	• Dental Treatment	• Hearing Aids (including batteries and repair)	• Psychiatric Care
• Bandages	• Dentures and cleaners	• Homeopathic Care	• Psychoanalysis
• Birth Control Pills	• Dermatologist	• Immunizations	• Psychologist
• Blood Pressure Monitor	• Diabetic Supplies	• Laboratory Fees	• Splints
• Blood Sugar Test Kit	• Diagnostic Devices	• Lactation Expenses	• Sterilization
• Blood Tests	• Doctor's fees not covered by insurance	• Medical Alert Bracelet	• Therapy
• Body Scan	• Drug Addiction (inpatient treatment)	• Operations (non cosmetic)	• Vasectomy
• Braille Books	• Drugs (with prescription)	• Optometrist	• Wheelchair
• Breast Pump/Supplies	• Eye Exams	• Orthopedist	• X-Ray

The following items are NOT qualified medical expenses:

• Babysitting	• Dental Floss	• Funeral Expenses	• Medigap Premiums
• Controlled Substances	• Diaper Service	• Health Club Dues	• Swimming Lessons
• Cosmetic Surgery	• Diet Foods	• Household Help	• Teeth Whitening
• Cosmetics	• Electrolysis	• Illegal Treatments	• Veterinary Fees
• CPR Class	• Exercise Equipment	• Marijuana	
• Dancing Lessons	• Facial Tissues	• Maternity Clothes	

7 UNDERSTANDING YOUR DENTAL PLAN

Dental Questions? Need to Locate a Provider?
 Contact Aetna
 1-877-238-6200 or www.aetna.com

Capco dental benefits are provided by Aetna. You may select either the DMO Plan, which provides in-network coverage only and utilizes a smaller network of providers, or the PPO Plan which provides both in-network and out-of-network coverage.

Type of Plan	DMO PLAN	PASSIVE PPO PLAN	
	IN-NETWORK ONLY	IN-NETWORK	OUT-OF-NETWORK
Deductible			
<i>Individual</i>	None	\$50	\$50
<i>Family</i>	None	\$150	\$150
Annual Maximum Benefit	None	\$1,500	
Preventive Services <i>(oral exam, cleaning, x-rays)</i>	100%	100%	
Basic Services <i>(fillings, root canal, oral surgery)</i>	100%	Plan pays 80% after Deductible	Plan pays 80% after Deductible
Major Services <i>(crowns, dentures, endo, periodontal)</i>	Plan pays 60%	Plan pays 50% after Deductible	Plan pays 50% after Deductible
Orthodontia <i>(children up to age 20)</i>	None	\$1,000	
Semi-Monthly Contributions		Pre Tax	Post Tax
Employee		\$9.10	\$0.00
Employee + 1		\$17.16	\$0.00
Family		\$23.92	\$0.00
Domestic Partner (DP)*		\$0.00	\$8.06
DP & DP Child(ren)*		\$0.00	\$14.82
*In addition to the post tax contribution, a portion of the premium for DP and dependents of DP will be taxable income to the employee. These amounts are \$15.39 for DP coverage and \$27.94 for DP and dependent coverage (for semi monthly pay period).			

Employees may change between dental plans at any point during the plan year. Any change will take effect on the first day of the month following the request for change.



8 UNDERSTANDING YOUR VISION PLAN

Vision Questions? Need to Locate a Provider?
 Contact EyeMed
 1-866-9EYEMED or www.eyemedvisioncare.com

Capco is pleased to offer vision benefits through EyeMed.

Please note that EyeMed does not issue Identification Cards. Your provider can contact EyeMed directly to verify benefits.

*Capco utilizes the EyeMed **Select** vision network.*



	IN-NETWORK	OUT-OF-NETWORK
Eye Exam	1 every 12 months	
	\$10 co-pay	Up to \$30 allowance
Prescription Lenses	1 pair every 12 months	
Single	\$10 co-pay	Up to \$25 allowance
Bifocal	\$10 co-pay	Up to \$40 allowance
Trifocal	\$10 co-pay	Up to \$60 allowance
Progressive	<i>Premium</i> : \$75 co-pay plus 80% of charge (less \$120 allowance) <i>Standard</i> : \$75 co-pay	Up to \$40 allowance
Frames	1 every 12 months	
	Up to \$140 allowance plus 20% off any amount over allowance	Up to \$70 allowance
Contact Lens	1 every 12 months in lieu of lenses and frames	
Elective	<i>Conventional</i> : Up to \$130 allowance plus 15% off any amount over allowance <i>Disposable</i> : Up to \$130 allowance	Up to \$104 allowance
Fit and Follow up Exam (<i>Comprehensive eye exam must be completed first</i>)	<i>Standard</i> : Up to \$40 allowance <i>Premium</i> : 10% off retail price	Up to \$104 allowance
Network Providers	Cohen Fashion Lenscrafters Sears Vision	Eye to Eye Pearl Vision JC Penny Optical
Semi-Monthly Contributions	Pre Tax	Post Tax
<i>Employee</i>	\$2.10	\$0.00
<i>Employee + 1</i>	\$2.89	\$0.00
<i>Family</i>	\$4.99	\$0.00
<i>Domestic Partner (DP)*</i>	\$0.00	\$0.79
<i>DP & DP Child(ren)*</i>	\$0.00	\$2.89

