

# **Benefits At A Glance**

Benefits	Plans Available	Details Found On
Each bundle includes the following benefits:  Medical (IBC) Prescription (CVS Caremark) Dental (United Concordia) Vision (Davis Vision)	Bundle 1: The Select Plan Bundle 2: The Choice Plan	Page 3-9
Health Savings Account	Available with The Choice Plan ONLY	Page 7
Life/Accidental Death & Dismemberment Benefits	Plan 1: Basic Life/AD&D Benefits (Company Paid) Plan 2: Voluntary Life/AD&D Benefits (Voluntary)	Page 10
Disability Insurance	Plan 1: Short-Term Disability Plan (Company Paid) Plan 2: Long-Term Disability Plan (Voluntary)	Page 11
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# Welcome!



Leo Parsons, President & COO and Jerry Parsons, Chairman & CEO

#### We're glad you're here.

Being part of CTDI means you are dialed in to a unique and exciting professional opportunity. One important way we demonstrate our commitment to you is via the benefits program showcased within this guide.

The CTDI benefits program makes you and us better. It gives you access to great core benefits, coverage options and protections, many of which are or can be extended to family members. What it does for you and others will depend on the choices you make at enrollment and beyond. What's in it for us? Well, we're at our best when you are too. It's that simple.

In this summary, you will find all of the information you need to make informed benefits selections. Take time to carefully review each plan and its offerings and how they may benefit you and your family. After reviewing your options, submit your benefit elections by the enrollment deadline.

Please take advantage of the resources identified on each page, as they provide the best avenues for making informed benefit decisions. You can also call Human Resources if you need any help along the way.

Thank you for being part of our CTDI family!

Leo A Careon Jung Carsond



## Plan Notes

#### Plan Year

The CTDI benefits Plan Year begins on April 1st and runs through the following March 31st. The Dependent Care Financial Assistance Plan and 401(k) Profit Sharing Plan are administered on a calendar year basis (January 1st through December 31st). This Benefits Guidebook outlines the benefits that apply to these plan years.

#### **Eliaibility**

Full-time employees and employees who are designated part-time plus working at least 30 hours per week become eligible to participate in the CTDI Employee Benefits Program on their 91st day of employment.

#### **Dependent Coverage**

In addition to electing coverage for yourself, you may also cover your eligible dependents. The following dependents are eligible for coverage under the following benefits: Medical/Prescription/Vision/Dental, Voluntary Life and AD&D Insurance, Voluntary Critical Illness Insurance, Voluntary Accident Insurance and the Employee Assistance Program:

- A legal spouse;
- Your children who are under the age of 26 regardless of student status, marital status, financial dependence or residence:
- Your children of any age who are mentally or physically disabled and dependent upon you for support (Enrollment requires approval by Independence Blue Cross).

#### **Program Elements**

The benefits provided through CTDI are broken into three types: 1) benefits provided at no cost, 2) benefits you may choose to enroll in and 3) voluntary benefits.

- 1) Benefits Provided at No Cost: These benefits are provided by CTDI at no cost to you.
- > Basic Life Insurance
- > Tuition Reimbursement Program
- > Paid Vacation

- > Basic Short-Term Disability
- > Monthly Incentive Plan (MIP)
- > Paid Sick/Personal Days

- > Employee Assistance Program
  - > Holidays
- 2) Benefits You May Choose to Enroll In: If you enroll in these benefits, you will share a portion of the cost with CTDI.
- > Medical/Prescription/Dental/Vision\*
- > Dependent Care Financial Assistance Plan > 401(k) Profit Sharing Plan

- 3) Voluntary Benefits: If you enroll in these benefits, you will be responsible for 100% of the benefit cost.
- Voluntary Life and AD&D Insurance
- Voluntary Long-Term Disability Coverage
- > Voluntary Critical Illness Insurance
- > Voluntary Accident Insurance
- > Voluntary Pet Insurance
- > Voluntary Personal and Auto Insurance

<sup>\*</sup>Please note: these benefits are bundled together.

## **Plan Notes**



#### **Annual Open Enrollment**

This is a period of time before the beginning of the Plan Year (April 1st) when you may:

- > enroll in benefits;
- > switch healthcare bundles;
- > change coverage levels (for example switching from Single coverage to Family coverage);
- > increase your Supplemental Life Insurance coverage, subject to carrier acceptance; and/or
- > cancel or discontinue benefits you currently have.

#### **Changing Your Benefits - Qualifying Life Events**

It is important to choose your benefits carefully. Your benefit choices are binding and will remain in effect through March 31<sup>st</sup>. The following "Qualifying Life Events" are the ONLY reasons you may change your benefits during the Plan Year:

- > Marriage
- > Birth, adoption or placement for adoption of an eligible child
- > Divorce, legal separation or annulment
- Loss or significant change of health coverage due to a change in your spouse's employment status
- > Death of a spouse or dependent
- > Loss of dependent status
- > Becoming eligible for Medicare during the year
- Sain or loss of eligibility for Medicaid, a Children's Health Insurance Program (CHIP) or a premium assistance subsidy under either of these programs (60-day special election period)
- Receiving a Qualified Medical Child Support Order (QMCSO)



You are required to report a Qualifying Life Event within 30 days of the event in order to make changes to your benefits. If you do not notify the Employee Benefits Service Center of the event and provide the requested documentation within the specified timeframe, you will not be able to make changes to your benefits until the next annual open enrollment period. Changes that are requested due to a "change of mind" without a Qualifying Life Event are not allowed until the next annual open enrollment period. For additional information regarding Qualifying Life Events, please call the Employee Benefits Service Center at 1-800-307-0230.

