

Employee Benefits Guide







Each year, RiverMead conducts a comprehensive review of our benefits to ensure we provide the best options to meet the needs of our employees and their families.

The 2025 Benefits Guide is a vital resource that summarizes the employee benefits and coverage options available to you. Offering an exceptional healthcare benefits package is fundamental to our values and demonstrates our commitment to you as a member of the RiverMead team. We encourage you to become familiar with the benefits offered and review these options carefully to choose the best coverage for you and your family. We also hope you take advantage of your benefits package's additional benefits and incentives.

RiverMead is committed to providing a diverse benefit offering that encourages a healthy lifestyle, reduces disease risk, and enhances the overall quality of life. We strive to promote a culture of health, employee well-being, and a positive work environment. RiverMead takes extraordinary pride in supporting the needs of our employees through our benefits and compensation programs throughout their careers.

As a reminder, you can enroll in benefits as a new hire, during open enrollment at the end of the calendar year, or when you experience a qualifying life event impacting your coverage. An example of a qualifying event may be birth, divorce, death, or loss of coverage elsewhere. If you are eligible for benefits and choose to decline health insurance coverage, you must waive the insurance election as part of open enrollment.

Please contact Human Resources anytime during the year with questions regarding your benefits. Wishing you and your family health, wellness, and all the best throughout 2025.

Carrie James

Director of Human Resources



Julie Simo, Controller; Jaime Conley, CFO/COO; Brianna Baron, Accounting Coordinator; Carrie James, Director of Human Resources; Kate Wasserloos, Human Resources Manager; Paris MacKeigan, Human Resources and Finance Coordinator

Eligibility

Employees

RiverMead offers a comprehensive benefits package to all regular full-time employees (i.e. those scheduled for 32 or more hours per week) as detailed in this guide. Employees who work less than full-time (less than 32 hours per week) are entitled to certain benefits in accordance with plan documents.

RiverMead offers a health insurance plan to all regular, full-time employees (i.e. those scheduled for 32 or more hours per week) and to those who may be eligible in accordance with the provisions outlined under the Patient Protection & Affordable Care Act of 2010. Eligibility for coverage for newly hired employees begins on the first of the month following one (1) full calendar month of employment.



Eligible Dependents

Eligible dependents include your spouse* and dependent children up to age 26, regardless of the dependent's financial dependency, student status or employment status. Disabled children up to any age and dependents who qualify as a dependent under the Internal Revenue Code are also covered regardless of age.

*Employee's with a spouse that is eligible to participate in another qualified health plan, such as their own employer plan will pay the surcharge rate. See employee deductions for more information.

When to Enroll

The Open Enrollment period begins mid November each year. You must submit your enrollment by the established deadline each year. Election forms are required whether or not you wish to continue at your current level of coverage, change your level of coverage or waive your coverage altogether.

Once the Open Enrollment period ends, you will not be able to enroll in RiverMead's insurance plan(s) until the next annual open enrollment period unless you experience a bona fide qualifying event. Please contact Human Resources for more information regarding what constitutes a qualifying event.

Qualified Life Event Updates

You are eligible to enroll yourself and your eligible dependents in our group plans when you meet the eligibility requirements. Generally, the coverage you elect for yourself and your dependents may only be changed during the next annual enrollment period, unless you qualify to make a mid-year change in coverage due to a qualifying event prescribed under HIPAA (the Health Insurance Portability & Accountability Act of 1996) and the Internal Revenue Code § 125.

Qualified Life Events include:

- A change in your employment status, or your spouse's employment status that affects eligibility for benefits;
- A change that causes your dependent children to become ineligible;
- A change in your marital status (such as marriage or divorce);
- A change in your spouse's employment status;
- A change in the number of your dependents due to birth, adoption or death;
- Significant cost increases or benefit reductions in this plan, or your spouse's open enrollment (significant increase not necessary); or
- Loss of your coverage or your dependent's coverage under your spouse's plan due to loss of eligibility under that plan.



Full-Time Benefits Snapshot

Medical Insurance Health Plans Inc.

Pharmacy Benefits Liviniti

Flexible Spending Accounts Health and Dependent Care flexible spending accounts (FSAs) administered

(FSA) by Flores.

Dental Insurance Northeast Delta Dental & Flores Vision hardware reimbursement program.

Voluntary Vision Ameritas Voluntary Vision

Disability InsuranceBoth Short and Long Term Disability insurance is through The Standard.

Life and Accidental Death and Life and AD&D insurance coverage is through The Standard. Now is a good

Dismemberment time to update your beneficiary information with Human Resources.

Please contact Human Resources for more information regarding any of these benefit plans.

Employee Deductions

RiverMead's Insurance plans are effective January 1, 2025 through December 31, 2025. 2025 biweekly premiums are listed below.

HPI EPO Plan		
Coverage Level	Employee Contribution	
Employee Only	\$98.03*	
Employee & Spouse	\$205.85	
Employee & Spouse (with surcharge)	\$286.72	
Employee & Children	\$186.24	
Employee & Family	\$294.06	
Employee & Family (with surcharge)	\$374.93	

^{*}In accordance with Affordable Care Act, a reduced premium rate for Employee Only Coverage will be provided to employees who earn \$18.11/hour or less in wages.



