



2024

BENEFITS GUIDE



Welcome



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Dear Goodwill Employee:

Welcome to Goodwill Industries of Northwest North Carolina!

At Goodwill, we are dedicated to providing our team members and covered dependents with a comprehensive benefit package. We understand the importance of a well-rounded benefits program, and because of that, we offer a range of plans the help protect you in the case of illness or injury. This commitment to your overall health and well-being is a partnership. Your benefits are a significant part of your total compensation, and it's your responsibility to make sure you understand them and use them wisely.

Your comprehensive benefits plan is designed to provide:

- Protection against the high cost of health, vision and dental care
- Protection of your income in case you become totally and permanently disabled and cannot work
- Financial assistance for your survivors if you pass away
- An income for your retirement and other future financial needs
- Assistance with educational expenses for you and your family members
- Other benefits and opportunities to help you fulfill personal and professional needs

The purpose of this guide is to provide a one-stop reference for the many varied benefits Goodwill offers. By putting this information in one place, we hope to create an easy resource for employees who have questions about what benefits are available. As you read the guide, please keep in mind that we have summarized your benefits; we have not included every detail. If you have questions about any of the information in this guide, contact The People Team via email at HRInfo@goodwillnwc.org.

The benefits booklet will be updated periodically to reflect any changes. For full plan descriptions and an electronic copy of the benefits booklet, go to the UKG home site.

Sincerely,

Timothy D. Howell
Chief People Officer



Contacts & Holiday Schedule



CARRIER CONTACTS

2024 HOLIDAY SCHEDULE	
Monday, January 1, 2024	New Year's Day
Monday, January 15, 2024	Martin Luther King Day
Friday, March 29, 2024	Good Friday
Sunday, March 31, 2024	Easter Sunday
Monday, May 27, 2024	Memorial Day
Wednesday, June 19, 2024	Juneteenth
Thursday, July 4, 2024	Fourth of July
Monday, September 2, 2024	Labor Day
Thursday, November 28, 2024	Thanksgiving
Wednesday, December 25, 2024	Christmas

BENEFIT PLAN	COMPANY	PHONE NUMBER	WEBSITE
Call Center	Benefits VIP	866-286-5354	www.benefitsvip.com
Medical	UMR	800-826-9781	www.umar.com
EAP	MyGroup	800-633-3353	www.mygroup.com
Pharmacy	Rx Benefits	800-334-8134	www.rxbenefits.com
Telemedicine	Teladoc	800-TELADOC	www.teladoc.com
Dental	Delta Dental	800-662-8856	www.deltadental.com
Vision	Delta Vision	800-877-7195	www.vsp.com
Flexible Spending Account (FSA)	Flores & Associates	800-532-3327	www.flores247.com
COBRA	UMR	866-868-3647	www.umar.com
Voluntary Life	The Hartford	888-301-5615	www.thehartford.com
Disability/Leave Management	The Hartford	888-301-5615	www.thehartford.com
403(b) Retirement Plan	Ascensus	866-809-8146	www.ascensus.com
Pension Plan	Ascensus	866-809-8146	www.ascensus.com
Work/Life Balance	UrbanSitter	Email: support@urbansitter.com	www.urbansitter.com
Financial	Truist	844-487-8478 or Email: Support@TruistMomentum.com	www.TruistMomentum.com
Discounted Tickets	Tickets at Work	800-331-6483	www.ticketsatwork.com
Medicare	Independent Benefit Advisors	919-303-9690	www.thebenefitadvisors.com

Paid Time Off (PTO)



PAID TIME OFF (PTO)



Goodwill's paid time off (PTO) plan is focused on allowing all regular employees to balance their work and home lives. Our plan combines non-working time (sick, vacation and holiday) into one group of paid hours. From day one, Goodwill's paid time off policy offers employees flexibility and the opportunity to carry over paid time off from year to year. Planning ahead is key with the paid time off system. Talk to your supervisor about requesting specific times off during the year in order to ensure your department's business needs are covered.

HOW DOES IT WORK?

Every pay period you earn paid time off time for each hour that you are paid by Goodwill (up to a maximum*). The earnings rate varies based on your years of service, but the earning begins as soon as you are employed (there are some limits to using PTO during your three-month introductory period). Employees earn PTO for each completed pay period as of the first day of the next pay period.

The table below illustrates your potential PTO bank and the carryover amount allowed.

- * Maximum is based on a 40-hour work week for hourly employees. Maximum is 86.67 hours per pay period for salaried employees.
- ** New accrual rate starts January 1 of following year. (Hired on ANY date in 2017, your 5th year accrual begins 1/1/2022.) If you are an hourly paid employee, you may use paid time off for whatever reason in hour increments (no partial hour increments paid). Salaried employees may only use time in half day and full day increments in accordance with FLSA regulations. *

If you have paid time off available, you may not use unpaid time for an absence. *

During your introductory period, PTO will only be paid out for holidays observed by Goodwill. Holidays that fall during your introductory period are the only times you can "go negative" in your PTO bank. Paid time off is tracked as scheduled or unscheduled. This allows managers to track excessive unscheduled absenteeism.

Employees in Retail must take a full five days of PTO (plus their normal two days off per work week) in order to get away from their store responsibilities, rest, relax and spend time with friends or family for a full week each year.

Paid time off will be paid out at 100% for those whose positions are eliminated by Goodwill through no fault of their own (lay-off) or who are unable to return from leave due to a workplace injury classified as such by Goodwill's workers' compensation.

Paid time off will be paid out to you after termination in increments depending on your years of service (see below) if your employment ends in good standing and is accompanied by a full two-week notice.

Introductory Period:

- no PTO paid
- < 1 year: 25%
- 1-4 years: 50%
- 5-9 years: 75%
- 10+ years: 100%

Years of Service**	PTO Hourly Earning	PTO Annual Earning	Maximum PTO Bank Balance*	Annual Carry-Over allowed
<1 Hourly	0.0731	152	152	80
<1 Admin Hourly	0.0827	172	172	90
<1 Salaried	0.0923	192	192	100
1-4	0.0923	192	272	180
5-9	0.1115	232	352	240
10+	0.1308	272	432	300

Leave of Absence



LEAVE OF ABSENCE

FILING A LEAVE OF ABSENCE

To file a leave of absence, call **The Hartford** at **888-563-1124** or go online to: www.thehartford.com

Goodwill offers a variety of leaves of absence. The following are administered through The Hartford. If you need any of the following leaves, please contact The Hartford.

- **FMLA** — The FMLA entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the employee had not taken leave.
- **USERRA Leave** — The U.S. Department of Labor's Veterans' Employment and Training Service (VETS) administers the Uniformed Services Employment and Reemployment Rights Act (USERRA). USERRA guarantees an employee returning from military service or training the right to be reemployed at his or her former job (or as nearly comparable a job as possible) with the same benefits.
- **Personal — Non-FMLA medical** — This leave is for those who do not yet qualify for FMLA but have a medical emergency and can provide documentation. It for employee only instances, and the leave is for a maximum of 30 days. This leave is available on day one of employment.
- **Personal — Non-medical** — This is for catastrophic instance sand is for the employee only. Leave is for a maxim of 30 days. This can be used once per 365 days, and employees are eligible after 90 days.
- **Paid Funeral Leave** — Up to three days for immediate family members (mother, father, grandmother, grandfather, grandchild, son, daughter, brother, sister and spouse). For other members of the family such as in-laws, uncles and aunts, the day of the funeral will be paid. There is no waiting period to qualify for this leave pay.
- **Paid Jury Duty Leave** — Based on employees' regular wages and daily department working hours. The employee must notify his supervisor in advance of the requirement to serve and documentation from the court regarding service will be required. Employees not chosen to serve will be expected to return to work for their scheduled hours.
- **Military Training Leave** — Employees must show military orders. PTO must be used if available.



