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BENEFITS GUIDE

MyPRIME
Benefits for You and Your Family
IN-HOUSE ASSOCIATES

WELCOME

TO YOUR BENEFITS!

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Benefits for You and Your Family

Prime, Inc., offers a comprehensive benefits program which is designed to help you stay healthy, feel secure, and maintain a work-life balance. Offering a competitive benefits package is just one way we strive to provide our associates with a rewarding workplace. Please read the information provided in this guide carefully. For full details about our plans, please refer to the Summary Plan Descriptions located at www.primeincbenefits.com. You can also request a free Summary Plan Description from the Human Resources Department.

Listed below are the benefits available during your Open Enrollment:

Who Is Eligible?

All W-2 associates scheduled to work at least 30 hours per week are eligible to participate in Prime's benefits program. Eligible associates may also enroll their legal spouse and dependent children (married or unmarried). A dependent child must be under 26 years old and may be the natural child, stepchild, legally adopted child, child placed for adoption, or other child for whom the associate has permanent legal custody.

When and How Do I Enroll?

The Open Enrollment period for 2022 benefits is October 12 through November 12. You can make changes to your benefits during this period. During this process, we also ask that you confirm that you understand the following statement: "Due to the Affordable Care Act, it is important to know that we offer you a qualified, affordable plan that satisfies the employer mandate."

There Are Two Options to Enroll

Option 1: MyPrime Self-Service Benefits Portal. Log on and view or change your coverage by using the MyPRIME link in the Prime Mobile app or by going to www.myprimeinc.com and logging in using your sign-on code and password, or click on MyPrime under the Associates Portal. If you do not know your password, contact the Help Desk at 417-521-3148.

Option 2: Speak with a Benefits Educator through the Enrollment Call Center. You can call 877-859-6107 to speak with a representative from 8 a.m. to 7 p.m. CST Monday-Friday and 9 a.m. to 3 p.m. CST Saturday.

When Is My Coverage Effective?

If you have satisfied your new-hire eligibility, all elections made during Open Enrollment will be effective January 1, 2022.

Changing Coverage During the Year

You can change your coverage during the year when you experience a qualifying change in status, such as marriage, divorce, birth, adoption, or loss of coverage. The change must be reported to the Human Resources Department within 30 days of the event and must be consistent with the event. For example, if your dependent child no longer meets eligibility requirements, you can drop coverage for only that dependent.

Vacation Policy

Vacation will accrue at a rate of 1/2 day per month for the first 10 months of employment with Prime. After the first anniversary is reached, vacation will be applied annually at anniversary date as follows:

- 1 week after 1 year
- 2 weeks after 3 years
- 3 weeks after 5 years
- 4 weeks after 10 years



Anthem Employee Assistance Program

When you need help meeting life's challenges, the Anthem Employee Assistance Program (EAP) is here for you and your household members. Check out some of the services we offer — at no cost to you.

Counseling

- Up to three visits per issue
- Face-to-face counseling or online visits via LiveHealth Online
- Can call EAP or use the online Member Center to initiate services

Legal Consultation

- 30-minute phone or in-person meeting
- Discounted fees to retain a lawyer
- Online resources, including free legal forms, seminars and a library of articles

Financial Consultation

- Phone meeting with financial professionals
- Consultation available during regular business hours — no time limits or appointments needed
- Online resources, including articles, calculators and budgeting tools

ID Recovery

- Identity theft risk level checked by specialists
- Help with reporting to consumer credit agencies
- Assistance filling out paperwork and negotiating with creditors

myStrength

- Online "health club for your mind"
- E-learning modules and mood trackers
- Library of videos, articles and inspirational quotes
- Supports development of personal action plans

Dependent Care and Daily Living Resources

- Information available on child care, adoption, summer camps, college placement, elder care and assisted living through the EAP website
- For help with everyday needs, like pet sitting, relocation resources and more

Other anthemEAP.com Resources

- Well-being articles, podcasts and monthly webinars
- Self-assessment tools for depression, anxiety, relationships, alcohol use, eating habits and more

Crisis Consultation

- Toll-free number for emergencies
- Round-the-clock help available
- Critical event support online to help with planning, coping and recovery resources when tragedy strikes

Available 24/7, 365 days a year Everything you share is confidential.

Need help? Give EAP a try.