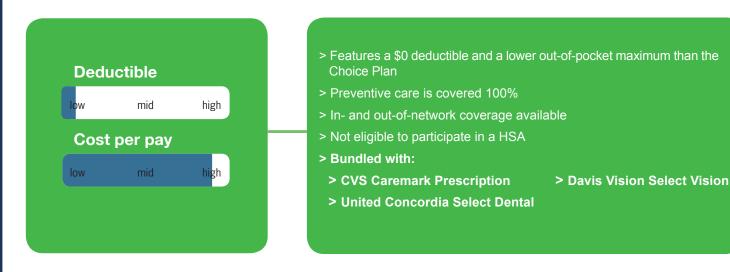


## **Medical Benefits**

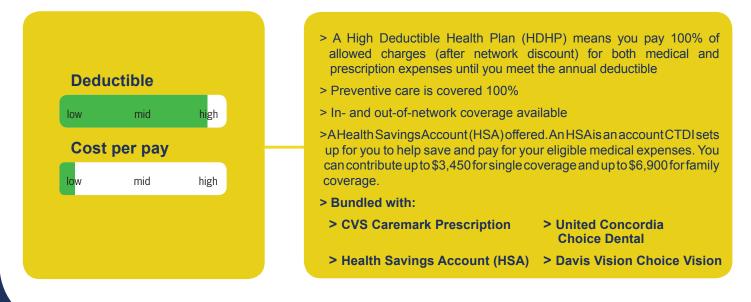
Medical insurance represents the largest aspect of the CTDI Employee Benefits Program. That is why we offer eligible employees two plan options; the Independence Blue Cross (IBC) Select and Choice Plans, which are designed to provide you and your family with access to quality, affordable health care. These plans offer you the freedom to receive care from many resources and covers a broad range of health care services and supplies, including office visits and hospitalization.

Please Note: When you enroll in the IBC Select or Choice PPO Plan, you are automatically provided with Prescription, Vision and Dental benefits at no additional cost to you. You will only be required to pay a small portion of the cost toward your medical coverage. Contributions are made on a weekly basis.

#### The Select Plan



## The Choice Plan



# **In-Network Medical Benefits**



Below is a summary of the benefit options offered and the coinsurance and copays associated with each plan. All coinsurance amounts apply after you meet your deductible. This chart is for illustrative purposes only. For specific plan details, please refer to your summary plan description (SPD). **The amounts listed below represent what YOU pay.** 

Panafit Panamintian	The Select Plan	The Choice Plan	
Benefit Description	In-Network	In-Network	
<b>Deductible</b> (Includes Prescription drugs found on page 6) Individual Family	\$0 \$0	\$2,000 \$4,000	
After Deductible, You Pay	0%	20%	
Out-of-Pocket Maximum Individual Family	\$1,500 \$3,000	\$4,000 \$8,000	
Lifetime Maximum	Unlimited		
Doctor's Office Visits Primary Care Physician Specialist	\$20 copay \$35 copay	20% after deductible 20% after deductible	
Preventive Care for Adults and Children	\$0 copay	0%, no deductible	
Pediatric Immunizations	0%²	0%, no deductible	
Routine GYN Exam/PAP	0%	0%, no deductible	
Mammogram	0%	0%, no deductible	
Maternity Care First OB Visit Hospital	\$20 copay \$100 copay per day of admission <i>(up to 3 days)</i>	20% after deductible 20% after deductible	
Urgent Care Clinic	\$35 copay	20% after deductible	
Emergency Room	\$150 copay (waived if admitted)	20% after deductible	
Ambulance Emergency Non-Emergency	0% 0%	20% after deductible 20% after deductible	
Inpatient Hospital Services	\$100 copay per day of admission (up to 3 days)	20% after deductible	
Inpatient Hospital Days	365	365	
Skilled Nursing Facility	0%	20% after deductible	
Hospice and Home Health Care	0%	20% after deductible	
Durable Medical Equipment and Prosthetics	0%	20% after deductible	
Outpatient Diabetic Education	0%	20% after deductible	
Mental Health Care – Inpatient	\$100 copay per day of admission (up to 3 days)	20% after deductible	
Mental Health Care – Outpatient	\$35 copay	20% after deductible	
Serious Mental Illness Care – Inpatient	\$100 copay per day of admission (up to 3 days)	20% after deductible	
Serious Mental Illness Care - Outpatient	\$35 copay	20% after deductible	
Substance Abuse Treatment – Outpatient/Partial Facility Visits	\$35 copay	20% after deductible	
Substance Abuse Treatment – Rehabilitation	\$100 copay per day of admission (up to 3 days)	20% after deductible	
Substance Abuse Treatment – Detoxification	\$100 copay per day of admission (up to 3 days)	20% after deductible	