Northeast Delta Dental		
Coverage Level	Employee Contribution	
Employee Only	\$0.00*	
Employee & Spouse	\$24.54	
Employee & Children	\$33.47	
Employee & Family	\$57.94	

^{*}All employees are **required** to participate in the Dental plan and RiverMead will continue to subsidize the full amount. The only cost is for those who wish to add dependents to the plan.

Ameritas Voluntary Vision		
Coverage Level Employee Contribution		
Employee Only	\$3.46	
Employee & Spouse	\$7.44	
Employee & Children	\$6.02	
Employee & Family	\$10.01	

Paid Time Off

Regular full-time and part-time employees are eligible to accrue paid time off (PTO) beginning on their first day of employment. This paid time off may be used for vacation days, personal days, sick days and RiverMead recognized holidays.

The following represent RiverMead recognized holidays:

New Year's Day

(January 1)

Memorial Day

(last Monday in May)

Juneteenth (June 19)

Independence Day

(July 4)

Labor Day

(first Monday in September)

Indigenous Peoples' Day (second Monday in October)

Thanksgiving

(fourth Thursday in November)

Christmas

(December 25)



For staff who work a Monday through Friday work schedule, holidays that fall on Saturday will be celebrated on Friday; holidays that fall on Sunday will be celebrated on Monday. For all other staff, the recognized holiday will be the actual holiday.

** Note: PTO may <u>not</u> be used until the successful completion of the employee's introductory period (generally 90 days but may be extended at the request of the Department Manager due to performance related concerns).

Employees <u>must</u> use PTO from their bank of hours when taking time off. Employees may <u>not</u> use PTO hours before such hours have accrued. PTO will accrue for all regular hours worked per payroll period, based on length of service. Available PTO will be used to bring employees up to their scheduled hours whenever the employee's hours fall below their schedule. Up to 360 hours of PTO may be carried over each year. Any hours in excess of 360 hours in a pay period will be forfeited.

Bereavement Leave

All regular full-time (i.e. those scheduled for 32 or more hours per week) and regular part-time (i.e. those scheduled for 16 to 31 hours per week) employees may receive up to three (3) days of paid Bereavement Leave, in the event of a death in their immediate family. To request bereavement leave, employees must complete a "Leave of Absence Request" form. For purposes of this benefit, "immediate family" is defined as spouse, child, mother/father, mother-in-law /father-in-law, brother/sister, brother-in-law/sister-in-law, or grandmother/ grandfather. At the discretion of the Director of Human Resources, other relatives in the household or a non-related member of the household may also be considered as an immediate family member. Employees will be paid for the number of hours they normally are scheduled to work. For more information, please contact Human Resources.

Jury Duty Leave

RiverMead encourages all employees to fulfill their civic responsibilities by serving on jury duty when required. Regular full-time employees (i.e. 32 or more hours per week) may request up to one (1) week of paid Jury Duty Leave. For more information, please contact Human Resources.

Medical Plan

Health Plans, Inc

The Health Plans Inc. National EPO Plan (Exclusive Provider Organization) uses the Harvard Pilgrim Regional Network and the United Healthcare National Network, providing access to a broad range of in-network providers. This plan offers flexibility with no requirement to select a primary care provider (PCP) and no need for referrals to see specialists. Full-time employees working 32 hours or more per week are eligible for medical insurance. New employees are eligible for medical benefits on the first of the month following one full calendar month of employment. For more detailed information on the benefits covered by the plan and the terms and conditions of coverage, please refer to the summary plan description and plan documents.

HPI EPO Plan		
Network	Harvard Pilgrim Regional Network United Healthcare National Network No Referral Needed	
Plan Year Deductible	\$3,000 Individuc	ıl, \$9,000 Family
Out-of-Pocket Maximum	\$6,600 Individual	I, \$13,200 Family
Physician Services Primary Care Office Visit Specialist Office Visit	\$25 copay, then \$50 copay, then	
Preventive Services Includes preventive Mammograms, Papanicolaou (Pap), Prostate Specific Antigen (PSA) tests and colorectal screenings.	Plan pays 100%	
Radiology Services Physician's Services / Office Visit Outpatient Facility Advanced Radiology (MRI, MRA, CAT, PET)	\$25 copay, then plan pays 100% Plan pays 100% Plan pays 100%^	
Inpatient Hospital Services	Plan pays 100% [^]	
Outpatient Services Outpatient Facility Services Outpatient Professional Services	\$75 per facility visit deductible, then plan pays 100% Plan pays 100%	
Emergency Medical Services Emergency Room Urgent Care Facility	\$150 copay, then plan pays 100% \$75 copay, then plan pays 100%	
Mental Health/Behavioral/Substance Abuse Inpatient Outpatient - Physicians Office Outpatient - all other services	Plan pays 100%^ \$25 copay, then plan pays 100% Plan pays 100%^	
Virtual Care through Doctor on Demand Urgent Care Virtual Care Behavioral Health Virtual Care Other Special Needs Home Health Care Rehabilitation/Habilitation Services Skilled Nursing Care Durable Medical Equipment	\$10 copay \$10 copay Covered 100%^ Covered 100%^ Covered 100%^ Covered 100%^	
Hospice Services	Covered 100%^	
Home Delivery (Mail-order) Pharmacy Generic Preferred Brand Non-preferred Brand	30-day supply \$10 \$30 \$50	90-day supply \$20 \$60 \$100

 $This \ benefit \ summary \ is \ intended \ only \ to \ highlight \ your \ benefits \ and \ should \ not \ be \ relied \ upon \ to \ fully \ determine \ coverage.$

^{**}Note that services where your plan deductible applies **first** are denoted with a caret (^)**

Benefit copays/deductibles always apply before plan deductible.