Call: 800-865-1044
Go online: www.anthemEAP.com
Your company web ID: PRIME



Prime offers four Medical plans through Anthem Blue Cross Blue Shield. The Medical plans offered for 2022 provide you with the opportunity to select a plan that best meets your needs. Coverage is available for associates only, associates plus spouses, associates plus children, or associates plus family coverage. The outline of the plans below will provide you with a highlight of the respective plan benefits.

Please refer to the Summary Plan Description for complete details of the respective plans.

Terms to Know

- Deductible: The first dollars of medical expenses before the insurance begins.
- Coinsurance: The plan pays a percentage of the claim after the deductible is met, and you pay the remaining percentage. Once you reach the out-of-pocket maximum, the plan pays 100%. Springfield, MO,

HSA-Fligible

Consuments: A flat dollar navment made for an office visit

Copayments: A flat dollar p	ayment mad	e for an office	visit.		HSA-Eligil	ole	Associate	
	Low PP	O Option	High PP	O Option	HDH	P Option	POS	Option
Benefit/Service	In Notwork	Out-of-	In Notwork	Out-of-	In-	Out-of-	In Naturals	Out-of-
Deductible	In-Network	Network	In-Network	Network	Network	Network	In-Network	Network
Single	\$900	\$1,800	\$750	\$1,500	\$2,800	\$2,800	\$0	\$1,000
Family	\$2,700	\$5,400	\$2,250	\$4,500	\$5,200	\$5,200	\$0	\$3,000
Out-of-Pocket Maximum	Ψ2,700	ψ5,400	ΨΣ,200	ψ4,500	ψ3,200	ψ0,200	ΨΟ	ψ0,000
(includes deductible)	#6 250	¢11.000	¢2.250	¢7,000	¢ E 000	¢10,000	\$1,500	ΦE E00
Single	\$6,350	\$11,800	\$3,250	\$7,000	\$5,000	\$10,000		\$5,500
Family	\$12,700	\$25,400	\$7,250	\$14,000	\$10,000	\$20,000	\$4,000	\$16,000
Office Visits								
Live Health Online Telehealth Visit	\$20 copay	Not covered	\$20 copay	Not covered	\$59 copay	Not covered	\$20 copay	Not covered
Primary Care Physician (PCP)	\$50 copay	50%	\$30 copay	50%	20%	40%	\$20 copay	40%
Specialty Care Physician (SCP)	\$50 copay	50%	\$40 copay	50%	20%	40%	\$20 copay	40%
Preventive Care	Covered at 100%	50%	Covered at 100%	50%	Covered at 100%	40%	Covered at 100%	40%
Emergency Room Services	30%	30%	20%	20%	20%	20%	\$200 copay; waived if admitted	\$200 copay; waived if admitted
Ambulance Services	30%	50%	20%	50%	20%	40%	20%	20%
Urgent Care	30%	50%	20%	50%	20%	40%	\$50 copay	40%
Inpatient/Outpatient Services	30%	50%	20%	50%	20%	40%	20%	40%
Prescription Drug Benefits	In-Network	Out-of- Network	In-Network	Out-of- Network	In- Network	Out-of- Network	In-Network	Out-of- Network
Deductible	\$100	\$100	No deductible	No deductible			No deductible	No deductible
Retail Pharmacies 30-Day Supply								
Generic (deductible waived if an Rx is generic)	20%		10%		20%		10%	
Preferred Brand	30%	50%	20%	50%	20%	50%	20%	50%
Non-Preferred Brand	40%	(\$45 min)	30%	(\$45 min)	20%	(\$60 min)	30%	(\$45 min)
Specialty	20% with \$100 max		20% with \$100 max		20%		20% with \$100 max	
Retail Pharmacy or Rx Benefits Home Delivery 90-Day Supply								
Generic	\$40 copay		\$20 copay		20%		\$20 copay	
Preferred Brand	\$80 copay		\$40 copay		20%		\$40 copay	
Non-Preferred Brand	\$120 copay	Not covered	\$80 copay	Not covered	20%	Not covered	\$80 copay	Not covered
Specialty	20% with \$100 max		20% with \$100 max		20%		20% with \$100 max	

2022 Weekly Medical Rates

2022 Weekly Medical Rates — First-Year Associates				
	Low PPO Option	High PPO Option	HDHP Option	POS Option
Associate Only	\$71.92	\$124.26	\$64.22	\$108.37
Associate + Spouse	\$142.18	\$241.16	\$126.42	\$209.68
Associate + Child(ren)	\$135.15	\$229.45	\$120.19	\$199.53
Associate + Family	\$209.59	\$353.29	\$186.08	\$306.87

