



2025 Associate Benefits Guide

Table of Contents

	Page
Letter from the CEO	3
How to Enroll	5
Eligibility and Waiting Periods	6
Mid-Year Enrollment Changes	7
Cost of Coverage Considerations	8
Medical Benefits	9
Prescription Drug Benefits	12
BlueCross BlueShield Texas Resources	14
Tobacco/Nicotine Cessation Resources	15
Virtual Visits / Telemedicine	16
Diabetes Management Program	17
Voluntary Accident and Critical Illness Benefits	18
Flexible Spending Accounts (FSA)	23
Dental Benefits	24
Vision Benefits	26
Life/AD&D Benefits	28
Will Preparation	31
Short-Term and Long-Term Disability Benefits	33
Planning for Retirement	35
Employee Assistance Program (EAP)	37
Pet Insurance	38
Associate Perks (discount program)	39
Federal Notices	40
Important Contacts	41

At Acme Brick, we owe our success to you, our hardworking and dedicated associates. In turn, we are pleased to offer you a comprehensive, market-competitive benefits program that offers more choices that fit your life and support your diverse and unique needs — both at work and home.

Benefit plan summaries provided in this guide are intended to provide an overview of the policy. Full terms of the policy can be found in the policy certificate. A copy of the policy certificate(s), is available by request at HR@brick.com.

If there is any discrepancy between this summary and the language in the benefit plan contracts or official plan documents, the language in the contracts or plan documents will determine your benefits.

October 1, 2024

Dear Fellow Acme Brick Associates,

Your HR and Senior Leadership teams desire to Make Acme a Great Place to Work, where you can have a career, not just a job, keep each other safe, and feel that you are our Greatest Asset.

One of the ways we work to accomplish this is by continuing to refine and expand our associate benefit program to support you and your loved ones. We strive to build out an affordable solution that protects you and your family's physical, emotional, and financial health. We are quickly approaching our annual Open Enrollment period, and I wanted to provide you with some information that you can use as you make decisions regarding your healthcare plan choices for 2025.

2025 Benefit Changes

There are no significant benefit changes for 2025, however we want to emphasize the benefits that are already in place and encourage you to take advantage of them.

- Livongo - Diabetes Management Program
- Annual Physical
- Nicotine Cessation Program
- Teladoc

These benefits and more are free to all associates who are covered by BCBS. By participating in these programs, you can improve your personal health, potentially saving you money as well as assisting in lowering the total plan cost.

2025 Premiums

While we use Blue Cross/ Blue Shield ("BCBS") to administer our healthcare plan, Acme is self-insured. With healthcare and prescription costs continuing to rise in 2024, Acme's plan costs also increased during the year. Projections are that healthcare costs will increase even more in 2025 (by roughly \$500 thousand) and some of the increase will, unfortunately, be passed on to our associates. The Gold plan is the costliest and has most of the higher cost claims, so we had to increase its premiums more than the other two plans.

We are also passing on a higher premium cost to associates who are enrolled in the "Standard" rate for all three plans. This is because associates who are enrolled at the "Standard" rates are tobacco users or do not fulfil the "Select" rate requirement to get an annual physical.



ACME BRICK COMPANY

a Berkshire Hathaway company

Ed Watson
ewatson@brick.com
President and CEO

I strongly suggest that anyone who has been enrolled at the "Standard" rate should save money by choosing the "Select" rate, getting an annual physical, and stopping the use of tobacco. This might allow you to live a longer, healthier life and help keep our healthcare costs lower for all associates.

Changes to the Dental PPO plan include eliminating the waiting period and increasing the calendar year maximum to \$2,000.

There will not be a cost increase to the other health plans:

- Dental
- Vision
- Short Term Disability
- Long Term Disability
- Life/AD&D Insurance

The details of the premiums and benefits for all healthcare plans will be more fully described during the Annual Open Enrollment process.

I encourage you to take a moment to reflect on what is most important to you and your family. There is no better time than now to prioritize being proactive about our health and well-being. Over the course of 2025, we will provide you with information and resources to help you become a wiser healthcare consumer. I trust you will take advantage of it and spread the news to those around you.

Thank you for your contribution to Acme Brick. It is my sincere wish that you will have a happy, healthy year in 2025.



Ed Watson



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How to Enroll

If you are a new hire, you have 31 days from your first day of employment to complete and submit your benefits enrollment form. Your benefits will be effective on the first of the month after 60 days of employment. For example, an associate who is hired on July 15th, their benefits will begin on October 1st.

Before You Enroll

- ☑ Carefully review the benefits listed in this guide and determine coverage that is best for you and your family.
- ☑ Ensure dependents meet the eligibility requirements. If enrolling dependents for the first time, you must submit proof of eligibility (i.e., birth certificate, marriage certificate, etc.) to HR@brick.com.
- ☑ Understand the cost of the plans you selected.
- ☑ Estimate your family's out-of-pocket health care costs if you want to contribute to a Health Care Flexible Spending Account (FSA).
- ☑ Determine your family's child or adult care costs if you want to contribute to a Dependent Care FSA

Check with Human Resources at HR@brick.com if you have questions.

New Hire Paper Enrollment

- ☑ Complete the paper enrollment form
- ☑ Be sure to designate your beneficiary(s) for Life and AD&D insurance
- ☑ Submit your completed form to HR@brick.com or your location administrator within 31 days from your date of hire

Annual Open Enrollment

- ☑ If you have an @brick.com email address, you must login to Employee Self Service (ESS) from the Acme Connect homepage.
- ☑ If you do not have an @brick.com email address, complete a paper enrollment form and return to HR@brick.com **from November 1st thru November 15th, 2024.**
- ☑ Be sure to designate or update your beneficiary(s) for Life and AD&D insurance



Eligibility and Waiting Periods

All benefit eligible associates who work at least 30 hours per week are eligible for the Acme Brick benefits offerings. For newly hired associates, most of your benefits are effective the first day of the month following sixty days of active employment. You may also enroll your eligible dependents for coverage.

Eligible dependents include:

- Your legally married spouse or qualified domestic partner (of the same/opposite sex)
- Children under the age of 26, regardless of marital status, student status or dependency
- Children 26 or older who are fully dependent on you for support due to a mental or physical disability (and are indicated as such on your federal tax return)
- Dependent verification will be required at the time of enrollment

For details on eligibility and when your benefits begin and end, refer to your summary plan documents or contact HR@brick.com.

Benefits Eligibility: Effective Dates and Termination Dates

Benefit Plan	Effective Date	Termination Date	Continuation After Termination
Medical/ Pharmacy	first of the month following 60 days of employment	last day of active employment	eligible for COBRA continuation
Teladoc/Livongo	first of the month following 60 days of employment	last day of active employment	eligible for COBRA continuation
Accident	first of the month following 60 days of employment	last day of active employment	portability to an individual policy is available
Critical Illness	first of the month following 60 days of employment	last day of active employment	portability to an individual policy is available
Dental	first of the month following 60 days of employment	last day of active employment	eligible for COBRA continuation
Vision	first of the month following 60 days of employment	last day of active employment	eligible for COBRA continuation
Flexible Spending Account (FSA)	first of the month following 60 days of employment	last day of active employment	eligible for COBRA continuation
Basic Life/AD&D	first of the month following 60 days of employment	last day of active employment	may be converted to an individual policy (limitations apply)
Voluntary Life/AD&D	first of the month following 60 days of employment	last day of active employment	may be converted to an individual policy (limitations apply)
Short-Term Disability	first of the month following 60 days of employment	last day of active employment	no option to continue coverage
Long-Term Disability	first of the month following 60 days of employment	last day of active employment	portability to an individual policy is available (limitations apply)

When and How to Make Changes After Open Enrollment

During the year, you cannot make changes to your benefit elections unless you experience a Qualifying Life Event (QLE), such as marriage, divorce, the birth or adoption of a child. If you experience a QLE (examples provided below), contact Human Resources at HR@brick.com within 31 days of the event or you will have to wait until next year's open enrollment period to make changes.

Qualifying Life Event (QLE)	Documentation Required
Marriage	Copy of marriage certificate
Divorce or legal separation	Copy of divorce decree
Death of an eligible dependent	Copy of death certificate
Birth of a newborn or adoption	Copy of birth certificate or copy of legal adoption papers
Stepchild	Copy of birth certificate plus a copy of the marriage certificate between the associate and spouse
Gain or Loss Eligibility for Other Group Coverage	Documentation from plan or issuer regarding change in eligibility (must include effective date)
Associate, spouse or dependent Medicare/Medicaid entitlement, or loss of entitlement for Medicare/Medicaid	Government verification that coverage was gained or lost (must include the effective date)

You have only 31 days from the date of the event to make changes to your benefit elections. Contact HR@brick.com to initiate the event and provide the supporting documentation. If you fail to notify HR within 31 days, your next opportunity to make benefit changes will be next year's annual open enrollment period.