Additional Medical Plan Info

- EPO Plan -

The EPO plan allows you access to in-network care with the Harvard Pilgrim Provider network and coverage outside of the region through the United Healthcare Options PPO network. There is no need to choose a primary care provider (PCP) or get referrals to see a specialist. Preventive care is covered 100% in-network. Please note that you will save money when you stay in-network. You may be required to pay the full cost of out of network care, except for emergency services.

Your plan includes programs for your health:

- Manage diabetes, heart, lung or other chronic conditions by enrolling in HPI's complex condition management program to work with a dedicated nurse who can help you improve well being.
- Breathe easier get help managing your asthma and avoiding your triggers to reduce missed days at work or school.
- You don't have to face serious illness alone you and your family will get personal support from an experienced nurse care manager to help you get the right care at the right time.

Call the number on the back of your ID card for more information.

Convenience Care and Urgent Care

As you know, in a medical emergency, you should always dial 911 or go to the nearest Emergency Room. When the condition is not life threatening and does not require emergency treatment, your plan provides options that are typically more convenient resulting in less wait time for care and lower out of pocket co-pays and overall cost of treatment than the ER.

Urgent Care and Convenience Care Clinics are a popular alternative for non-emergency care. Their medical staff treat non-life-threatening conditions such as broken bones, sprains, cuts, bronchitis, sinus infections, eye and ear infections, fevers, etc. and conditions that need immediate care including labs and x-rays.

For comparisons, an Emergency Room visit is a \$150 co-pay, a visit to a Convenience Care facility (for instance, CVS Minute Clinic) co-pay is only \$25 and an Urgent Care Clinic (for example, Convenient MD or Concentra) co-pay is \$75.

Doctor on Demand

For HPI members, Doctor on Demand can treat many common medical conditions through live online video. See and talk to a board-certified medical provider from your home or office through your smartphone, tablet or computer. You and your family get a convenient way to receive care. There is a \$10 co-pay for this service. You need to download the app now and then you will be prepared when someone in the family comes down with a UTI, skin rash, pink eye or influenza. Most prescriptions can be instantly sent to your nearest pharmacy. Go to www.doctorondemand.com to start your visit on your computer or to download the app on your smartphone. You will save yourself time and money when you use Doctor on Demand or stand alone Urgent Care facilities.

Doctor on Demand also offers behavioral health care. The most common conditions that Doctor on Demand treats are depression, relationship issues, workplace stress, social anxiety, addiction, trauma and loss. The service is not meant for crisis or emergency situations. Anyone experiencing a crisis or emergency should call 911 or go to the nearest emergency room. To get started, visit doctorondemand.com to set up an account, or download the app on your smartphone.

Additional Medical Plan Info (cont.)

HPI's My Plan

For 24/7 online access to your plan and account details, sign up for HPI's My Plan. With My Plan you will be able to find a primary care provider, view, print or order your member ID card, review your claims, check your benefits, request claim reimbursements, view or print applicable tax forms and more. To register for My Plan, go to the website listed on the back of your member ID card (it will be at the top). Click on the "Members" section and the link to "Get Registered." Enter your information to create your username. Dependents will need to have the five-digit home zip code and last four digits of the employee's social security number to register.

Manage your plan online With My Plan

24/7 access to your plan and account details

Register in Minutes!

- Go to the website listed on the back of your member ID card (it will be at the top)
- Visit the Members section and click the link to Get Registered
- Enter your information to create your username and password

If you are a dependent, be sure to have the five-digit home ZIP Code and the last four digits of the employee's (plan subscriber's) social security number.

Access all of your account details* in one secure location anytime, anywhere!

- · Review your claims
- Check your benefits
- · Access your prescription drug plan
- Search your provider network
- · Download a report of your claims

* You will have access to details applicable to your plan. Please note,

Request claim reimbursements

not all of the items listed above apply for all plans.

- View, print or order your member ID card
- View or print applicable tax forms
- Find a Primary Care Provider (PCP)
- View your health spending account details



On your mobile device!





Have questions? Contact HPI Customer Service at the phone number or website listed on the back of your member ID card.



How To Register



1 Go to doctorondemand.com/health-plans-inc (or download the Doctor On Demand app), and click the **Register** button.





Scan code to download the Doctor On Demand app

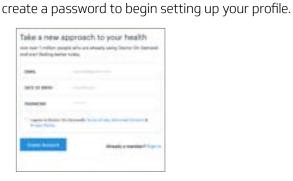
3 Enter your name, phone number/type, and gender, then click **Continue**.