2022 Weekly Medical Rates — Second-Year+ Associates				
	Low PPO Option	High PPO Option	HDHP Option	POS Option
Associate Only	\$28.14	\$83.09	\$25.17	\$72.49
Associate + Spouse	\$55.16	\$161.03	\$49.10	\$140.04
Associate + Child(ren)	\$52.45	\$153.22	\$46.70	\$133.28
Associate + Family	\$81.08	\$235.79	\$72.04	\$204.83





Health Savings Account (HSA)

A Health Savings Account will be available for all associates enrolled in the HDHP. An

HSA is a personal healthcare bank account that you can use to pay out-of-pocket medical expenses with pre-tax dollars. You own and administer your healthcare savings account. You determine how much you will contribute to your account, when to use your money to pay for qualified medical expenses, and when to reimburse yourself. HSAs allow you to save and roll over money if you do not spend it in the calendar year. This is a bank account; you must have money in the account before you can spend it. The money in this account is always yours. If you change health plans or jobs, the money in the account is yours to keep.

Note: Bank of America will charge a \$2.25 monthly fee for the HSA account.

You are eligible to open and fund an HSA if:

- You are covered by an HSA-eligible High Deductible Health Plan, such as the HDHP for 2022.
- You are not covered by your spouse's health plan (unless it is a qualified HDHP), Flexible Spending Account (FSA), or Health Reimbursement Account (HRA).
- You are not enrolled in a Healthcare FSA.
- You are not eligible to be claimed as a dependent on someone else's tax return.
- You are not enrolled in Medicare, TRICARE, or TRICARE For Life.

You can use HSA money to pay for qualified medical expenses now or in the future. Your HSA can be used for your expenses and those of your spouse and dependents, even if they are not covered by the HDHP. Qualified medical expenses are defined by the IRS. These expenses include doctor's office visits, deductibles, coinsurance, and prescription drugs. IRS Publication 502 provides a complete list of eligible expenses and can be found at www.irs.gov.

Prime has partnered with Bank of America to administer the HSAs opened by associates participating in the HDHP. You can elect to participate in the HSA and have deductions taken on a pre-tax basis and deposited into your account. You may also start an HSA at a financial institution of your choice. In that case, you would deposit funds on an after-tax basis and deduct the amount of your contributions when you file your income taxes.

Catch-Up Contribution

Individuals age 55 or older may make an additional \$1,000 annual contribution to their HSAs.

There Are Three Ways to Maximize Your Tax Savings

- Contributions to an HSA are tax-free. (They can be made through payroll deduction on a pre-tax basis when you open an account with Bank of America.)
- 2. The money in this account (including interest and investment earnings) grows tax-free.
- 3. As long as the funds are used to pay for qualified medical expenses, they are spent tax-free.

HSA FUNDING AND LIMITS*

The 2022 IRS maximum contributions for these accounts are:

\$3,650 self-only and \$7,300 family.

*Employees are responsible for tracking annual limits. Funding limits include both employer and employee contributions.

Prime's Contribution

Prime will make a contribution to your account based upon your HDHP Medical coverage tier. Prime's 2022 weekly contribution: \$5.77/week or \$300 annual for associate-only coverage and \$9.62/week or \$500 annual for family coverage. If you are enrolling in the HDHP for the first time, Prime's contribution will be \$11.54/week or \$600 annual for associate-only and \$19.23/week or \$1,000 annual for family coverage for the first year you have the HDHP.





As a member of Prime Inc's Health plan, you and your family can receive 24/7/365 access to US board-certified physicians who can consult, diagnose, and prescribe medication, if deemed appropriate, via interactive video. Regardless of time and locations, you can connect with a network physician for common and acute illnesses. The physician will be able to review your visit record and discuss symptoms and treatment options.

LiveHealth Online is one of the lowest cost options for members! LHO is only \$20 on the PPO plan and POS plan and \$59 on the HDHP.

Benefits of LiveHealth Online

- 24/7/365 access to a physician through your Anthem Sydney mobile app.
- You can speak to a doctor at work, while traveling or from the comfort of your home.
- You can save money by avoiding expensive ER and urgent care visits.
- Access to behavioral health services.
- If you are enrolled in the PPO plan you can use LiveHealth Online for \$20!
- If you are enrolled in the HDHP you can use LiveHealth Online for only \$59, which is usually significantly less than your out-of-pocket costs for the ER or physician's visit.