## **Out-of-Network Medical Benefits**

Below is a summary of the amounts associated with out-of-network coverage. These are the amounts you will be subject to if you do not visit a participating provider. This chart is for illustrative purposes only. For specific plan details, please refer to your summary plan description (SPD). **The amounts listed below represent what YOU pay.** 

Panelit Description	The Select Plan	The Choice Plan	
Benefit Description	Out-of-Network*	Out-of-Network*	
Deductible Individual Family	\$500 \$1,000	\$4,000 \$8,000	
After Deductible, You Pay	20%	40%	
Out-of-Pocket Maximum Individual Family	\$3,000 \$6,000	\$8,000 \$16,000	

<sup>\*</sup>Out-of-network, non-participating providers may bill you for the difference between the Plan allowance, which is the amount paid by the Plan, and the provider's actual charge. **This amount may be significant.** 

When you visit a provider outside of the Independence Blue Cross network, you should be aware of the potential out-of-pocket costs you may experience.



The Select Plan	The Choice Plan	
Out-of-Network	Out-of-Network	
Office visits subject to deductible and coinsurance	You pay 100% of allowed charges (no network discount) for both medical and prescription expenses until you meet the annual deductible	
You pay 20% after deductible for Preventive Care	You pay 40% after deductible for Preventive Care	
Higher deductible	Higher deductible	
20% coinsurance	40% coinsurance	
Possible balance billing	Possible balance billing	
Claim forms	Claim forms	

# **Prescription Benefits**





With the costs of medication continually rising, it is important to have a prescription plan that offers affordability and convenience. For this reason, CTDI offers employees the CVS Caremark Plan.

Please note: Employees who elect medical coverage will automatically be enrolled in the CVS Caremark Prescription Plan.

Through this plan, you can have your prescriptions filled in three ways:

- 1. Visit a participating CVS Caremark retail pharmacy (up to a 30-day supply)
- 2. Use the Mail Order Pharmacy (up to a 90-day supply of a maintenance medication)
- 3. Pick up your 90-day supply at a CVS retail pharmacy

Your prescription benefits include different pricing structures or "tiers" that enable you to control cost based on the medications you select. Generic medications provide the lowest out-of-pocket cost. Brand name medications not included on the formulary provide the highest out-of-pocket cost. The specific copay amounts are listed below.

Brookintion Drugo	The Select Plan	The Choice Plan	
Prescription Drugs	In-Network	In-Network	
Retail (30-day supply) Generic Formulary Brand Name Non-Formulary Brand Name	\$10 copay \$30 copay \$50 copay	20% after deductible 20% after deductible 20% after deductible	
Mail Order (90-day supply) Generic Formulary Brand Name Non-Formulary Brand Name	\$20 copay \$60 copay \$100 copay	20% after deductible 20% after deductible 20% after deductible	

Please note: The Medical Plan and Prescription plan share the same deductible.



# **Health Savings Account**

(Choice Plan Participants Only)

If you enroll in the Choice Plan, you also have the opportunity to establish a Health Savings Account (HSA) with Empower. An HSA is an account you establish to pay for qualified health care expenses for you and your eligible dependents which is an excellent opportunity to save for future medical expenses or to simply save for your future. However, it is important that you understand how to contribute funds to an HSA, how to withdraw funds you have contributed and what, if any, tax implications are associated with your HSA fund.



# An HSA provides you with great tax savings:

- > Contributions made to your HSA via paycheck deductions are pre-tax;
- > Earnings growth through interest and investments is not taxed; and
- > Withdrawals from your account are tax-free, if used for qualified health care expenses.

#### **Program highlights:**

- > Contributions to your HSA can be made through payroll deductions or you can deposit money directly into your account:
- > You own the account and it's portable (you can take your HSA funds with you even if you leave);
- > Balances carry over from year to year (no "use it or lose it");
- > You can spend your funds on qualified health care expenses or save for your future

## **Getting started:**

- > If you choose the Choice plan during enrollment, you will be prompted to enroll in an HSA with Empower.
- > Once you elect to open an HSA, you will need to enter your desired weekly contribution.
- > After you enroll in your HSA, your Empower debit card will be mailed to you.
- > You will also receive materials in the mail that will help you better understand how your HSA works.

For the 2018 plan year, if you enroll in the Choice Plan, you can contribute up to the following amounts in your HSA:

- > \$3,450 if you elect Single coverage
- > \$6,850 if you elect Family coverage
- > If you are age 55 or older, but not enrolled in Medicare, you can contribute an additional \$1,000 catch-up contribution to your HSA.



## **Dental Benefits**

Good dental health is important to your overall well-being.
Routine dental care can even reduce your risk for conditions such as heart disease, diabetes and strokes. That is why CTDI is offering a dental plan that provides comprehensive coverage and accessibility. Your dental benefits are provided through United Concordia Companies, Inc. (UCCI).

Please Note: Employees who elect medical coverage will automatically be enrolled in either the United Concordia Dental Select or Choice PPO Plan.

Both Select and Choice plans provide coverage for preventive services, basic services, and major services. However, the Select Plan includes orthodontia coverage for dependent children up to age 19. The plans differ in how they share costs with you.