5 Enter your HPI member ID number, then click **Submit**.







4 <u>Important:</u> In the Health Insurance screen, type and select the full name "<u>Health Plans, Inc.</u>" then click **Continue**.



6 The screen will confirm that your insurance has been accepted and display your copayments (if applicable).



For assistance with website/app, billing, or other issues, contact Doctor On Demand Member Support at 800-997-6196 or support@doctorondemand.com.

For questions about your plan benefits or eligibility, contact HPI Customer Service at the phone number or website on the back of your member ID card.



See a doctor now, wherever you are.



Access to a licensed professional at your fingertips

It's fast and easy

- · Connect virtually with a physician in minutes1
- · Video visits held online or through the mobile app
- Pay only your office visit/PCP-level cost share or less.
 Refer to your plan Summary of Benefits for your specific copay amount.
- Referrals are not required
- Paperless prescriptions are sent directly to your pharmacy²

Medical Urgent Care Visits

Doctors can diagnose, treat and write prescriptions for many conditions, including:

- · Coughs/colds/flu
- Sore/strep throat
- · Pediatric issues
- Sinus and allergies
- · Nausea/diarrhea
- · Rashes and skin issues
- · Women's health
- Sports injuries

Behavioral Health Visits³

Psychologists support you using talk therapy, while psychiatrists will also look for biological imbalances and can prescribe medicine as part of a treatment plan.⁴

- ¹ Availability more limited during overnight hours.
- ² Doctor On Demand physicians do not prescribe Schedule I-IV DEA controlled substances, and may elect not to treat or prescribe other medications based on what is clinically appropriate.
- ³ Doctor On Demand is not meant for crisis or emergency mental health situations. If you are experiencing a crisis or emergency, call 911 or go to your nearest emergency room. Psychology visits are typically available within 48 hours to one week and psychiatry visits are typically available within 2–3 weeks.
- ⁴ Doctor on Demand psychiatrists can prescribe medications when necessary for treatment; however, Doctor On Demand does not prescribe any controlled substances. In these cases, alternatives with less potential for abuse and dependence may be offered.



- **1.** Download the app on your mobile device or access doctorondemand.com/health-plans-inc
- **2.** Create your account and enter insurance (choose Health Plans, Inc.) and pre-consult information.
- **3.** Complete a questionnaire of current symptoms and medical history.
- **4.** Pay cost-share via app or website.
- **5.** Consult with a Doctor On Demand board certified provider.
- **6.** Receive email follow up after the visit to share with your PCP, or request that it be sent directly to your PCP.

The details of your consultation will not be forwarded to your PCP without your consent.





or web video visits at doctorondemand.com/health-plans-inc



Scan code to download the Doctor On Demand app



Have questions about Doctor On Demand? Contact Member Support at 800-997-6196 or support@doctorondemand.com.



Prescription Drugs



FirstChoice – FirstChoice is the preferred pharmacy network of Liviniti, offering access to reduced prescription costs at 50,00+ participating FirstChoice pharmacies across the nation. Participating FirstChoice pharmacies offer, on average, lower cost on medications for covered drugs than a standard (non-preferred) pharmacy. FirstChoice consists of both independent (local/community) and retail (national/regional) pharmacies Participating FirstChoice pharmacies also offer the added benefit of filling a 90 day supply of medications. Non-FirstChoice pharmacies (Walgreens) are limited to a 30 day supply. Please see the Liviniti flyer for more details.

Liviniti Home Delivery – Healthdyne Mail Order Pharmacy manages the mail order option with Liviniti. For further information go to liviniti.healthdyne.com or call (855) 772-9384.

Variable Copay – Variable Copay utilizes manufacturer-provided coupons to significantly reduce the cost on eligible high cost brand and specialty medications. With Variable Copay, your out of pocket costs for prescription drugs may be reduced or eliminated by a drug manufacturer's coupon. The remaining drug coupon dollars are used to offset the costs to the employer. Please see the Liviniti flyer for more details.

Liviniti Member Portal – the Liviniti Member Portal provides a variety of helpful features that make it easy t manage all aspects of your prescription drug benefit. With this tool you may see your benefit details, manage your account and prescription history, locate a pharmacy, look up a drug price and request a new ID card. To access your Member Portal:

- 1. Visit <u>liviniti.com/members</u>
- 2. Login to the Pharmacy Benefits Portal with your credentials. Note: First time users need to create an account by following the hyperlink on the Member Portal page

Price Check Tool – The Drug Pricing Tool allows members to price their prescription drugs at any pharmacy in a few easy steps. To access the Drug Pricing too, please go the Member Portal mentioned above or check the Liviniti flyer for more details.

- 1. Visit <u>liviniti.com/members</u>
- 2. Login to the Pharmacy Benefits Portal
- 3. Select Pharmacy Locator on the top navigation
- 4. Enter Zip Code
- 5. Select Search Radius
- 6. Locate your desired pharmacy and select the Price Check option
- 7. Enter drug name, desired quantity and days supply for the drug
- 8. Select Search



Liviniti Mobile App

Quick access to your prescriptions

For fast, on-the-go questions about your pharmacy benefits, the answers can fit in the palm of your hand with the Liviniti mobile app.