When to use LiveHealth Online

- For nonemergency medical issues (especially as an alternative to the high cost of an emergency room or urgent care center visit).
- When your doctor or pediatrician is not available on your schedule.
- When you are traveling and need medical care.
- When it's not convenient to leave your home or work.
- Anytime, anywhere, including nights, weekends and even holidays.

Common conditions treated

- Cold/flu.
- Cough, congestion, sinus infection.
- Urinary tract infection.
- Allergies.
- Nausea.
- Constipation.
- Pinkeye.
- Rashes.







Dental Insurance

Dental benefits provided by Anthem Blue Cross Blue Shield include a large network of dental providers. To find an in-network provider in your area, visit www.anthem.com and choose the Dental Complete network, or call Anthem Blue Cross Blue Shield at 855-769-1465. The chart below is a brief outline of the plan. Please refer to the Summary Plan Description for complete plan details.

If you elect the Low Option, major and orthodontic services will not be covered.

	Low Option	High Option	
Benefit/Service	·		
Deductible			
Single	\$75	\$75	
Family	\$225	\$225	
Calendar Year Maximum (1/1-12/31 per person)	\$750	\$1,000	
Type 1 — Preventive Care			
Routine Oral Exams			
X-Rays	Plan pays 100%; deductible waived	Plan pays 100%, deductible waived	
Cleanings			
Type 2 — Basic Services			
Sealants (up to age 16)			
Extractions	Plan pays 80% after deductible	Dian nova 90% after deductible	
Anesthesia	Fian pays 60% after deductible	Plan pays 80% after deductible	
Fillings			
Type 3 — Major Service			
Crowns, Inlays and Onlays			
Crown, Denture and Bridge Repair			
Endodontics	Not covered	Plan pays 50% after deductible	
Implants			
Periodontics			
Orthodontics			
Orthodontics Applies to Eligible Adults And Dependent Children to Age 26	Not covered	Plan pays 50% after deductible	
Lifetime Maximum (per person)	N/A	\$1,000	
2022 Weekly Dental Rates			
	Low Option	High Option	
Associate Only	\$2.88	\$4.84	
Associate + Spouse	\$5.79	\$9.72	
Associate + Child(ren)	\$7.69	\$12.92	
Associate + Family	\$10.56	\$17.75	



Prime offers a Vision plan through Vision Service Plan (VSP). This comprehensive Vision plan is designed to promote optimum eye health for you and your family. To find a provider, please visit www.vsp.com.

UV Lenses Covered at 100%!

Note: The chart below is a brief outline of the plan. Please refer to the Summary Plan Description for complete details.

	Description	Copay	Frequency
	Your Coverage With a VSP Doctor		
WellVision Exam	Focuses on your eyes and overall wellness	\$15	Every calendar year
Prescription Glasses		\$25	See frame and lenses
Frame	\$200 allowance for a wide selection of frames \$220 allowance for featured frame brands 20% off amount over your allowance	Included in prescription glasses	Every calendar year
Lenses	Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children	Included in prescription glasses	Every calendar year
Lens Options	Progressive lenses Antireflective coating and UV lenses Average 20%-25% off other lens options	\$25 \$ 0	Every calendar year
Contacts (instead of glasses)	\$200 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation)	Up to \$60	Every calendar year
	Glasses and Sunglasses 20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam.		
Extra Savings and Discounts Retinal Screening Guaranteed pricing on retinal screening as an enhancement to your WellVision			ellVision Exam.
	Laser Vision Correction Average 15% off the regular price or 5% off the promotional price; discounts availa from only contracted facilities.		

Visit <u>www.vsp.com</u> for details if you plan to see a provider other than a VSP doctor. Potential reimbursements for an out-of-network vision provider:

Exam: Up to \$45 Lines Trifocal Lenses: Frame: Up to \$70 Progressive Lenses: Single Vision Lenses: Up to \$65 Lined Bifocal Lenses: Up to \$50 Up to \$30 Contacts: Up to \$105 Up to \$50

VSP guarantees coverage from VSP doctors only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

2022 Weekly Vision Rates	
Associate Only	\$2.40
Associate + Spouse	\$4.19
Associate + Child(ren)	\$4.56
Associate + Family	\$6.95



What Dependent Care Is All About

The Dependent Care Flexible Spending Account (FSA) allows you to set aside pre-tax dollars to cover qualified child care or disabled dependent care expenses you would normally pay out of your pocket with post-tax dollars. You pay no federal or state income taxes on the money you place in a Dependent Care FSA.