If the qualified life event is the result of Medicaid entitlement or loss of Medicaid entitlement for an associate or dependent, you must notify HR within 60 days in order to make changes to your elections

Cost of Coverage

Acme Brick pays the majority of the cost to provide benefits to you. You can see your applicable associate costs further in this guide.

Select Medical Rates

Annual open enrollment: To qualify for the reduced Select medical rates, associates and spouses enrolled in medical must be tobacco/nicotine-free. Only the associate must complete an annual physical. Please submit a completed Wellness Incentive Affidavit to HR@brick.com by **December 20, 2024**.

– If you do not have access to Acme Connect, you can get a copy of the affidavit from your local administrator.

For new hires: To qualify for the reduced Select medical rates, please submit a completed Wellness Incentive Affidavit within 31 days of your benefits effective date.

Tobacco/nicotine users who do not complete the smoking cessation program will be subject to the Standard medical plan rates. More information about tobacco/nicotine cessation programs available through BlueCross BlueShield of Texas can be found on page 14.

Understanding the Total Cost of Healthcare

It is important to choose a plan that meets your healthcare needs and your budget needs. Before choosing a plan, consider each plan's total yearly cost – not just the premium:

- Compare the **DEDUCTIBLE** amounts. Each of the (3) plans includes a deductible which is the amount you are required to spend out of your own pocket for certain healthcare services before BlueCross BlueShield will pay a percentage of claims to your doctor or hospital. Some services do not have a deductible such as doctor office visits and prescription drugs where you will instead pay a **COPAY** at the time of service. Preventive care is paid in full by BlueCross BlueShield with no deductible or copay as long as the physician/laboratory is in-network.
- Compare the total annual **OUT-OF-POCKET** amounts for each of the (3) plans. The total out-of-pocket amount is the maximum amount you would have to pay before BlueCross BlueShield pays all remaining claims for the year at 100%. The deductible amount and all copays are included in the total out-of-pocket amount in addition to any **COINSURANCE**. Coinsurance is the percentage you pay after meeting your deductible (40%, 30% or 20% depending on which plan you choose). Remember that **DEDUCTIBLE + COPAYS + COINSURANCE = OUT-OF-POCKET**

Medical Benefits

Administered by BlueCross BlueShield Texas

When it comes to medical coverage, Acme Brick provides you with choices. There are three medical plans to choose from, along with voluntary benefits such as Accident and Critical Illness to enhance your coverage.

- **Bronze Plan:**
 - highest deductibles and 40% coinsurance
 - highest out-of-pocket maximums
 - lowest cost per paycheck
- **Silver Plan**
 - lower deductibles and 30% coinsurance
 - lower out-of-pocket maximums
- **Gold Plan**
 - lowest deductibles and 20% coinsurance
 - lowest out-of-pocket maximums
 - highest cost per paycheck

These plans are administered by BlueCross BlueShield of Texas and cover medical services for you and your benefit eligible dependents to stay well and manage your health.

Each of these plans provides you with comprehensive benefits and includes copays when going to your primary care physician, a specialist or even urgent care.

No matter which plan you choose, you will have access to:

- A broad network of doctors, specialists and hospitals
- Preventive care services are covered in full with no deductible or out-of-pocket if you use a network provider.

Prescription Drugs

When you enroll in an Acme Brick medical plan, you automatically receive prescription drug coverage administered by Express Scripts. The same prescription drug benefits apply regardless of which medical plan you choose. The cost of your prescription drugs will depend on whether the drug is generic, preferred brand name, non-preferred brand name, or specialty drug and whether you purchase your prescription at an in-network pharmacy or through the Express Scripts Home Delivery program.

Know Your Healthcare Lingo:

- **Coinsurance:** The percentage you owe after your deductible. For example, if your plan pays 80%, you are responsible for paying the remaining 20%.
- **Copay:** The fixed amount you pay to your provider for a covered service such as an office visit or prescription drug.
- **Annual Deductible:** The amount you pay for a health service before your medical plan starts paying.
- **In-Network Provider:** A doctor or hospital that accepts your plan allowance and cost-sharing as payment in full. Search for **Blue Choice** PPO providers online at bcbstx.com/find-care.
- **Annual Out-of-Pocket Maximum:** The most you will pay for covered medical services in any plan year. If you hit this amount, your medical plan pays 100% of covered services after that.
- **Preferred Drug List (PDL):** A list of prescription drugs covered by your prescription drug plan. Often referred to as the Prescription Drug Formulary.
- **Preventive Care:** Routine healthcare that includes screenings, check-ups and patient counseling to prevent illnesses and disease or other health problems.
- **Prior Authorization:** Approval from BlueCross BlueShield of Texas *may* be required for certain medical services before they are covered by your medical plan. Prior authorization *may* also be required from Express-Scripts for certain prescription drugs before they are covered.



Comparison of Medical Plan Options

This chart compares your options for in-network services. Before you enroll, consider the per pay period cost and the cost of services and prescription drugs you expect to spend during the year. Evaluate how your out-of-pocket expenses may fluctuate and consider adding Voluntary Accident and Critical Illness benefits to help offset your out-of-pocket medical costs.

	BRONZE PLAN	SILVER PLAN	GOLD PLAN
	IN-NETWORK YOU PAY		
Annual deductible (single/family)	\$3,000/\$9,000	\$2,000/\$6,000	\$1,000/\$3,000
Coinsurance	You pay 40%	You pay 30%	You pay 20%
Annual out-of-pocket (single/family)	\$8,000/\$16,000	\$7,000/\$14,000	\$6,000/\$12,000
Office visits – Primary Care	\$30 copay		
Office visits – Specialist	\$40 copay		
Office visits – Mental Health (Psychologist/Psychiatrist)	\$30 copay/\$40 copay		
Preventive care (includes well childcare, immunizations, mammograms, pap smears, prostate exams, other preventive diagnostics, etc.)	covered in full with no deductible or out-of-pocket expense		
Teladoc – virtual visits	\$0 copay		
Urgent Care	\$30 copay		
Emergency Room – Facility	\$350 copay		
Emergency Room – Physician	40% after deductible	30% after deductible	20% after deductible
Lab and X-Ray	40% after deductible	30% after deductible	20% after deductible
Hospitalization - Outpatient	40% after deductible	30% after deductible	20% after deductible
Hospitalization - Inpatient	40% after deductible	\$250 copay + 30% after deductible	\$250 copay + 20% after deductible
Diagnostic Imaging (MRI, CT, PET)	40% after deductible	30% after deductible	20% after deductible
Prescription Drugs (30 day)			
Tier 1 Generic	\$10 copay		
Tier 2 Preferred Brand	\$50 copay		
Tier 3 Non-Preferred Brand	\$70 copay		
Tier 4 Specialty	\$125 copay		
Mail Order (90 day)	2 ½ x copay		

Avoid Surprise Bills!! Staying in-network means lower out-of-pocket costs for you, because providers and facilities cannot charge more than the BCBSTX allowable amounts for covered services. Ask your doctor to refer you to a specialist, hospital or surgical center that participates in the BCBSTX Blue Choice Network.

Medical Plan Cost (weekly payroll deductions)

Bronze Plan		
	Select Rates	Standard Rates
Associate Only	\$24.34	\$40.13
Associate + Spouse	\$88.09	\$105.15
Associate + Child(ren)	\$49.57	\$65.86
Associate + Family	\$111.50	\$129.03

Silver Plan		
	Select Rates	Standard Rates
Associate Only	\$37.82	\$54.54
Associate + Spouse	\$120.87	\$140.06
Associate + Child(ren)	\$71.30	\$89.02
Associate + Family	\$155.45	\$175.66

Gold Plan		
	Select Rates	Standard Rates
Associate Only	\$49.33	\$68.69
Associate + Spouse	\$156.72	\$182.96
Associate + Child(ren)	\$88.57	\$110.44
Associate + Family	\$196.21	\$224.97

Registering with Express Scripts

Online access to savings and convenience

Manage your medicines anywhere, any time with express-scripts.com and the Express Scripts™ mobile app

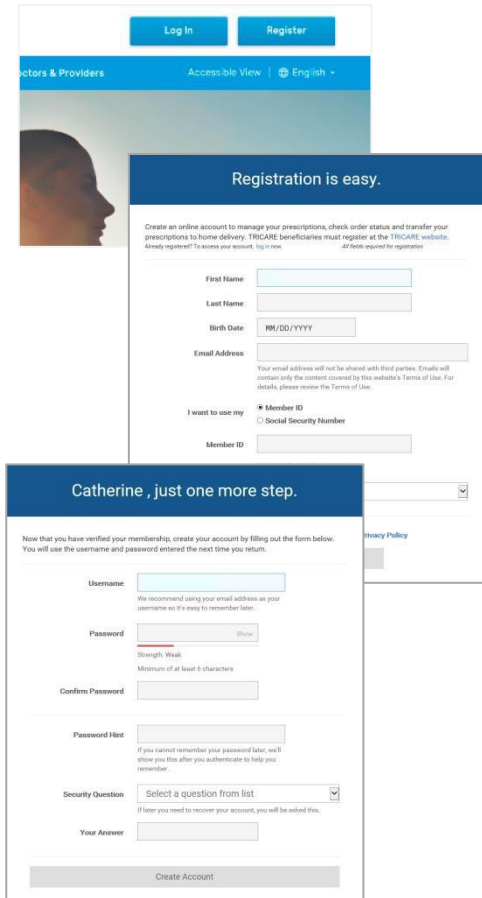
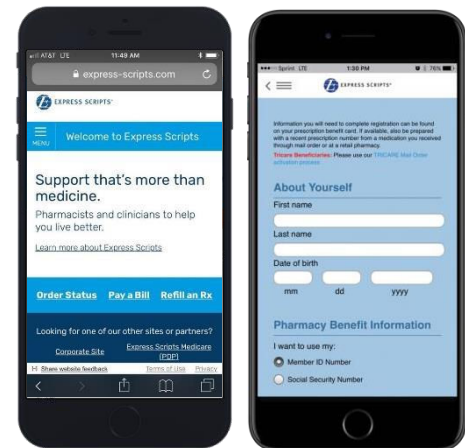
Register now so you can experience:

- More savings.**
 Compare prices of medicines at multiple pharmacies. Get free standard shipping¹ from the Express Scripts PharmacySM.
- More convenience.**
 Get up to 90-day supplies of your long-term medicine sent to your home. Order refills, check order status, and track shipments. Print forms and ID cards, if needed.
- More confidence.**
 Talk with a pharmacist from the privacy of your home any time, from anywhere. Find the latest information on your medicine, including possible side effects and interactions.
- More flexibility.**
 Download the Express Scripts mobile app to manage your medicines, find nearby pharmacies and get directions, and use your virtual ID card while on the go.

Get Started Today!

Registering is safe and simple. Your information is secure and confidential. Please have your member ID number or SSN available.

- Go to express-scripts.com, select Register or download the Express Scripts mobile app for free from your mobile device's app store and select Register
- Complete the information requested, including personal information and member ID number or Social Security Number (SSN), create your username and password, along with security information in case you ever forget your password
- Click Register now and you're registered
- To set preferences², select Communication Preferences from the menu under Account, scroll to Communication and Viewing Preferences. Click Edit preferences. Preferences can only be selected via the member website.

Members who have touch ID authentication on their mobile devices can enable it to log in to their Express Scripts account on the mobile app, if desired.

¹Standard shipping costs are included as part of your prescription plan benefit.

²Preferences include the option to share your prescription information with other adult members of your household (aged 18+) covered under your prescription drug plan. All covered adults (aged 18+) in the household need to register separately. When you grant permission to share your prescription information with other registered household members, they can view your information, place orders on your behalf and more. The Express Scripts mobile app is available for iPhone®, iPad®, and Android™ mobile devices. 2018 Express Scripts. All Rights Reserved. Express Script and E Logo are trademarks of Express Scripts Strategic Development, Inc. All other trademarks are the property of their respective owners

Getting Started with Home Delivery from the Express Scripts PharmacySM

Online access to savings and convenience

Whether you are viewing the member website or using the Express ScriptsTM mobile app¹, you can easily manage your home delivery prescriptions:

- Check order status
- Refill and renew prescriptions
- Check prices and coverage
- Find convenient pharmacies
- View your Rx claims and balances
- Pay your balance using a variety of payment options
- View our therapeutic resource centers for information
- And much more



To access the member website ...

Log in to express-scripts.com (Register if it is your first visit. Just have your member ID or SSN handy.)

If you have a NEW prescription ...

Get started by contacting your doctor to request a 90-day prescription that he or she can ePrescribe directly to Express Scripts

Or print a form by selecting “Forms” or “Forms & Cards” from the menu under “Benefits,” print a mail order form and follow the mailing instructions.

Or call us and we’ll contact your doctor for you.

Please allow 10 to 14 days for your first prescription order to be shipped.

Forms & cards

To mail in a prescription your doctor has already written:

- 1 Print a mail order form by [clicking here](#)
- 2 Mail your prescription(s) along with completed form to the address provided on the mail order form

If you already have a prescription ...

Check Order Status online or using our app to view details and track shipping.

Transfer retail prescriptions to home delivery. Just click **Add to Cart** for eligible prescriptions and check out. We’ll contact your provider on your behalf and take care of the rest. Check **Order Status** to track your order.

Recent Order Status			
Go to full order status			
Toprol XL 200 mg tablet 200 mg, brand View details	Rx #: 123-	Chris	Address Verification Required
Harvoni 90-400 mg tablet 90 mg - 400 mg, brand View details	Accredo Rx #: 297-44	Shipped on XX/XX/XXXX Tracking #: 9374820164600649231480	

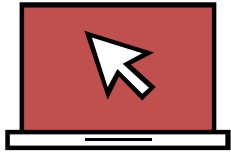
Prescriptions You Can Order Today			
Find a prescription not listed below View Rx Archive			
Chris			
Omeprazole dr 10 mg capsule 10 mg, generic View details	Rx #: 123 90-day supply 2 refills remaining	Refill past due You may be running low on this medication	<input checked="" type="checkbox"/> Prescription in cart

Refill and Renew Prescriptions for yourself and your family while online or while using our app. Just click **Add to Cart** for eligible prescriptions and check out. We’ll contact your provider on your behalf, if renewals are included, and take care of the rest.

¹ You can search for “Express Scripts” in your app store and download it for free. Then register, if first visit, or log in.

Additional BlueCross BlueShield Texas Resources

How to Find a PPO Provider



From your computer or mobile device, log on to [bcbstx.com](https://www.bcbstx.com) and click on **Provider Finder**.



Call the Customer Service number on your ID card
800-521-2227



Speak with your provider's office



BCBSTX App for Mobile Devices

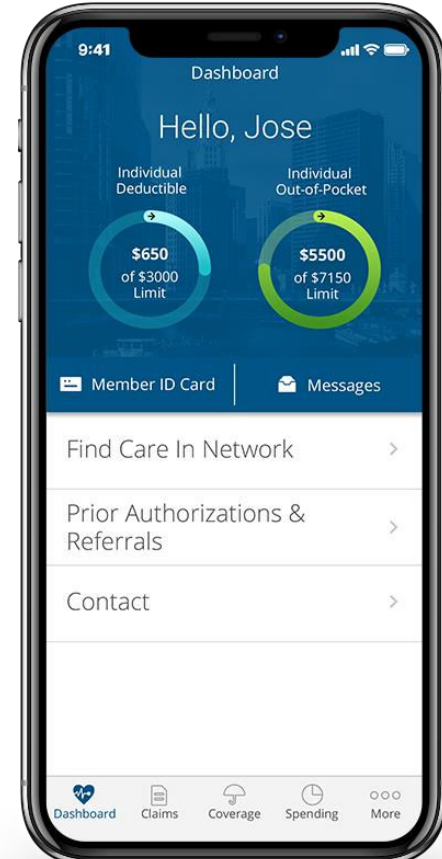
- Find an in-network doctor, hospital or urgent care facility or search for Spanish-speaking doctors
- Access your claims, coverage and deductible information
- Access temporary digital member ID card
- Secure login with Face ID (iOS only) and Fingerprint ID
- **Let us know your communication preferences**



Download for
Apple



Download for
Android



Tobacco/Nicotine Cessation Resources with BlueCross BlueShield of Texas

Support is Available to Help You Quit

We want Associates to be engaged in their jobs and communities, and to achieve their highest level of well-being by removing nicotine from their lives. Our nicotine cessation program, provided through BlueCross BlueShield of Texas, is designed to:

- Provide healthy lifestyle education, resources and support
- Help you lead a healthier life
- Manage health care costs for the organization
- Help you save on medical claims

To qualify for Select rates you must be tobacco/nicotine free and complete an annual physical and submit your completed wellness incentive affidavit before December 20.

Nicotine users who do not complete the cessation program will receive the Standard medical plan rates. Contact HR@brick.com with any questions.

Take Advantage of Tools and Support Available From Your Health Plan

Use of counseling or medicine — or using them together — can be part of an effective plan to quit tobacco/nicotine use, which is also referred to as tobacco/nicotine cessation.

Tobacco/nicotine cessation services are among the many preventive benefits available through your health plan as long as you visit a doctor in your health plan's provider network. There are no out-of-pocket costs like copays or coinsurance, even if you haven't met your deductible. Talk to your doctor about taking the next steps.

Counseling Covered

Tobacco/nicotine use cessation counseling sessions (including telephone, group, and individual counseling) led by qualified doctors are available at no cost share for members of non-grandfathered plans who use tobacco/nicotine products. Please refer to your benefits materials for information on what benefits are covered at no cost to you.*

Medications Covered

Your health plan also covers two 90-day treatments for tobacco/nicotine use cessation medicine per benefit period. This coverage includes a variety of FDA-approved tobacco/nicotine use cessation drugs (including both prescription and over-the-counter) when prescribed by your doctor.