Family Medical Leave Act (FMLA)

FILING A LEAVE OF ABSENCE

To file a leave of absence, call **The Hartford** at **888-563-1124** or go online to:
www.thehartford.com

FAMILY MEDICAL LEAVE ACT (FMLA)



The Family Medical Leave Act (FMLA) is a federal law which offers up to 12 work-weeks (26 in certain cases) of unpaid leave to cover qualifying absences. It protects an eligible employee's job, pay and benefits (ensuring return to the same or equivalent position) and allows continuation of health benefits. The leave must be used during the "FMLA year", which is a rolling 12-month period calculated from the start date of the employee's FMLA leave.) This leave does not have to be in one block: depending on circumstances, it can be a reduced leave or intermittent schedule.

Goodwill coordinates short-term disability (if approved) and paid time off to provide employees with monetary security during their absences.

Employee Eligibility Criteria: To be eligible for FMLA leave, an employee must have been employed with Goodwill Industries of Northwest North Carolina for at least 12 months (which need not be consecutive); and for at least 1,250 hours during the 12-month period immediately preceding the commencement of the leave.

Events Which May Entitle an Employee to up to 12 weeks of FMLA Leave

- To care for a seriously ill family member, such as a parent or child.
- Incapacity due to pregnancy, prenatal care or childbirth.
- To care for a child adopted by the employee (or placed with the employee for foster care).
- Care of the employee's newborn child (must conclude within 12 months of birth), or care for a child adopted by the employee (or placed with the employee for foster care).
- Employee's own serious health condition which makes the employee unable to perform one or more of the essential functions of his or her job.
- Spouse, child or parent on active duty or on call to active-duty status in the National Guard or Reserves in support of a contingency operation has to address issues such as making financial/childcare/legal arrangements, attending counseling, attending reintegration briefings (or other issues/events related to duty).
- To care for a current member of the Armed Forces undergoing treatment or on the temporarily retired list with a serious injury or illness incurred in the line of duty.



QUALIFYING LIFE EVENTS

As a reminder, your new hire enrollment window is the one time of year you can make benefit elections or changes to your benefit plans without experiencing a qualifying event. Qualifying events include:

- Marriage or Divorce
- Birth or Adoption
- Death
- Loss or Gain of other coverage
- Qualified Medical Child Support Orders
- Your employment status changes from part-time to full-time

If one of those events should occur outside your new hire enrollment window, you must notify **and** submit documentation to **Human**

Resources within 30 days of the event to make changes to your and your dependent's benefit elections. These changes are to be made in the enrollment system, UKG Pro.



REMEMBER!

You only have 30 days from a qualifying event to select your insurance coverages.

BENEFIT ELIGIBILITY

As a valued employee of Goodwill, full-time employees working 30 or more hours per week, are eligible to enroll in all the benefits described in this guide. ***Please note, the vision benefit is provided, free of charge, to only those who are enrolled in the medical plan.***

Part time employees are eligible for PTO, Teladoc, the Employee Assistance Plan (EAP) and the 403(b) Retirement Plan.

Non-Goodwill Temporaries (Agency Temporaries) and employees who are hired on a limited term basis (Paid Participants or Fill-In employees) are not eligible for benefits.

Eligible dependents may enroll in medical, dental, vision, and supplemental life.

Eligible dependents include:

- Your legal spouse who does not have access to medical insurance at their place of employment.
- To enroll your spouse for medical coverage, you must complete the Spousal Attestation Form. This form allows you to attest that your legal spouse is not covered or eligible for any other insurance plan. This form can be located on the UKG Home Page and must be returned to hrinfo@goodwillnwc.org
- Dependent children up to age 26.
- Dependent unmarried children over age 26 who are incapable of self-support.

BENEFIT TERMINATIONS

Medical, Pharmacy, Dental, Vision and FSA policies will remain effective until the end of the month in which you are no longer eligible. All other policies will terminate at midnight, the day in which you are no longer eligible.

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please refer to the required notices at the end of this guide or refer to the Goodwill Intranet for more information.

Benefits VIP

BENEFITS VIP

Goodwill
Northwest North Carolina 

Goodwill is now providing telephonic services Monday-Friday, 8:30am–8pm (EST). Their bilingual customer service representatives are there to answer all your benefit questions!



BenefitsVIP®

Help starts here.

BenefitsVIP is a powerful, one-stop contact center staffed by seasoned benefits advocates ready to help you and your family resolve benefit issues.

For service that's **CONFIDENTIAL** and **RESPONSIVE**, contact:

866.286.5354

Monday - Friday 8:30am - 8pm (ET)

answers@benefitsvip.com

Fax: **856.996.2755**

- Benefits questions
- ID card requests
- Precertification support
- Claims resolution
- Prescription issues
- Provider network questions
- ...and much more!



BenefitsVIP.com

Request member assistance and order ID cards with a click.



HealthDiscovery.org

Get vital, useful and fun health insurance and wellness facts.

How to Enroll in UKG



HOW TO ENROLL IN UKG

Step 1: Go to the Goodwill UKG website. Login with your Username and Password.

English (USA) ▼

Goodwill
Northwest North Carolina


Welcome,
come on in!

User name
GINNC

Password

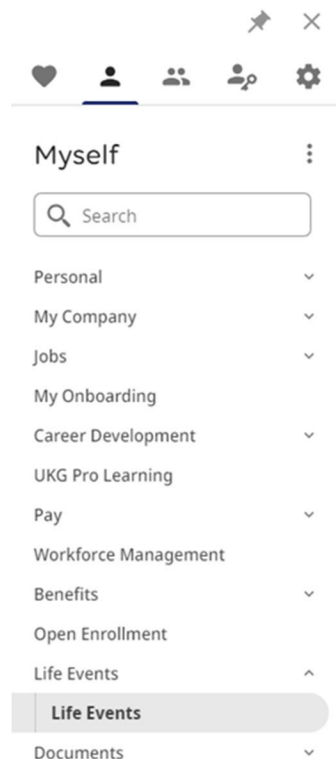
Sign in

[Forgot your password?](#)



Powered by UKG

Step 2: Once logged in, at the top left of the screen, select: **Myself** Menu > **Life Events** > **Life Events**



How to Enroll in UKG

HOW TO ENROLL IN UKG



Step 3: Click on the link for the Life Event that most closely matches your Qualifying Event

Step 4: In the new Life Event Enrollment window – Enter the Reason for the Life Event

Step 5: Click “Next” – Please verify the contacts listed and those marked as Beneficiaries.

- If you need to modify a contact – click on the link for their name.
- Make any corrections and then click “Save”.

How to Enroll in UKG



VERIFY AND ADD BENEFICIARIES IN UKG

Step 6: If you need to Add a Beneficiary – click on the “Add (+)”, Fill in their contact information and “Save”.

Add/Change Contact

☒ Contact is active

delete | **save** | reset | cancel | print | help

Personal

First

Middle

Last

Former last

Suffix

SSN

Date of birth

Gender

Date of marriage

Step 7: Click “Next” to go through the Benefits pages to either elect the benefit or decline the benefit.

About This Life Event

Verify Beneficiary And Dependent Information

Medical

Dental

Flexible Spending Account

FSA - Medical

FSA - Dependent Care

Group Term Life Insurance

Employee Supplemental Life

Voluntary Life - Employee

Spousal Supplemental Life

Voluntary Life - Spouse

Child Supplemental Life

Voluntary Life - Child

Medical

back next submit

Select a Plan

Use the options below to choose or decline a plan.

Please select Plan A or Plan B. If you do not want medical coverage, please select “I decline medical plans”.
Seleccione Plan A o Plan B. Si no desea cobertura médica, seleccione “Rechazo planes médicos”.

☐ I decline Medical plans.

☐ Medical Plan A

Options

<input type="radio"/> Employee Only	\$70.56
<input type="radio"/> Employee + Child(ren)	\$231.11
<input type="radio"/> Employee + Spouse	\$316.08
<input type="radio"/> Employee + Family	\$464.49

Medical Plan A Plan Inf

Your payroll deduction is pays, and out of pocket is

Su deducción de nómina copagos y desembolso n

Updating Beneficiaries

VERIFY AND ADD BENEFICIARIES IN UKG



Step 8: Click “**Submit**” at the Confirmation page.