*In addition to the post tax contributions, a portion of the premium for DP and dependents of DP will be taxable income to the employee. These amounts are \$2.97 for DP coverage only and \$4.58 for DP and dependent coverage (per semi monthly pay period).

9 UNDERSTANDING DOMESTIC PARTNER BENEFITS

Employees have the ability to enroll their domestic partners and children of domestic partners in the Capco benefit plans. The tax implications, however, for domestic partners and dependents of domestic partners are different from those of legally married spouses and dependent children.

When an employer provides health care benefits for the spouse or dependents of an employee, the IRS allows the money paid by the employer for these benefits to be excluded from the employee's gross income. No such exclusion exists, however, for benefits of an employee's domestic partner or dependents of a domestic partner. The money paid by an employer for the health care benefits for an employee's domestic partner and dependents of a domestic partner is taxable income.

Neither a domestic partner, nor the children of a domestic partner (who are not dependents of the employee), are eligible to receive tax-favored benefits through a cafeteria plan.

The chart below highlights the portion of an employee's payroll contribution, by plan, that will be deducted post-tax for domestic partner coverage and any children of domestic partners. Also listed is the portion of premium that Capco pays for domestic partners and any children of domestic partners that must be included as part of an employee's taxable income.

10 UNDERSTANDING YOUR ANCILLARY BENEFITS

Questions? Contact Unum
1-866-679-3054 or www.unum.com

Capco ancillary benefits are offered through Unum. Unum has worked hard to earn a reputation for high quality insurance products.

BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE (AD&D)

Basic Life and AD&D insurance coverage are important parts of your financial well being and Capco provides these benefits at no cost to you.

All employees working a minimum of 30 hours per week are eligible for Basic Life insurance. Basic Life insurance is equal to 1 times basic annual earnings to a maximum benefit of \$500,000. Benefits are reduced by 65% at the age of 70 and an additional 50% at the age of 75. Capco also offers Basic Dependent Life insurance. This benefit is \$10,000 for your spouse and \$2,500 for each of your eligible children.

AD&D insurance provides benefits to you and your beneficiary should you suffer loss of life or limb due to an accident. All employees working a minimum of 30 hours per week are eligible for AD&D. AD&D insurance is equal to 1 times basic annual earnings up to a maximum of \$500,000.

SUPPLEMENTAL LIFE AND AD&D

You have the option to purchase additional Life and AD&D insurance for yourself, your spouse and your children. You pay 100% of the cost of coverage, and the premium will be deducted from your paycheck on a post tax basis. Any coverage elected over the Guarantee Issue Amount must be approved by Unum.

SHORT-TERM DISABILITY

Capco provides a Short-Term Disability plan at no cost to you. Short-Term Disability replaces a portion of your income if you become disabled due to an accident, injury, or illness.

All active employees working at least 30 hours per week are eligible to receive the STD benefit. If you cannot work due to injury or sickness, your STD benefit will begin after a 7-day waiting period and can last up to 13 weeks. You may use standard sick days as income replacement during your 7-day waiting period.

LONG-TERM DISABILITY

Capco provides a Long-Term Disability plan at no cost to you. Long-Term Disability replaces a portion of your income if you become disabled due to an accident, injury, or illness.

All active employees working at least 30 hours per week are eligible to receive the LTD benefit. The LTD benefit begins on the 91st day of disability and replaces up to 60% of your gross monthly base earnings to a maximum monthly benefit of \$15,000. The LTD benefit may be reduced by other sources of income.



11 UNDERSTANDING YOUR ANCILLARY BENEFITS

Questions? Contact Unum
1-866-679-3054 or www.unum.com
Basic Life and AD&D, STD, LTD: 951554
STD—NY : 951556
Supplemental Life: 951555

Basic Life & AD&D - Employer Paid

Employee Basic Life & AD&D	1 times Base Annual Earning (BAE) up to a maximum \$500,000
Benefit Reduction	35% at age 70; 50% at age 75

Short-Term Disability (STD) - Employer Paid

Amount of Benefit	66.67% of Base Salary up to a Maximum of \$1,500 per week
When Benefits Begin	After 7 day waiting period
Maximum Benefit Period	13 weeks

Long-Term Disability (LTD) - Employer Paid

Amount of Benefit	60% of Gross Monthly Base Salary up to a Maximum of \$15,000 per month
When Benefits Begin	After 90 days of disability
Maximum Benefit Period	To SSNRA

State Disability

Employees who are absent because of their own disability may be eligible for State Disability Insurance (SDI) benefits depending on the state in which they are employed. SDI benefits may be payable when you cannot work because of illness or injury, including pregnancy and childbirth, not caused by employment at the Company.

