
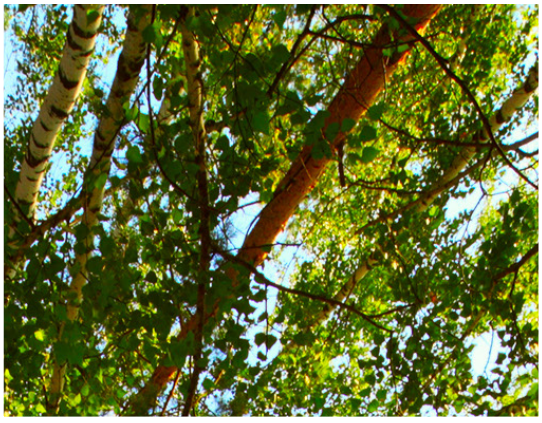
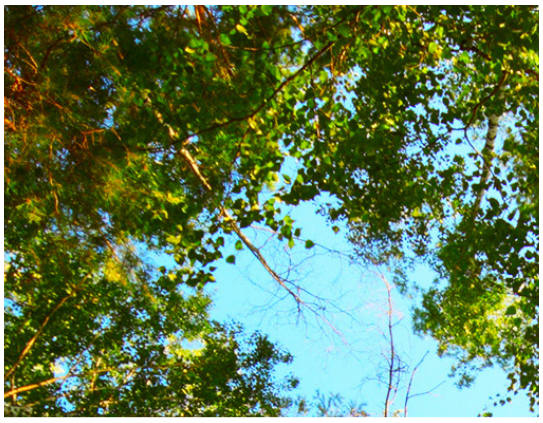





2025 Benefits Guide

KENDALL
VEGETATION SERVICES

Welcome to Your Healthcare Benefits!

At Kendall Vegetation Services, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This guide will help you choose the type of plan and level of coverage that is right for you so please be aware that there are some changes to your benefits for 2025.

Please reach out to Human Resources with questions or concerns.

Sincerely,

Your Human Resources Team

Note: *Union members' benefits may vary from those presented in this guide and employees should consult their Union Agreement for details on their benefits and coverage.*

This booklet summarizes the benefit plans that are available for eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this booklet is not a guarantee of benefits.

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What's Inside ...

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Eligibility

Eligible Employees:

You may enroll in the Kendall Vegetation Services employee benefits program if you are a Full-Time employee working at least 30 hours per week.

Eligible Dependents:

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse and children up to age 26. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided. Children may include natural, adopted, stepchildren and children obtained through court-appointed legal guardianship, as well as children of same sex state-registered domestic partners.

When to Enroll:

If you are a new hire, you have **30 days** to enroll in benefits from your date of hire. If you are part of an acquisition, you will have a designated period to enroll in benefits which will be communicated to you.

When Coverage Begins:

If you are a New Hire, your coverage will begin the first of the month following 30 days of employment. Example – if you are hired on May 14, you will hit 30 days in June, and your coverage will begin July 1.

If you are enrolling through an acquisition, your coverage will begin the first of the month following the date of the acquisition. For example, acquisition takes place on May 14, your coverage will begin June 1.

If enrolling during Open Enrollment, which is 2 weeks long in the fall each year, your coverage will begin January 1.

Changes in Benefit Elections

Family Status Change:

A change in family status is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits.

Examples of some family status changes include:

- Change of legal marital status (i.e. marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e. birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in your having to wait until the next open enrollment period to make your change. Please contact Human Resources to make these changes.

Open Enrollment:

With few exceptions, Open Enrollment is the only time of year when you can make changes to your benefits plan. All elections and changes take effect on the first day of the plan year. During Open Enrollment, you can:

- Add, change, or delete coverage
- Add, or drop dependents from coverage

If you do not make your 2025 benefit elections, you will automatically be defaulted to your prior year elections.

Note: Some states (currently, California, Massachusetts, New Jersey, Rhode Island, Washington D.C., and Vermont) may impose a tax on residents who do not have health insurance coverage, subject to limited exceptions.

Spousal Surcharge

Effective 1/1/2025

- If your spouse has health insurance provided to them by their employer and you elect to cover them on your plan here, you will pay a surcharge of $36 per pay.
- This additional charge only applies to medical coverage. You can enroll your spouse in any other plans offered without the additional surcharge.
- You will have to complete an affidavit to enroll your spouse in medical coverage.

Key Terms

Allowable Charge
The amount a doctor or hospital can charge for a health care service or item they give you.

Benefit Period
From the start date to the end date of your benefits coverage.

Copay
Flat dollar amount member is responsible for at the time of service. The plan usually pays 100% of the remaining balance.

Coinsurance
Percentage of payment shared between the member and the plan for certain services after the deductible has been met.

Deductible
Amount member is responsible for before the plan pays for certain services.

Drug Tiers
Prescription drugs are put into different categories based on how much they cost, whether they're brand-name or generic and sometimes other factors. Tier 1 drugs have the lowest copayment and are mostly generic versions of brand-name drugs. Tier 2 is made up of mid-priced drugs that may be brand-name but are "preferred" within their drug class. Tier 3 has mostly brand-name drugs with higher copayments.

High Deductible Health Plan (HDHP)
Qualified plan as defined by the IRS. No first dollar benefits. All services are subject to the deductible before the plan will pay. Exception is routine preventive care as defined by the IRS.

Network Provider
Medical and pharmacy providers that have contracted with the plan to provide lower out-of-pocket costs for members.

Out-of-Pocket Maximum
Member total payments for deductible, coinsurance, and copays to stated maximum per plan year. Once reached, the plan will pay 100% for eligible expenses for the rest of the plan year.

Premium
The amount you pay to belong to a health plan.

Medical Plan Highlights

This year Kendall Vegetation Services is proud to offer three medical plan options through Anthem BCBS PPO Network. The chart below is a brief summary of benefits available to eligible employees. Please refer to the summary plan descriptions for complete plan details.

