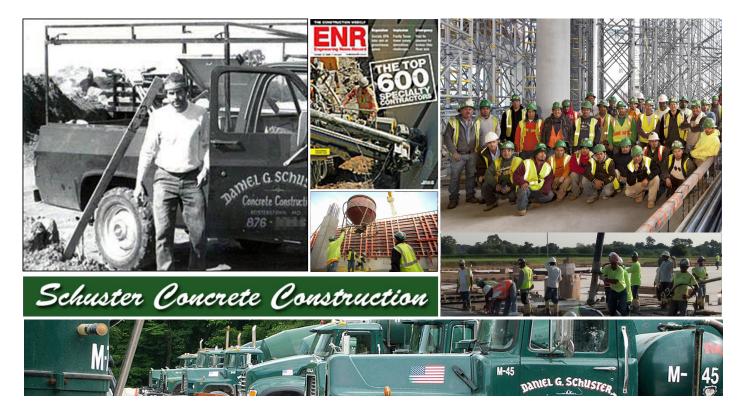
Schuster





2017—2018 Benefits Enrollment Guide Working Together for Healthier Lives

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Benefits for You and Your Family

Welcome,

Daniel G. Schuster's (Schuster) benefits program is designed to help you stay healthy, feel secure, and maintain a work/life balance. Schuster offers a comprehensive and competitive benefits package that includes various options to meet the needs of our diverse lifestyles and financial needs.

Please take the time to review all of the plan options available to you prior to making your selections. Consider each benefit and the associated cost carefully and choose the benefits package that will best meet you and your family's needs throughout the year. For full details about our plans, please refer to the Summary Plan Descriptions.

Options selected during open enrollment remain in place for the full plan year. Options selected upon hire remain in place through the end of the benefit plan year in which you are hired.

Listed below are the Schuster benefits available during enrollment:

- Medical Insurance—CareFirst Administrators & Express Scripts for Prescription Drugs
- Dental Insurance—Delta Dental
- Vision Insurance—Davis Vision
- Basic Life and Accidental Death and Dismemberment Insurance *Employer-paid benefit—SunLife Financial
- Voluntary Term Life Insurance *Employee-paid benefit—Unum
- Voluntary Short-Term Disability Insurance *Employee-paid benefit—Unum
- Employee Assistance Program*—ComPsych
- 401(k) Retirement Plan

The Internal Revenue Service (IRS) states that eligible employees may only make elections to the plan once a year at Open Enrollment. Your benefit choices are binding through April 30th of each year. The following circumstances are the ONLY reasons you may change your benefits during the year:

Marriage	Death of a Spouse		
Divorce	Death of a Dependent		
Birth & Adoption	Loss of Dependent Status		
Any change in your or your spouse's employment status that results in a change in your benefit eligibility			

These special circumstances, often referred to as life event changes, will allow you to make plan changes outside of the Open Enrollment period. If you experience a Life Event change, you must notify your Human Resources Department and make your life event changes within 30 days of the event to avoid lapse in coverage. All other changes are deferred to Open Enrollment.

Medical Insurance - Care First Administrators

Schuster offers two medical plan options. Each plan accesses the National BlueCross BlueShield provider networks. The chart below is a brief outline of the Standard plan. Please refer to the Summary Plan Description for complete plan details. *NOTE: Medical benefit deductions are taken on a pre-tax basis*.

BENEFITS	STANDARD 80/60 PLAN		
	In-Network	Out-of-Network	
Annual Deductible (calendar year)			
Individual	\$250	\$500	
Family	\$750	\$1,500	
Maximum Out of Pocket (calendar year)	Includes d	leductible	
Individual	\$2,000	\$3,000	
Family	\$4,000	\$6,000	
Preventive Care			
Immunizations	100%	60% after deductible	
Preventive Care	100%	60% after deductible	
Physician Services	•		
Office Visits	\$25 copay, then 100%	60% after deductible	
Specialist Visits	\$25 copay, then 100%	60% after deductible	
Urgent Care	\$50 copay, then 100%	\$50 copay, then 100%	
Outpatient Diagnostic			
Diagnostic Tests Minor	80% after deductible	60% after deductible	
Diagnostic Tests Major	80% after deductible	60% after deductible	
Hospital Services			
Inpatient Care (pre-certification required)	80% after deductible	60% after deductible	
Outpatient Surgery	\$35 copay; then 100%	60% after deductible	
Emergency room	\$150 copay (waived if admitted) then 80%		
Prescription Drugs—with Express Scripts			
RX Deductible	None		
RX Out-of-Pocket Max	None		
Retail Generic	\$10		
Retail Preferred	\$30		
Retail Non Preferred	\$50		
Specialty Drugs	15% Coinsurance up to \$150 Max per Fill		
Retail/Mail Prescription	Retail - 34 day supply; Mail - 90 day supply; copay 2x retail		
Smoking Cessation Products	\$500/individual per lifetime		