#### **Understanding UCCI PPO Dental Plans**

The United Concordia Dental PPO Plan allows for freedom of choice each time you need covered dental services. You can obtain services from any dentist or specialist within United Concordia's Advantage Plus network, or you can visit any dentist of your choice outside of the plan's network.

#### **Dental Plan Summary**

This chart highlights the benefits provided under each United Concordia Dental Plan. This chart is for illustrative purposes only. For specific plan details, please refer to your summary plan description (SPD). **The coinsurance amounts listed below represent what YOU pay.** 

	United Concordia Select Plan		United Concordia Choice Plan	
	In-Network Out-of-Network		In-Network	Out-of-Network
Annual Deductible Individual / Family	\$0 / \$0	\$25 / \$75	\$50 / \$150	\$50 / \$150
Annual Benefit Maximum per Person	\$2,000	\$1,000	\$1,000	\$1,000
Preventive Services <sup>1</sup>	0% (no deductible)	0% (no deductible)	0% tible) (no deductible) (no de	
Basic Care <sup>1</sup>	0%*	20%*	20%*	20%*
Major Services <sup>1</sup>	50%*	50%*	50%*	50%*
Orthodontia	50%	Not covered	Not covered	
Orthodontia Lifetime Maximum	\$2,000/person	Not covered	Not co	overed

<sup>&</sup>lt;sup>1</sup>Certain frequency and age limitations may apply. \*Services are subject to the annual deductible.

## **Looking for a Dental Provider?**

To locate a participating (in-network) provider near you, please call United Concordia at **1-800-332-0366** or visit **www.ucci.com** and select the **Advantage Plus National Network**.



## **Vision Benefits**

#### **Vision Plans**

Routine eye care is just as important as having regular medical check-ups. A good eye exam can not only test your vision, but can also detect some serious illnesses before other symptoms begin to surface. To this end, CTDI has chosen to offer a comprehensive vision plan through Davis Vision.

Please Note: Employees who elect medical coverage will automatically be enrolled in the Davis Vision Select or Choice Plan.

#### **Davis Vision Plans**

The Davis Vision Plans provide you with quality vision care coverage. Through these plans, you may receive both an eye exam and eyewear (lenses and frames or contact lenses) from a Davis Vision provider (in-network) or from any provider of your choice outside of the Davis Vision network (out-of-network). You will get the most from your vision benefits when you visit a participating Davis Vision provider. **Under the Select Plan, covered services may be received once every calendar year.** 

#### **Vision Plan Summary**

The chart below summarizes the benefits provided under each Davis Vision Plan. This chart is for illustrative purposes only. For specific plan details, please refer to your summary plan description (SPD).

	Davis Vision Select Plan		Davis Vision	Choice Plan
	In-Network	Out-of- Network	In-Network	Out-of- Network
Service Frequency Exams Lenses Frames Contacts	Every 12 Every 12	2 Months 2 Months 2 Months 2 Months	Every 12 Every 24	2 Months 2 Months 4 Months 2 Months
Exam	Covered 100%	Up to \$35 reimbursement	You pay: \$10	Up to \$40 reimbursement
Lenses (per pair) Single Vision Bifocal Trifocal Lenticular	Covered 100%	Up to \$75 reimbursement	You pay: \$25	Reimbursed up to: \$40 \$60 \$80 \$100
Davis Vision Frames (only available innetwork) Fashion Selection Designer Selection Premier Selection	<b>You Pay:</b> \$0 \$0 \$20	Not Applicable	<b>You Pay:</b> \$0 \$15 \$40	Not Applicable
Contact Lenses (in lieu of glasses)	Up to \$75 reimbursement	Up to \$75 reimbursement	Up to \$100 reimbursement	Up to \$225 reimbursement

## **Looking for a Vision Provider?**

To locate a Davis Vision Plan network doctor, visit www.ibx.com and using the "Find a Doctor" feature.

## Life and AD&D Benefits



Life and Accidental Death and Dismemberment (AD&D) insurance are important components of your financial security, especially if others depend on you for support. That's why CTDI provides you with Basic Life and AD&D Insurance at no cost to you. In addition, you have the option of purchasing Voluntary Life Insurance and Supplemental AD&D Insurance. Your Life and AD&D benefits are insured by Libery Mutual Insurance.

#### Basic Employee Life and AD&D Insurance

As an eligible employee, CTDI provides you with company paid basic life insurance in an amount that equals one times (1x) your annual earnings up to a maximum of \$250,000. You are also provided with an equal amount of AD&D insurance. This benefit is reduced by 65% at age 70 and by 50% at age 75. This benefit is provided at no cost to you. Make sure to complete your beneficiary designation on the Employee Benefits Service website.

#### **Voluntary Life and AD&D**

If you need additional financial protection, you may purchase Voluntary Life Insurance for yourself and your eligible family members. If you elect this coverage, you will pay 100% of the benefit cost.

Coverage For:	Purchase Amount	Benefit Maximum	Guarantee Issue Amount
Employee	\$10,000 increments	\$750,000	Lesser of \$300,000 or three (3) times earnings
Spouse	\$10,000 increments	The lesser of \$100,000 <u>OR 50</u> % of the employee coverage amount	\$20,000
Dependent Child(ren)	\$5,000 increments	\$10,000	\$10,000

#### **Guaranteed Issue Amount**

When you are first eligible, Voluntary Life Insurance is offered on a Guarantee Issue basis. This means you are automatically approved for a certain coverage amount.