Note: Please note that SDI is administered by the applicable state and does not provide for any leave or pay rights from the Company. For more information regarding State Disability Insurance please contact Human Capital at USHumanCapitalOperations@Capco.com.

Supplemental Life - Voluntary

Employee	1x, 2x or 3x salary up to a \$500,000 maximum. Amounts over \$250,000 subject to Evidence of Insurability (EOI).		
Spouse / Domestic Partner	Increments of \$5,000 up to a \$50,000 maximum. Amounts over \$25,000 subject to Evidence of Insurability (EOI).		
Employee and Spouse/Domestic Partner <i>Monthly Contributions based on age and coverage amounts elected</i>	Age	Employee Cost Per \$1,000	Spouse/Domestic Partner Cost per \$1,000 <i>Rate is based on Employee's Age</i>
	<30	\$0.058	\$0.058
	30-34	\$0.078	\$0.078
	35-39	\$0.092	\$0.092
	40-44	\$0.154	\$0.154
	45-49	\$0.236	\$0.236
	50-54	\$0.438	\$0.438
	55-59	\$0.677	\$0.677
	60-64	\$0.908	\$0.908
	65-69	\$2.110	\$2.110
	70-74	\$2.110	\$2.110
75+	\$2.110	\$2.110	
Employee Voluntary AD&D	Voluntary AD&D Benefit will match your Supplemental Life election amount. Cost for AD&D is \$0.022 per \$1,000 of benefit.		
Eligible Child(ren)	Increments of \$2,000 up to a \$10,000 maximum. Benefit to age 19 or 26 if full time student		
	\$.053 per \$2,000		

12 FLEXIBLE SPENDING ACCOUNTS

Questions?
Contact CBIZ
1-800-815-3023 select option 4
Or email cbizflex@cbiz.com

A Flexible Spending Account is an arrangement that permits you to pay for certain out-of-pocket expenses with funds that you have set aside, by payroll deduction, on a tax-free basis. Capco offers three types of Flexible Spending Accounts: The Health Care Reimbursement Account is for out-of-pocket medical expenses including medical, dental, vision, and prescription drug expenses for you and your dependents. The Dependent Care Assistance Account is designed to help you pay for daycare services so that you and your spouse (if married) can work or be a full-time student. The Transit/Parking Account allows you to pay for mass transit or parking fees. Please note: you will receive only one debit card from CBIZ that will work for all FSA accounts you have elected.

Account Type	Examples of Eligible Expenses	Contribution Limits	Access to Funds	Pre Tax Benefits
Health Care	<ul style="list-style-type: none"> Medical Plan Deductibles Most Insurance Co-payments Prescription Drugs Some OTC medicines (Only if prescribed by your doctor) Vision Exams/Eyeglasses/Contacts Laser Eye Surgery Acupuncture Weight Loss Programs Dental and Orthodontia (Braces) Birth Control Pills/Devices/Procedures Chiropractic 	Maximum annual contribution is \$2,500	Allows immediate access to the entire contribution amount from the first day of the benefit year, before all scheduled contributions have been made.	<ul style="list-style-type: none"> Save 20% - 40% on your health care expenses. Save on purchases not covered by insurance. Reduces your taxable income.
Dependent Care	<ul style="list-style-type: none"> Daycare Day Camp Eldercare Before and After School Care 	<ul style="list-style-type: none"> Minimum contribution is \$100 per year Maximum contribution is \$5,000 per year (\$2,500 if married and file separate) 	You will be able to submit claims up to your year-to-date accumulated amount in your account (You will only be reimbursed based on your accumulated contribution amounts)	<ul style="list-style-type: none"> Save 20% - 40% on your dependent care expenses. Reduces your taxable income.
Transit/Parking	Mass Transit	Maximum contribution is \$130 per month	Maximum monthly Contribution Balances not used in your Transit and Parking Account will roll from one Plan year to the next. This is not a use it or lose it plan.	<ul style="list-style-type: none"> Save 20% - 40% on your transit/parking expenses. Reduces your taxable income.
	Parking	Maximum contribution is \$250 per month		
"Use it or Lose it" Rule	You should plan your contributions carefully. According to IRS guidelines, any money in your FSA at the end of the year will be forfeited. See below for important claims filing deadlines.			
Eligibility	You are eligible for the FSA benefits the first of the month following your date of hire. You may incur claims beginning January 1 - December 31 of the current year. All current year claims must be submitted between January 1 of the current year and March 31 of the following year.			