The mobile app has all the information and resources you would expect, in one convenient place. Use your smartphone to track and manage your prescriptions whenever you want. The free mobile app is a one-stop resource that keeps your pharmacy benefits always within your reach.

- Digital ID Card
- Prescription History
- Drug Price Check
- Drug Formulary Search
- Pharmacy Locator
- Variable Copay Enrollment
- Prior Authorization Reviews
- Plus More



Favorite Features

Drug Formulary Search

A formulary is a list of generic and brand name prescription drugs covered by your health plan. You can now quickly search for covered drugs inside the mobile app. Choose generics and preferred brands to save the most money.

Variable Copay Enrollment

The Variable Copay™ program significantly reduces the rising cost of eligible brand and specialty medications by utilizing manufacturer-provided coupons. Enrollment is necessary to receive these manufacturer provided coupons. You can enroll in Variable Copay directly from the mobile app, if applicable.

Prior Authorization Reviews

Prior authorization is a cost-savings initiative of your prescription plan and ensures the appropriate use of certain drugs. This program is designed to help prevent improper prescribing or use of certain drugs that may not be the best choice for a given health condition. You can view your prior authorization status within the mobile app.

Drug Price Check

Look up the cost of your prescriptions at various pharmacies to save additional money.

Download the mobile app









In the app store, search for Liviniti or Southern Scripts.

Prescription Drugs

Liviniti Prescription Plan			
	First Choice	Retail-Non-First Choice (limited to 30-day supply)	Mail Order (61-90-day supply)
Generic (lesser of price or copay)	1-30 Day: \$10 31-60 Day: \$20 61-90 Day: \$30	1-30 Day: \$20	\$20
Preferred	1-30 Day: \$30 31-60 Day: \$60 61-90 Day: \$90	1-30 Day: \$45	\$60
Compound	1-30 Day: \$50	1-30 Day: \$60	
Non-Preferred	1-30 Day: \$50 31-60 Day: \$100 61-90 Day: \$150	1-30 Day: \$60	\$100
Specialty Meds are all limited to 30-day supply, and must be filled at a specialty network pharmacy. Compounds are limited to a 30 day supply.			ty network pharmacy.
Generic	\$50		
Preferred	\$100		
Non-Preferred	\$250		

Flexible Spending Accounts

Flores

Flexible Spending Accounts (FSAs) allow you to set aside pre-tax dollars to pay yourself back for eligible health care and dependent care expenses. There are two types of FSAs you can select: **Health Care FSA** and **Dependent Care FSA**. Full-time employees working 32 hours or more per week are eligible to elect flexible spending. New employees are eligible for medical benefits on the first of the month following one full calendar month of employment.

Health Care FSA

You can elect up to \$3,300 to receive reimbursement for out-of-pocket health care expenses for you and your family members. These medical, dental, vision or other health care related expenses cannot be eligible for reimbursement through any insurance or other benefit program. Out-of-pocket health care expenses incurred by you and your family are eligible if the service occurred during the plan year and while you are making contributions to the plan. You can be reimbursed up to your full annual election, less any previous reimbursements.

Dependent Care FSA

You can elect up to \$5,000 and receive reimbursement to pay for dependent care for dependents up to age 13, which allows you and your spouse to work outside your home, to seek employment or to attend school full-time. Eligible expenses must be incurred during the plan year and while you are making contributions to the plan. When submitting a claim, you can only be reimbursed up to the amount you have contributed to date, less any previous reimbursements.

The FSA Accounts are administered by Flores.

Pre-Tax Savings Example			
	Without FSA	With FSA	
Gross Pay	\$25,000	\$25,000	
Health Care FSA Contribution	\$0	-\$1,000	
Taxable Income	\$25,000	\$24,000	
Taxes*	-\$6,413	-\$6,156	
Take Home Pay after Taxes	\$18,587	\$17,844	
Health Care Expenses	-\$1,000	-\$1,000	
Available Income	\$17,587	\$16,844	
Tax-Free Reimbursement from FSA	\$0	\$1,000	
Net Income	\$17,587	\$17,844	

^{*}Assumes federal withholding of 15%, state withholding equal to 20% of federal and social security withholding of 7.65%. For illustrative purposes only. Actual dollar amounts and savings may vary.

Health Care FSA Rollover Feature

You may rollover up to \$660 of unused funds at the end of the plan year to the next plan year.

This rollover amount does not impact your maximum election for the following plan year.

(e.g. If you have a maximum election limit of \$3,300 and rollover \$660, you could have access to up to \$3,960 for the next plan year.)



That's a savings of \$257 for the year!

Dental

Northeast Delta Dental

Dental insurance can be just as important to a lifetime of good health as your medical plan. RiverMead offers the PPO Plus Premier Network Dental plan through Northeast Delta Dental. Please refer to the Northeast Delta Dental Summary of Coverage for full plan details and any benefit limitations. Full-time employees working 32 hours or more per week are eligible for dental insurance. New employees are eligible for medical benefits on the first of the month following one full calendar month of employment.