Member Responsibility	Anthem HSA 6500 PPO In-Network	Anthem 5000 PPO In-Network	Anthem 2000 PPO In-Network
Annual Deductible			
Individual	$6,500	$5,000	$2,000
Family	$13,000	$10,000	$4,000
Coinsurance	0%	0%	20%
Maximum Out-of-Pocket			
Individual	$6,525	$8,550	$5,000
Family	$13,050	$17,100	$10,000
Physician Office Visit			
Primary Care	0% AD	$25	$15
Specialty Care	0% AD	$50	$30
Preventive Care			
Preventive Care	No charge	No charge	No charge
Telehealth (Primary Care/MH)	0% AD	$25	$15
Diagnostic Services			
X-ray and Lab Tests	0% AD	30% AD	20% AD
Complex Radiology	0% AD	30% AD	20% AD
Urgent Care Facility	0% AD	$100	$60
Emergency Room	0% AD	30% AD	20% AD
Inpatient Facility	0% AD	30% AD	20% AD
Outpatient Facility & Surgical	0% AD	30% AD	20% AD
Mental Health & Substance Use			
Inpatient	0% AD	30% AD	20% AD
Outpatient Office Visit	0% AD	30% AD	20% AD
Retail Pharmacy (30-day supply)			
Pharmacy Deductible	Medical Ded. Applies	$500 Ind./$1,000 Family	$0 Ind./$0 Family
Generic (Tier 1)*	$15	$5	$5
Preferred (Tier 2)	$50	$50	$50
Non-Preferred (Tier 3)	$85	$100	$100
Preferred Specialty (Tier 4)	20% up to $300	20% up to $250	20% up to $250
Mail Order Pharmacy (90-day supply)			
Generic (Tier 1)	$38 AD	$13	$13
Preferred (Tier 2)	$125 AD	$125	$125
Non-Preferred (Tier 3)	$213 AD	$250	$250
Preferred Specialty (Tier 4)**	20% up to $300	20% up to $250	20% up to $250
	WEEKLY RATES	**WEEKLY RATES**	**WEEKLY RATES**
Employee	$18.63	$22.88	$45.17
Employee + Spouse	$96.74	$142.48	$149.33
Employee + Child(ren)	$63.64	$100.41	$105.91
Employee + Family	$132.30	$188.99	$197.48

AD = After Deductible
* Deductible is waived for some preventive generics
** 30 day supply only
Note: Out-of-network benefits available for all plans consist of higher premiums and coinsurance and may be susceptible to balance billing for any charges over the allowable limit for a service. Remaining in-network for services is advised. See SPD for details or anthem.com to see if your provider is in-network.

Health Savings Account (HSA)

When you are enrolled in a Qualified High Deductible Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to an HSA Account. This benefit is offered through Chard Snyder.

What is a Health Savings Account (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no "use it or lose it" rule; your balance carries over year to year.

Plus, you get extra tax advantages with an HSA because:

- Money you deposit into an HSA is exempt from federal income taxes
- Interest in your account grows tax free
- You don't pay income taxes on withdrawals used to pay for eligible health expenses. If you withdraw funds for non-eligible expenses, taxes and penalties apply.
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

Are You Eligible To Open A Health Savings Account (HSA)?

Although everyone is able to enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet these requirements, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP)
- You must not be covered by another non-QHDHP health plan, such as a spouse's PPO plan.
- You are not enrolled in Medicare.
- You are not in the TRICARE or TRICARE for Life military benefits program.
- You have not received Veterans Administration (VA) benefits within the past three months.
- You are not claimed as a dependent on another person's tax return.
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse's FSA. Enrollment in a limited purpose health care FSA is allowed.

2025 IRS HSA Contributions

You are able to contribute to your Health Savings Account on a pre-tax basis through payroll deductions up to the IRS statutory maximums. The IRS has established the following maximum HSA contributions. The annual limit must include the employer amount that is provided to you, the employee.

- $4,300 Individual
- $8,550 Family
- If you are age 55 and over, you may contribute an extra $1,000 catch-up contribution.

2025 HSA Funds

Kendall Vegetation Services will contribute $500 in HSA funds to those enrolled in the HSA plan if you complete an attestation form for receiving an annual physical and providing proof you have opened a Chard Snyder HSA account. After which you will receive $125 per quarter until your next physical is due. There is no retro funding for mid-year enrollment.

Health Savings Account (HSA) *continued*

The Chard Snyder
Health Savings Account

CHARDSNYDER™ Benefit Solutions

What is a Health Savings Account?

Consider enrolling in a **Health Savings Account** (HSA) if you are enrolled in a High Deductible Health Plan (HDHP). An HSA is a personal bank account that helps you save money when paying for healthcare expenses for you and your family. After deciding the amount you want to contribute, HSA funds are deducted from your paycheck before taxes so you can use them to pay for eligible expenses that your health insurance does not cover. An HSA stays with you after you leave your job and helps you save for retirement expenses.

What are the Advantages of an HSA?

An HSA provides you with triple tax savings by allowing you to:

- contribute to the account tax free,
- grow interest or earnings tax free, and
- pay for your eligible out-of-pocket expenses tax free.

You can also use your HSA as a long-term retirement investment option once you have reached a certain balance set by your employer. Your HSA account offers self-directed mutual fund investments to help you grow your healthcare savings for future needs.

Am I Eligible for an HSA?

If all of these statements are true, you are eligible to contribute to an HSA:

- I am **not** participating in another health plan (spousal plan, individual policy) that is not an eligible High Deductible Health Plan.
- My spouse is **not** enrolled in a healthcare plan that provides me with benefits before I have met the IRS annual minimum deductible. (Includes a Health Reimbursement Arrangement.)
- I do **not** receive Medicare benefits of any kind.
- My spouse or I have previously had a Health FSA but our FSA account balance is $0.
- I have **not** received healthcare benefits (other than dental, vision, preventive or for a service-connected disability) from the Veterans Administration (TRICARE) within the last three months (including prescriptions).