13 TRAVEL B E N E F I T S



Should you need emergency assistance while you are traveling for work or traveling internationally, Capco offers travel accident and travel assist plans. These plans can help locate doctors, assist with emergency prescription refills, and help communicate with foreign language doctors/hospitals. These plans can also assist with lost or stolen luggage and lost or stolen passports/travel documents.

Travel Benefits

Business Travel Accident (AIG)

www.aigbenefits.com/travelassist

Policy Number: GTP 0009137966

1-877-244-6871

1-715-346-0859 (outside the U.S)

Cigna- International Medical Plan

www.cignaenvoy.com

**Policy Number: 05257B Fidelity National
Information Services**

1-800-243-1348

1-302-797-3535 (outside the U.S)

14 ADDITIONAL BENEFIT PROGRAMS

THE CAPITAL MARKETS 401(K) PLAN

Under the Capco 401(k) plan through Fidelity Investments; all eligible employees may withhold a maximum of up to 60% of pay on a pre-tax basis to the IRS maximum for 2016. Capco matches 50% of the employee's contribution; the match cannot exceed 6% of eligible compensation. There is a three-year progressive vesting schedule, less than one year 0%, one year, but less than two years 34%, two years, but less than three 67% and three or more years, you are 100% vested on all Company contributions. You are always 100% vested on all employee contributions and rollover amounts.

VOLUNTARY BENEFITS

Capco offers voluntary products! There are several plans that are available to employees—plans are portable and employees may choose to elect more than one line of coverage.

Aflac Supplemental Hospital Indemnity

Provides benefits for inpatient and outpatient service as a result of covered accidents and sickness. Benefits also available for spouse and dependent children.

Aflac Critical Illness

Provides a lump sum benefit upon the diagnosis of each covered illness, which include: heart attack, stroke, major organ transplant, kidney failure (end stage), cancer, carcinoma in situ and coronary.

Aflac Accident

Provides benefit for the treatment of injuries suffered as the result of a covered accident. Provides 24 hour protection and does not limit number of claims.

UNUM Long Term Care (LTC)

Helps provide for the cost of long-term care beyond a pre-determined period. Long term care insurance covers care generally not covered by health insurance, Medicare or Medicaid.

Identity Theft

Covers any type of identity theft- not just financial or credit. Licensed investigators will restore your identity without any caps or limits on their services.

Life Events Legal Plan

Offers the ability to speak with an attorney on any type of legal issue.

FITNESS EXPENSE REIMBURSEMENT PROGRAMS

Our fitness reimbursement program offers a solution for engaging employees in physical fitness. Capco will provide participants with monetary incentives for physical activity to maintain a healthy lifestyle.

Employee may choose one of the two fitness options:

Option 1

Employee may sign up for a gym membership via Capco's corporate discount program (gyms listed below). Capco will pay the full amount of the membership up front and Employee will reimburse Capco through semi-monthly payroll deductions. Capco subsidizes \$50 monthly for the membership dues. Up to \$39 of the one-time processing fee is reimbursable via T&E for employee only (use project code 1200295). Corporate discount is extended to spouses/domestic partners. Note: Spouses/domestic partners and family members of Capco employees are not eligible for the monthly employer subsidy. Please contact HC Ops for more details.

- **New York Sports Club**
- **New York Health & Racquet Club**
- **Equinox**
- **Crunch**
- **Sport & Health**
- **RDV Athletic Club**
- **Complete Body**

Option 2

Employee may request reimbursement for up to \$50 monthly on **any physical activity expense** (gym membership of choice or fitness class) by sending supporting documentation (receipt of payment and proof of enrollment) to Human.Capital.Americas@capco.com. Please note that this option is a taxable benefit processed via payroll. Applicable taxes will be withheld from the \$50 reimbursement. Up to \$39 of the one-time processing fee is reimbursable via T&E for employee only (use project code 5022927). This provides you of the freedom to self-select your gym and fitness venue for:

- **Traveling employees who may not want to get "locked in" to a specific gym**
- **More variety of gyms and fitness venues for mobile and dispersed workforce**

WORKING ADVANTAGE

Capco has a membership with Working Advantage and employees have access to discounts for movie theatres, movie rental, theme parks, ski tickets, Broadway theatre tickets, special family events, online shopping and much more.

Registering is easy. Simply go to the Working Advantage website at www.workingadvantage.com and click on "Register". Using the Member ID (946917007), you may complete your one-time registration for free and create your own personal account with a password of your choice. You can order either online or by phone at 1-800-565-3712 Monday through Friday 8:00 a.m. to 6:30 p.m. and Saturday 9:00 a.m. to 5:00 p.m. ET.

15 ADDITIONAL BENEFIT PROGRAMS

Introducing ...