Dental Plan Benefits - PPO Plus Premier Network		
Calendar Year Deductible	\$50 per person Type 2 & 3 Services, waived for Type 1 Services \$150 family deductible maximum	
Maximum Benefit (per person)	\$2,000 per member per year, up to \$4,000 with Double-Up Max (see official plan documents for details)	
Charges covered for you	In Network Out of Network	
Type 1 Services - Diagnostic/Preventive Routine exams (2 per year), bitewing X-rays, other X-rays, cleanings (2 per year), fluoride / sealants for children 19 and under, space maintainers for children 16 and under	Covered at 100%, not subject to deductible	Covered at 100%, not subject to deductible
Type 2 Services - Basic Restorative Restorative, endodontics, periodontics, denture repair, simple extractions, complex extractions, anesthesia	Covered at 80% after Deductible	Covered at 80% after Deductible
Type 3 Services - Major Restorative Onlays, crowns, crown repairs, prosthodontics	Covered at 50% after Deductible	Covered at 50% after Deductible

Vision Hardware HRA

Flores

RiverMead will be offering a vision hardware reimbursement program through Flores, available to full-time employees working 32 hours or more per week, for those who participate in RiverMead's Northeast Delta Dental plan. Each member of the dental plan will have access to \$150 to use for qualified vision expenses each calendar year.

Eye Care Benefits			
Calendar Year Deductible	N/A		
Maximum Benefit (per person)	\$150 per member per year		
Plan Benefits	Plan Allowances		
Lenses (per pair)			
Single, Bifocal, Trifocal	Subject to maximum		
Lenticular	Subject to maximum		
Progressive	Subject to maximum		
Contacts (Elective/Medically Necessary)	Subject to maximum		
Frame Allowance	Subject to maximum		

Voluntary Vision

Ameritas

If you would like Vision insurance coverage, the Ameritas ViewPointe Voluntary Vision plan is available for you to enroll in with the following benefits. Full-time employees working 32 hours or more per week are eligible for dental insurance. New employees are eligible for dental benefits on the first of the month following one full calendar month of employment.

Ameritas ViewPointe Plan H Summary	EyeMed Insight Network	Out of Network
Deductibles	\$10 Exam, \$25 Eye Glass Lenses	No deductible
Annual Eye Exam	Covered in full	Up to \$35 copay
Lenses (per pair) Single Vision Bifocal Trifocal Lenticular Progressive	Covered in full Covered in full Covered in full 20% discount See lens options	Up to \$25 Up to \$40 Up to \$55 No benefit N/A
Contact Lenses Fit & Follow Up Exams -Standard -Premium (allowance) Elective Medically Necessary	Member cost up to \$40 10% off retail Up to \$130 Covered in full	No benefit No benefit Up to \$104 Up to \$200
Frame Allowance	\$130	Up to \$65
Frequencies (Months) Exam / Lens / Frame	12 / 12 / 24 Based on date of service	12 / 12 / 24 Based on date of service
Len's Options (Member Cost)	EyeMed Insight Network	Out of Network
Progressive Lenses		

Len's Options (Member Cost)	EyeMed Insight Network	Out of Network
Progressive Lenses Standard / Premium Tier 1 Tier 2 Tier 3 Tier 4	\$65 + lens deductible \$85 + lens deductible \$95 + lens deductible \$110 + lens deductible \$65 plus 80% of charge less \$120 allowance	No Benefit No Benefit No Benefit No Benefit No Benefit
Lens Options Standard Polycarbonate Tint (solid & gradient) Scratch Resistant Coating	\$40 \$15 \$15	No Benefit No Benefit No Benefit
Anti-Reflective Coating Standard/Premium Tier 1 Tier 2 Tier 3	\$45 \$57 \$68 \$80% of the charge	No Benefit No Benefit No Benefit No benefit
Ultraviolet Coating	\$15	No benefit
Lasik or PRK	Average discount of 15% off retail price or 5% off promotional price at US Laser Network participating providers.	No Benefit

Disability Insurance

The Standard

RiverMead provides both Short and Long Term Disability insurance for full-time eligible employees. Having disability insurance can provide a sense of security, knowing that if the unexpected happens, you'll still receive a monthly income. RiverMead provides this coverage at no cost to you. It replaces a portion of your income if you are sick or injured and unable to work. Full-time employees working 32 hours or more per week are eligible for disability benefits. New employees are eligible for Short and Long Term Disability first of the month following 90 days of employment.

Short Term Disability (STD): Short-term disability provides for a portion of your income if you are unable to work due to pregnancy, a non-work-related illness or injury.

Flimination Period | Their

There is 7 day waiting period regardless of whether your disability is a result of an illness or injury. Benefits begin on the 8th day.

Benefit Duration

Up to 13 weeks.

Benefit Amount

60% of weekly earnings to a maximum benefit of \$650 per week.

Long Term Disability (LTD): Long-term disability provides for a portion of your income up to Social Security Normal Retirement age if you are unable to work due to a non-work-related injury or illness.

Elimination Period

There is an elimination period of 90 days from the onset of your disability.

Benefit Duration

Benefits continue up to age 65 or Social Security Normal Retirement Age (SSNRA),

whichever is later.

Benefit Amount

60% of your monthly covered earnings to a maximum benefit of \$5,000 per month. Please refer to certificate for all plan details.