Prescription Drugs Covered

- Buproban (bupropion SR 150 mg tablets)
- Chantix
- Nicotrol Inhaler
- Nicotrol NS
- Zyban (bupropion SR 150 mg tablets)

Over-the-Counter Drugs Covered

- Commit
- Nicotine Transdermal Kits
- Nicoderm CQ and generics
- Nicorette gum and generics
- Nicorette lozenges and generics



For More Information

To learn more about tobacco/nicotine cessation coverage under your BCBSTX health plan, call the Customer Service number located on the back of your member ID card



Teladoc is available to all members enrolled in one of the Acme Brick medical plans administered by BCBSTX


\$0 copay



download the app


Your access to Teladoc lets you **talk with a doctor anytime**, anywhere, through phone or through the convenience of online video consults, 24 hours, 7 days a week.

1




Talk to a doctor anytime, anywhere you happen to be

2




Receive quality care via phone, video or mobile app

3




Prompt treatment, talk to a doctor in minutes

4




A network of doctors that can treat every member of the family

5



Prescriptions sent to pharmacy of choice if medically necessary

6



Teladoc is less expensive than the ER or urgent care

GET THE CARE YOU NEED

Teladoc doctors can treat many medical conditions, including:

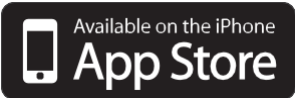
- Cold & flu symptoms
- Allergies
- Pink Eye
- Respiratory infection
- Sinus problems
- Skin problems
- And more!

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.

Talk to a doctor anytime!

DOWNLOAD THE APP - Available in the App Store and on Google Play

 [Teladoc.com](https://www.teladoc.com)
1-800-TELADOC (835-2362)



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Turn the tables on diabetes

The Diabetes Management program can help you maintain your blood sugar levels for **better overall health**.



Normal blood sugar is
80-130 mg/dL¹
before meals

After meals, it should
still be less than

180 mg/dL¹

Where do you fall?

The Highs and Lows of Blood Sugar

When you have diabetes, it's important to track your blood sugar regularly. By monitoring, you can:

- See if your lifestyle choices are working
- Get immediate feedback
- Collect data your Livongo team can use to help you

Manage Your Overall Health

- Take your medicine
- Eat a balanced diet
- Stay active
- Get enough sleep
- Check your blood sugar



The Diabetes Management program from Livongo provides the support and tools you need to help you reach your health goals. This program can help you get your blood sugar levels under control, which is pretty sweet.

“I've got all these great tools. You have the ability to download and have access to all your records. It's really good. I wish I would have started using it a lot longer ago.” John S.

Get started with Livongo today

Visit Join.Livongo.com/ACME/Register or call 800-945-4355 or download the app Use your registration code: ACME

¹<https://medlineplus.gov/bloodglucose.html>

Las comunicaciones del programa Livongo están disponibles en español. Al inscribirse, podrá configurar el idioma que prefiera para las comunicaciones provenientes del medidor y del programa. Para inscribirse en español, llame al 800-945-4355 o visite Hola.Livongo.com/ACME. The testimonials, statements and opinions presented are applicable to the individuals depicted. Each member's exact results and experience will be unique and individual to each member. The testimonials are voluntarily provided and are not paid. Program includes trends and support on your secure Livongo account and mobile app but does not include a phone or tablet. You must have an iPhone or Android smartphone and install the Livongo app to participate in the Livongo program. © Teladoc Health, Inc. All rights reserved. Teladoc Health marks and logos are owned by Teladoc Health, Inc. All programs and services are subject to applicable terms and conditions.

Supplement Your Medical Coverage

To help you manage out-of-pocket medical costs, Acme offers Voluntary Accident and Critical Illness insurance through Lincoln Financial.

Accident Plan

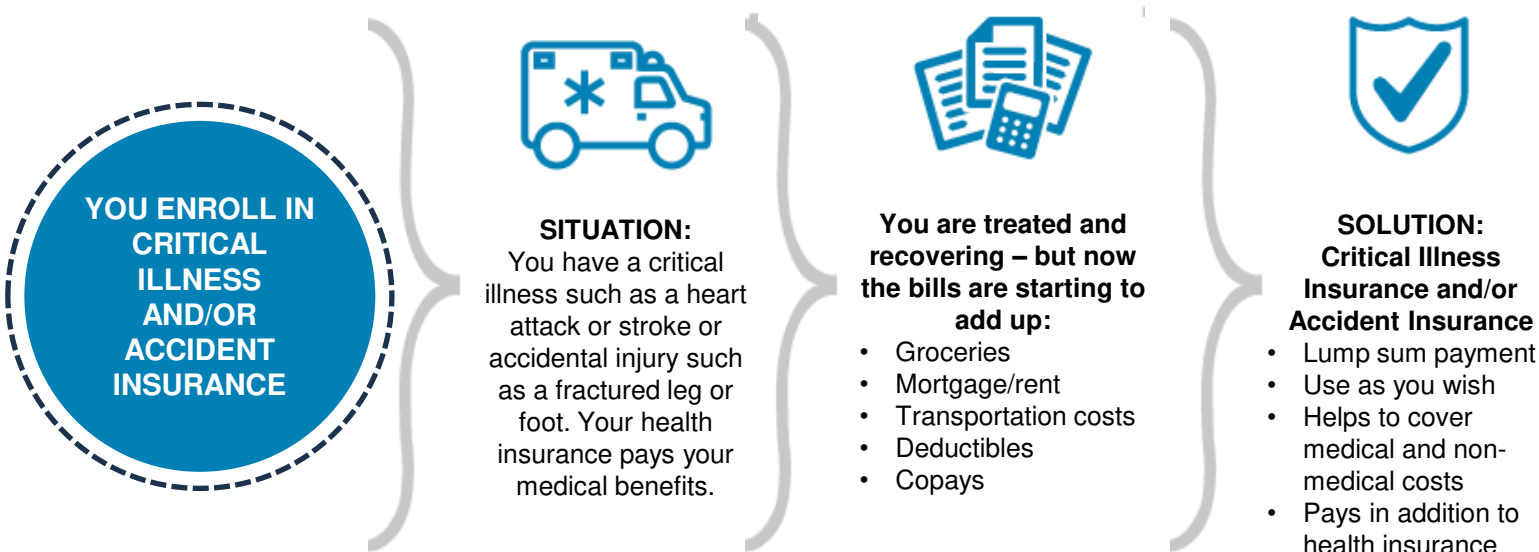
In the event of a covered accident or injury, this insurance will pay a lump-sum cash benefit to you and your eligible family members who you elect to cover. Accident insurance is NOT medical insurance.

Critical Illness Plan

Heart attack and stroke are examples of common critical illnesses that often lead to unexpected medical bills. If you are being treated for such a critical illness, shouldn't your primary focus be on getting well--not worrying about how to pay for your care? Critical Illness insurance can help you by paying a lump sum cash benefit to help cover your daily living expenses such as grocery bills, mortgage payments, transportation costs or pay for your out-of-pocket medical costs, including deductibles, copays, and cost-shares. You may choose from \$10,000, \$20,000, or \$30,000 in coverage amounts for yourself, and \$5,000, \$10,000, or \$15,000 for a spouse, not to exceed 50% of associate amount. Critical Illness insurance is NOT medical insurance.

How to Enroll

To enroll in the Voluntary Accident and/or Critical Illness plan, you will need to complete and submit the "Lincoln Financial Group Accident - Critical Illness Enrollment Form" located on Acme Connect or contact your local administrator or HR@brick.com for a copy of this form.



Accident Benefits

Insured by Lincoln Financial



Emergency Treatment	Your Cash Benefit*
Ambulance (land or air)	Up to \$1,500
Emergency treatment	Up to \$200
X-ray	Up to \$40
Fractures	Your Cash Benefits*
Ankle	Up to \$575
Arm	Up to \$1,125
Collarbone	Up to \$675
Facial bones	Up to \$1,125
Fingers	Up to \$125
Foot (excluding toes)	Up to \$575
Leg	Up to \$4,500
Dislocations	Your Cash Benefits*
Ankle	Up to \$1,125
Collarbone	Up to \$1,125
Shoulder/Elbow/Hand (except fingers)	Up to \$575
Leg/Hip	Up to \$3,600
Specific Injuries	Your Cash Benefits*
Blood, plasma	Up to \$500
Burns	Up to \$15,000
Concussion	Up to \$200
Dental services	Up to \$200
Lacerations	Up to \$600
Traumatic brain injury	Up to \$7,500
Surgical benefits	Up to \$2,000
Hospitalization and Ongoing Care	Your Cash Benefits*
Admission and daily confinement	Up to \$2,000 + up to \$600 per day
Therapy	Up to \$50 per visit/10 visits
Recovery Assistance	Your Cash Benefits*
Companion lodging	Up to \$200 per day
Transportation	Up to \$400 per trip
Moving Vehicle Benefits	Your Cash Benefits*
Moving vehicle injury/death	Up to \$5,000
Accidental Death and Dismemberment	Your Cash Benefits*
Accidental death: you, your spouse or partner, your child(ren)	\$75,000, \$30,000, \$15,000
Dismemberment	Up to \$60,000
Wellness Benefit	Your Cash Benefits*
Receive a cash benefit every year you and any of your covered family members complete a single covered assessment test.	\$50 each

*Benefit payable is dependent on severity and complexity of injury

This summary provides an overview of the policy. Full terms of the policy can be found in the policy certificate. Please refer to the disclosure notice on the following page.