Medical Insurance - Care First Administrators

Schuster offers two medical plan options. Each plan accesses the National BlueCross BlueShield provider networks. The chart below is a brief outline of the Standard plan. Please refer to the Summary Plan Description for complete plan details. *NOTE: Medical benefit deductions are taken on a pre-tax basis*.

BENEFITS	VALUE 70/50 PLAN		
	In-Network	Out-of-Network	
Annual Deductible (calendar year)			
Individual	\$1,500	\$3,000	
Family	\$3,000	\$6,000	
Maximum Out of Pocket (calendar year)	Includes d	eductible	
Individual	\$3,000	\$6,000	
Family	\$6,000	\$12,000	
Preventive Care			
Immunizations	100%	50% after deductible	
Preventive Care	100%	50% after deductible	
Physician Services			
Office Visits	70% after deductible	50% after deductible	
Specialist Visits	70% after deductible	50% after deductible	
Urgent Care	70% after deductible	50% after deductible	
Outpatient Diagnostic			
Diagnostic Tests Minor	70% after deductible	50% after deductible	
Diagnostic Tests Major	70% after deductible	50% after deductible	
Hospital Services			
Inpatient Care (pre-certification required)	70% after deductible	50% after deductible	
Outpatient Surgery	70% after deductible	50% after deductible	
Emergency room	50% after deductible		
Prescription Drugs—with Express Scripts			
RX Deductible	\$250/individual/\$500 family		
RX Out-of-Pocket Max	None		
Retail Generic	\$10		
Retail Preferred	\$30		
Retail Non Preferred	\$50		
Specialty Drugs	15% Coinsurance up to \$150 Max Per Fill		
Retail/Mail Prescription	Retail - 34 day supply; Mail - 90 day supply; copay 2x retail		
Smoking Cessation Products	\$500/individual per lifetime		

Dental Insurance - Delta Dental

Schuster offers a dental plan through Delta Dental. You may choose any dentist to provide your oral care; however, if you choose an in-network provider you can maximize the plan benefits. For a list of network providers, please visit **www.deltadentalins.com**. The chart below is a brief outline of the plan. Please refer to the Summary Plan Description for complete plan details.

Dental Benefits Overview

BENEFITS	DELTA DENTAL PREMIER PPO
Deductible	\$50 Individual / \$150 family
Calendar Year Maximum (1/1-12/31)	\$2,000
Diagnostic & Preventive	Plan pays 100% Deductible & Maximum waived
Basic Restorative	Plan pays 80% after deductible
Oral Surgery	Plan pays 80% after deductible
Endodontic	Plan pays 80% after deductible
Periodontics	Plan pays 80% after deductible
Major Restorative	Plan pays 50% after deductible
Prosthodontics	Plan pays 50% after deductible
Implants	Plan pays 50% after deductible
Orthodontics (Covered members to age 26)	Plan pays 50% after deductible
Ortho Lifetime Maximum	\$1,000

Vision Insurance - Davis Vision

Schuster offers Voluntary Vision coverage for you and your dependents through Davis Vision. You may use a vision care provider of your choice; however, to receive the highest level of benefits from the plan, you must use an in-network provider. For a complete list of network providers, please visit **www.davisvision.com**.