The Chard Snyder
Mobile App

CHARDSNYDER™ Benefit Solutions

Manage your HSA on the go, anywhere, anytime

Features

- View account balances and transaction details
- Request HSA transactions, including distributions and contributions
- Manage HSA investments to realign, update, or transfer your portfolio *(Options become available when minimum HSA cash balance set by your employer is reached.)*
- Enter your bank account for seamless transfers
- Scan any product for eligibility using your phone's camera

Download from the App Store or Google Play

Available on the App Store | GET IT ON Google Play

www.chard-snyder.com

Health Savings Account (HSA) *continued*

Chard Snyder helps you get the most out of your HSA benefit.

What are HSA Eligible Expenses?

HSA funds can be used for healthcare, dental, and vision expenses; prescriptions; and over-the-counter health products.

The IRS determines what expenses are HSA eligible. Eligible expenses are reimbursed if they are incurred by you, your spouse, or your eligible tax dependents. The charts below show examples of eligible and ineligible expenses:

Eligible Expenses

Deductibles	Medical Services	Dental Treatment	Acne Medicine
Hospital Services	Contact Lenses	Chiropractor	Menstrual Care
Prescriptions	Orthodontia	Sunscreen	OTC Medications
Copays	Physical Exams	Physical Therapy	Baby Monitors

Ineligible Expenses

Insurance Premiums	Teeth Whitening	Hair Removal
Massage	Nutritional Supplements	Maternity Clothes
Elective Cosmetic Surgery	Household Help	Funeral Expenses

How Do I Access My HSA Funds?

The Chard Snyder Benefits Card provides an easy, convenient way to use your HSA funds to pay for eligible items and services. It works just like a debit card, but utilizes smart technology so it can only be used to pay for expenses that are eligible according to IRS guidelines under the HSA plan.

The Chard Snyder Benefits Card eliminates the need to pay out-of-pocket or wait for reimbursement. Simply swipe the card for payment at your healthcare provider's office, pharmacy, store, or use online, and the funds are automatically deducted from your HSA.

You can also reimburse yourself after purchasing eligible items out-of-pocket using your online account or the Chard Snyder mobile app.

The Chard Snyder Benefits Card

- Convenient way to pay for eligible expenses directly from your HSA
- Works like a debit card
- Connect with your mobile wallet for contactless payments
- Save your receipts

You may use your card until the expiration date shown on the front. You will receive new cards just before your current card expires.

Chard Snyder Website

www.chard-snyder.com

Once you've enrolled, access your Chard Snyder HSA online account from the website home page by clicking on the blue *Login* tab at the top right of the page.

Chard Snyder Participant Services

Our Participant Services team is here to help answer questions you may have about your HSA. Contact us via Live Chat on the Chard Snyder website or give us a call.

CHARDSNYDER™ Benefit Solutions

800.982.7715 www.chard-snyder.com

CS_HSA Benefits Card v8.23

Anthem Sydney App

Sydney™ Health makes healthcare easier

Access personalized health and wellness information wherever you are

The Sydney Health mobile app is the one place to keep track of your health and your benefits. With a few taps, you can quickly access your plan details, Member Services, virtual care, and wellness resources. Sydney Health stays one step ahead — moving your health forward by building a world of wellness around you.

Find Care

Search for doctors, hospitals, and other healthcare professionals in your plan's network and compare costs. You can filter providers by what is most important to you such as gender, languages spoken, or location.

My Health Dashboard

Use My Health Dashboard to find news on health topics that interest you, health and wellness tips, and personalized action plans that can help you reach your goals.

Live Chat

Find answers quickly with the Live Chat tool in Sydney Health. You can use the interactive chat feature or talk to an Anthem representative when you have questions about your benefits or need information.

Virtual Care

Connect directly to care from the convenience of home. Assess your symptoms quickly using the Symptom Checker, then consult with a doctor through a video visit or text session.

Community Resources

This resource center helps you connect with organizations offering free and reduced-cost programs to help with challenges such as food, transportation, and child care.

My Health Records

See a full picture of your family's health in one secure place. Use a single profile to view, download, and share information such as health histories and electronic medical records directly from your smartphone or computer.

Download Sydney Health today

Use the app anytime to:

- Find care and compare costs
- See what's covered and check claims
- View and use digital ID cards

GET IT ON Google Play

Download on the App Store

Use your smartphone camera to scan this QR code

Anthem

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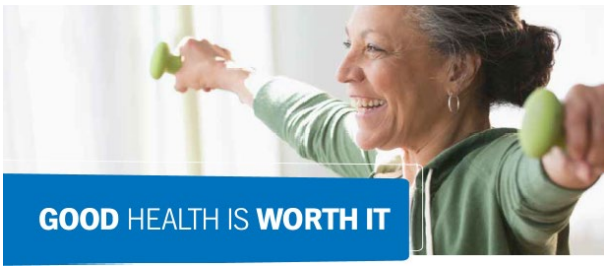
Anthem Wellness Plan



Anthem
And Its Affiliate HealthKeepers, Inc.

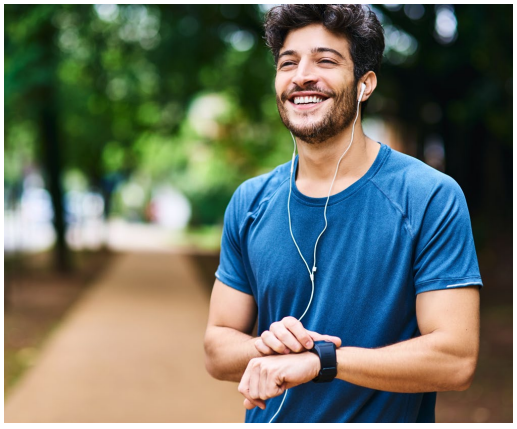
Focus on your well-being and earn rewards up to $200

The more activities you complete, the greater your reward.

Your whole health matters, and we want to reward you for taking care of it. The Wellbeing Solutions program, sponsored by your employer, connects you with easy-to-use digital health and wellness tools that can help you stay your best. When you complete any of the activities listed below, you'll earn rewards to put toward electronic gift cards for select retailers. You choose the activities you'd like to complete to receive the maximum of $200 in rewards. Don't wait, use your Sydney℠ Health app or visit anthem.com to learn more.