FIS MARKETPLACE

GET THE ABSOLUTE BEST PRICING ON:

- Apparel
- Auto
- Cell phones
- Computer/software
- Dining
- Electronics
- Entertainment
- Financial services
- Flowers/gifts
- Health/wellness
- Home
- Personal Vacations
- Tickets
- Travel



Don't pay retail ever again! FIS Marketplace is a new, employee perks program designed to be a one-stop shop for employees. Save money on large purchases, as well as your everyday purchases. And, earn points for every dollar you spend, and get even more stuff for free. Once you activate your account, you will have access to exclusive offers and deep discounts from top popular merchants at the places you already shop. In addition, your employee access comes with five friends and family accounts.

**START
SAVING
TODAY!**

1. Visit the FIS Marketplace on FIS & me:
 - > via Employee Matters > HR and Benefits > FIS Marketplace
 - > or go to <https://fisglobal.corporateperks.com/login>
2. Login/register
3. Shop

*This program is currently only available to U.S. employees. Other locations will be rolled out in the future.

16 ADDITIONAL BENEFIT PROGRAMS

Adoption Assistance Program

Recognizing adoption as a meaningful and viable way to build a family, Capco provides an Adoption Assistance Program to assist employees with their adoption expenses. Capco provides up to \$10,000 in adoption assistance to all employees who are eligible for benefits and have a minimum of one (1) year of service. Active employees who opt out or waive health, dental, and vision coverage remain eligible for the Adoption Assistance Program. The adoption must be final before expenses are eligible for reimbursement.

The coverage applies to public and private agency adoptions, independent adoptions, and international adoptions. The adopted child must be under the age of 18.

Direct Reimbursement of Adoption Expenses

The Adoption Assistance Program will reimburse eligible expenses allowed under the IRS Regulations in the amount of \$10,000 for each adopted child as defined by individual state agencies. The number of adoptions is unlimited. If you adopt a child with special needs, you may also be eligible for a federal and/or state tax deduction for qualified adoption expenses that are not reimbursed through this program. You must request reimbursement within 90 days of incurring the expense. Payments will be made directly to you.

Eligible Expenses

The following adoption charges are eligible for reimbursement:

- Legal Fees
- Court Fees
- Adoption agency fees, including foreign adoption fees
- Required medical exams for the child
- Initial immunizations for the child
- Transportation costs to bring the child to the adopting parents (or for the adult accompanying the child to their home country)



Ineligible Expenses

The following charges are not eligible for reimbursement:

- Expenses for adopting stepchildren
- Expenses for adopting children related to either parent, such as nephews, nieces, cousins, brothers, or sisters.
- Transportation for the adopting parents
- Medical examination fees for the adopting parents
- Cost of personal items for either parents or children during or after the adoption, such as clothing or food
- Expenses provided by other adoption assistance programs
- Pledges, gifts, or support fees to an adoption agency

Additional Adoption Assistance Information

Please contact Human Capital for additional information,

USHumanCapitalOperations@Capco.com

17 ADDITIONAL BENEFIT PROGRAMS

Capco employees have access to support for the whole family.

Family Care. SOLVED.



Start Making Your Life Easier.

REGISTER AT NO COST:

www.careadvantage.com/capco

Back-Up Username: Capco

Back-Up Password: backup4u

OR CALL: 877-BH-CARES (242-2737)

Bright Horizons
Care Advantage™

A Bright Horizons Solution at Work

Your Many *Bright Horizons Care Advantage*® Benefits Include:

BACK-UP CHILD AND ADULT/ELDER CARE:

High-quality, low-copay replacement care for your child in your home or in a center; in-home care for adult/elder loved ones throughout the U.S. any time you need an extra hand.

NEW COPAYS IN 2016 FOR BACK-UP CARE:

Employees can access up to 10 annual days of family care when regular arrangements fall through. Get immediate access to care supports at subsidized rates; center-based care is \$10/child or \$15/family; all in-home care is \$4/hour.

NANNIES, ELDER CARE, PET CARE, AND MORE:

Do-it-yourself access to a comprehensive database of self-pay services including nannies and sitters for evening and weekend care, plus elder care resources, pet sitters, homework help, and more.



18 INCREASING WORKPLACE EFFICIENCY

Contact Unum/Life Balance
1-800-854-1446
www.lifebalance.net
(user ID and password: lifebalance)

Life Balance - Employee Assistance Program

When you have questions, concerns or emotional issues surrounding your personal or work life, you can count on us to offer help. Unum's EAP offers unlimited access to master's level consultants by telephone, resources and tools online, and up to three face-to-face visits with a consultant for help with a short-term problem.

Help for personal challenges, big and small

Keeping your work and personal life in balance can sometimes be tricky. Stressful situations can affect your health, well-being and ability to focus on what's important.