Confirm Your Elections or Changes

← → | ✓ | 📄 ↺ ⊗ | 🖨️ ?
back next submit draft reset cancel print help

This page shows a summary of the changes you are about to make. Please verify your changes carefully before submitting. If you need to make any edits you can do so by selecting the plan type or plan description hyperlink to return to the election page. When you are satisfied with your changes, please click the Submit button on the toolbar.

[My change is due to](#) New Hire Enrollment

[Date of event](#) 10/17/2023



A UnitedHealthcare Company

ADDITIONAL UMR BENEFITS

As a member of UMR, you will have access to additional benefits such as:

- Preventive and routine care services covered at 100%.
- **Complex Condition CARE:** CARE nurse managers advocate for patients and caregivers throughout treatment.
- **TalkSpace:** Services comprised of personalized care, including therapy, self-guided exercises, psychiatry, and relationship tools for stress, anxiety, depression, healthy living, trauma, grief, eating disorders, substance use, sleep, identity struggles, chronic issues, and more. Providers located in all 50 states!
- **Mobile App:** Members can view plan details on demand. Members can access digital ID card, look up in network providers, look up copays or coinsurance, view recent claims and even chat call or message a UMR member support team.



MEDICAL PLAN OPTIONS

BENEFIT	PLAN A YOU PAY:	PLAN B YOU PAY:
Annual Deductible	Individual: \$2,500 Family: \$3,000	Individual: \$1,250 Family: \$1,500
Out-of-Pocket Maximum (combined with prescription drugs)	Individual: \$5,500 Family: \$10,000	Individual: \$3,000 Family: \$5,000
Primary Care	\$40 Copay	\$20 Copay
Specialist & Urgent Care Facilities	\$80 Copay	\$40 Copay
Inpatient & Outpatient Hospital Services	30% after deductible	20% after deductible
Outpatient CT, MRI, and PET Scans (Requires Prior Authorization)	30% after deductible	20% after deductible
Emergency Room	Emergency: 30% after Deductible Non-Emergency: \$200 for the 1st visit, 30% after Deductible for subsequent visits	Emergency: 20% after Deductible Non-Emergency: \$200 for the 1st visit, 20% after Deductible for subsequent visits
Ambulance	30% after Deductible	20% after Deductible
Bi-weekly Per Pay Contributions		
Employee Only	\$65.13	\$71.64
Employee + Spouse	\$291.77	\$320.94
Employee + Children	\$213.33	\$234.66
Employee + Family	\$428.76	471.64
Semi-Monthly Per Pay Contributions		
Employee Only	\$70.56	\$77.61
Employee + Spouse	\$316.08	\$347.68
Employee + Children	\$231.11	\$254.22
Employee + Family	\$464.49	\$510.94

Medical



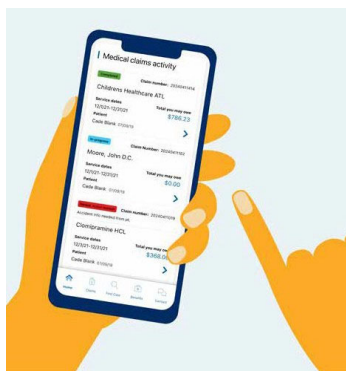
A UnitedHealthcare Company

UMR MOBILE APP

The UMR app has a smart fresh look, simple navigation, and faster access to your health care benefits information.

View your plan details on demand - anytime, anywhere. With a single tap, you can:

- Access your digital ID card
- Look up in-network health care providers
- Find out if there's a co-pay for your upcoming appointment
- View your recent medical and dental claims
- Chat, call or message UMR's member support team



Download the UMR app today!
Simply scan the QR code or visit your app store to get started.

Something on your mind?

Message a dedicated therapist anytime, anywhere

With Talkspace online therapy, you can regularly communicate with a therapist, safely and securely from your phone or desktop. No office visit required.

Here's how Talkspace can fit your life

With Talkspace, you can message a licensed therapist, 24/7.

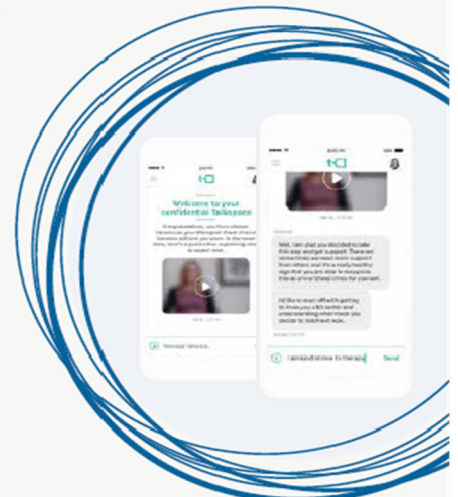
- Support for anxiety, depression, PTSD, substance use disorders, eating disorders, compulsive disorders and other conditions
- Specialized clinicians delivering services across all 50 states and are matched to members based on location, needs and preferences
- Find a therapist with an online matching tool
- Start therapy within hours of choosing your therapist
- Choose real-time face-to-face video visits by appointment, when needed
- You can also access Talkspace Psychiatry to schedule live video sessions with a psychiatrist trained in mental health care and prescription management for a tailored treatment plan

Talkspace is convenient, safe and secure.

Simply register (first visit only) and choose a provider and message anywhere, anytime at talkspace.com/connect.

After you register, download the Talkspace app on your mobile phone. Talkspace is supported by Chrome, FireFox, Safari or Edge browsers on your desktop computer.

Talkspace is your space to use in your time. It's covered under your plan's behavioral health benefits.**



IOS • Android • Desktop • Messaging • Voice • Video • Photo

*Data rates may apply.
**Copayment may apply and will be charged via credit card. You may use Talkspace as often as desired per week once copayment for that week has been paid. IOS is a trademark or registered trademark of Cisco in the U.S. and other countries and is used under license. Android is a registered trademark of Google LLC. Administrative services provided by United HealthCare Services, Inc. or their affiliates.
If you are experiencing thoughts of suicide or if this is urgent and an emergency, call 911 or 1-800-SUICIDE (784-2433) or 1-800-273-TALK (8255). UMR does not recommend or endorse any treatment, medication, suggested approach, specific or otherwise. The information provided herein is for educational purposes only. For advice about specific treatments or medications, please consult your physician and/or mental health care provider. Certain conditions and restrictions may apply. Also, certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.

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A UnitedHealthcare Company



Complex Condition CARE
Complex Condition CARE +



Ongoing Condition CARE



Wellness CARE



Maternity CARE

If you need to contact UMR CARE, please call the number on your member ID card.



Prescription Drug



PRESCRIPTION DRUG PLAN OPTIONS

BENEFIT	PLAN A YOU PAY:	PLAN B YOU PAY:
Out-of-Pocket Maximum (combined with medical)	Individual: \$5,500 Family: \$10,000	Individual: \$3,000 Family: \$5,000
RETAIL PHARMACY COVERAGE (01-30-DAY SUPPLY)		
Generic	\$20	\$10
Preferred Brand	\$50 + 20% Coinsurance	\$15 + 15% Coinsurance
Non-Preferred Brand	\$50 + 20% Coinsurance	\$25 + 25% Coinsurance
Preventive Generic	\$0	\$0
RETAIL PHARMACY COVERAGE (31-90-DAY SUPPLY)		
Generic	\$60	\$30
Preferred Brand	\$150 + 20% Coinsurance	\$45 + 15% Coinsurance
Non-Preferred Brand	\$150 + 20% Coinsurance	\$75 + 25% Coinsurance
Preventive Generic	\$0	\$0
MAIL ORDER EXTENDED SUPPLY (01-90-DAY SUPPLY)		
Generic	\$40	\$20
Preferred Brand	\$100 + 20% Coinsurance	\$30 + 15% Coinsurance
Non-Preferred Brand	\$100 + 20% Coinsurance	\$50 + 25% Coinsurance
Preventive Generic	\$0	\$0
SPECIALTY MEDICATION		
Specialty Generic	\$20	\$10
Specialty Preferred Brand	\$50 + 20% Coinsurance	\$15 + 15% Coinsurance
Specialty Non-Preferred Brand	\$50 + 20% Coinsurance	\$25 + 25% Coinsurance

Teladoc



SET UP YOUR TELADOC ACCOUNT IN MINUTES!