How a Dependent Care FSA Works

- Choose a specific amount of pre-tax money to contribute each pay period to your account during the year.
- The amount is automatically deducted from your pay at the same level each pay period.
- As you incur eligible expenses, submit the appropriate paperwork to be reimbursed by the plan.

Important Rules to Keep in Mind

- The IRS has a strict "use it or lose it" rule. If you do not use the full amount in your Dependent Care FSA by the end of the calendar year, you will forfeit any remaining funds, so please plan your contributions carefully.
 - You may still use any remaining Dependent Care FSA funds for the first two and a half months of your next plan year.
- Once you enroll in the Dependent Care FSA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one Dependent Care FSA to another.
- Re-enrollment is required each year.

Plan	Annual Maximum Contribution	Examples of Covered Expenses
Dependent Care Flexible Spending Account	\$5,000 married filing jointly/ \$2,500 single or married filing separately	Day care, nursery school, elder care expenses





All Prime Associates have a one-time opportunity to elect Term Life and AD&D coverage through OneAmerica. Associates must sign up within 30 days from your Date of Hire. However, during the 2021 Open Enrollment, ALL inhouse associates will be eligible to enroll regardless of your previous enrollment status.

*Group Life Benefit: \$15,000 *AD&D Benefit: \$15,000

As you grow older, the amount of life and AD&D insurance for you will be reduced according to the following schedule:

At the age of	The original amount of insurance and cost will reduce to
80	50%

Waiver of Premium: If you are deemed totally disabled, your life insurance benefit will continue without payment of premium. Additional paperwork will be required.

*Portability: If your employment with Prime ends, you may take your policy with you by paying the term life rate.

Weekly Life and AD&D Ra	ates
First Year Associates	\$0.57
Second Year Associates	\$0.38



Through OneAmerica, you have the opportunity to obtain additional Life insurance for you and your family members with no underwriting (up to the guaranteed issue amounts).

Employee Life and AD&D

- Employees may purchase up to 5 times their basic annual earnings, capped at \$250,000, in increments of \$10,000.
- Guaranteed issue (this year only): up to \$250,000.
- Employee AD&D coverage will match the Life insurance amount.
- Accelerated Life Benefit: Pays up to 75% of the Life insurance benefit for a terminal condition, as defined in the certificate.
- Waiver of Premium: If you are totally disabled prior to age 60, your premium may be waived until age 65.
- Age Reduction: At age 70, benefit will reduce by 33% of the original Life insurance amount, rounded to the next higher \$10,000, if not already an exact multiple of \$10,000. At age 75 the benefit will reduce by an additional 22% of the original amount, similarly rounded. The reduced amount will not be less than \$20,000.

Spouse Life and AD&D

- Employees may purchase spousal coverage up to 50% of the employee's coverage amount up to \$50,000 in \$5,000 increments.
- Guaranteed issue (this year only): \$50,000.
- Spouse AD&D coverage will match the Life insurance amount.

Spouse Age Reduction: Same as Employee with a minimum coverage no less than \$10,000.

Child Life and AD&D

- Employees may purchase \$10,000 in Child Life insurance coverage. Child AD&D is available if both employee AD&D and Child Life are chosen.
- Guaranteed issue (this year only): No medical questions are required.

Child Weekly Life and AD&D Rates		
Live Birth to 26 Regardless of Student Status		
\$10,000	0.51	

Important News for Subsequent Open Enrollments

Modified Open Enrollment—Associates who waived coverage when first eligible can elect \$20,000 of Voluntary Life and AD&D coverage on themselves without providing Evidence of Insurability (EOI). This is strictly for associates.

Annual Purchase Guarantee—Associates currently enrolled can increase their benefit amount by \$10,000 up to the guaranteed issue amount without providing Evidence of Insurability. This is for associates only.

Weekly Life and AD&D Rates per \$1,000 of Benefit			
Age	Employee	Spouse	
Age	Employee	Spouse	
<20	0.0309	0.0309	
20-24	0.0309	0.0309	
25-29	0.0316	0.0316	
30-34	0.0369	0.0369	
35-39	0.0473	0.0473	
40-44	0.0630	0.0630	
45-49	0.0958	0.0958	
50-54	0.1581	0.1581	
55-59	0.2804	0.2804	
60-64	0.4235	0.4235	
65-69	0.6565	0.6565	
70-74	1.0350	1.0350	
75+	2.0868	2.0868	

Universal Life (Permanent Life Insurance)

Life insurance is a promise to your family to help protect their future. Trustmark Universal LifeEvents® insurance is permanent Life insurance that provides a death benefit for your family if something happens to you or your spouse.