Activity type	Activities	Amount
Preventive care measures **How you earn:** Receive your reward when claims are processed	Complete a colorectal cancer screening (45 years and older)	$25
	Complete a routine mammogram (women 40 to 74)	$25
	Complete an annual preventive wellness exam or well woman exam with your doctor	$25
	Get an annual cholesterol test[1]	$20
	Get an annual flu shot	$20
	Have an annual eye exam[2]	$25
Condition management programs **How you earn:** Reach certain benchmarks or complete a program	ConditionCare program: Work one-on-one with your health coach for a chronic condition and earn rewards for participating in and completing the program[4]	Up $50 ($20 participation/$30 completion)
	Future Moms program: Moms-to-be can receive support from a registered nurse and earn rewards for completing initial, interim, and postpartum assessments[5]	Up to $40 ($20 initial/$10 interim/$10 postpartum assessments)
	Wellbeing Coach Telephonic – Weight Management Program: Receive one-on-one support and lifestyle coaching for weight management. Complete your goal to earn a reward[6]	$25
	Wellbeing Coach Telephonic – Tobacco Cessation Program: Receive one-on-one support and lifestyle coaching for tobacco cessation. Complete your goal to earn a reward[6]	$25
Digital Wellness activities **How you earn:** Complete activities in the Sydney Health℠ app or on anthem.com	Complete action plans around eating healthy, weight management, physical activity, and more	Up to $25 ($5 per action plan)
	Complete a health assessment and receive tailored health recommendations	$20
	Complete Well-being Coach Digital daily mission check-ins[6]	Up to $20 ($4 per milestone)
	Connect a fitness or lifestyle device	$5
	Log in to your Anthem account	$5
	Track your steps	Up to $60 ($2 per 50,000 steps tracked)
	Update your contact information	$10

Anthem Wellness Plan *continued*



Well-being Coach can help you meet your goals

Well-being Coach offers multiple options to help you meet your health goals. Our digital coaching app offers personalized 24/7 support on the go. Well-being Coach combines smart technology and proven behavioral therapy techniques to help you maintain a healthy weight, quit tobacco, and improve your nutrition, activity, mindfulness and sleep. Well-being Coach is powered by Lark and accessible from the Sydney Health app.

If you prefer a helping hand and would like additional support meeting your health goals for high-risk weight management and tobacco cessation, Well-being Coach gives you access to a certified health coach by phone. You and your health coach will identify healthy habits and develop custom action plans to achieve your health goals. No matter how you connect, you can earn rewards with Well-being Coach.

How to redeem your rewards

When you're ready to redeem your rewards, open the **Sydney Health app** or go to **anthem.com**. Then go to *My Health Dashboard*, select **Redeem Rewards**, and use your rewards credit toward an electronic gift card.

You choose from popular retailers including MasterCard, Amazon, Bed Bath & Beyond, Gap (all brands), Staples, Target, The Home Depot, and TJ Maxx. The minimum gift card amount is set by each individual retailer.

Open the **Sydney Health app** or log into **anthem.com** anytime to explore the electronic gift card options available to you.

If you'd like more information about any of the Wellbeing Solutions activities, call the Member Services number on the back of your ID card or contact Member Services through the Sydney Health app

1 Annual cholesterol test eligibility: men 35 years and older, women 40 years and older with a full cholesterol (Lipid) panel
2 Routine Annual eye exam reward is available if employer provides vision coverage through Anthem.
3 Future Moms assessments completion dates: Initial assessment must be completed by day 97; Interim assessment must be completed by 1 day prior to delivery; Postpartum Assessment must be completed by 56 days after delivery.
4 Well-being Coach Weight Management program (telephonic) is available for members who are identified as high risk based on a BMI of 30 or higher.
5 Well-being Coach Tobacco Cessation program (telephonic) is available for members who are identified as high risk based on any tobacco usage.
6 Members may earn rewards for completing quarterly Well-being Coach Digital milestones while logging daily mission check-in activities on the digital coaching app: daily Mission check-ins: 1st check-in: $4, next 15 check-ins during 1st quarter: $4, 25 check-ins for quarters 2-4: $4 each quarter) The digital coaching app download is available using Sydney Health or anthem.com.

Well-being Coach Digital is provided by Lark Health.

All preventive care activities are claims-based. Medical waivers apply to all claim-based activities.

Rewards eligibility applies to only employees and their spouse/domestic partner. Members must be active on the plan and activity must take place during the plan effective year. It may take a little time once you complete a wellness activity before you see the reward amount in your account.

Subscriber and spouse/domestic partner may earn rewards when eligible activities are completed and, in some instances, are verified by an Anthem claim. Anthem claims are required for claims-based activity rewards and may take up to 60 days to adjudicate.

Product availability may vary.

The reward amount redeemed may be considered income to you and/or your spouse/domestic partner and subject to state and federal taxes in the tax year it is paid. You and/or your spouse/domestic partner should consult a tax expert with any question regarding tax obligations.

The list of retailers available for electronic gift card rewards redemption is subject to change. Open the Sydney Health app or log on to anthem.com or to explore the electronic gift card options available to you.

Engagement Package 200 MEM 09/21

Dental Plan Highlights

This year Kendall Vegetation Services is proud to offer two dental plan options for employees through Lincoln Financial Group. The chart below is a brief summary of the in-network benefits. Please refer to the summary plan description for complete plan details.