1. Download the app, go online, or call Teladoc
2. Enter your first and last name, date of birth and ZIP code to get started
3. Provide basic information to confirm your benefits
4. Finish creating your account by answering a few medical questions
5. Schedule a confidential virtual care visit or phone consult when you need care



TELADOC PLAN

BENEFIT	IN NETWORK	OUT OF NETWORK
Telemedicine (Teladoc) Physician Services	\$0 Copay	Not Covered
Telemedicine (Teladoc) Mental Health Services	\$0 Copay	Not Covered

Goodwill offers Teladoc at no premium cost to full-time & part-time employees!

Doctors are available 24/7 over the phone or through video chat to help with a variety of non-emergent health conditions, including:

- Cold & Flu
- Upset Stomach
- Bronchitis
- Urinary Tract Infections
- Fever
- Allergies
- Poison Ivy
- Sinus Infections
- Pink Eye
- Headache
- Sore Throat

All Teladoc physicians are board certified and located in the U.S. Teladoc doctors can send a prescription to your local pharmacy, when medically necessary.

Teladoc is not intended to replace your primary care physician but is a convenient option for quality non-emergency care. Be sure to register with Teladoc either online, via mobile app, or by phone. During your registration, you will complete your medical history so that when you need Teladoc, it will be fast and easy.

Teladoc will also cover unlimited **Mental Health** visits at no copay! These services are available to you, your spouse, and your dependents from ages 13 through 26. Services include:

- Depression & Anxiety
- LGBTQ+
- Nicotine Recovery
- Bipolar Disorder & Insomnia
- Stress
- Chronic Pain
- Caregiving
- Coping with COVID
- Substance & Alcohol Abuse
- Pregnancy & Early Parenting
- Trauma/PTSD
- Relationships & More!

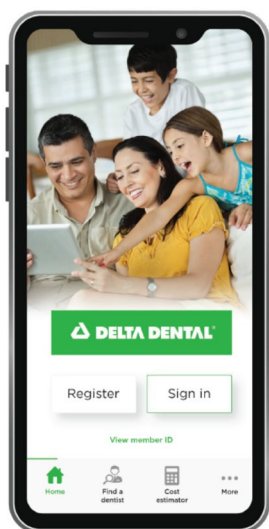


DELTA DENTAL'S MOBILE APP

The Delta Dental Mobile App is optimized for iOS (Apple) and Android devices. To download the app on your device, visit the App Store (Apple) or Google Play (Android) and search for Delta Dental Mobile App. Or, scan the QR code below.

The App features include:

- **Mobile ID Card**
- **Find a dentist**
- **Dental Cost Estimator**
- **Claims**
- **Coverage**



SCAN TO DOWNLOAD
DELTA DENTAL MOBILE APP

DENTAL PLAN

BENEFIT	PPO NETWORK	PREMIER NETWORK	OUT-OF-NETWORK
Annual Deductible	Individual: \$100 Family: \$300	Individual: \$100 Family: \$300	Individual: \$100 Family: \$300
Benefit Maximum			
Annual	\$1,000	\$1,000	\$1,000
Orthodontic Lifetime	\$1,000	\$1,000	\$1,000
Diagnostic & Preventive Services			
Emergency Palliative Treatment, Sealants, Brush Biopsy & X-Rays	0% No Deductible	0% No Deductible	0% No Deductible
Basic Services			
Minor Restorative Services, Endodontic Services, Periodontic Services, Oral Surgery Services, Major Restorative Services, Other Basic Services, Relines and Repairs	20% after Deductible	20% after Deductible	20% after Deductible
Major Services			
Bridges, Implants, Dentures, Crowns over implants	20% after Deductible	20% after Deductible	20% after Deductible
Orthodontic Services (Dependents age 26 and under)	0% No Deductible	0% No Deductible	0% No Deductible

Bi-weekly Per Pay Contributions

Employee Only	\$2.56
Employee + Spouse	\$10.64
Employee + Children	\$13.12
Employee + Family	\$20.54

Semi-Monthly Per Pay Contributions

Employee Only	\$2.78
Employee + Spouse	\$11.53
Employee + Children	\$14.22
Employee + Family	\$22.25

Vision

VISION PLAN

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Eye Exam Retinal Screening Contact Evaluation & Fitting	\$10 Copay No more than \$39 Copay \$60 Copay	\$45 Allowance
Hardware (Frames and Lenses)	\$10 Copay	N/A
Frequency Exam Lenses Frames	Every 12 Months Every 12 Months Every 12 Months	Every 12 Months Every 12 Months Every 12 Months
Frames (copay waived when lenses are purchased)	\$10 Copay (value of up to \$150)	\$70 Allowance
Lenses Single Vision Lenses Bifocal Vision Lenses Trifocal Vision Lenses Lenticular Vision Lenses Progressive Vision Lenses	\$10 Copay \$10 Copay \$10 Copay \$10 Copay \$10 Copay	\$30 Allowance \$50 Allowance \$65 Allowance \$100 Allowance \$50 Allowance
Lens Enhancements Standard anti-glaring coating Impact-resistant lenses (adult) Light-reactive lenses Scratch-resistant coating	\$41 single/\$41 multifocal \$31 single/\$35 multifocal (covered for children) \$75 single/\$75 multifocal \$17 single/\$17 multifocal	Contact Member Services
Contact Lenses (instead of glasses) Medically Necessary	Covered in full after \$10 Copay	\$210 Allowance
Contact Lenses Elective Contact Lenses	\$150 Allowance	\$105 Allowance

Per Pay Contributions

Employee Only	\$0.00
Employee + Spouse	\$0.00
Employee + Child (ren)	\$0.00
Employee + Family	\$0.00



Delta Vision Provided by VSP

Additional Discounts

By using VSP providers, you will have access to exclusive discounts on top of your benefits. These discounts include:

Glasses and Sunglasses:

- Extra \$20 to spend on featured frame brands.
- 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP network provider within 12 months.

Laser Vision Correction:

- Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.

Eyeconic®:

- Go to eyeconic.com for an easy-to-use, convenient online eyewear option.

TruHearing®

- Save up to 60% on hearing aids and batteries. Visit www.truhearing.com/vsp or call **877-396-7194** for more information.



QUESTIONS? Call **Benefits VIP** at **866.286.5354**

Flexible Spending Accounts



FSA Rules

\$640 Rollover Benefit

Health Care FSA balances up to \$640 that are not used by the end of the plan year will automatically rollover to the next year. There is no rollover for Dependent Care FSA. You can change your FSA withholdings mid-year if you have a significant change in the cost of dependent care or a qualifying event.

"Use It or Lose It" Rule

Any Health Care FSA balance over \$640 and Dependent Care FSA balance, of any amount, that is not incurred by the end of the plan year is forfeited back to Goodwill.

Documentation Requirements

Always save documentation of your eligible expenses. The administrator or the IRS may require you to submit your documentation.

Timing

The FSA amounts you elect must be for expenses that you **incur between January 1, 2024 – December 31, 2024.**



FSA OVERVIEW

Goodwill Industries of Northwest North Carolina provides you the opportunity to pay for out-of-pocket medical, dental, vision, dependent care expenses and some over-the-counter items with pre-tax dollars through a flexible spending account (FSA). You can also make purchases from the FSA store by going to www.FSAstore.com.

Flexible Spending Accounts (FSA) allow you to avoid federal, state and Social Security (FICA) taxes on the money you pay for eligible out-of-pocket health care and dependent care expenses. The benefit of FSA is the tax savings on money you spend on eligible expenses. Depending on your tax bracket, the savings can be significant.