**IMPORTANT: This is a fixed indemnity policy,
NOT health insurance**

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- **Visit [HealthCare.gov](https://www.healthcare.gov)** or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website ([naic.org](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Critical Illness Benefits
Insured by Lincoln Financial



Critical Illness for You	Critical Illness for Your Spouse	Critical Illness for Your Child(ren)
Guaranteed coverage amounts: \$10,000, \$20,000 or \$30,000	Guaranteed coverage amounts: \$5,000, \$10,000 or \$15,000 (up to 50% of the associate amount)	Guaranteed coverage amounts: \$2,500, \$5,000, \$10,000 (up to 50% of the associate amount)
Covered Conditions		Benefit Percentage
Heart attack		100%
Sudden cardiac arrest resulting in death		100%
Stroke		100%
Invasive cancer		100%
End stage renal (kidney) disease		100%
Major organ failure (heart, lung, liver, pancreas, intestine)		100%
Arterial/vascular disease		25%
Mitral or aortic valve disease		25%
Non-invasive cancer (in-situ)		25%
Skin cancer (other than melanoma)		\$250 per lifetime
Supplemental Conditions		Benefit Percentage
Advanced Huntington's disease		100%
Advanced COPD		100%
AIDS		100%
Advanced ALS/Lou Gehrig's disease		100%
Advanced Alzheimer's disease		100%
Advanced Parkinson's disease		100%
Advanced multiple sclerosis		100%
Loss of sight, hearing and/or speech		50%
Accidental Injuries Benefit		Benefit Percentage
Severe burns, permanent paralysis or traumatic brain injuries (includes coma)		100%
Additional Childhood Diseases		Benefit Percentage
Cerebral palsy		100%
Cleft lip, cleft palate		100%
Cystic fibrosis		100%
Down syndrome		100%
Muscular dystrophy		100%
Spina bifida		100%
Type 1 diabetes		100%
Wellness Benefit		Your Cash Benefits*
Receive a cash benefit every year you and any of your covered family members complete a single covered assessment test.		\$50 each

This summary provides an overview of the policy. Full terms of the policy can be found in the policy certificate

Accident and Critical Illness Cost (weekly payroll deductions)

Accident Plan	
Associate Only	\$2.87
Associate + Spouse	\$4.74
Associate + Child(ren)	\$5.21
Associate + Family	\$7.04

Critical Illness Plan Rates per \$1,000 by Age: Associate and Spouse			
< 25	\$.07	50 – 54	\$.51
25 – 29	\$.10	55 – 59	\$.68
30 – 34	\$.13	60 – 64	\$.96
35 – 39	\$.17	65 – 69	\$1.32
40 – 44	\$.25	70 – 74	\$2.53
45 – 49	\$.35	75+	\$2.53
Child	\$.133		

Premium Calculation			
To calculate the weekly payroll deduction, divide your desired benefit by 1,000. Multiply the result by the applicable rate from the above table.			
Associate	divide your desired benefit amount (\$30,000, \$20,000 or \$10,000) by 1,000	= _____ units × _____ rate	= \$ _____
Spouse	divide your desired benefit amount (\$15,000, \$10,000 or \$5,000) by 1,000	= _____ units × _____ rate	= \$ _____
Child	divide your desired benefit amount (\$10,000, \$5,000 or \$2,500) by 1,000	= _____ units × _____ rate	= \$ _____
Total weekly payroll deduction (estimated)			= \$ _____

Please note: Spouse coverage is based on the spouse's age as of January 1, 2025

Flexible Spending Accounts

Administered by Wex Health

Flexible Spending Accounts (FSAs) allow you to pay for eligible healthcare (including dental and vision) and dependent childcare expenses using tax-free dollars.

- **Healthcare FSA** – used to pay for out-of-pocket expenses associated with medical, dental and vision plans such as copayments, coinsurance, deductibles, prescription drug expenses, lab exams and tests, contacts lenses and eyeglasses for you and your eligible dependents.
- **Dependent Care FSA** – used to pay for dependent care expenses such as daycare, before and after school programs, day camps, preschool/nursery school, etc. expenses that are necessary for you or your spouse to work or attend school full-time.

IMPORTANT: The IRS has a “use it or lose it” rule. If you do not spend down all of the money you elected to put in your FSA by the annual deadline, any unused dollars in your account will be forfeited.

How the Healthcare FSA Works	How the Dependent Care FSA Works
You may contribute up to \$3,300 per year as a pre-tax payroll contribution	You may contribute up to \$5,000 per year as a pre-tax payroll contribution, or \$2,500 if married filing separate tax returns
You receive a debit card to pay for eligible healthcare expenses, including dental and vision	You submit claims for reimbursement; no debit cards are provided; funds must be available in your account
Eligible expenses include copays, coinsurance, deductibles, eyeglasses, contact lenses and some over-the-counter medications if prescribed by your doctor	Can be used to pay for eligible dependent care expenses including daycare, after-school programs and elder care programs for your aging parents
Submit claims up to March 31 st of 2026 for expenses incurred from January 1, 2025 thru March 15, 2026.	Submit claims up to March 31 st of 2026 for expenses incurred January 1, 2025 thru December 31, 2025.
If you do not spend all of the funds that you elected to contribute by March 15, 2026, those unused dollars are forfeited per IRS rules.	If you do not spend all of the funds that you elected to contribute by December 31, 2025, those unused dollars are forfeited per IRS rules.

How you can save taxes with an FSA	Healthcare FSA		Dependent Care FSA	
	Without FSA	With FSA	Without FSA	With FSA
Your taxable income	\$50,000		\$50,000	
Your 2025 election	\$0	\$2,850	\$0	\$5,000
Taxable wages	\$50,000	\$47,150	\$50,000	\$45,000
Federal and Social Security taxes	\$14,325	\$13,609	\$14,325	\$12,894
Take home (net)	\$32,825	\$33,541	\$30,675	\$32,106
Annual tax savings with FSA	\$0	\$716	\$0	\$1,431

Dental

Administered by Cigna

You have two dental coverage options through Cigna: DHMO plan and a traditional PPO plan. The DHMO plan is a copay plan and has lower associate contributions. You must choose a general dentist from the Cigna Dental Care Access network who can refer you to a specialist if needed. The traditional PPO plan allows you to receive services from any Cigna network dentist and enjoy negotiated network discounts.

	DHMO Plan	PPO Plan	
	In-Network Only you pay	In-Network you pay	Out-of-Network you pay
Calendar year deductible Individual/Family	None	\$50/\$150	
Calendar Year Maximum Benefit Class 1, 2, 3	Unlimited	\$2,000	
Class 1: Diagnostic & Preventive Oral evaluation, routine cleanings, x-rays, fluoride, sealants, space maintainers, emergency care to relieve pain	exam, cleanings, x-rays: \$0; sealants: \$8 - \$12 per tooth; space maintainers: \$110-\$170	0%	0%
Class 2: Basic Restorative Fillings, endodontics, periodontics, oral surgery, anesthesia, repairs to crowns, dentures and bridges, surgical extractions of impacted teeth	fillings: \$72; simple extractions: \$12-\$53; oral surgery: \$110-\$400; periodontics: \$42-\$430; endodontics: \$14-\$350	20% after deductible	20% after deductible
Class 3: Major Restorative Inlays/onlays, prosthesis over implant, crowns, dentures, bridges	crowns: \$410-\$790; inlays/onlays: \$390-\$460; dentures: \$525-\$680; bridges: \$1,200-\$2,400	50% after deductible	50% after deductible
Class 4: Orthodontia For children to age 19	\$2,040 - \$2,376 adults and children	50% after deductible; \$1,000 lifetime benefit maximum	50% after deductible; \$1,000 lifetime benefit maximum
Waiting Periods Class 3 Major Restorative Class 4 Orthodontia	None	None	
Maximum Reimbursement Level	Copays based on contracted fee schedule	Based on contracted fees; member not responsible for discounted amounts	Based on maximum reimbursable charge (MRC); member responsible for amounts exceeding the MRC.

Dental (continued)

Maintaining proper oral care can really have an impact on your overall health. Our plan through Cigna covers two cleaning per year at no cost.

It's not just Plaque and Bad Breath. Did you know that poor oral health can contribute to the following?

1. Increased risk of Cardiovascular Disease
2. Increased Risk of Erectile Dysfunction
3. Risk for certain Cancers
4. High Blood Sugar (Diabetes) – People with existing Diabetes already have an increased risk for gum disease
5. Increased risk for developing Kidney Disease
6. Increased risk for Dementia
7. Risk for developing Rheumatoid Arthritis
8. Higher rate of Respiratory Infections
9. Issues with Fertility
10. Pregnancy Complications

People who get regular preventive care are 22% less likely to need care at an emergency room or urgent care center.