	PPO Base Plan	PPO Buy-Up Plan
Member Responsibility	**In-Network**	**In-Network**
Annual Deductible		
Individual	$50	$50
Family	$150	$150
Deductible applies to:	Type 2 & 3	Type 2 & 3
Type 1 – Diagnostic & Preventative *Oral exams, cleanings, x-rays, fluoride, sealants, space maintainers, emergency treatment*	No charge	No charge
Type 2 – Basic Services *Direct placement fillings, simple extractions, periodontal scaling & root planing*	Ded., then 20%	Ded., then 20%
Type 3 – Major Services *Dentures, bridges, crowns, inlays/onlays*	Ded., then 50%	Ded., then 50%
Type 4 – Orthodontic Services (covers adults and children) *Orthodontic Exams, X-rays, Extractions, Study Models and Appliances*	Not covered	50%
Maximum Benefit (per covered person):		
Types 1, 2 & 3 combined	$1,500 Per Calendar Year	$2,500 Per Calendar Year
Type 4, while covered by the plan	Not Covered	$2,500 Lifetime
Annual Maximum Type	MaxRewards® Included. A covered person may be eligible for the Rollover Amount for Types 1, 2 & 3 combined based on the following:	MaxRewards® Included. A covered person may be eligible for the Rollover Amount for Types 1, 2 & 3 combined based on the following:
Eligible Range (claim threshold):	$1 - $800 Per Calendar Year	$0 - $900 Per Calendar Year
Rollover Amount:	$500 Per Calendar Year	$650 Per Calendar Year
Maximum Rollover Account Balance:	$1,250 Rate assumes that all members' Maximum Rollover Account Balance is $0 at time of takeover.	$1,500 Rate assumes that all members' Maximum Rollover Account Balance is $0 at time of takeover.
	WEEKLY RATES	**WEEKLY RATES**
Employee	$3.67	$4.71
Employee + Spouse	$7.19	$9.42
Employee + Child(ren)	$8.75	$11.55
Employee + Family	$13.25	$17.18

* Out-of-network services are based on the Maximum Allowable Charge (MAC).

Key Coverage Highlights

- Lincoln makes it simple and easy to create dental plans that are just the right fit. We offer several valuable plan options, many with flexible terms and conditions.
- Extensive network of dentists with more than 546,690 access points and over 115,665 unique providers — some discounts total more than 35%. Provider searching is available on our Mobile App and website by visiting LincolnFinancial.com/FindA/Dentist.
- Value-add programs including our health center website that provides valuable tools such as oral health risk assessments and a cost estimator so employees can evaluate their costs up front.
- Support and service that satisfies with online access to enrollments, claims, bill payments and plan documents.

Dental Plan Highlights *continued*

MaxOver™

Get rewarded for good oral health activities

Preventive care leads to good oral health. MaxOver rewards you for your good oral health habits when you receive preventive care each plan year. Members qualifying for the benefit may roll over a portion of their annual maximum for use in future years. So, if you need a procedure that costs more than your plan's annual maximum, you can use the funds in your MaxOver account to help cover the difference.

How do you qualify for MaxOver™?

Have at least one preventive exam and cleaning during your benefit period.

Have claims that are less than the MaxOver claims threshold† paid during the benefit period.

Satisfy any waiting periods included in your plan for major services (if applicable).

MaxOver benefits are determined three months after the end of the group's benefit period. To check your MaxOver allowance, log in to DeltaDentalVA.com and scroll to My Benefits.

How it Works

Plan's annual maximum	$1,500*
Submit claims up to	$750
MaxOver amount added to next benefit period	$375**
Total annual maximum	$1,875

- If your annual maximum is $1,500*, you can submit claims up to $750 to qualify.
- If you submit less than $750 in claims and meet the other program requirements, the amount added for the next benefit period is $375.**
- The total annual maximum available for your next benefit period is $1,875.
- For each benefit period during which the above conditions are met, you can roll over an additional $375 toward future benefit periods, up to a maximum carryover of an additional $1,500.

Delta Dental of Virginia wants our members to take advantage of the benefits and services we offer and to reward them for staying healthy.

*The MaxOver benefit is determined for each family member covered under your dental plan. You cannot use another family member's MaxOver benefit to fund your claims. Orthodontic services are excluded from MaxOver. **MaxOver amounts vary based on your plan's annual maximum allowance. Ask your group administrator or call our benefit services department at 800.237.6060 for your plan's specific MaxOver amounts.†The MaxOver claims threshold is equal to half of your annual maximum.

Vision Plan Highlights

This year Kendall Vegetation Services is proud to offer two vision plan options for employees through EyeMed. The chart below is a brief summary of the in-network benefits. Please refer to the summary plan description for complete plan details.

	Base Plan	Buy-Up Plan
Member Responsibility	**In-Network**	**In-Network**
Routine Exams	$10	$10
Vision Materials		
Frames	20% off balance over $130	20% off balance over $200
Contacts - Covered in lieu of frames		
Conventional Contacts	15% off balance over $130	15% off balance over $200
Disposable Contacts	100% of balance over $130	100% of balance over $200
Medically Necessary Contacts	No charge	No charge
Standard Plastic Lenses		
Single	$25	$10
Bifocal	$25	$10
Trifocal / Lenticular	$25	$10
Progressive	$80 - $200	$65 - $185
Frequency		
Lenses - in lieu of contacts	Once every plan year	Once every plan year
Contacts - in lieu of lenses	Once every plan year	Once every plan year
Frames	Once every other plan year	Once every plan year
Exams	Once every plan year	Once every plan year
	WEEKLY RATES	**WEEKLY RATES**
Employee	$1.66	$3.46
Employee + Spouse	$3.15	$6.57
Employee + Child(ren)	$3.32	$6.92
Employee + Family	$4.88	$10.17

Additional Savings

- 40% off additional pairs of glasses
- 20% off any item not covered by the plan, including non-prescription sunglasses
- 15% off retail price or 5% off promotional price for Lasik or PRK from US Laser Network
- Up to 64% off hearing aids, with an extended warranty and free batteries through Amplifon Hearing Health Care Network

Members can get exclusive additional discounts and deals that are often stackable with their vision benefits at eyemedvisioncare.com

Voluntary Life/AD&D Plan Highlights

Voluntary Life/AD&D

You may purchase additional Voluntary Life and AD&D insurance with Lincoln Financial Group to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to medical questions and Evidence of Insurability (EOI). You are required to elect coverage for yourself in order to elect coverage for your spouse and/or dependents. Your contributions will depend on your age and the amount of coverage you elect. Your spouse's rate will be based on your age. Please refer to the summary plan description for complete plan details and rates.