HOW TO USE YOUR ACCOUNT

You can choose the amount you want to be withheld from your paycheck, up to \$3,200, before taxes are applied. You will pay for eligible expenses with an FSA debit card, or you can retrieve your funds by paying out-of-pocket and filing for reimbursement later. The full amount you elect for the Health Care FSA is available at the beginning of the plan year. For the Dependent Care FSA, funds are available only after they are deducted from your paycheck.

CONTRIBUTIONS

Contributions to your FSA are deducted from your paycheck before any taxes are taken out. When making FSA elections, only elect the amount of money you expect to spend on eligible expenses for the year. Money not spent, up to the IRS limit of \$640 will not be refunded but can be left in the account and rolled into the next plan year.

Health Care FSA

Covers medical, dental and vision expenses that are only partially covered or not covered at all by your insurance. Eligible expenses include:

- ✓ Medical Deductibles & Coinsurance
- ✓ Dental Care & Orthodontia
- ✓ Prescription Drug & Doctor Copays
- ✓ Over-the-Counter Drugs
- ✓ Medical supplies and equipment
- ✓ Lasik Surgery

NEW! Max Contribution:
\$3,200

Dependent Care FSA

Covers amounts you pay to daycare centers, babysitters, caregivers or after school programs that allow you and your spouse to work, seek work, or train for work. Eligible expenses include:

- ✓ Daycare for children under 13 years of age or older disabled children
- ✓ Adult daycare for adult dependents as defined by IRS
- ✓ Daycare provider must have tax ID number
- ✗ **Not for dependent's health care expenses**

Max Contribution:
\$5,000 tax filing single or married
or
\$2,500 married tax filing separately

Employee Assistance Program (EAP)

EMPLOYEE ASSISTANCE PLAN (EAP)

BENEFIT	IN-NETWORK
EAP Sessions	6 per issue
Issues	Unlimited
Frequency	Per Plan Year
Issue Types	Marital Difficulties Parenting Stress Depression Work-Related Concerns Alcohol and Drug use/Abuse Grief and Loss
Legal Services (Does not cover disputes or actions involving employer, EAP or business issues)	Free telephonic legal advice 25% discount on ongoing legal services Legal forms available to download Online legal encyclopedia
Legal Sessions	30 minutes with a local attorney
Financial Services	Bankruptcy Budgeting Buying a home College savings Retirement planning ID theft recovery through credit monitoring Discounted credit reports
Eligibility	Employee and all members of the household

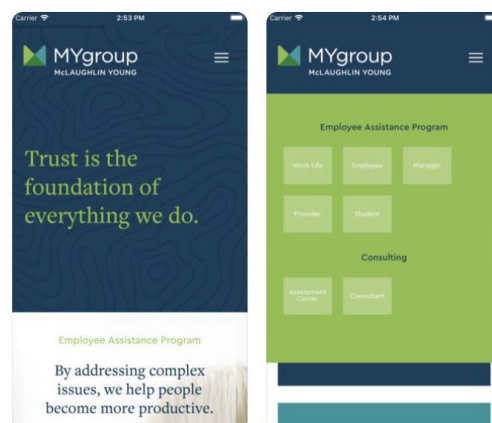


CONFIDENTIAL HELP IS AVAILABLE 24/7/365!

The Employee Assistance Program (EAP) is offered through McLaughlin Young and is fully paid for by Goodwill in an effort to support employees' health and well-being through basic telephone advice and consultation, as well as referrals to local providers. It is available for all regular Goodwill employees, their spouses and children under 26. The EAP is available your first day—there is no waiting period.

There are two ways to access your EAP and work-life services:

1. Call 800-633-3353 or
2. Visit www.mygroup.com | Click on My Portal Login | Work-Life |
Username: gwinwnc |
Password: guest



QUESTIONS? Call **Benefits VIP** at **866.286.5354**



Basic Life and AD&D



FILING A CLAIM

To file a claim, call **The Hartford** at **888-563-1124** or go online to: www.thehartford.com



BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Goodwill pays the entire cost of Basic Life Insurance and AD&D coverage for each employee. This money can help your family pay for basic living expenses, final arrangements, tuition and more. AD&D Insurance is also available, which can pay a benefit if you survive an accident but have certain serious injuries. It can pay an additional amount if you die from a covered accident.

ACCELERATED BENEFIT—A “LIVING” BENEFIT

If you are diagnosed with a terminal illness with less than 12 months to live, you can request 100% of your life insurance benefit (up to \$250,000) while you are still living. This amount will be taken out of the death benefit and may be taxable.

WAIVER OF PREMIUM

Your cost may be waived if you are totally disabled for a period of time.

PORTABILITY

You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

COVERAGE

- **Full-Time Employees**
 - Basic Life Insurance: 1x Your Annual Salary
 - Basic AD&D: 1x Your Annual Salary

BENEFICIARIES

You can update your beneficiaries in UKG at anytime throughout the year. Please review the “*Updating Beneficiaries*” section of this guide.

AGE REDUCTION OF BENEFITS

Coverage reduces to 35% at age 70 and to 50% at age 75.

AD&D BENEFITS – PERCENT OF COVERAGE AMOUNT PER ACCIDENT	
	BASIC COVERAGE
Length of time after accident that covered accidents or death can occur within	365 days
Percent of coverage amount that the total benefit for all losses due to the same accident will not exceed	100%
LOSS FROM ACCIDENT	BASIC COVERAGE
Life	100%
Both Hands or Both Feet or Sight of Both Eyes	100%
One Hand and One Foot	100%
Speech and Hearing in Both Ears	100%
Either Hand or Foot and Sight of One Eye	100%
Movement of Both Upper and Lower Limbs (Quadriplegia)	100%
Movement of Both Lower Limbs (Paraplegia)	75%
Movement of Three Limbs (Triplegia)	75%
Movement of the Upper and Lower Limbs of One Side of the Body (Hemiplegia)	50%
Either Hand or Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%

Voluntary Life and AD&D

VOLUNTARY LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Voluntary Life and AD&D is additional life insurance that an employee can purchase for themselves, a spouse and/or children under the age of 26.

COVERAGE

Employees can elect the coverage levels below up to the guaranteed issue amount. The spouse's and dependent's election may not exceed the employee's.

• Full-Time Employees:

- Supplemental Life Insurance: 5x Your Annual Salary up to \$500,000
- Supplemental AD&D: 5x Your Annual Salary up to \$500,000
- Incremental Elections: \$10,000
- Guarantee Issue: \$200,000

• Spouses:

- Supplemental Life Insurance: The lesser of 100% of the employee's supplemental coverage or \$350,000
- Incremental Elections: \$5,000
- Guarantee Issue: \$25,000

• Children:

- Supplemental Insurance: \$10,000
- Incremental Elections: \$2,000

EVIDENCE OF INSURABILITY (EOI) FORMS

Employees can elect coverage up to the guaranteed issue amount without an EOI form. Any amount over that, an EOI form is required. If your election requires an EOI form, you will be directed in UGK to The Hartford's webpage to complete your EOI. If you would prefer to have an EOI form printed, please contact Human Resources. If you do not complete the EOI form, you will only be enrolled in and charged for the guaranteed issue amount.

AD&D BENEFIT

Voluntary life insurance includes an equal amount of the Accidental Death and Dismemberment benefit for the employee.

AGE REDUCTION

Employee and spouse coverage reduces to 35% at age 70 and to 50% at age 75. Spouse age reduction of benefits is based on the employee's age, not the spouse's age.

PER PAYCHECK COST

Employee and Spouse cost is based on the employee's age. Employee and Spouse cost increases take effective on January 1st.