#### Evidence Of Insurability (EOI)

If you elect a Voluntary Life and AD&D amount that exceeds the guaranteed issue amounts listed above, you will be subject to EOI.

EOI is an application process in which you provide information on the condition of your health or your dependent's health in order to be considered for coverage under the plan.

The completed EOI application requires review and approval by Liberty Mutual before coverage becomes effective.

Visit www.mylibertyconnection.com to complete the EOI application.



# **Disability Benefits**

CTDI offers disability benefits through Liberty Mutual Insurance to provide income protection in the event that an illness or injury prevents you from working. These benefits work with other benefits/sources of income to replace a certain percentage of your earnings. The disability payments you receive from our plans will generally be reduced by any benefits your are eligible to receive from Social Security, Workers' Compensation, Retirement Benefits or any other disability benefits available to you.



#### **Short-Term Disability**

If you cannot work due to disability, the Short-Term Disability coverage can provide income replacement for up to 26 weeks. **This coverage is provided at no cost to you.** The weekly maximum benefit is determined by your employment level as Employee (\$1,250 per week), Manager (\$2,000 per week), or Director (\$4,000 per week).

There is a seven (7) day waiting period. The waiting period is the number of consecutive days you must be totally disabled before the benefit would begin. The plan replaces 60% of your weekly salary for maximum of 26 weeks.

#### **Salary Continuation (Full-Time Salaried Employees Only)**

The Salary Continuation Plan provides full-time salaried employees with the income replacement benefits listed below during a covered disability. **This coverage is provided by CTDI at no cost to you.** 

<b>Benefit Description</b>	Benefit Overview
Benefit Amount	100% of your weekly salary (provided through payroll)
Benefits Will Be Paid	For a minimum of two weeks, plus one additional week of coverage for each full year of service completed with CTDI

Once you have exhausted your salary continuation benefits, you are eligible to apply for Short-Term Disability coverage for the remainder of your disability. Income replacement benefits will be provided for a total of 26 weeks if you remain disabled (Salary Continuation Plan and Short-Term Disability combined).

#### **Voluntary Long-Term Disability**

If your disability continues beyond 26 weeks, you may be eligible for benefits through Long-Term Disability coverage. You will pay 100% of the benefit cost if you elect this benefit.

#### The monthly maximum benefit is determined by your employment level:

Regular Full Time Employees: 60% of salary to a maximum of \$6,000 per month

Managers: 60% of salary to a maximum of \$8,000 per month

Directors/Executives: 60% of salary to a maximum of \$10,000 per month

Please note: Requests for LTD coverage outside the initial eligibility period will be subject to Medical Underwriting (EOI).

# **Voluntary Benefits**



#### **Voluntary Critical Illness Insurance**

Voluntary Critical Illness Insurance, provided through Allstate, can help bridge the gap between your actual expenses and the benefits that are available to you. The best part is that you can choose the right amount of coverage that will best meet your needs.

#### **Benefit Overview**

Critical Illness Insurance covers specific conditions such as cancer, heart attack or stroke. Plus, it:

- > Provides a lump-sum payment if you are diagnosed with a covered condition.
- > Helps you focus on your recovery instead of your finances.
- > Can supplement your savings to help pay for unexpected expenses related to a critical illness.

#### **Coverage Options**

- > Employee: You may elect either \$10,000 or \$20,000 of coverage.
- > Spouse: You may elect 50% of the employee coverage amount.
- > Dependent Child(ren): You may elect 50% of the employee coverage amount.

#### **Voluntary Accident Insurance**

Voluntary Accident Insurance is designed to provide you with cash payments in the event that you or a covered family member should have an accident. Coverage is available for both the injury sustained, as well as the medical treatment for the injury. This benefit is provided through Allstate.

## **Coverage Features**

- > Supplements existing medical coverage and pays benefits in addition to, not in lieu of, this coverage.
- > Benefits are available for the inpatient and outpatient treatment of a covered accident, including inpatient hospital admissions, follow-up treatments, exploratory surgery and physical therapy. There is no limit on the number of claims that can be filed.



- > Cash payments (based on a schedule of benefits) are available for specific injuries, including but not limited to: fractures, dislocations, burns, concussions, comas and emergency dental work. In addition, lump sum benefits are available if death or dismemberment is caused by the injuries sustained in a covered accident.
- > Coverage is guaranteed (no underwriting review and approval).
- > Premiums are paid through convenient payroll deductions.



# Dependent Care Financial Assistance Plan



A Dependent Care Financial Assistance Plan provides you with the ability to set aside money on a pre-tax basis for day care expenses for your child, disabled parent or spouse. Generally, expenses will qualify for reimbursement if they are the result of care for: your children, under the age of 13, for whom you are entitled to a personal exemption on your federal income tax return; and your spouse or other dependents, including parents, who are physically or mentally incapable of self-care. With a Dependent Care FAP, you will be reimbursed only for dependent care services you have already received and can only be reimbursed for funds that you have already had deducted.

The maximum annual amount you can deposit into the Dependent Care FAP is \$5,000. While CTDI will

match 10% of your contribution amount up to a maximum of \$500 per year, any amounts over \$5,000 (which include both employee deduction and CTDI contribution) are taxable according to IRS regulations.