You may enroll yourself and your eligible dependents or you may waive dental coverage. You do not have to be enrolled in medical coverage to elect a dental plan. Acme Brick offers dental coverage through Cigna. For information on finding a dental provider using the Cigna Access Plus or Advantage network, visit www.cigna.com and click on Find a Doctor, Dentist or Facility.

Digital ID cards are available online at www.myCigna.com or through the mobile app. Paper copies will not be printed, but you can email your ID card directly to your dentist or save them to your Apple Wallet.

Before You Enroll Consider this:

1. Most in-network preventive cleanings and exams are covered at 100%.
2. You may receive dental care in- or out-of-network. However, when you go out of network, the provider can charge more and the plan will only reimburse up to the reasonable and customary rates.

DHMO Option

If you decide to enroll in the DHMO Option for the first time or add new dependents under this option, you need to select a primary care dentist. You can choose a different DHMO dentist for yourself and each covered dependent.

You should consult the participating provider directory prior to enrolling. The directory lists the dentists who are members of the network, any services performed by a non-network provider are not covered.

To search the online provider directory:

1. Go to www.cigna.com.
2. Click on "Find a Doctor" located at the top of the screen
3. Click on "Employer or School" when asked "How are you covered?"
4. Enter your address and click your search type: doctor by type, doctor by name or health facilities
5. Select the type of dentist that you are looking for, then select to continue as guest and click the blue Continue button again
6. Under CIGNA DENTAL CARE DHMO select Cigna Dental Care Access

Still need help? Call 800-Cigna24 (800-244-6224)

Vision

Insured by Davis Vision, a Versant Health/MetLife company



Healthy eyes and clear vision are an important part of your overall health and quality of life. You may enroll yourself and your eligible dependents or you may waive vision coverage. You do not have to be enrolled in medical coverage to elect a vision plan.

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

Versant Health is dedicated to providing a breadth of choices through its industry-leading networks. Our network partners include Target Optical, Pearle Vision (select locations), and For Eyes retail locations. It is important to confirm participation through the member website at davisvision.com/locator or calling 800-999-5431.

	In Network You pay	Out-of-Network Maximum Reimbursement
Exam	\$10 copay	\$45
Materials	\$25 copay	see below
Covered Services – Lenses/Frames		
Single lens	\$25 copay	\$40
Bifocal	\$25 copay	\$60
Trifocal	\$25 copay	\$80
Lens Enhancements		applied to the allowance for the applicable corrective lens
Tinting	\$0	
Scratch-resistant	\$0 - \$12	
U/V coating	\$30	
Anti-reflective coating	\$35 - \$85	
Polycarbonate lenses	\$0 - \$30	
Progressive lenses	\$50 - \$175	
Frames	\$160 allowable + 20% discount off balance	\$75
Covered Services – Contact Lenses In Lieu of Lenses/Frames		
Contacts – medically necessary	\$0	\$225
Contacts – elective	\$160 allowable + 15% discount off balance	\$100
Benefit Frequency		
Exams	once every 12 months	
Lenses	once every 12 months	
Frames	once every 12 months	
Contacts (in lieu of lenses)	once every 12 months	

Dental and Vision Cost (weekly payroll deductions)

Dental – DHMO Plan	
Associate Only	\$1.52
Associate + Spouse	\$2.78
Associate + Child(ren)	\$3.19
Associate + Family	\$4.88

Dental – PPO Plan	
Associate Only	\$2.83
Associate + Spouse	\$5.07
Associate + Child(ren)	\$6.06
Associate + Family	\$8.50

Vision Plan	
Associate Only	\$1.28
Associate + Spouse	\$2.56
Associate + Child(ren)	\$2.68
Associate + Family	\$3.74

Basic Life and Accidental Death and Dismemberment (AD&D):

Acme Brick automatically provides all full-time associates with Basic Life/AD&D insurance in the amount of \$20,000.

Accidental Death and Dismemberment (AD&D) provides additional benefits if you die or suffer a covered loss in an accident, such as losing a limb or your eyesight.

Voluntary Life and Accidental Death and Dismemberment (AD&D)

If you would like to purchase additional life insurance coverage, you can elect Voluntary Life and AD&D insurance for yourself, spouse and your dependent child(ren).

Voluntary Life and AD&D – for You and Your Dependents

	Associate	Spouse	Child(ren)
Benefit Amount	Increments of \$25,000 up to \$300,000	Increments of \$5,000 up to \$150,000 not to exceed 50% of the associate's elected amount	\$10,000 (\$250 for children 14 days to 6 months of age)
Guaranteed Issue (GI)	\$300,000	\$50,000	\$10,000
Age Reduction	35% at age 65 60% at age 70 75% at age 75 90% at age 80	35% when associate turns 65 Terminates when associate turns 70 or retires, whichever comes first	n/a

IMPORTANT

If you are increasing your Voluntary life coverage or enrolling in this benefit after waiving coverage when you were first eligible, complete the online Evidence of Insurability (EOI) form online at

www.mylincolnportal.com/customer/public/login:

1. First time users register with company code ACMEBRICK
2. Choose the option for "Evidence of Insurability" and "Complete Evidence of Insurability"
3. Be sure to save your confirmation statement before exiting

Voluntary Life and AD&D Cost (weekly payroll deductions)

Voluntary Life Rate per \$1,000 by Age: Associate and Spouse			
< 25	\$.012	50 – 54	\$.067
25 – 29	\$.014	55 – 59	\$.127
30 – 34	\$.018	60 – 64	\$.192
35 – 39	\$.023	65 – 69	\$.351
40 – 44	\$.030	70 – 74	\$.475
45 – 49	\$.044	75+	\$.475
Child	\$.046		
Voluntary Life Weekly Premium: Child			\$.46
Voluntary AD&D Rate per \$1,000: Employee, Spouse & Child			\$.005

Premium Calculation			
To calculate the weekly payroll deduction, divide your desired benefit by 1,000. Multiply the result by the applicable rate from the above table.			
Associate	divide your desired LIFE benefit amount by 1,000	= _____ units × _____ rate	= \$ _____
	divide your desired AD&D benefit amount by 1,000	+ = _____ units × \$.005	
Spouse	divide your desired LIFE benefit amount by 1,000	= _____ units × _____ rate	= \$ _____
	divide your desired AD&D benefit amount by 1,000	+ = _____ units × \$.005	
Child	\$10,000 LIFE \$10,000 AD&D	\$.0462 + \$.005	= \$ _____
Total weekly payroll deduction (estimated)			= \$ _____

Please note: Spouse rate/premium is based on the associate’ age as of January 1, 2025

Additional Voluntary Accidental Death and Dismemberment (AD&D)

Additional Voluntary AD&D – for You and Your Dependents (in addition to the Voluntary AD&D on prior page)

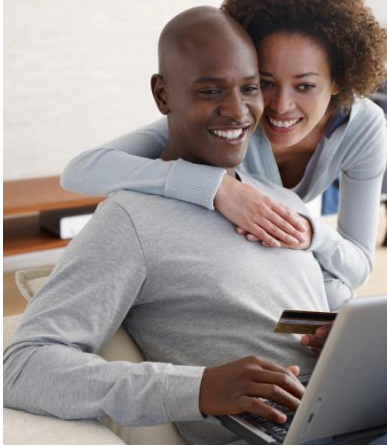
	Associate	+Spouse Only	+ Child(ren) Only	+ Family
Benefit Amount <i>(this amount is in addition to any Voluntary Life/AD&D amount elected above)</i>	Increments of \$50,000 up to \$500,000; not to exceed 10× your base annual earnings	50% of associate's elected amount	15% of the associate's elected amount up to \$20K	Spouse: 40% of associate's elected amount Child(ren): 10% of associate's elected amount not to exceed \$20,000

Premium Calculation: Associate Only Coverage		Example Calculation	Your Calculation
Step 1	Weekly rate per \$1,000 of coverage	\$.005	\$.005
Step 2	Enter your the desired coverage amount	\$200,000	\$ _____
Step 3	Divide the amount from Step 2 by 1,000	= 200	= _____
Step 4	Calculate the weekly cost by multiplying Step 1 by Step 3. This is your weekly payroll deduction amount.	= \$1.00	= _____

Premium Calculation: Spouse and/or Child Coverage		Example Calculation	Your Calculation
Step 1	Weekly rate per \$1,000 of coverage	\$.005	\$.005
Step 2	Enter the Spouse coverage amount based on the percentage of your desired election from the chart above. (50% or 40%)	\$80,000 would be 40% of your coverage amount with child included.	\$ _____
Step 3	Enter the Child coverage amount based on the percentage of your desired election from the chart above. (15% or 10%)	\$20,000 would be 10% of your election with spouse included.	\$ _____
Step 4	Add Step 2 and 3 to get the total coverage for your family members.	\$100,000	= _____
Step 5	Divide the amount from Step 2 by 1,000	= 100	= _____
Step 6	Calculate the weekly cost by multiplying Step 1 by Step 3. This is your weekly payroll deduction amount.	= \$.50	= _____

Combine the final amounts from each bucket to get your total premium for family coverage.