- It helps provide permanent financial protection.
- It is a financial tool that helps you manage life at every stage, from supporting a family to sending your children to college to the need for long-term care.
- It builds cash value over time, and you can access it for life's challenges and opportunities.

Benefits can be paid as a death benefit, a living benefit, or a combination of both. Your coverage is fully portable at the same rate, so you can take it with you if you change jobs or retire. This plan offers family coverage. You may protect your spouse, your children up to age 23, and your grandchildren up to age 18 with Universal Life insurance, even if you choose not to participate.

Guaranteed Issue (No Health Questions Asked)

NEW HIRES/NEWLY ELIGIBLE (FIRST TIME OFFERED COVERAGE)

 Associate: The lesser of \$16 per week or \$200,000 (age 64 max).

NON-PARTICIPANTS (IF YOU DID NOT ELECT COVERAGE AT YOUR FIRST OPPORTUNITY)

 Associate: The lesser of \$8 per week or \$200,000 (age 64 max).

The LifeEvents Advantage

LifeEvents is designed to match your needs throughout your lifetime. It pays a higher death benefit during working years when expenses are high and your family needs maximum protection. Then at age 70, when financial needs are typically lower, the death benefit reduces to one-third. Consistent levels of living benefits throughout retirement are provided when you are most likely to need long-term care services.

Living Benefits

Long-Term Care (LTC)² pays a monthly benefit equal to that of your death benefit for up to 25 months. The LTC benefit accelerates the death benefit and proportionately reduces it.

Benefit Restoration³

This Restores the death benefit¹ that is reduced to pay for LTC, so your family receives the full death benefit amount when they need it most.

Optional Benefits Available to Each Individual Associate for Additional Premium

Waiver of Premium: This benefit covers total disability of the primary insured and waives the premium for the base coverage and riders after the six (6)-month elimination period.

¹Death benefit reduces to one-third at the latter of age 70 or the 15th policy anniversary.
²The LTC benefit is an acceleration of the death benefit and is not Long-Term Care insurance. It begins to pay after 90 days of confinement or services, and to qualify, you must meet conditions of eligibility for benefit. Pre-existing condition limitations may apply. Living benefit may not be available in all states or may be named differently. Please consult your policy for complete details.
³Not available in all states or may be named differently in some states.

IUL.205/GUL.205 is underwritten by Trustmark Insurance Company, Lake Forest, Illinois. In New York, Policy IUL.205 NY.

R7-09 is underwritten by Trustmark Life Insurance Company of New York, Albany, New York. Limitations and exclusions may apply. Refer to the policy, certificate, and riders for complete details.



Accident Insurance

The Trustmark Accident insurance is designed to help cover the out-of-pocket expenses that result from a sudden covered accident. Since health insurance covers only certain expenses, an Accident insurance benefit will provide you a lump-sum cash benefit when a covered member is hurt unexpectedly.

The Plan Covers a Wide Variety of Injuries Due to Covered Accidents Such As:

- Burns and stitches.
- Emergency dental work.

- Dislocations or fractures.
- Eye injuries.

Examples of Covered Accident-Related Expenses

- Hospitalization up to \$2,000 in reimbursable benefit.
- Physical therapy up to \$50 (maximum of 6 visits per year).
- Surgery up to \$2,000 in reimbursable benefit.
- Emergency room services up to \$200 in reimbursable benefit.
- Follow-up office visit up to \$100 in reimbursable benefit.
- Ambulance trips up to \$450 (100 miles requirement; up to 3 trips).
- Wellness visits \$100 per person on the plan once per year (in most states).

Benefits are paid for non-occupational accidents* or off-the-job accidents and are paid regardless of any other Medical benefits you may have. Coverage is available for you, your spouse, and your eligible children. There are no health questions and no physical exams required.

Your coverage is portable, which means you can take your policy with you if you leave the company. Your Benefits Educator can provide you with detailed information about the plan and costs during your enrollment session.

*Benefits may vary by state, and additional benefits may be available in some states. Most benefits are paid once per person per covered accident unless otherwise noted. A-607 is underwritten by Trustmark Insurance Company, Lake Forest, Illinois.





Trustmark Critical Illness insurance provides cash to help with the extra expenses associated with a critical illness. Benefit dollars are payable to you when you are diagnosed¹ with a covered critical illness, even if you receive benefits from other insurance. You may use those benefit dollars however you see fit. You may elect an amount between \$5,000 and \$20,000. The minimum amount of coverage is \$5,000 or \$3 per week. If you choose to cover your spouse, he or she may receive 50% of the associate benefit amount; your child may receive 10% of the associate benefit.