To determine the amount you should contribute to the Dependent Care Financial Assistance Plan, review the eligible dependent day care expenses you incurred over the past few years. If you do not use all of the money in your account by the end of the plan year (December 31st), federal law requires you to forfeit the balance.

## **Eligible Dependent Day Care Expenses**

Expenses will generally qualify for reimbursement through the Dependent Care Financial Assistance Plan if they are the result of care for:

- > your children, under the age of 13, for whom you are entitled to a personal exemption on your federal tax
- > your spouse or other dependents, including parents, who are physically or mentally incapable of self care.

In addition, the dependent care services must enable both you and your spouse to work, seek employment and/ or attend school on a full-time basis. Eligible expenses include day care, nursery school or preschool, before and after school programs, summer day camp, and adult day care.

## Receiving Reimbursement

To receive reimbursement for the eligible dependent day care expenses you incurred, complete a claim form and submit it along with your itemized bill(s) or receipt(s) to the CTDI Corporate Human Resources Department. Forms can be obtained online at <a href="https://www.CTDIbenefits.com">www.CTDIbenefits.com</a>. Claims are processed on a monthly basis. In order to receive timely reimbursement, your signed claim form and related receipts or bills must be received by Human Resources on or before the established date for the month requested.

# **Voluntary Benefits**



#### **Employee Assistance Program (Magellan Behavioral Health)**

Just when you think you have life figured out, along comes a challenge. Whether those challenges are big or small, the Employee Assistance Plan through Magellan Behavioral Health is available to help you and your family find a solution and restore your peace of mind. Take advantage of the following services that are available to you and your family:

- > Basic clinical and work/life support by phone or web
- > Free face-to-face sessions with licensed behavioral clinicians
- > 24/7 phone consultation with a trained customer service representative and professional counselor
- > Monthly phone seminars on relevant topics
- > Unlimited access to online research and other key resources
- > Life events research and qualified referrals (i.e., child care providers)

To start taking advantage of the services and resources available through the EAP, please contact Magellan Behavioral Health at **1-800-432-4374** or visit **www.MagellanHealth.com**.

Any help you receive through the Employee Assistance Program is confidential. The program operates strictly within the bounds of national standards of confidentiality and will not share any of your personal information with CTDI.

#### **Voluntary Personal Auto and Home Insurance**

CTDI employees are eligible for discounted insurance through the Liberty Mutual Auto and Home Program. Coverage types available include auto, homeowners, renters, recreational vehicles, and more. To learn more, please call **1-800-524-9400** or visit **www.libertymutual.com/CTDI** for your free quote. Please mention client #122031.

#### **Voluntary Pet Insurance**

CTDI employees have the opportunity to receive a group discount on My Pet Protection through Nationwide. Nationwide plans cover thousands of medical problems and conditions related to accidents or illnesses for dogs, cats, birds, rabbits, reptiles and other exotic pets. You have the option to choose from 2 My Pet Protection plans based on the level of coverage required. Coverage is available for accidents, injuries, surgeries, and more depending on the plan you choose.

You can request a quote online by accessing the Nationwide website. Enrollment is completed directly with the carrier and can be done online at **www.petsnationwide.com** or via the phone at **1-888-899-4874**.





## Additional Benefits

#### **Tuition Reimbursement Program**

CTDI encourages professional and technical development through its Tuition Reimbursement Program. This program covers job-related courses taken outside working hours at accredited colleges and universities.

Employees working 30 hours or more per week are eligible for this benefit upon the completion of 90 days of employment. This program provides a maximum calendar-year reimbursement of \$7,500 when pursuing your undergraduate degree and \$12,000 if pursuing Graduate degree (including the cost of tuition, books, registration and lab fees). You will receive reimbursement based on the final grade you receive: A = 100%, B = 90% and C or Pass for Pass/Fail courses = 80%. In order to receive reimbursement, you must submit transcripts/grade reports and receipts.

Prior approval must be obtained before attending a course. If you are interested in taking advantage of the benefits available through the Tuition Reimbursement Program, please complete both the Tuition Education Assistance Request and Statement of Intent forms located in the Library on the Benefits website.

#### **Holidays**

CTDI observes the following eight (8) holidays:

- > New Year's Day
- Independence DayLabor Day
  - > Christmas Eve

- > Good Friday

> Christmas Day

- > Memorial Day
- > Thanksgiving Day

#### Paid Vacation and Paid Sick/Personal Days

Employees are eligible for paid vacation and paid sick/personal days following 90 days of employment, according to the schedule below:

Anniversary	Paid Vacation Days Accrued
6 Months	1 Week (5 Days)
1-4 Years	2 Weeks (10 Days)
5-14 Years	3 Weeks (15 Days)
15-24 Years	4 Weeks (20 Days)
25 or More Years	5 Weeks (25 Days)

Anniversary	Paid Sick/Personal Days Accrued	
<b>3 Months</b> (If hired prior to October 1st)	1 Day	
1 Year	3 Days	
2 or More Years	5 Days	



# 401(k) Profit Sharing Plan



CTDI realizes the importance of saving towards retirement and offers employees a 401(k) Profit Sharing Plan to assist you in reaching your long-term financial goals.