Online will preparation via EstateGuidance®



What is online will preparation?

Having a will allows you to designate who will receive your property and assets when you're gone. Without one, your state determines how your estate is distributed. Lincoln Financial Group's trusted partnership with *LifeKeys®* includes *EstateGuidance* online will preparation services with your life insurance policy. *EstateGuidance* will securely walk you through each step of documenting your final wishes and executing a will.

Online will preparation allows you to document your final wishes, including naming:

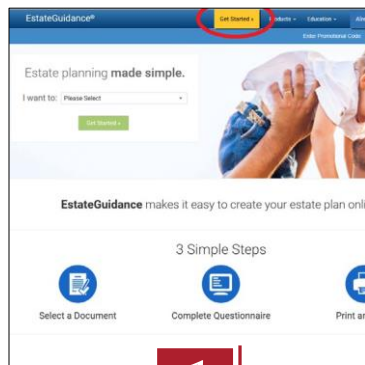
- Beneficiaries to inherit property
- A guardian to care for minor children

Online will preparation is straightforward. With *EstateGuidance*, you can:

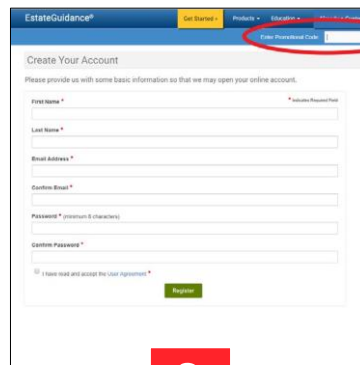
- Follow detailed instructions and definitions that guide you through the process.
- Create, save, and print a legally binding will that you can update at any time.
- Make unlimited revisions at no cost.

Personal legal forms and documents are stored on a secure server and are only accessible via password.

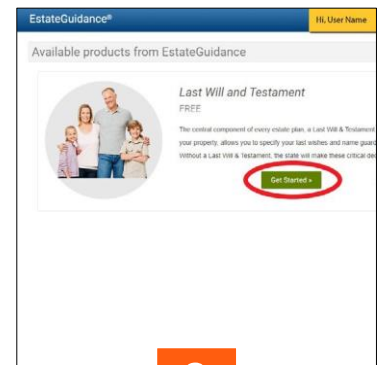
Where do I begin?



Go to EstateGuidance.com and click Get Started.

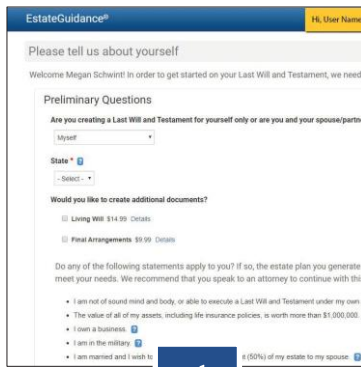


Create your account and enter LIFEKEYS in the Promotional Code field to receive the discounted products.

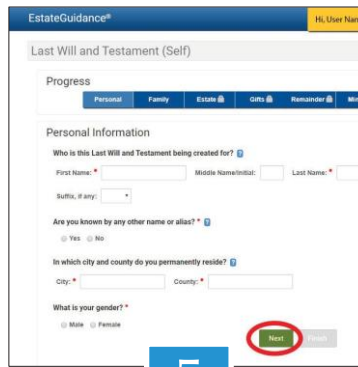


Click Get Started under Last Will and Testament.

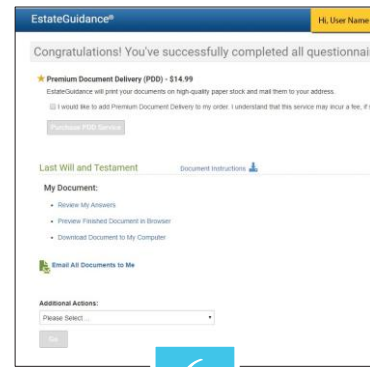
Online will preparation via EstateGuidance® (continued)

The screenshot shows the 'Preliminary Questions' section of the EstateGuidance website. It includes a welcome message, a dropdown for 'Are you creating a Last Will and Testament for yourself only or are you and your spouse/partner?', a 'State' dropdown, and checkboxes for 'Living Will \$14.99' and 'Final Arrangements \$9.99'. There are also several statements to agree or disagree with, such as 'I am not of sound mind and body...' and 'I am married and I wish to...'. A blue square with the number '4' is overlaid on the bottom right of the screenshot.

Answer the preliminary questions. You can add a Living Will or Final Arrangements for an additional cost. Click “Get Started” to proceed.

The screenshot shows the 'Personal Information' section of the EstateGuidance website. It includes a progress bar with tabs for Personal, Family, Estate, Gifts, Remainder, and Minors. The 'Personal' tab is active. It contains fields for 'Who is this Last Will and Testament being created for?', 'First Name', 'Middle Name/Initial', 'Last Name', 'Suffix', 'Are you known by any other name or alias?', 'In which city and county do you permanently reside?', 'City', 'County', and 'What is your gender?'. A red circle highlights the 'Next' button. A blue square with the number '5' is overlaid on the bottom left of the screenshot.

Enter your personal information and click “Next” to move through all 8 sections (Personal, Family, Estate, Gifts, Remainder, Minors, Legal Rep and Other).

The screenshot shows the 'Congratulations! You've successfully completed all questionnaire' screen of the EstateGuidance website. It includes a 'Premium Document Delivery (PDD) - \$14.99' section, a 'Download your document' button, and a 'My Document' section with links to 'Review My Answers', 'Preview Finished Document in Browser', and 'Download Document to My Computer'. There is also a 'Small All Documents to Me' button and an 'Additional Actions' section. A blue square with the number '6' is overlaid on the bottom left of the screenshot.

Congratulations, you've completed your will! You can download the document to your computer or have it emailed to you for free or request a printed copy for \$14.99.

Be sure to sign and date your last will and testament in the presence of qualified witnesses and a notary public, as detailed at [EstateGuidance.com](https://www.estateguidance.com).



Visit [EstateGuidance.com](https://www.EstateGuidance.com) and use promo code LIFEKEYS.

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Order code: LFE-WPREP-FLI001

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Will Prep Service is not available to a beneficiary(ies) of policies issued in the state of NY.



Voluntary Disability: Short-Term and Long-Term Administered by Lincoln Financial



Short-term disability insurance provides a cash benefit for up to 24 weeks when you are unable to work due to injury, illness, surgery or recovery from childbirth.

If after 24 weeks you are unable to return to work in a full-time capacity, you may be eligible for extended disability benefits if you enroll in the Long-term disability benefits plan. Long-term disability benefits are payable through your Social Security Normal Retirement Age.

Short-Term Disability

Weekly benefit amount	60% of your weekly earnings, not to exceed \$2,000 per week
Elimination period: illness	14 days; benefits begin on day 15
Elimination period: injury	14 days; benefits begin on day 15
Maximum benefit duration	up to 24 weeks
Pre-existing limitation	none

Long-Term Disability

Monthly benefit amount	60% of your weekly earnings, not to exceed \$8,667 per month
Elimination period: illness	180 days (after short-term disability ends)*
Elimination period: injury	180 days (after short-term disability ends)*
Maximum benefit duration	Social Security Normal Retirement Age (SSNRA)
Pre-existing limitation	3/12**
Evidence of Insurability (EOI)	Coverage elected during the annual enrollment period is not subject to Evidence of Insurability (EOI) as long as the below criteria has been satisfied: (1) You have not been previously declined; and (2) Your elected benefit amount or increased election amount does not exceed the Maximum Monthly Benefit.

* Associates not enrolled in the Short-Term Disability plan must satisfy the full 180-day elimination period with benefits payable on the 181st day.

** Benefits may not be paid for any condition treated within 3 months prior to your effective date until you have been covered under this plan for 12 continuous months.

Voluntary Disability: Short-Term and Long-Term Cost (weekly payroll deductions)

Short-Term Disability Premium Calculation

To determine your estimated weekly payroll deduction:

1. Calculate your weekly salary:

Divide your annual salary (your hourly rate \times 2080) by 52 weeks (*rounded to nearest whole dollar*); not to exceed \$2,000 per week.

2. Multiply by the benefit percentage (60%) to determine your maximum weekly benefit amount:

Multiply your weekly salary by 60%.

3. Calculate your weekly premium:

Divide your weekly benefit by 10 and multiply by the applicable rate shown.

Age Range:

0 – 24

25 – 29

30 – 34

35 – 39

40 – 44

45 – 49

50 – 54

55 – 59

60 – 64

65+

Rate per \$10 of benefit:

\$0.073

\$0.077

\$0.075

\$0.084

\$0.093

\$0.111

\$0.149

\$0.190

\$0.190

\$0.218

The weekly STD benefit amount may not exceed \$2,000 regardless of your annual salary amount. If your calculated weekly benefit exceeds \$2,000 your benefit will be limited to \$2,000 per week.