For You:

Voluntary Life

Amounts of Insurance: Increments of $10,000 to a maximum of lesser of 5x earnings of $500k with a minimum of $10,000
Guaranteed Issue: $300,000
Reduction Schedule: 65% at age 65, 50% at age 70

Voluntary AD&D

Amounts of Insurance: Increments of $10,000 to a maximum of $500,000 with a minimum of $10,000
Reduction Schedule: 65% at age 65, 50% at age 70

For Your Spouse:

Voluntary Life

Amounts of Insurance: Increments of $5,000 to a maximum of $150,000 with a minimum of $5,000
Coverage up to Employee Amount: 100% of Employee Optional
Guaranteed Issue: $30,000
Reduction Schedule: 65% at age 65, 50% at age 70

Voluntary AD&D

Amounts of Insurance: Increments of $5,000 to a maximum of $150,000 with a minimum of $5,000
Coverage up to Employee Amount: 100% of Employee Optional
Reduction Schedule: 65% at age 65, 50% at age 70

For Your Child(ren):

Voluntary Life

Amounts of Insurance: Increments of $5,000 to a maximum of $10,000 with a minimum of $5,000
Child Age Limit / Student Age Limit: 26/26

Voluntary AD&D

Amounts of Insurance: Increments of $5,000 to a maximum of $10,000 with a minimum of $5,000
Child Age Limit / Student Age Limit: 26/26

Important Reminder!

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes. Beneficiaries may be changed at any point during the plan year.

Voluntary Disability Plans Highlights

Voluntary Short-Term Disability

Voluntary Short-Term Disability coverage through Lincoln Financial Group, replaces a portion of your income when you are unable to work due to an illness or injury. This coverage has a pre-existing limitation of 12 months for conditions treated within the six months prior to effective date of coverage. Your election could be subject to medical questions and Evidence of Insurability (EOI).

Elimination Period: Accident 7 Days
Elimination Period: Sickness 7 Days
Benefit Percentage: 60.0%
Maximum Weekly Benefit: $2,500
Minimum Benefit: $20.00
Benefit Duration (Including EP): 13 Weeks
Work Related Disabilities: Non-Occupational
Definition of Disability: Own Job
Basic Weekly Earnings Definition: Salary
Partial Disability: Work Incentive Benefit
Successive Periods of Disability: 14 Days
Pre-Existing Condition Exclusion: 6-12

Voluntary Long-Term Disability

Voluntary Long-Term Disability coverage through Lincoln Financial Group, is designed to cover a portion of your salary when you are unable to work due to an accident or illness that occurs 90 days after being deemed disabled and picks up after short-term disability is exhausted. This coverage has a pre-existing limitation of 12 months for conditions treated within the three months prior to effective date of coverage. Your election could be subject to medical questions and Evidence of Insurability (EOI).

Elimination Period: 90 days (30 day accumulation period)
Benefit Percentage: 60.0%
Maximum Monthly Benefit: $15,000
Minimum Monthly Benefit: Greater of $100 or 10% of Gross Benefit
Benefit Duration: Social Security Normal Retirement Age
Definition of Disability: 24 Month Own Occupation
Basic Monthly Earnings Definition: Salary
Pre-Existing Condition Exclusion: 3-12
Mental & Nervous Limitation: 24 Months
Substance Abuse Limitation: 24 Months
Successive Periods of Disability: 6 Months

Voluntary Worksite Plans

Voluntary Accident

No one plans to have an accident but, it can happen at any moment throughout the day, whether at work or at play. Most major medical insurance plans only pay a portion of the bills. This policy through Lincoln Financial Group, can help pick up where other insurance leaves off and provide cash to cover the expenses. Our accident coverage helps offer peace of mind when an accidental injury occurs. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Summary of Benefits:

Initial care visit	$150	Ambulance	$300
X-ray	$300	Air ambulance	$1,500
Emergency care / treatment	$200	Major diagnostic	$200

Voluntary Critical Illness

Critical Illness coverage through Lincoln Financial Group, provides a lump sum benefit following major diagnosis like cancer, kidney failure, heart attacks, or stroke. This benefit can be used to help cover expenses that your insurance does not, such as bills, groceries, or transportation. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Coverage Amounts:

Employee - $10,000
Spouse - $5,000 up to 50% of employee benefit amount
Children - 50% of your coverage amount at no extra cost

Health Assessment/Wellness Benefit*: Level: $50

* You receive a cash benefit every year you and any covered family members complete a single covered exam or screening.

Voluntary Hospital Indemnity

Hospital Indemnity coverage through Lincoln Financial Group, helps deliver financial security for the unexpected—allowing you to help protect your budgets against unforeseen expenses if you suffer an accidental injury or sickness. You can use the cash benefits from this coverage to help meet copayments, to pay for recovery expenses or in any way you see fit. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Summary of Benefits:

Hospital Admission: For the initial day of admission to a hospital for treatment of a sickness/an injury	$2,000 per day for one day per calendar year
Hospital Confinement: For each day of confinement in a hospital as a result of a sickness/an injury	$200 per day for 30 days per calendar year (starting on day 2)
Hospital ICU Confinement: For each full or partial day of confinement in an ICU as a result of a sickness/an injury	$400 per day for 30 days per calendar year (starting on day 1)
Newborn Care: For each day of confinement to a hospital for routine postnatal care following birth	$200 per day for two days per calendar year
Health Assessment/Wellness Benefit*:	Level: $50

* You receive a cash benefit every year you and any of your covered family members complete a single covered exam, screening, or immunization.

401(k) Retirement Plan

Kendall Vegetation Services is proud to offer a 401(k) Retirement plan through John Hancock. Employees are eligible to start contributing to this plan the first of the month following 60 days of employment. **Example:** Date of hire = 4/6/2025, 60 days will be reached in June, eligibility to begin contributing = 7/1/2025.