#### **Eligibility**

You are automatically enrolled in the CTDI 401(k) Profit Sharing Plan if you are a CTDI employee, are at least 18 years of age and have completed one month of employment. Employees 18 years or older will be automatically enrolled the first of the month after completion of one month of service.

#### **Automatic Enrollment**

- > Employees who meet the eligibility rules will automatically be enrolled in the plan.
- > A deferral of 5% pay will automatically be withheld from your paycheck before taxes.
- > Deferrals will be invested in the appropriate default fund.
- > Automatic deferrals will continue until you change your deferral.

#### 401(k) Elected Deferrals

- > You may defer a percentage (%) of your pay or a specific (or flat) dollar amount to the 401(k) Profit Sharing Plan.
- > Deferrals to the plan are taken from your paycheck before federal and most state and local taxes are calculated (pre-tax).
- > The maximum amount you can defer is limited by the IRS.
- > Catch-Up Deferrals: You may defer an additional amount to the plan if you are age 50 or older and have reached the annual IRS contribution limit.
- > The money you defer into the 401(k) Retirement Plan is immediately 100% vested. This means you automatically own all of the deferrals you made to the plan.

## **Company Matching Contributions**

CTDI will make company matching contributions to your 401(k) Profit Sharing Plan account. The company match is currently 10% of your contribution up to the first 5% of your pay that you contribute to the plan effective with quarter following three months of service.

#### **Rollover Deferrals**

CTDI allows money from other eligible retirement plans to be deferred into the 401(k) Retirement Plan and Trust. If you would like to "rollover" your retirement savings from another plan, please contact Empower Retirement at 1-800-338-4015 or visit www.empower-retirement.com/participant.

## **Investment Options**

There are a variety of investment options available under the 401(k) Profit Sharing Plan.

The information presented above only highlights the benefits available to you through the 401(k) Profit Sharing Plan. If there is any discrepancy between the information presented above and official Plan Documents, the language of the official Plan Documents shall prevail as accurate.



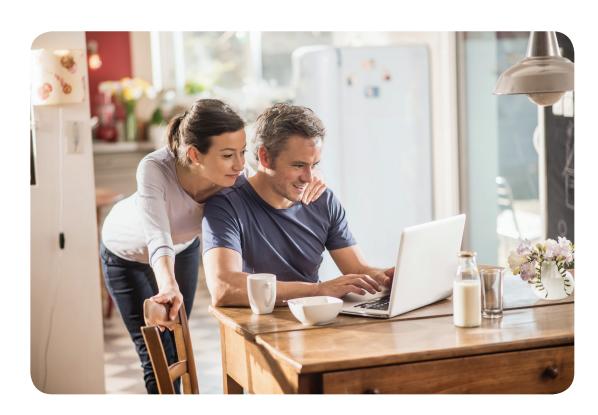
## When & How to Enroll

Once you have reviewed all of your benefit options, you may log on to **www.CTDIbenefits.com** to elect your benefits. You have access to the online enrollment system 24 hours a day, 7 days a week from any computer that has internet access. This gives you the opportunity to discuss your benefit options with your family members during the enrollment process.

Once you log in, you will find a library of helpful information, detailed information about each plan, and payroll contributions you can expect for each benefit listed in this guidebook.

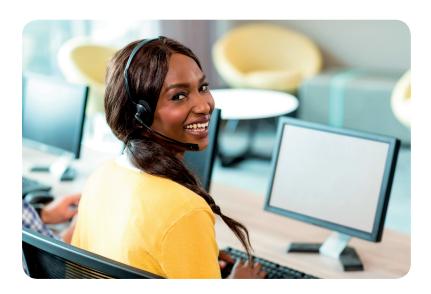
#### Here's how it works:

- > Visit www.CTDlbenefits.com
- > To log in, enter your 6-digit Employee ID Number (including any leading zeros).
- > Your default password is the last six digits of your Social Security Number (without dashes or spaces).
- > Before you begin the enrollment process, have the *Social Security Number*, *Date of Birth*, and *any appropriate documentation* ready for yourself and any dependent(s) that you are newly enrolling and/or beneficiary(ies) that you are adding.





# **Need Help Enrolling?**



If you need assistance submitting your benefit elections or have general benefit questions, please call the Employee Benefits Service Center and speak with a Benefits Specialist.

## When should you call the Employee Benefits Service Center?

#### Call a Benefits Specialist to:

- > Find out if particular services are covered under a benefit plan you are considering.
- > Receive help with your online enrollment.
- > Learn more about CTDI's benefit bundles.
- > Get answers to general benefit questions and assistance with claim issues.
- > Update or change your life insurance beneficiary designation.

To reach a benefits specialist, call the Employee Benefits Service Center at **1-800-307-0230**, Monday–Friday 8:30 AM – 5:30 PM.

# Finding A Provider



#### Finding a Medical Provider

## Independence

You can search for participating physicians, hospitals, and providers through Independence Blue Cross's (IBC) website at www.ibx.com. IBC's website also allows you to search by zip code, miles willing to travel, city and state or county and state.