BENEFITS	IN-NETWORK	OUT-OF-NETWORK	
Routine Eye Exam	\$10 copay	Up to \$45 allowance	
Vision Lenses (every 12 months)			
Single Vision		Up to \$52 allowance	
Bifocal	No copay	Up to \$82 allowance	
Trifocal		Up to \$101 allowance	
Frames (every 12 months)			
Tower Collection Frames	No copay	Not available	
Non-Tower Collection	Up to \$90 allowance	Up to \$45 allowance	
Contact Lenses (every 12 months)			
In lieu of eyeglasses	No copay on formulary or \$97 single/ \$127 bifocal contact lens allowance towards provider supplied contacts	Up to \$97/ \$127 allowance	

Basic Life and Accidental Death and Dismemberment Insurance— Sun Life Financial

Schuster provides a basic life and accidental death and dismemberment (AD&D) benefit for employees enrolled in one of the company sponsored medical plans. The Life and AD&D coverage is offered through Sun Life Financial. The basic life amount is equal to \$15,000 and the AD&D benefit amount is equal to \$15,000. This coverage is provided at no cost to you.

Voluntary Life—Sun Life Financial

Schuster provides a voluntary short-term income protection through Sun Life Financial, in the event you become unable to work due to a non-work related illness or injury. The short-term disability plan provides a percentage of your weekly base salary up to the specified maximum. You must fulfill the 14 day elimination/waiting period before you are eligible to begin receiving benefits. Guarantee Issue is only offered during your initial eligibility period. If you did not elect coverage during that time, you may elect coverage during open enrollment but will be subject to Evidence of Insurability (EOI). If an EOI form is required, you must complete and submit the EOI to the Carrier for underwriting approval. Please see the Summary Plan Description for complete details.

Benefits Percentage: 70% of annual earnings

Weekly Benefit Maximum: \$750
Waiting/ Elimination Period: 14 days

Maximum Duration of Benefits: 26 weeks

401(6)

Employees may participate in the Schuster 401(k) retirement plan after completing one year of continuous service. You may elect to defer from 1% to 100% (subject to IRS annual maximum) of your pay on a pre-tax basis. The plan is open for new participants on May 1 and November 1 of each year. For details on how to enroll or to make election changes please contact the Schuster HR Department.

Employee Assistance Program - ComPsych

Schuster understands there are times when we need some help with life's everyday stresses. That's why we offer our employees a fully integrated continuum of employee assistance, work life, behavioral health and wellness services which help individuals improve their behavioral and physical health and address personal, family and life issues.

No matter what the issue or personal concern ComPsych Guidance Resources provides a team of professionals ready to help with such issues as:

- · Locating childcare and eldercare services
- · Financial advice concerning budgeting and controlling debt
- · Working through complex, sensitive issues such as relationships, depression, and substance abuse
- · Dealing with and resolving conflict
- · Legal information and services

The ComPsych staff of behavioral professionals, attorneys, financial experts, and wellness professionals can be reached by phone at 1-800-872-7255, on the web **www.compsych.com**, or in person. Your plan provides for 5 sessions with a provider.

7ime Off

Schuster is aware that employees need time away from work as part of their work/life balance. That's why we offer paid Vacation, Personal Days and Holidays. After 6 months of employment, employees are eligible for the following six paid holidays:

- New Years Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

Other Benefits

In addition to the benefits described in this brochure, Schuster offers a variety of other benefits, some of which include:

- Workers' Compensation
- Unemployment Compensation
- Jury Duty, Bereavement, and Military Reserve training leave
- In-house Tools and Safety supply Store
- Ongoing professional training
- Paid Weekly (direct deposit available)

Important Telephone Numbers & Websites

BENEFITS	CARRIER	PHONE NUMBER	WEBSITE
Schuster HR Department	Fabiola Lara	1-443-909-7449	benefits@schusterinc.com
Medical Insurance	CareFirst Administrators	1-877-889-2478	www.cfblue.com
Dental Insurance	Delta Dental	1-800-932-0783	www.deltadentalins.com
Vision Insurance	Davis Vision	1-800-999-5431	www.davisvision.com
Basic Life and AD&D Insurance			www.sunlife.com/us
Voluntary Term Life Insurance	Sun Life Financial	1-800-247-6875	
Short-Term Disability Insurance			
Critical Illness and Accident Insurance	Unum	1-800-635-5597	www.unum.com
(401K) Retirement Plan	Alerus	1-800-795-2697	www.alerusretirementsolutions.com
Employee Assistance Program	ComPsych	1-800-272-7255	www.compsych.com
Health Management	Conifer	1-877-324-9668	N/A





Sandra Vanessa Carrillo 1-800-459-2110 Ext. 2018 Schuster Personal Health Nurse

Who is Conifer?