FILING A CLAIM

To file a claim, call **The Hartford** at **888-563-1124** or go online to: www.thehartford.com



Voluntary Life and AD&D



FILING A CLAIM

To file a claim, call **The Hartford** at **888-563-1124** or go online to: www.thehartford.com



VOLUNTARY LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Employee & Spouse Rates- Cost per \$1,000 (Based on Employee's Age)			
Age Range	Monthly	Bi-Weekly	Semi-Monthly
Under 25	\$0.079	\$0.036	\$0.040
25-29	\$0.092	\$0.042	\$0.046
30-34	\$0.104	\$0.048	\$0.052
35-39	\$0.130	\$0.060	\$0.065
40-44	\$0.175	\$0.081	\$0.088
45-49	\$0.264	\$0.122	\$0.132
50-54	\$0.430	\$0.198	\$0.215
55-59	\$0.714	\$0.330	\$0.357
60-64	\$1.114	\$0.514	\$0.557
65-69	\$1.810	\$0.835	\$0.905
70-74	\$3.188	\$1.471	\$1.594
75 +	\$5.412	\$2.498	\$2.706

To calculate your deduction, multiply the rate in the above chart by the number of thousands in life insurance benefit	
Employee Age: 40	Age 40 Monthly Rate: \$.175
Coverage Amount:	\$30,000
Calculation	$$.175 \times 30 = \5.25 per month

Child Cost (Regardless of the number of children)			
Amount	Monthly	Bi-Weekly	Semi-Monthly
\$2,000	\$0.348	\$0.161	\$0.174
\$4,000	\$0.696	\$0.321	\$0.348
\$6,000	\$1.044	\$0.482	\$0.522
\$8,000	\$1.392	\$0.642	\$0.696
\$10,000	\$1.740	\$0.803	\$0.870

Short-Term Disability (STD)

SHORT-TERM DISABILITY

Short-Term Disability Insurance provides cash payments to you when you become ill or injured and unable to work. You can use the benefit to pay medical bills, household expenses, or anything you choose.



WHO IS ELIGIBLE

Goodwill offers Short-Term Disability at no cost to all full-time regular employees.

- For full-time hourly employees, the benefit begins on the first of the month following one complete year of employment based on the employee's date of hire.
- For full-time admin hourly employees and salaried employees, the benefit begins on the first of the month following 90 days of employment.

BENEFIT

- Hourly Employees: Short-term disability pays 60% of your weekly salary up to a maximum of a \$600 weekly benefit.
- Salaried Employees: Short-term disability pays 60% of your weekly salary.

WAITING PERIOD & PTO

There is a 7-day waiting period before benefits can begin. You may use your accrued paid time off during this waiting period. PTO is used to make the person whole. Example, STD pays 60% and employees get 40% PTO, if available. Unless you contact the Payroll Department to indicate otherwise, PTO will automatically be used to cover the waiting period.

DURATION

Up to 12 weeks of paid benefits.

FILING A DISABILITY CLAIM

To file a claim, call **The Hartford** at **888-563-1124** or go online to: www.thehartford.com



Long-Term Disability (LTD)



FILING A DISABILITY CLAIM

To file a claim, call **The Hartford** at **888-277-4767** or go online to: www.thehartford.com



LONG-TERM DISABILITY

In addition to the Short-term Disability, Goodwill also provides Long-Term Disability coverage to full-time regular salaried and administrative hourly employees at no cost to you. Long-Term Disability provides a cash benefit to help you pay your bills if you become sick or injured and unable to bring home a paycheck for months or years. It can also provide access to rehabilitation resources that can help you get back to work. Long-Term Disability provides peace of mind for you and your family.

BENEFIT

The Long-Term Disability benefit pays 60% of your monthly salary up to the greater of \$100 or 10% of the benefit based on Monthly Income Loss before the deduction of Other Income Benefits.

MAXIMUM BENEFIT

\$10,000

WAITING PERIOD

After being disabled for 90 days, your Long-Term Disability benefit will begin.

DURATION

If your disability begins before you reach the age of 63 you will be able to continue to receive the payout from this benefit until you reach the greater of the normal Social Security Retirement Age or 4 years.

Additional Benefits



TRUIST FINANCIAL WELL-BEING PROGRAM

When you're on top of your finances, you're on top of your life and ready to make more of the moments that matter. This program is designed to get you there, by equipping you with the information and tools you need to prioritize, plan and progress on your journey to financial confidence.

GET STARTED WITH 2 SIMPLE STEPS:



1. REGISTER AT WWW.TRUISTMOMENTUM.COM

- Go to www.TruistMomentum.com (or scan QR code below).
- Enter your name and company email address.
- Enter the registration code:
GOODWILL
- Enter a unique password and click "Register".



2. BUILD YOUR FINANCIAL CONFIDENCE PROFILE

- Login to www.TruistMomentum.com (after registering).
- Answer some simple questions and list your values.
- Go through the content by viewing the videos or modules in each of the 8 Pillars.
- Check off the action items as you complete them.
- View and track your progress to financial confidence on your profile page.
- Click on the + sign in each Pillar to check your progress on learning and doing.

Additional Benefits



URBANSITTER

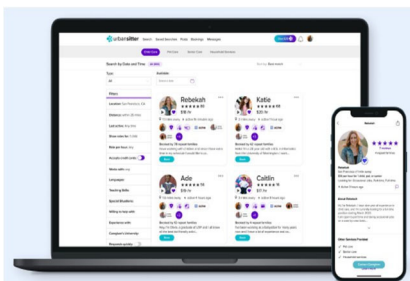
How It Works

Finding trusted care is now easier than ever. The UrbanSitter program is easy to use and you'll gain immediate access upon enrollment.

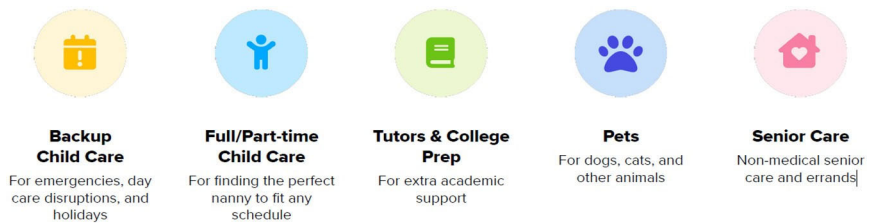
*Example:

- ⇒ Your babysitter called in sick and now you need backup childcare.
- ⇒ You post a job and receive responses from sitters in your area in minutes.
- ⇒ You book a sitter and now you can work knowing that your child is in good hands.
- ⇒ You pay for the booking with a company-provided care credit.

**This process is the same for all services.*



For 2024 Goodwill is providing a new service to help Full-time and Part-time employees with work/life balance. UrbanSitter's Benefit Program relieves employees of the hassle of finding care, so that they can focus on work and their well-being. The convenient site and app allow employees to find, book and pay for in-home care. Caregivers are background-checked and employees can see who's popular in their personal network. Inclusive services: childcare, pet sitting, household services and senior companion care. These services are described as follows:



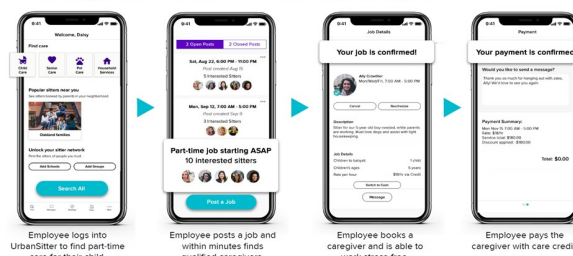
To assist with these services, Goodwill also is providing eligible employees with a **stipend**. A stipend is a yearly amount given to employees with the purpose of being used towards UrbanSitter services. This amount **will not** rollover yearly. You have from **January 1, 2024—December 31, 2024** to utilize your stipend amount.

WORK-LIFE BALANCE PLAN

BENEFIT	IN NETWORK	OUT OF NETWORK
Employee Stipend Amount (in and out of network amounts are combined)		\$150

To find care, please download the UrbanSitter App from the App Store (Apple) or Google Play (Android) and register. You can also register online at www.urbansitter.com.

Finding care is a breeze from start to finish



Additional Benefits



MYCARE

MyCare is a diabetes support program. Rx Benefits and Tria Health has teamed up to introduce a pharmacist-led program that takes a proactive approach with diabetics. How the program works is:

1. RX Benefits reviews pharmacy claims to identify eligible members.
2. Once identified, Tria Health performs member outreach to schedule a pharmacist consultation. The member is then offered an incentive to participate.
3. Once the member has their consultation, the Pharmacist will customize a Care Plan addressing all aspects of the member's health.
4. With the member's permission, the Care Plan is then shared with the member & physician.
5. On-going care coordination and follow-up will continue with the member.