You will receive enrollment information from John Hancock (also included below) via email and in the mail shortly before you are eligible to participate. You will ***not*** be able to enroll prior to your eligibility window.

Saving for retirement while taking care of other financial priorities can be a tricky balance. John Hancock provides the resources to help you navigate the pressures of long and short-term goals, so you can live your best life today and tomorrow.

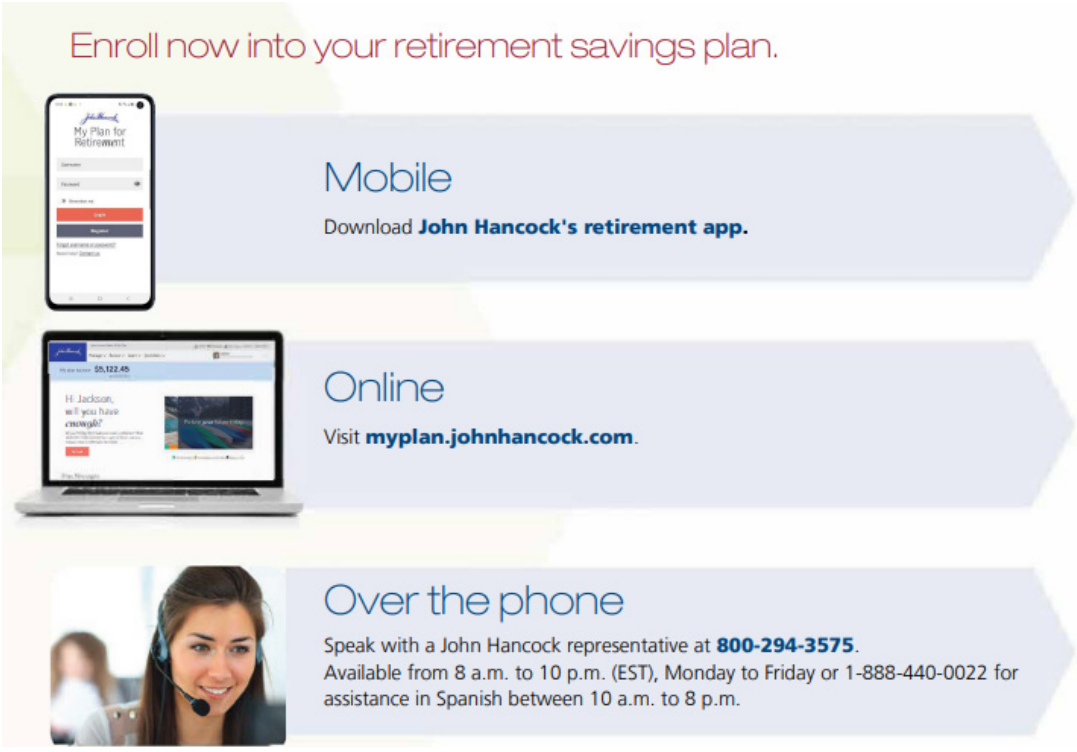
Xylem Tree Experts will match your contribution on the following schedule:

- 100% match 1-3%
- 50% match 4-5%

Example: if an employee contributes 5% or more, you will earn a 4% employer match.

The vesting schedule for employer match is 5 years graded (elapsed time), please see schedule below.

- Less than 1 year = 0%
- 1 year but less than 2 = 20%
- 2 years but less than 3 = 40%
- 3 years but less than 4 = 60%
- 4 years but less than 5 = 80%
- 5 years or more = 100%



Employee Assistance Program (EAP)

Employee Assistance Program
SIP Vegetation Management

Anthem

Available 24/7, 365 days a year

Everything you share is confidential*

Life can be full of challenges. Your Anthem Employee Assistance Program (EAP) is here to help you and your household members. EAP offers a wide range of **no-cost** support services and resources, including:

Counseling
- Up to 3 visits per issue
- In-person or online visits
- 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
- Free legal resources, forms, and seminars online

Financial consultation
- Phone meeting with financial professionals
- Regular business hours; no appointment required
- Free financial resources and budgeting tools online

ID recovery
- Help reporting to consumer credit agencies
- Assistance with paperwork and creditor negotiations

Dependent care and daily living resources
- Online information about child care, adoption, elder care, and assisted living
- Phone consultation with a work-life specialist
- Help with pet sitting, moving, and other common needs

Other anthemEAP.com resources
- Well-being articles, podcasts, and monthly webinars
- Self-assessment tools for emotional health issues

Crisis consultation
- Toll-free emergency number; 24/7 support
- Online critical event support during crises

We are ready to support you

You can call us at **800-999-7222**, or go to **anthemEAP.com** and enter your company code: TREE

When something unexpected happens, EAP can help you figure out your next steps. Contact us today.

* In accordance with federal and state law, and professional ethical standards.
This document is for general informational purposes. Check with your employer for specific information on the services available to you.

Language Access Services – (TTY/TDD: 711)
Spanish – Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda.
Chinese – 您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。

Anthem complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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Employee Assistance *continued*

Lincoln Financial Group®

Employee Assistance Program

The resources you need to meet life's challenges

EmployeeConnect℠ offers professional, confidential services to help you and your loved ones improve your quality of life.

In-person guidance

Some matters are best resolved by meeting with a professional in person. With *EmployeeConnect*℠, you and your family get:

- In-person help for short-term issues (up to five sessions with a counselor per person, per issue, per year)
- In-person consultations with network lawyers, including one free 30-minute in-person consultation per legal issue, and **25% off** subsequent meetings

Unlimited 24/7 assistance

You and your family can access the following services anytime — online, on the mobile app or with a toll-free call:

- Information and referrals on family matters, such as child and elder care, pet care, vacation planning, moving, car buying, college planning and more
- Legal information and referrals for family law, estate planning, consumer and civil law
- Financial guidance on household budgeting and short- and long-term planning

Online resources

EmployeeConnect℠ offers a wide range of information and resources you can research and access on your own. Expert advice and support tools are just a click away when you visit GuidanceResources.com or download the GuidanceNow℠ mobile app. You'll find:

- Articles and tutorials
- Videos
- Interactive tools, including financial calculators, budgeting worksheets and more

EmployeeConnect℠

EMPLOYEE ASSISTANCE PROGRAM SERVICES

Confidential help 24 hours a day, seven days a week for employees and their family members. Get help with:

- Family
- Parenting
- Addictions
- Emotional
- Legal
- Financial
- Relationships
- Stress

Insurance products issued by:
The Lincoln National Life Insurance Company
Lincoln Life & Annuity Company of New York
Lincoln Life Assurance Company of Boston

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Employee Assistance *continued*

We partner with your employer to offer this service at no additional cost to you!