Weekly Paycheck Cost

Step 1 answer: \$ _____

Example: \$2,500 per week

Step 2 answer: \$ _____

Example: \$1,500

Step 3 answer: \$ _____

Example: \$13.95 based on rate for 42 year old

Long-Term Disability Premium Calculation

To determine your estimated weekly payroll deduction:

1. Calculate your monthly salary:

Divide your annual salary (your hourly rate \times 2080) by 12 months; not to exceed \$14,445 per month

2. Divide your monthly salary by 100

3. Calculate your weekly premium:

Use the value from step 2 and multiply by a rate of \$.132 to get your estimated weekly premium

The monthly salary amount in Step 2 may not exceed \$14,445 regardless of your annual salary amount. If your calculated monthly salary amount exceeds \$14,445 your salary amount will be limited to \$14,445 per month.

Weekly Paycheck Cost

Step 1 answer: \$ _____

Example: \$6,000 per month

Step 2 answer: \$ _____

Example: 60

Step 3 answer: \$ _____

Example: 60 \times \$.132



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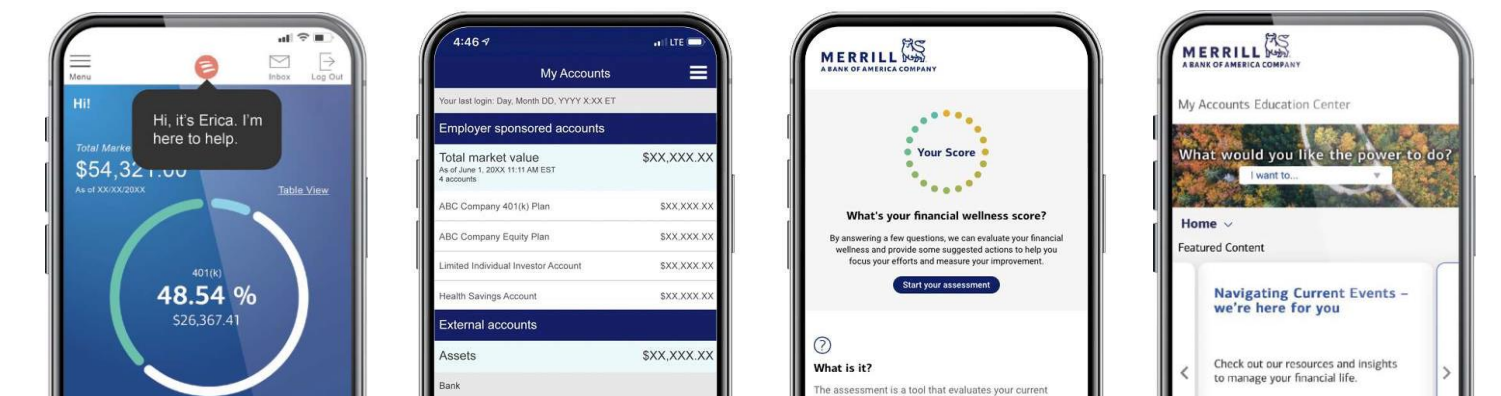
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Employee Assistance Program (EAP) Powered by ComPsych and Guidance Resources

Help and support for personal and work-life matters. *EmployeeConnect PlusSM* gives you and your loved ones the support, resources and information you need to handle life's demands.

GuidanceConsultantsSM

When going through a difficult time, having someone to talk to can make a big difference in your state of mind. You and your loved ones have access to confidential counseling from trained counselors for:

- Stress, anxiety and depression
- Relationship/marital conflicts
- Parenting questions
- Job pressures
- Grief and loss
- Substance abuse

GuidanceResources® Online

Whenever you need guidance on important life matters, visit GuidanceResources.com. You'll find help on relationships, work, school, children, legal, financial concerns and more. You have access to:

- Timely articles, HelpSheetsSM, tutorials, streaming videos and self-assessments
- "Ask the Expert" personal responses to your questions
- Childcare, elder care, attorney and financial planner searches
- Pet insurance discounts and care locator

Financial Services

Everyone needs a bit of financial advice now and then. With *EmployeeConnect PlusSM*, you can speak with a ComPsych® financial expert to discuss:

- Managing personal financial challenges
- Credit card and debt management
- Budgeting
- Tax questions
- Financing for college
- Estate planning
- Investment options
- Mortgages, loans and refinancing
- Retirement planning

Legal Services

You can easily feel overwhelmed when faced with legal issues. Fortunately, help is just a phone call away. *EmployeeConnect PlusSM* gives you access to a ComPsych® staff attorney. Get valuable legal help with:

- Family law
- Bankruptcy and credit issues
- Landlord/tenant issues
- Civil actions and small claims
- DUI/DWI
- Wills, living wills and trusts
- Name changes
- Contracts
- Probate matters
- Immigration

Work-Life Services

When you need help resolving issues at home or work, *EmployeeConnect PlusSM* is here for you. Work-life specialists will research your question and will send you information based on your needs. Find help with:

- Childcare and before- and after-school care
- Elder care and assisted living services
- Relocation information
- Event planning and home improvement

24 hours a day/7 days a week. Call 855-327-4463, or visit us online at www.GuidanceResources.com
(Web ID = Lincoln)

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Federal Notices

Federal laws require that Acme Brick provide you with certain notices that inform you about your rights regarding eligibility, enrollment and coverage of health care plans. These notices, SPDs and plan amendments are available in print upon request to the HR department at HR@brick.com.

Notice	What It Means For You
HIPAA Privacy Notice	Describes your rights to health privacy
Special Enrollment Rights	Describes when you can enroll for coverage when you have previously declined coverage.
Premium Assistance Under Medicaid and CHIP	Provides a list of states that have premium assistance programs to help you pay for medical coverage if you are unable to afford health care coverage premiums.
Family and Medical Leave Act (FMLA)	If you or a family member is faced with a health condition that causes you to miss work, you may be able to take up to 12 weeks of job-protected time off under the FMLA.
Summary of Benefits and Coverage (SBC)	Summarizes important information about your health coverage options in a standard format to help you compare each option
Newborns' and Mothers' Health Protection Act	Describes protections for mothers and their newborn children relating to the length of their hospital stays following childbirth.
Women's Health and Cancer Rights Act of 1998	Provides information regarding a woman's rights after a mastectomy
Genetic Information Non-Discrimination Act of 2008 (GINA)	Prohibits employers from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by the law.
Michelle's Law	Prohibits group health plans from terminating the coverage of a dependent child who has lost student status as a result of a medically necessary leave of absence.
Consolidated Omnibus Budget Reconciliation Act (COBRA)	Provides details about how COBRA can provide ongoing health benefits after coverage ends under certain conditions
Your Prescription Drug Coverage and Medicare	The key purpose of this notice is to advise you that the prescription drug coverage you have under the Acme Brick Health and Welfare Plan is expected to pay out, on average, at least as much as the standard Medicare prescription drug coverage will pay in 2025. (This is known as "creditable coverage.")
Health Insurance Marketplace Coverage Options	Provides basic information about individual health insurance options that will be available through the Marketplace (also referred to as Exchanges) beginning in 2014.
The "No Surprises Act"	Provides protection against balance billing and out-of-network cost sharing with respect to emergency services, non-emergency services furnished by non-participating providers at certain participating health care facilities, and air ambulance services furnished by nonparticipating providers of air ambulance services.

Important Contacts

Coverage	Administrator	Phone	Email/Website
Human Resources	Acme Brick	800.792.1234	HR@brick.com
Medical Benefits	BlueCross BlueShield Of Texas	800.521.2227	bcbstx.com
Pharmacy Benefits	Express Scripts	855.686.9784	express-scripts.com
Smoking Cessation	BlueCross BlueShield Of Texas	877.806.9380	bcbstx.com
Telemedicine/ Virtual Visits	Teladoc Health	800.TELADOC	TeladocHealth.com
Diabetes Management	Livongo by Teladoc Health	800.945.4355	Livongo.com
Accident Benefits	Lincoln Financial	800.423.2765	Lincoln4Benefits.com
Critical Illness Benefits	Lincoln Financial		
Flexible Spending Accounts (FSA)	Wex Health	866.451.3399	WexInc.com
Dental Benefits	Cigna	800.244.6224	mycigna.com
Vision Benefits	Davis Vision	800.999.5431	DavisVision.com
Life/AD&D Benefits	Lincoln Financial	800.423.2765	Lincoln4Benefits.com
Disability Benefits	Lincoln Financial		
Employee Assistance Program (EAP)	ComPsych and Guidance Resources	855.327.4463	GuidanceResources.com Web ID: Lincoln
Pet Insurance	Nationwide	877.738.7874	petinsurance.com/brick
Associate Discount Program	PerkSpot	n/a	acmebrick.perkspot.com
Retirement Savings	Bank of America Merrill Lynch	800.228.4015	benefits.ml.com (Acct # 605900)
Pension Plan	Berkshire Hathaway Consolidated Pension Plan	877.459.2403	eepoint.com/bhcpp