Pharmacist Consultations at a Glance

The Three B's	Health Literacy
A member's approach to their healthcare varies based on their: Background, Behavior & Beliefs.	Gauging how well members understand medical information helps pharmacists know what resources to provide.
Medication Review	Preventative Care
A comprehensive review of all medications - prescription, OTC, and vitamins/supplements.	Ensures members are meeting disease/age recommended preventative care.
Habits & Lifestyle	Care Coordination & Follow Up
Pharmacists and dietitians assess a member's motivation for lifestyle changes and provides recommendations accordingly.	Communicating recommendations to a member's care team is essential, along with ensuring follow up appointments for continuous care.

Tria Health Average Member with Diabetes

Age:

55

Rx
Medications:

9

OTC
Medications:

2

Total
Conditions:

7

Chronic
Conditions:

4

Drug Therapy
Problems on
Initial Consult:

1.8

Additional Benefits

TUITION REIMBURSEMENT



Goodwill encourages our employees to pursue continuing education related to their jobs. With prior approval from your supervisor, Goodwill reimburses full-time employees, with 6 months of service, 100% of appropriate tuition and book costs, up to \$2,000 annually, for classes that are successfully completed. Training required by your supervisor will be paid in full.

SERVICE AWARDS



At each 5-year increment of service, employees are recognized with a certificate, Goodwill item, and a check for \$10 for each year of service.

DR. BOB H. GREENE SCHOLARSHIP FUND



Goodwill's Board of Directors established the scholarship fund in honor of Dr. Greene's years of dedication to Goodwill and in recognition of his longevity of service to North Carolina academia. The award is intended to not only further the education of aspiring students, but also recognize and assist those students who demonstrate involvement in their community and represent the values of Goodwill.

To be eligible, scholarship candidates must have a parent currently employed by Goodwill for at least 1 year, have a cumulative grade point average of 2.5 or higher, a record of community service, and be either a current student at an institution of higher learning or a graduating high school senior enrolling in an accredited institution of higher learning or the following fall semester. The application process for the scholarship opens annually in early spring and includes submission of an essay discussing one of three possible topics along with two letters of recommendation, one from a teacher or counselor, and one from a supervisor or community leader.

CREDIT UNION

Goodwill has formed partnerships with several credit unions throughout northwest North Carolina, including Allegacy, Members, Telco and others. Employees and their families may take advantage of these established partnerships by applying for membership. Credit unions can offer favorable, lower cost rates for many different banking and loan services. Please contact your Human Resources representative to identify a credit union close to you. Goodwill will join additional area credit unions as the need becomes apparent.



DISCOUNTED TICKETS

Goodwill has collaborated with Tickets at Work to provide discounts to many amusement parks, concerts and other ticketed events.

1. Go to <https://www.ticketsatwork.com>
2. Complete the information to become a member (Select sign up with a company code)
3. Use company code Goodwill NWNC
4. Use your company (or) personal email
5. Complete the rest of the form, then select submit
6. Call 800-331-6483 for assistance



Retirement: Pension Plan

PENSION PLAN

This benefit is becoming rare in today's workplace since it is a large cost to the employer. Goodwill offers this benefit without cost or contribution to all eligible employees to help our staff prepare for retirement. See the pension plan summary plan description for more information about this plan.

ELIGIBILITY

Goodwill contributes an amount equal to 10% of your annual salary to the pension plan for each eligible calendar year worked. Employees must be at least 21 years of age, work until the end of the calendar year, and work at least 1,000 hours per plan year to be eligible for a contribution.

CONTRIBUTIONS

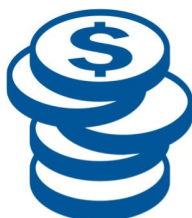
Contributions are made after the end of every full calendar year. The money is invested appropriately in an effort to increase these funds (see Summary Plan Description for details). Please remember that market conditions vary and will affect pension plan earnings.

VESTING

After two years of working 1,000 hours each year, you begin to gain ownership of the money Goodwill has invested in the pension plan. You become 20% vested after two years and 20% each additional year you work 1,000 hours. After six years with Goodwill, you are fully vested.

WITHDRAWALS

During employment you may not take out loans or borrow funds from the pension plan. When you retire or are no longer employed with Goodwill, your vested funds are yours to keep. You will receive annual statements of your vested pension plan funds during your employment, as well as additional information if you do leave Goodwill as to how to withdraw these funds.



Retirement: 403(b) Plan



403(B) PLAN

You decide how much of your income you want to save and invest (within federal limitations). Based on your decision, Goodwill will reduce your paycheck either before or after income taxes by that amount and forward it to our investment partner on a regular basis. Contributions are allocated to your choice of investment options within the savings plan. Your 403(b) savings have no effect on Social Security. Your Social Security contributions and benefits are based on your total pay.

ENROLLMENT

Type <http://myaccount.ascensus.com/rplink> into your browser, and register. After that, you can enroll. Ascensus also offers a mobile app for Android and iPhones.

LOANS AND WITHDRAWALS

Generally, you can only withdraw money from your 403B retirement savings account when you retire or are no longer employed by Goodwill; however, there are several ways employees can withdraw money while you are employed such as Hardship Withdrawals, Loans, and In-service Withdrawals for employees who have attained a certain age. Employees can contact Ascensus to see if they are eligible to get a distribution from their 403B.

PORTABILITY

If you go to work for another employer who also sponsors an eligible retirement savings plan, you may be able to transfer or roll over your account balance to your new employer's program.

TRADITIONAL 403(B) VS. ROTH 403(B) PLANS

Both plans are a type of supplemental retirement program that allow you to set aside money for retirement during your working years. The Traditional 403(b) permits setting aside money on a pre-tax basis. The contributions and any earnings that accumulate over the years are not taxed until you withdraw the funds, which is usually at retirement (when you may be in a lower tax bracket). The Roth 403(b) allows you to set aside money on an after-tax basis. Earnings are tax-free if they are withdrawn according to retirement plan guidelines.

BENEFIT OF A TRADITIONAL 403(B) PLAN

With a traditional pre-tax 403(b) savings program, your current federal income tax is reduced, so it costs you less out-of-pocket to invest.

BENEFIT OF ROTH 403(B) PLAN

With a Roth 403(b) savings program you are contributing to the account with after-tax dollars, but all withdrawals are tax free if you meet the plan conditions.

BRIEF SUMMARY OF THE 403(B) PROGRAMS

In compliance with 403(b) regulations, we notify our employees of the right to participate in this plan. Employees may enroll in this plan at anytime. For enrollment, please use the <http://myaccount.ascensus.com/rplink> link, sign up, and designate a beneficiary. Deductions will begin soon after Ascensus processes the enrollment. This is usually done every Friday.

Medicare



MEDICARE COVERAGES

Independent Benefit Advisors is here to provide you with Medicare Supplement, Medicare Advantage and Medicare Prescription Drug Plans for ages 65 and up. For these coverages, you must be enrolled in Medicare Parts A & B. For enrollment in Parts A & B, please contact your local social security administration office. **At no cost to you,** Independent Benefit Advisors will assist you in determining which Medicare Plans in North Carolina will best fit your needs.

MEDICARE SUPPLEMENT PLANS (MEDIGAP)

North Carolina Medicare Supplement Insurance, also known as Medigap, is available for purchase from private insurance companies. These Medicare supplement in NC cover some or all costs that Medicare does not, such as deductibles and co-payments. The different types of NC Medicare Supplemental Insurance provide different levels of coverage in addition to Medicare, providing flexibility and choice for North Carolina Medicare recipients. Your individual NC Medicare Supplemental Insurance needs will depend on your overall state of health and your budget.