That's when you can pick up the phone and speak confidentially to a master's level consultant who can help you or a family member to:

- Locate childcare and eldercare services and obtain matches to the appropriate provider based on your or your family's preferences and criteria. The consultant will even confirm space availability.
- Speak with financial experts by phone regarding issues such as budgeting, controlling debt, teaching children to manage money, investing for college, and preparing for retirement.
- Work through complex sensitive issues such as personal or work relationships, depression, or substance abuse.
- Get a referral to a local attorney for a free, 30-minute in-person or telephonic legal consultation.

You'll have access to an attorney for state specific legal information and services. If you decide to retain the attorney, you may be eligible to receive a 25% discount on additional services.

You also have unlimited access at www.lifebalance.net where you can:

- Read booklets, life articles and guides
- View videos and online seminars, as well as listen to podcasts
- Subscribe to email newsletters
- Find information on parenting, retirement, finances, education and more
- Use health management online calculators and other tools to help you with topics such as losing weight or starting a new exercise program
- Access links to other informative websites
- Use school, camp, eldercare and childcare locators
- Use financial calculators, retirement planners, worksheets and more

Guidance for work-related conflicts

If you're a manager dealing with staff issues such as an employee who's feeling overwhelmed, you have unlimited access to guidance from a team of consultation experts. Call the toll-free work-life balance EAP to:

- Have a confidential sounding board and objective view
- Work on communication and problem-solving skills
- Learn how to motivate your employees

A wallet card is available with telephone number and online contact information. Please see your human resources manager to request one.

Your work-life balance employee assistance program can help you find solutions to the everyday challenges of work and home as well as for more serious issues involving emotional and physical well-being.

- Childcare and/or eldercare referrals
- Personal relationship information
- Health information and online tools
- Legal consultations with licensed attorneys
- Financial planning assistance
- Stress management
- Career development

Help is easy to access:

- **Telephonic consultations:** Speak confidentially with a master's level consultant to clarify your need, evaluate options and create an action plan.
- **Face-to-face meeting:** Meet with a local consultant up to three times per issue for short-term problem resolution.
- **Educational materials:** Receive information through our online library of downloadable materials and interactive tools.

To learn more, please visit www.lifebalance.net; user ID and password: lifebalance

Claim your 15% discount when you enroll online

Petplan
pet insurance



Call **1.800.809.9200** or Visit **PetplanBenefits.com**

15% EMPLOYEE DISCOUNT VOUCHER

Visit **PetplanBenefits.com** and type in **CAPCO** to receive a **15% discount**.

Policy Benefits	Petplan Bronze Policy	Petplan Silver Policy	Petplan Gold Policy
Annual Coverage Limits	\$10,000	\$14,000	\$22,000
Deductible	Choice of \$50, \$100, or \$200 deductible		
Reimbursement	Choice of 100%, 90% or 80% reimbursement direct to you		
Policy Coverage	Accidents • Illnesses • Hereditary, congenital + chronic conditions Prescription medications • Surgery • Specialist treatment Cancer treatment • Alternative + holistic therapies Non-experimental stem cell therapies • Diagnostic testing MRI + CAT scan imaging • Non-routine dental treatment		
Additional Coverage	N/A	Boarding + kennel fees Advertising + reward Loss due to theft/straying	Boarding + kennel fees Advertising + reward Loss due to theft/straying Death from illness or injury Vacation cancellation
Additional Info	Covered for Life™ with annual renewal		

Terms and conditions apply. Policy becomes effective at 12:01am the day after adoption. A 24-hr waiting period for accidents, a 14-day waiting period for illnesses and a 6-month exclusion for cruciate ligaments and patellas applies. Lifetime coverage is contingent on the policy being renewed each year without any break in coverage. Subject to annual policy limits of \$10,000, \$14,000 or \$22,000. Limits are replenished in full on renewal. Pre-existing conditions, including those where clinical signs are present prior to the effective date of the policy or during the policy waiting period, are excluded from coverage.

Coverage under any pet insurance policy is expressly subject to the conditions, restrictions, limitations, exclusions and terms of the policy documentation issued by the insurer. Availability of this program is subject to each state's approval and coverage may vary by state. Pet insurance policies are issued by AGCS Marine Insurance Company and administered by Fetch Insurance Services, LLC (Fetch Insurance Agency, LLC in Michigan), d/b/a Petplan (Petplan Insurance Agency, LLC in California). AGCS Marine Insurance Company, a member of the Allianz Group, is rated A+ by A.M. Best (2012).

Visit **PetplanBenefits.com** and type in **CAPCO** to receive 15% discount.

*** Women's Health and Cancer Rights Act of 1998**

Your medical plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy – related services, including reconstruction and surgery to achieve symmetry between the breasts, prosthesis, and complications resulting from a mastectomy (including lymphedema).

Please call your plan administrator for more information. These benefits may be subject to annual deductibles, co-insurance provisions or copays that are appropriate and consistent with other benefits under your plan.