*EmployeeConnect*SM counselors are experienced and credentialed.

When you call the toll-free line, you'll talk to an experienced professional who will provide counseling, work-life advice and referrals. All counselors hold master's degrees, with broad-based clinical skills and at least three years of experience in counseling on a variety of issues. For face-to-face sessions, you'll meet with a credentialed, state-licensed counselor.

You'll receive customized information for each work-life service you use.

To take advantage of the *EmployeeConnect*SM program or for more information: Visit GuidanceResources.com (username: LFGSupport, password: LFGSupport1), download the GuidanceNowSM mobile app or call 888-628-4824.

LincolnFinancial.com

LCN-2836182-112019
MAP 12/19 **Z01**
Order code: LTD-EAPEE-FLI001

Lincoln Financial Group®

*EmployeeConnect*SM

EMPLOYEE ASSISTANCE PROGRAM SERVICES

To find out more:

- Visit GuidanceResources.com
  (username: LFGSupport ■ password: LFGSupport1)
- Download the GuidanceNowSM mobile app
- Call 888-628-4824

Lincoln Financial Group® | ComPsych® GuidanceResources® Worldwide

Medicare

We Make Medicare Easier for Employers & Employees

Medicare can be confusing because of its complicated rules and wide array of options. As a result, employees often turn to their employers for help, creating an additional burden and compliance risks.

My Benefit Advisor (MBA) provides a variety of Medicare-related programs to help employees understand their options, reduce the employer's costs and compliance risks, and increase the overall value of the employee benefit package.

Medicare Insurance Plans

Individual Medicare Plans

We provide employees with personalized service and access to multiple insurance options that cost the same as buying directly from the carrier.

Group Retiree Plans

MBA can design a custom plan that fits the needs of each employer, with a minimum of two participants and within government regulations.

Medicare Education Resources

Reduce the confusion and costly mistakes that occur when an active employee or retiree becomes eligible for Medicare.

- **Medicare Basics Brochure**
- **On-Demand Videos**
- **Education Library**
- **Employee Workbook: Medicare vs. Group Health Plan**

Medicare *continued*

MY BENEFIT ADVISOR

How My Benefit Advisor Can Help

Employee Issue	MBA Solution
Employees struggle with understanding their Medicare options and look to HR for help. ■ Should they enroll in Medicare while on the group plan? ■ Will they or their dependent benefit by dropping group coverage and enrolling in Medicare?	We provide a variety of Medicare educational services, including: ■ resources to help employees make important decisions ■ personal consultants to answer questions about Medicare and optional insurance plans
Retiring employees need help with transitioning from the group health plan to Medicare.	Our agents specialize in Medicare and will help each retiree: ■ understand Medicare ■ provide insurance options that match each person's specific needs ■ assist with enrollment and provide ongoing service
Looking for a new cost-effective way to improve the employee and retiree benefit program	We help develop a custom retiree health program to attract and retain employees: ■ minimal administration ■ zero or minimal employer cost
Looking for solutions to minimize the impact of an aging workforce: ■ reduce claim costs for health plan and workers comp ■ improve productivity ■ create employee advancement opportunities	Cost-savings strategies are available to: ■ help employees understand when and how they may benefit by voluntarily enrolling in Medicare vs. the employer group health plan ■ offer a Medicare retiree plan that helps make retirement a viable and less frightening option
Interested in making changes to their current retiree plan to reduce costs or improve benefits	We have the expertise and resources to design, market, and implement a variety of retiree programs, including: ■ replace or redesign the current group retiree plan ■ convert from group retiree to individual plans in combination with a retiree HRA

For more information about My Benefit Advisor and how we can help with Medicare, contact Shawn McLean at (757) 663-4089 or email shawn.mclean@mybenefitadvisor.com

MY BENEFIT ADVISOR

Contact Information

Have Questions? Need Help?

Kendall Vegetation Services is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time at **855-874-6699** or via e-mail at **BRCEast@usi.com.** If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

Carrier Customer Service

Benefit	Carrier	Phone Number	Website
Medical	Anthem BCBS	1-833-592-9956	www.anthem.com
Health Savings Account	Chard Snyder	1-800-982-7715	www.chard-snyder.com
Dental	Lincoln Financial Group	1-877-275-5462	www.lfg.com
Vision	EyeMed	1-844-225-3107	www.eyemed.com
Voluntary Life/AD&D	Lincoln Financial Group	1-877-275-5462	www.lfg.com
Voluntary Short & Long-Term Disability	Lincoln Financial Group	1-877-275-5462	www.lfg.com
Voluntary Accident, Critical Illness & Hospital Indemnity	Lincoln Financial Group	1-877-275-5462	www.lfg.com
401(k) Retirement Plan	John Hancock	1-800-294-3575	www.myplan.johnhancock.com
Employee Assistance Program (EAP)	Anthem BCBS	1-800-999-7222	www.anthemEAP.com
	Lincoln Financial Group	1-888-628-4824	www.GuidanceResources.com username: LFGSupport password: LFGSupport1
Medicare	My Benefit Advisor / Shawn McLean	1-757-663-4089	shawn.mclean@mybenefitadvisor.com
Open Enrollment	GIS	1-888-592-2681	—
Human Resources Benefit Team	Kendall Vegetation Services	1-877-949-1113	benefits@wakendall.com