MEDICARE ADVANTAGE PLANS (PART C)

Medicare Advantage Plans in NC, or Medicare Part C, are offered through private insurance companies. North Carolina Medicare Advantage plans are contracted through Medicare and provide hospital, medical, and prescription drug benefits to users. Unlike most Medicare Supplement plans, Medicare Advantage plan in NC have networks with specific doctors and facilities that participants must use in order to be covered. When deciding which type of coverage is best for you between Medicare Supplement Plans or a Medicare Advantage Plans in NC, contact the knowledgeable and experienced team at Independent Benefit Advisors.

MEDICARE PRESCRIPTION DRUG PLANS (PART D)

North Carolina Medicare Supplement Plans do not cover prescription drugs, so Medicare Part D prescription drug policies are available. To receive Medicare Part D prescription coverage, you will need to purchase a Part D policy through a private insurance company. A licensed insurance agent at Independent Benefit Advisors can discuss with you in greater detail how North Carolina Medicare supplement plans and Medicare Part D prescription drug coverage work together.



Important Notices

Medicare Part D Creditable Coverage Notice

Important Notice from Goodwill Industries of Northwest North Carolina 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 Goodwill Industries of Northwest North Carolina 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. Goodwill Industries of Northwest North Carolina has determined that the prescription drug coverage offered by the Option A and Option B Plans administered through RX Benefits are, 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 to 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 while enrolled in Goodwill Industries of Northwest North Carolina coverage as an active employee, please note that your Goodwill Industries of Northwest North Carolina coverage will be the primary payer for your prescription drug benefits and Medicare will pay secondary. As a result, the value of your Medicare prescription drug benefits will be significantly reduced. Medicare will usually pay primary for your prescription drug benefits if you participate in Goodwill Industries of Northwest North Carolina coverage as a former employee. You may also choose to drop your Goodwill Industries of Northwest North Carolina coverage. If you do decide to join a Medicare drug plan and drop your current Goodwill Industries of Northwest North Carolina coverage, be aware that you and your dependents may not be able to get this coverage back.

Important Notices

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 Goodwill Industries of Northwest North Carolina 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 October to join.

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

Contact the Natalie Grubbs for further information at 336-724-3625 ext. 11297. **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 Goodwill Industries of Northwest North Carolina 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 (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).

Important Notices

Name of Entity/Sender: Goodwill Industries of Northwest North Carolina

Contact: Human Resources

Address: 2701 University Parkway Winston-Salem, NC 27105

Phone Number: 336.724.3625

Notice of Privacy Practices

Goodwill Industries of Northwest North Carolina maintains a Notice of Privacy Practices that provides information to individuals whose protected health information (PHI) will be used or maintained by the Plan. If you would like a copy of the Plan's Notice of Privacy Practices, please contact Human Resources at 336.724.3625 / 2701 University Parkway Winston- Salem, NC 27105

HIPAA Special Enrollment Rights Notice

If you are declining enrollment in Goodwill Industries of Northwest North Carolina group health coverage 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 this 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. Finally, you and/or your dependents may have special enrollment rights if coverage is lost under Medicaid or a State health insurance ("CHIP") program, or when you and/or your dependents gain eligibility for state premium assistance. You have 60 days from the occurrence of one of these events to notify the company and enroll in the plan. To request special enrollment or obtain more information, contact Human Resources at 336.724.3625.

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, 2021. Contact your State for more information on eligibility.

Important Notices

NORTH CAROLINA – Medicaid	VIRGINIA– Medicaid and CHIP
Website: https://medicaid.ncdhhs.gov/ Phone: 919-855-4100	Website: https://www.dmas.virginia.gov/ Medicaid Phone: 1-800-432-5924 CHIP Phone: 1-855-242-8282

To see if any other states have added a premium assistance program since July 31, 2021, or for more information on special enrollment rights, contact either:

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

Women’s Health Cancer Rights Act (WHCRA) Notice

Do you know that your Plan, as required by the Women’s Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema? Call your plan administrator at 336.724.3625 for more information.

Newborns’ And Mothers’ Health Protection Act (NMHPA) Notice

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 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 insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

Model General Notice of COBRA Continuation Coverage Rights

You’re getting this notice because you recently gained coverage under a group health plan (the Plan). This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan. **This notice explains COBRA continuation coverage, when it may become available to you and your family, and what you need to do to protect your right to get it.** When you become eligible for COBRA, you may also become eligible for other coverage options that may cost less than COBRA continuation coverage. The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and other members of your family when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan’s Summary Plan Description or contact the Plan Administrator.

You may have other options available to you when you lose group health coverage. For example, you may be eligible to buy an individual plan through the Health Insurance Marketplace. By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30-day special enrollment period for another group health plan for which you are eligible (such as a spouse’s plan), even if that plan generally doesn’t accept late enrollees.

Important Notices

What is COBRA continuation coverage?

COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a life event. This is also called a “qualifying event.” Specific qualifying events are listed later in this notice. After a qualifying event, COBRA continuation coverage must be offered to each person who is a “qualified beneficiary.” You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay If you’re an employee, you’ll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.
- If you’re the spouse of an employee, you’ll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:
 - Your spouse dies;
 - Your spouse’s hours of employment are reduced;
 - Your spouse’s employment ends for any reason other than his or her gross misconduct;
 - Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
 - You become divorced or legally separated from your spouse.
- Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:
 - The parent-employee dies;
 - The parent-employee’s hours of employment are reduced;
 - The parent-employee’s employment ends for any reason other than his or her gross misconduct;
 - The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
 - The parents become divorced or legally separated; or the child stops being eligible under the Plan as a “dependent child”

When is COBRA continuation coverage available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events: 1) The end of employment or reduction of hours of employment; 2) Death of employee or 3) The employee’s becoming entitled to Medicare benefits (under Part A, Part B, or both).

For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child’s losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to Human Resources

How is COBRA continuation coverage provided?

Once the Plan Administrator receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries. Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses, and parents may elect COBRA continuation coverage on behalf of their children. COBRA continuation coverage is a temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

There are also ways in which this 18-month period of COBRA continuation coverage can be extended:

Disability extension of 18-month period of COBRA continuation coverage

If you or anyone in your family covered under the Plan is determined by Social Security to be disabled and you notify the Plan Administrator in a timely fashion, you and your entire family may be entitled to get up to an additional 11 months of COBRA continuation coverage, for a maximum of 29 months. The disability would have to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of COBRA continuation coverage.

Important Notices

Second qualifying event extension of 18-month period of continuation coverage

If your family experiences another qualifying event during the 18 months of COBRA continuation coverage, the spouse and dependent children in your family can get up to 18 additional months of COBRA continuation coverage, for a maximum of 36 months, if the Plan is properly notified about the second qualifying event. This extension may be available to the spouse and any dependent children getting COBRA continuation coverage if the employee or former employee dies; becomes entitled to Medicare benefits (under Part A, Part B, or both); gets divorced or legally separated; or if the dependent child stops being eligible under the Plan as a dependent child. This extension is only available if the second qualifying event would have caused the spouse or dependent child to lose coverage under the Plan had the first qualifying event not occurred.

Are there other coverage options besides COBRA Continuation Coverage?

Yes. Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicare, Medicaid, Children's Health Insurance Program (CHIP), or other group health plan coverage options (such as a spouse's plan) through what is called a "special enrollment period." Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at www.healthcare.gov.

If you have questions

Questions concerning your Plan or your COBRA continuation coverage rights should be addressed to the contact or contacts identified below. For more information about your rights under the Employee Retirement Income Security Act (ERISA), including COBRA, the Patient Protection and Affordable Care Act, and other laws affecting group health plans, contact the nearest Regional or District Office of the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit www.dol.gov/agencies/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.) For more information about the Marketplace, visit www.HealthCare.gov.

To protect your family's rights, let the Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator. Plan contact information Goodwill Industries of Northwest North Carolina / Human Resources/ 336-724-3625.



Notes

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



YOUR BENEFITS. YOUR CHOICES. YOUR HEALTH.

This benefit summary provides selected highlights of the employee benefits program available. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. Our company reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.