*** The Genetic Information Nondiscrimination Act (GINA)**

The Genetic Information Nondiscrimination Act of 2008, also referred to as GINA, is a federal law that protects Americans from being treated unfairly because of differences in their DNA that may affect their health. The law prevents discrimination from health insurers and employers.

Who needs protection from genetic discrimination?

Everyone should care about the potential for genetic discrimination. Every person has dozens of DNA differences that could increase or decrease his or her chance of getting a disease such as diabetes, heart disease, cancer or Alzheimer's. It's important to remember that these DNA differences don't always mean someone will develop a disease, just that the risk to get the disease may be greater.

More and more tests are being developed to find DNA differences that affect our health. These tests (called genetic tests) will become a routine part of health care in the future. Health care providers will use information about each person's DNA to develop more individualized ways of detecting, treating and preventing disease. But unless this DNA information is protected, it could be used to discriminate against people.

Why was the law needed?

The law was needed to help ease concerns about discrimination that might keep some people from getting genetic tests that could benefit their health. The law also enables people to take part in research studies without fear that their DNA information might be used against them in health insurance or the workplace.

*** Notice of Special Enrollment Rights**

If you are an active employee declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may in the future be able to enroll yourself or your dependents in this plan, provided that you request enrollment within 30 days after your other coverage ends and you fulfill other special enrollment requirements. (These requirements are set out in your Certificate of Coverage)

In addition, if active employees 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, provided that you request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

There is an additional enrollment period if an active employee or dependent loses eligibility for Children's Health Insurance Program (CHIP), Medicaid or becomes eligible for CHIP for Medicaid premium assistance. The special enrollment allows children or their parents to have 60 days, rather than 30, to request enrollment.

Also, your health plan may not establish rules for eligibility (including continued eligibility) of an individual to enroll under the terms of the plan based on a health status-related factor.

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 employer-sponsored 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, 2015. Contact your State for more information on eligibility –

ALABAMA – Medicaid	GEORGIA – Medicaid
Website: www.myalhipp.com Phone: 1-855-692-5447	Website: http://dch.georgia.gov/ - Click on Programs, then Medicaid, then Health Insurance Premium Payment (HIP) Phone: 404-656-4507
ALASKA – Medicaid	INDIANA – Medicaid
Website: http://health.hss.state.ak.us/dpa/programs/medicaid/ Phone (Outside of Anchorage): 1-888-318-8890 Phone (Anchorage): 907-269-6529	Website: http://www.in.gov/fssa Phone: 1-800-889-9949
COLORADO – Medicaid	IOWA – Medicaid
Medicaid Website: http://www.colorado.gov/hcpf Medicaid Customer Contact Center: 1-800-221-3943	Website: www.dhs.state.ia.us/hipp/ Phone: 1-888-346-9562
FLORIDA – Medicaid	KANSAS – Medicaid
Website: https://www.flmedicaidprecovery.com/ Phone: 1-877-357-3268	Website: http://www.kdheks.gov/hcf/ Phone: 1-800-792-4884

KENTUCKY – Medicaid	NEW HAMPSHIRE – Medicaid
Website: http://chfs.ky.gov/dms/default.htm Phone: 1-800-635-2570	Website: http://www.dhhs.nh.gov/oii/documents/hippapp.pdf Phone: 603-271-5218
LOUISIANA – Medicaid	NEW JERSEY – Medicaid and CHIP
Website: http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1-888-695-2447	Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710
MAINE – Medicaid	NEW YORK – Medicaid
Website: http://www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 1-800-977-6740 TTY 1-800-977-6741	Website: http://www.nyhealth.gov/health_care/medicaid/ Phone: 1-800-541-2831
MASSACHUSETTS – Medicaid and CHIP	NORTH CAROLINA – Medicaid
Website: http://www.mass.gov/MassHealth Phone: 1-800-462-1120	Website: http://www.ncdhhs.gov/dma Phone: 919-855-4100
MINNESOTA – Medicaid	NORTH DAKOTA – Medicaid
Website: http://www.dhs.state.mn.us/id_006254 Click on Health Care, then Medical Assistance Phone: 1-800-657-3739	Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-800-755-2604
MISSOURI – Medicaid	OKLAHOMA – Medicaid and CHIP
Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005	Website: http://www.insureoklahoma.org Phone: 1-888-365-3742
MONTANA – Medicaid	OREGON – Medicaid
Website: http://medicaid.mt.gov/member Phone: 1-800-694-3084	Website: http://www.oregonhealthykids.gov http://www.hijosaludablesoregon.gov Phone: 1-800-699-9075
NEBRASKA – Medicaid	PENNSYLVANIA – Medicaid
Website: www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633	Website: http://www.dhs.state.pa.us/hipp Phone: 1-800-692-7462
NEVADA – Medicaid	RHODE ISLAND – Medicaid
Medicaid Website: http://dwss.nv.gov/ Medicaid Phone: 1-800-992-0900	Website: http://www.eohhs.ri.gov/ Phone: 401-462-5300