#### **Employees residing in SE PA\***

- Call 1-215-557-7577
- Visit www.ibx.com and use Group Number 10042750

#### Employees residing outside of SE PA\*

- Call 1-800-275-2583
- Visit www.ibx.com and use Group Number 10042751



You can search for participating providers at www.caremark.com or by calling 1-844-203-6997.

#### Finding a Dental Provider

## UNITED CONCORDIA®

You can search for participating providers at www.ucci.com. United Concordia's website also allows you to search by zip code, miles willing to travel, city and state or county and state.

Employees can also call **1-800-332-0366** for assistance in locating a participating provider. Please reference Group Number 252697000.

#### Finding a Vision Provider



To locate providers participating in the Independence Blue Cross/Davis Vision networks, visit www.ibx.com.

#### **Employees residing in SE PA\***

- Call 1-215-557-7577
- Visit www.ibx.com and use Group Number 10042750

#### **Employees residing outside of SE PA\***

- Call 1-800-275-2583
- Visit www.ibx.com and use Group Number 10042751

\*SE PA refers to employees residing within the following counties in Pennsylvania: Bucks, Chester, Delaware, Montgomery and Philadelphia. SE PA medical plan participants utilize the Personal Choice network. Anyone living outside of these counties is considered to be "out-of-area" and utilizes the national BlueCard PPO network.



Questions Regarding	Call	Phone/Fax Number	Online and/or Mailing Address	Group/Policy Number
General eligibility, enrollment, deductions, plan options, life event changes, important forms, general benefits information, COBRA	The Employee Benefits Service Center	1-800-307-0230 (p) 1-866-406-6946 (f)	www.CTDlbenefits.com 1200 Abington Executive Park, Clarks Summit, PA 18411	N/A
Medical Benefits	Independence Blue Cross	1-215-557-7577 (SE PA)* 1-800-275-2583 (out-of-area)	www.ibx.com	10042750 (SE PA)* 10042751 (out-of-area)
Prescription Benefits	CVS Caremark	1-844-203-6997	www.caremark.com	RxBIN: 004336 RxPCN: ADV RxGRP: 9151014609
Health Savings Account	Optum	1-866-234-8913	www.optumbank.com	N/A
Vision Benefits	Independence Blue Cross/Davis Vision	1-215-557-7577 (SE PA)* 1-800-275-2583 (out-of-area)	www.ibx.com	10042750 (SE PA)* 10042751 (out-of-area)
Dental Benefits	United Concordia	1-800-332-0366	www.ucci.com	252697000
Basic Life and AD&D Insurance	Liberty Mutual	1-800-713-7384	www.mylibertyconnection.com	SA3-830-510136-01
Voluntary Life and AD&D Insurance	Liberty Mutual	1-800-713-7384	www.mylibertyconnection.com	SA3-830-510136-01
Short-Term Disability	Liberty Mutual	1-800-713-7384	www.mylibertyconnection.com	GD3-830-510136-01
Salary Continuation	CTDI Corporate Human Resources	610-436-5203	benefits@ctdi.com	N/A
Voluntary Long-Term Disability	Liberty Mutual	1-800-713-7384	www.mylibertyconnection.com	GF3-830-510136-01
Dependent Care Financial Assistance Plan	CTDI Corporate Human Resources	610-436-5203	benefits@ctdi.com	N/A
Voluntary Critical Illness & Accident Insurance	Allstate	1-800-521-3535	allstatebenefits.com/ mybenefits	N/A
Voluntary Personal Auto and Home Insurance	Liberty Mutual	1-610-548-7150 (DE, NJ, PA) 1-800-524-9400 (out-of-area)	www.libertymutual/CTDI	122031
Voluntary Pet Insurance	Nationwide	1-888-899-4874	www.PetsNationwide.com	N/A
401(k) Profit Sharing Plan	Empower Retirement®	1-800-338-4015	www.empower-retirement.com/ participant	92079-01
Tuition Reimbursement Program	CTDI Corporate Human Resources	610-436-5203	benefits@ctdi.com	N/A
Employee Assistance Program	Magellan Behavioral Health	1-800-432-4374	www.MagellanHealth.com	N/A

<sup>\*</sup>SE PA refers to employees residing within the following counties in Pennsylvania: Bucks, Chester, Delaware, Montgomery and Philadelphia. SE PA medical plan participants utilize the Personal Choice network. Anyone living outside of these counties is considered to be "out-of-area" and utilizes the national BlueCard PPO network.



#### ABOUT THIS BENEFITS SUMMARY

This Benefits Guidebook describes the highlights of the CTDI Employee Benefits Program in non-technical language. It is meant to assist you in making your benefit elections and is not meant to take the place of the official plan documents. Your specific rights to benefits under this program are governed solely, and in every respect, by the official documents and not the information contained within this Benefits Guidebook. If there is any discrepancy between the descriptions of the program elements as contained within this Benefits Guidebook or other benefits enrollment materials you receive and the official plan documents, the language of the official plan documents will govern. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Eligibility for any benefit plan is determined by applicable plan documents and policies. You should be aware that any and all parts of the CTDI Employee Benefits Program may be changed in the future to meet Department of Labor regulations, Department of Health and Human Services guidelines, Internal Revenue Service rules or otherwise as determined by the plan trustees and their sponsor, CTDI.

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CTDI Denver, CO Branch