Guaranteed Issue (No Health Questions Asked)

NEW HIRES/NEWLY ELIGIBLE (FIRST TIME OFFERED COVERAGE)

Associate: The greater of \$3 per week or \$20,000.

Spouse: \$10,000.

Child: \$2,000.

NON-PARTICIPANTS (IF YOU DID NOT ELECT COVERAGE AT YOUR FIRST OPPORTUNITY)

Associate: The greater of \$3 per week or \$10,000.

Spouse: \$5,000.Child: \$1,000.

Benefits for a Covered Critical Illness*

- Invasive cancer.
- Heart attack.
- Stroke.
- Renal failure.
- Blindness.
- Paralysis of two or more limbs.

- ALS (Lou Gehrig's disease).
- Carcinoma in situ (25% benefit).
- Major organ transplant.
- Coronary artery bypass surgery (25% benefit).
- Wellness visits \$50 per person on the plan up to a 2 x family maximum (in most states).

Most states define eligibility as first diagnosis. First diagnosis means the first time a physician identifies a covered condition from its signs or symptoms. If you've been diagnosed with a covered condition prior to having coverage, you may not be eligible for a benefit for that condition. Please consult your policy/group certificate for specific covered conditions. Most skin cancer is excluded. CACI-82001 is underwritten by Trustmark Insurance Company, Lake Forest, Illinois.

^{*}Covered critical illnesses may vary by state. Coverage for a subsequent condition is included; please see your Benefits Educator for details.

¹As defined by policy/group certificate.

Short Term Disability (STD) Insurance

Prime provides you the opportunity to purchase Short Term Disability insurance through OneAmerica. In the event you become unable to work due to an off-the-job injury or illness, STD will replace a portion of your salary. Associates may elect up to 60% of their weekly gross salary in \$50 increments. You must fulfill the 14-day elimination period before you may receive disability benefits, which are payable at the same frequency as your paycheck. The full benefit duration is 24 complete weeks. Associates who enroll in this coverage will be subject to a pre-existing condition limitation explained below.

Guaranteed Issue: Voluntary Short Term Disability is guaranteed issue at each annual enrollment. Evidence of Insurability is not required for new enrollees.

Weekly STD Rates			
Associate Age	Rates per \$10 of Benefit		
<25	0.1615		
25-29	0.1615		
30-34	0.1615		
35-39	0.1615		
40-44	0.1825		
45-49	0.2315		
50-54	0.2541		
55-59	0.3418		
60-64	0.4389		
65-69	0.4389		
70+	0.4389		

Conversion Benefit: The Short Term Disability Plan has a built-in conversion benefit which allows participants to take their coverage with them if they leave the company.

Pre-Existing Condition Limitation: A pre-existing condition is one for which the associate has seen a medical practitioner or taken medication in the six months prior to the coverage effective date. We will not pay benefits for any disability resulting directly or indirectly from a pre-existing condition unless the disability begins after 12 consecutive months during which the associate is continuously insured under this plan.



Long Term Disability (LTD) Insurance

Associates may purchase long-term income protection through OneAmerica for possible events in which they become unable to work due to a non-work-related illness or injury. Benefit payments begin after you have satisfied the 6-month elimination period. Associates who enroll in this coverage will be subject to a pre-existing condition limitation explained below.

You may elect, in \$100 increments, up to 60% of your gross monthly earnings with a \$5,000 per month maximum, up to age 65. If your disability occurs at or after age 61, benefits would be paid for a reduced period of time. For covered disabilities, there are 180 days between time of injury and receipt of benefit payment.

Guaranteed Issue: Voluntary Long Term Disability is guaranteed issue at each annual enrollment. Evidence of Insurability is not required for new enrollees.

Pre-Existing Condition Limitations: You may not be eligible for benefits if you have received treatment for a condition within the past 6 months until you have been covered under this plan for 12 more or if you remain treatment free for a period of 12 consecutive months.

Weekly LTD Rates			
Associate Age	Rates per \$100 of Benefit		
<19	\$0.0498		
20-24	\$0.0498		
25-29	\$0.0542		
30-34	\$0.0681		
35-39	\$0.1059		
40-44	\$0.1793		
45-49	\$0.2806		
50-54	\$0.3865		
55-59	\$0.4763		
60-64	\$0.4020		
65-69	\$0.4020		
70+	\$0.4020		

Definition of Disability

You would be considered disabled for benefits because of sickness or injury if:

- You are unable to perform all the material and substantial duties of your regular occupation. To attain partial benefits, you must have a 20% or more loss in monthly earnings due to the same sickness or injury.
- Mental Illness: 12-month lifetime maximum payout.