SOUTH CAROLINA – Medicaid	VIRGINIA – Medicaid and CHIP
Website: http://www.scdhhs.gov Phone: 1-888-549-0820	Medicaid Website: http://www.coverva.org/programs_premium_assistance.cfm Medicaid Phone: 1-800-432-5924 CHIP Website: http://www.coverva.org/programs_premium_assistance.cfm CHIP Phone: 1-855-242-8282
SOUTH DAKOTA - Medicaid	WASHINGTON – Medicaid
Website: http://dss.sd.gov Phone: 1-888-828-0059	Website: http://www.hca.wa.gov/medicaid/premiumpymt/pages/index.aspx Phone: 1-800-562-3022 ext. 15473
TEXAS – Medicaid	WEST VIRGINIA – Medicaid
Website: http://gethipptexas.com/ Phone: 1-800-440-0493	Website: http://www.dhhr.wv.gov/bms/Medicaid%20Expansion/Pages/default.aspx Phone: 1-877-598-5820, HMS Third Party Liability
UTAH – Medicaid and CHIP	WISCONSIN – Medicaid and CHIP
Website: Medicaid: http://health.utah.gov/medicaid CHIP: http://health.utah.gov/chip Phone: 1-866-435-7414	Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002
VERMONT– Medicaid	WYOMING – Medicaid
Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427	Website: https://wyequalitycare.acs-inc.com/ Phone: 307-777-7531

To see if any other states have added a premium assistance program since July 31, 2015, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
 Employee Benefits Security Administration
www.dol.gov/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

OMB Control Number 1210-0137 (expires 10/31/2016)

Important Notice from Capco About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Capco 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:

1. 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. Capco has determined that the prescription drug coverage offered by United Healthcare 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 Capco coverage may be affected.

If you do decide to join a Medicare drug plan and drop your current Capco coverage, be aware that you and your dependents may not be able to get this coverage back.

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 Capco 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 nineteen 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 November to join.

For More Information About This Notice Or Your Current Prescription Drug Coverage...

Contact the person listed below for further information. **NOTE:** You will 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 changes through Capco. 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 will 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 (see the inside back cover of your copy of the “Medicare & You” handbook for their telephone number) for personalized help
- 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 them at 1-800-772-1213 (TTY 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).

Name of Entity/Sender:	Capco
Contact--Position/Office:	Capco Benefits / Diana Kristona-Drue
Address:	77 Water Street, 10th Floor, New York, NY 10005
Phone Number:	1-877-207-6978 / 1-407-551-8902

Find policy numbers, customer service phone numbers, and websites for benefit carriers below.

BENEFIT PROVIDER	POLICY NUMBER	PHONE NUMBER	WEBSITE and ADDITIONAL INFORMATION
United Healthcare Medical	GA-700855	1.800.444.6222	www.myuhc.com
United Healthcare/Optum Rx Retail Prescription Drug Service	GA-700855	1.888.543.1480	www.myuhc.com
United Healthcare/Optum Rx Mail-order Prescription Drug Service	GA-700855	1.800.562.6223 <i>Doctors may call 1-800-791-7658</i>	www.myuhc.com Fax forms to 1.800.491.7992 Fax request form can be found on the EMS portal
Aetna/US Healthcare Dental	723707	1.877.238.6200	www.aetna.com
EyeMed Vision	9833823	1.866.9EYEMED	www.eyemedvisioncare.com
Unum Life/AD&D STD – NY Employees STD – All Employees LTD	Basic Life and AD&D, STD, LTD: 951554 STD - NY: 951556 Supplemental Life: 951555	1.866.679.3054	www.unum.com
Employee Assistance Program (Unum) Life Balance	Must mention The Capital Markets Company, Inc.	1.800.854.1446	www.lifebalance.net User ID and Password: lifebalance
CBIZ Flexible Spending Accounts		1.800.815.3023 Option 4	https://myplans.cbiz.com
AIG - Business Travel Accident Plan Cigna- International Medical Plan	GTP: 0009137996 05257B (Fidelity National Information Services)	1.877.244.6871 1.175.346.0859 (outside of U.S.) 1.800.243.1348 1.302.797.3535 (outside of U.S.)	www.aigbenefits.com/travelassist www.cignaenvoy.com
Fidelity Investments 401(k)	The Capital Markets Company Plan 45459	1.800.581.5800	www.401k.com



Disclaimer: This Benefit Guide provides a brief summary of the benefits available under Capco's Benefit Program. In the event of any discrepancy(ies) between this summary and any Document, Insurance Contract or Certificate, the Insurance Document(s) will prevail. Capco retains the right to modify or eliminate these benefits at any time and for any reason.