Over the past 10 years, Conifer has a become a health care leader by working closely with individuals, physicians, hospitals, health plans and others to promote healthy outcomes and reduce health care costs. Conifer is a private company doing business in over 30 states, supporting quality health care through our Personal Health Management programs.

Why should I trust Conifer?

Conifer has been in business for over a decade serving many thousands of individuals. Conifer's clinical guidelines are regularly reviewed by practicing physicians, who are national experts. Also, Conifer's expert clinical team is made up of full-time nurses, who are credentialed and certified through state laws and professional groups. In addition, Conifer Personal Health Management operations are accredited by a national quality organization.

Can Conifer make a difference in my life?

If you are chronically ill or suffering from complex medical conditions, Conifer can help you and your physician by providing you insights on how to improve your health. Our goal is to work with you and your physician to help develop and support a customized care treatment plan for you. Of course, your willingness to participate in the Conifer Personal Health Management program is key to achieving a successful outcome.

How does Conifer make contact with me?

If you are identified as a possible candidate for Personal Health Management support, a nurse will call you to provide you with key information about the Personal Health Management program we are offering on behalf of you and your health plan and to discuss your health care needs. Conifer looks forward to the opportunity to work with you in a confidential and professional manner. Our goal is to help you live a healthier life!

Do the Conifer services cost me anything?

No. Conifer's Personal Health Management services are paid by Schuster.

How can I contact Conifer?

Once a personal nurse contacts you, you will be given a telephone number to communicate directly with your personal nurse. If you have not been contacted but you would like to talk to your nurse about health care services you are receiving or feel you need, please contact us by calling 1-877-324-9668. We welcome your call and look forward to assisting you.

Glossary of Health Coverage and Medical Terms

- This glossary has many commonly used terms, but isn't a full list. These glossary terms and definitions are intended
 to be educational and may be different from the terms and definitions in your plan. Some of these terms also
 might not have exactly the same meaning when used in your policy or plan, and in any such case, the policy or plan
 governs. (See your Summary of Benefits and Coverage for information on how to get a copy of your policy or plan
 document.)
- Bold blue text indicates a term defined in this Glossary.
- See page 4 for an example showing how deductibles, co-insurance and out-of-pocket limits work together in a real life situation.

Allowed Amount

Maximum amount on which payment is based for covered health care services. This may be called "eligible expense," "payment allowance" or "negotiated rate." If your **provider** charges more than the allowed amount, you may have to pay the difference. (See **Balance Billing**.)

Appeal

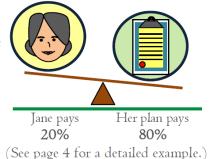
A request for your health insurer or **plan** to review a decision or a **grievance** again.

Balance Billing

When a **provider** bills you for the difference between the provider's charge and the **allowed amount**. For example, if the provider's charge is \$100 and the allowed amount is \$70, the provider may bill you for the remaining \$30. A **preferred provider** may **not** balance bill you for covered services.

Co-insurance

Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service. You pay co-insurance plus any deductibles you owe. For example,



or plan's allowed amount for an

if the **health insurance** or **plan's** allowed amount for an office visit is \$100 and you've met your deductible, your co-insurance payment of 20% would be \$20. The health insurance or plan pays the rest of the allowed amount.

Complications of Pregnancy

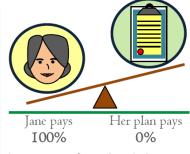
Conditions due to pregnancy, labor and delivery that require medical care to prevent serious harm to the health of the mother or the fetus. Morning sickness and a non-emergency caesarean section aren't complications of pregnancy.

Co-payment

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

Deductible

The amount you owe for health care services your health insurance or plan covers before your health insurance or plan begins to pay. For example, if your deductible is \$1000, your plan won't pay anything until you've met



(See page 4 for a detailed examp.

your \$1000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.

Durable Medical Equipment (DME)

Equipment and supplies ordered by a health care **provider** for everyday or extended use. Coverage for DME may include: oxygen equipment, wheelchairs, crutches or blood testing strips for diabetics.

Emergency Medical Condition

An illness, injury, symptom or condition so serious that a reasonable person would seek care right away to avoid severe harm.

Emergency Medical Transportation

Ambulance services for an emergency medical condition.

Emergency Room Care

Emergency services you get in an emergency room.

Emergency Services

Evaluation of an emergency medical condition and treatment to keep the condition from getting worse.

IMPORTANTI ENIPLOPMATION

Schuster