You would continue to receive benefits if:

■ The insured meets the 51% impairment rating definition after the 24-month own occupation definition. Please refer to the plan description for further details.



Fidelity is our 401(k) provider. For questions, call Fidelity at 800-835-5097, visit <u>www.401k.com</u>,

download Fidelity's NetBenefits app, or see your Human Resources Department.

New Hire Enrollment

Associates become eligible to participate in the 401(k) plan on the first day of the calendar quarter (January 1, April 1, July 1, and October 1) after they have completed 6 full months of service. Previously eligible rehires are able to participate immediately after enrolling.

How Do I Enroll?

Prior to your entry date, you will receive an enrollment packet in the mail from Fidelity with valuable information about planning for your retirement. There are three ways to enroll:

- Go online to <u>www.401k.com</u>. If you do not have an account with Fidelity, you will need to register online before accessing your account.
- Download Fidelity's NetBenefits app on your mobile device.
- Call Fidelity at 800-835-5097 to speak with a customer service representative.

Contributions and Investment Options

You can contribute 1% to 75% of eligible pre-tax income up to the IRS limit of \$19,500*. Prime Inc., will match 100% of the first 3% of eligible compensation deferred and 50% of the next 2% of eligible compensation deferred. You may choose from a number of investment options, including investments managed by SageView Advisory Group. Participants are vested at 100% immediately upon contribution; therefore, any funds Prime matches on your 401(k) are yours from day one. If you leave employment, your contributions are yours. Contributions may be changed on a quarterly basis, and your investment allocations may be changed at any time.

Can I Withdraw From My Account While Still Employed?

The option to apply for a loan from your plan account is available after you have a minimum vested balance of \$2,000. You may take out a loan of up to 1/2 of your vested balance, but no more than \$50,000. Your total loan balance in a 12-month time frame may not exceed \$50,000. Participants may also be eligible for an In-Service Distribution (after age 59 1/2) or a Hardship Withdrawal.*

*Please see the Summary Plan Description for specific information regarding withdrawal.

Can I Roll Over My 401(k) From Another Employer to Prime's Plan?

Yes! To roll over your 401(k) or other qualified plan from another employer:

- Contact the financial institution that holds the funds for the plan you want to transfer.
- Have them make the rollover check to "Fidelity Investments Institutional Operations Company (or FIIOC) for the benefit of YOUR NAME." (The checks must be from a financial institution; personal checks are not acceptable.)
- Once you receive the check, DO NOT cash it or put it in your bank. This check must be mailed directly to Fidelity.
- List your name, SSN, and plan number (58662) on the check.
- Complete the Rollover Application. Request the Rollover Application from Human Resources.
- Mail the information to:
 Fidelity Investment Client Service Operations
 P.O. Box 770003
 Cincinnati, OH 45277

^{*}The annual IRS limit has not been announced for 2022. This amount is subject to change.

Notes		

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Notes		

Contacts

Medical Insurance

Anthem Blue Cross Blue Shield

Phone: 833-828-1977 Website: www.anthem.com

Health Savings Account (HSA)

Bank of America

Phone: 866-791-0250

Website: www.bankofamerica.com/

benefitslogic

Dental Insurance

Anthem Blue Cross Blue Shield

Phone: 855-769-1465 Website: www.anthem.com

Vision Insurance

VSP

Phone: 800-877-7195 Website: www.vsp.com

Employee Assistance Program

Anthem Blue Cross Blue Shield

Phone: 800-865-1044

Website: www.anthemEAP.com and

enter Prime

Dependent Care FSA

PRIME

Phone: 417-866-0001 Website: Contact HR

Short Term Disability, Long Term Disability, Basic Life, Supplemental Life and ADD

OneAmerica

Phone: 800-553-5318

Website: www.oneamerica.com

Universal Life Insurance, Critical Illness Insurance, and Accident Insurance

Trustmark

Phone: 800-918-8877

Website: www.trustmarksolutions.com

401(k) Retirement Plan

Fidelity

Phone: 800-835-5097 Website: www.401k.com

McGriff Insurance Services Professional Enrollment Concepts

Enrollment Support

Phone: 877-859-6107

Website: www.pecinsuresource.com

All changes must be made by November 12!

The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.