Life Insurance

The Standard

RiverMead provides both Life and AD&D insurancee to full-time eligible employees. Life insurance provides for your family to help cover expenses they currently have (or will incur) in the event your earnings are no longer available. New employees are eligible for Life Insurance first of the month following 90 days of employment.

Term Life and Accidental Death & Dismemberment Insurance

Maximum Benefit

You are eligible for Life Insurance in the amount of 1x your annual salary, to a maximum benefit of \$100,000.

AD&D Benefit

A cash benefit to you if you suffer a covered loss in an accident, such as losing a limb or your eyesight, up to a maximum of \$100,000.

Age Reduction

At age 65, your benefit amount will reduce by 35%. At age 70, your benefits will reduce to 50% (of the original amount), and your benefit will terminate upon your retirement.

Educational Assistance

RiverMead recognizes that the skills and knowledge of its employees are critical to the success of the organization. RiverMead's Educational Assistance program encourages personal development through formal education to promote professional growth and enhance job related skills.

To this end RiverMead offers eligible employees Educational Assistance that is excludable from gross income under 26 US Code § 127 Educational Assistance Program. Under this program employees are eligible for up to \$1,000 of Educational Assistance during each semi-annual award period (\$2,000 per calendar year). For each semi-annual award period, applications are due January 15th and July 15th, and are awarded February 28th and August 31st each year. *Per Diem employees are not eligible.

This program assists with expenses incurred by or on behalf of an employee for education (tuition, fees, books, supplies, and equipment necessary for class) at an accredited college, university, or technical/vocational institution. The program can also assist with loan repayment on any qualified education loan (as defined in § 221(d)(1)) incurred by the employee for education of the employee.

Please contact Human Resources for more information.

403(b) Retirement

403(b) Retirement Savings Plan

The 403(b) Retirement Savings Plan provides benefits based on voluntary employee contributions, along with a matching contribution by RiverMead.





Employees who regularly work 20 hours or more per week may begin depositing a portion of their income, as permitted by law and/or Plan requirements beginning with their first day of employment. For 2025, the IRS maximum contribution is \$23,500 per year. If you are age 50 or older, you may make additional catch-up contributions of \$7,500 a year as well (for a total of \$31,000).

Employees who regularly work 20 hours or more per week, are eligible to receive employer contributions following the completion of one (1) year of service and have worked a minimum of 1,000 hours in the prior twelve months of employment. RiverMead will match the employee's contribution up to 6%, beginning the following January or July, once the eligibility requirements are met. Contributions are made by RiverMead and fully vested according to the following vesting schedule:

Completion of **one** year of service: 0% Completion of **two** years of service: 20% Completion of **three** years of service: 50% Completion of **four** years of service: 75% Completion of **five** years of service: 100%

Please contact Human Resources for more information.

Working Advantage Perks

working

More perks. More savings. More of what makes you happy.

We're here to support your personal and financial well-being through exclusive deals and limited-time offers on the products, services and experiences you need and love







START SAVING ON

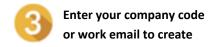
Electronics • Appliances • Apparel • Cars • Flowers • Fitness Memberships
Gift Cards • Groceries • Hotels • Movie Tickets • Rental Cars • Special Events
Theme Parks • And More!

New to Working Advantage? Getting Started is Easy.

Maximize your time away from the workplace and start saving today!







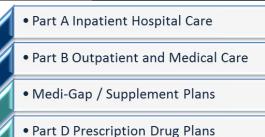
Your Company Code
RIVERMEADPERKS

NEED HELP? EMAIL US: <u>CUSTOMERSERVICE@WORKINGADVANTAGE.COM</u>

Medicare Solutions

Medicare is very complex and it is important that you have an advocate who can provide you the proper Medicare education and guidance. There are different paths you can choose in Medicare plans and it can be very time consuming and difficult to filter through these options yourself. It is important that you find the appropriate plan in your area that best fits your medical needs and is within your financial budget.

Ed Estey of Borislow Insurance will simplify the Medicare approach by providing you the needed education, plan evaluation and enrollment assistance to you <u>at no cost</u>. Borislow Insurance represents several Medicare insurance companies and Ed will assist you in evaluating and enrolling in your desired plans that best suit your lifestyle needs.



• Part C Medicare Advantage Plans

Learn what you need to know of the complicated parts of Medicare Contact Ed Estey at 978-722-1120 or EEstey@borislow.com

Additional Benefits & Incentives

AAA Membership Discounts: RiverMead offers annual AAA enrollment at a discounted price. If you would like to become a member of AAA (American Automobile Association), we will post quarterly enrollment notices on our Touch Town Community App. If you are unfamiliar with AAA, they offer their members benefits such as roadside assistance and discounts on travel, including discounted hotel rates. If you wish to include members of your family, you may do so at an additional discounted rate per family member, all of which will be deducted through payroll deductions.

5 Year Club & Annual Service Award Celebrations: The fall of each year is a time for celebration. Beginning in September, we invite all employees with 5+ years of service to our Annual 5 Year Club luncheon. Then in December we follow up with our Annual Service Awards event. This grand and special event allows RiverMead to publicly thank our employees for their 5-10-15-20-25+ years of service.

Employee Referral Bonus: All RiverMead staff who refer applicants who are hired for any of our open positions are eligible to receive an employee referral bonus of \$1,500 paid in three equal installments.





(continued...)

Additional Benefits & Incentives (cont.)

Discounted Meals: RiverMead subsidizes the cost of meals to its employees at a significantly reduced price. Please contact our Accounting Office (Ext. 205) for more information regarding the Employee Meal Account Program.

CPR Training: RiverMead offers onsite CPR certification training on a regular basis. Although this is a requirement for some positions, it is offered to all staff free of charge. We regularly post training dates/times on our Touch Town Community App.

LNA/MNA Training Programs: The purpose of these training programs is to expand the field of well-qualified and well-trained individuals capable of providing competent care within the Health Center. Our aim is to offer a learning environment that fully prepares students for the realities, demand, and rewards of the job, with an emphasis on the resident and caregiver relationship.

These programs are designed to meet the curriculum and course requirements outlined by the New Hampshire State Board of Nursing. After completion of these courses, students will be prepared to take the New Hampshire State competency exams and become competent and caring members of our healthcare team.

Please contact Health Center Administration for more information.

On-Site Fitness Center & Swimming Pool:

RiverMead has a state-of-the-art on-site Fitness Center as well as an in-door swimming pool which is attached. These facilities also include changing areas and shower facilities.

These venues are available for staff use during a variety of timeframes. This Fitness Center offers space for classes and private workouts as well as an equipment room featuring the latest in fitness equipment.

In 2025 we hope to be able to expand these fitness offerings by providing classes such as yoga, strength training, Zumba, etc. Please contact RiverMead's Fitness Manager, Carol Leger for more information.



(continued...)

Additional Benefits & Incentives (cont.)

Sullivan Tire & Auto Services: Employee Benefit Program: Sullivan Tire & Auto Service has designed an Employee Benefit Program specifically for the employees of RiverMead AND their family members!

A special account number – 6002160 -- has been assigned to the RiverMead employee account. This account number easily identifies employees and their vehicles for specific prices and discounts.

This benefit program is offered at over 73 Sullivan Tire & Auto Service locations throughout New England and provides a 10% discount on all parts and labor*. Tires are always at an everyday low price. Once your vehicle is profiled in the Sullivan Tire system, an alert will notify any Sullivan Tire location that you are enrolled in the program and the discounts will be calculated automatically.

All that's needed when you bring your vehicle to Sullivan Tire is to announce their Special Program status with RiverMead and share the special account number 6002160. The 10% benefit will be reflected on your final invoice - for all applicable services.

Courtesy Shuttles are available at all Sullivan Tire locations.

Need to find a Sullivan Tire Store?

Call their store locator at: 877-855-4826 or visit www.sullivantire.com

*Offer Subject to Change. This discount can only be used for repairs paid for with cash, check or credit card payment.

The RiverMead Employee Assistance Fund (REAF): REAF is committed to providing financial assistance to RiverMead employees who, for reasons beyond their control, are experiencing a personal financial emergency in one of the following (but not limited to) areas:

- Immediate needs for food, shelter, or fuel.
- Transportation costs such as essential vehicle repair and/or purchase.
- Medically necessary treatment that is not covered by RiverMead sponsored health insurance. This could also include assistance for family members who are covered as dependents on a RiverMead insurance plan.
- Medically necessary special equipment or supplies not covered by RiverMead sponsored health insurance. This could also be extended to covered participants on a RiverMead insurance plan.
- Other reasons that would be reviewed on a case-by-case basis.

RiverMead employees filing for assistance from the REAF must be:

- At least 18 years of age.
- Have been continuously employed with RiverMead for at least one year
- Employed at least 20 hours per week on a regular basis (i.e. 1000 hours per year from their respective anniversary date).
- Employed in good standing. Good standing (for purposes of administration of this fund) is defined as no current written warnings (6 months or less) or under a period of close supervision. Mitigating circumstances in this area will be reviewed on a case-by-case basis.

Please note: Employees on FMLA or other approved Leaves of Absence are ineligible to participate in the REAF.

Employees should contact Human Resources to confirm eligibility and complete the Employee Assistance Fund Application Form. In general, approved employee REAF loans shall be repaid through payroll deductions. A repayment of \$50 or 3% of the total loan amount, whichever is greater, will be required per pay period. The Director of Human Resources will initiate a check request form, payable directly to the third party (bank or other creditor), on behalf of the employee.

Please note: Employees who voluntarily or involuntarily terminate employment with RiverMead are liable for any unpaid balance. Contact Human Resources for more information.

Terms to Know

After-Tax Dollars

Income from which federal, Social Security (OASDI/Medicare tax), state and local taxes have already been deducted.

Before-Tax Dollars

Income on which, under current law, you pay no federal income or Social Security (OASDI/Medicare tax) taxes. In many states, you pay no state or local taxes on before-tax dollars either.

Coinsurance

Coinsurance is a shared cost between what you pay for covered services after you satisfy your deductible and what the Plan pays on your behalf. The cost share, or coinsurance %, is much higher if you go out of network.

Copay

A copay is a flat amount that you pay for covered services before you satisfy your deductible. These typically apply to provider visits, ER visits and prescription drugs.

Dependent Care Flexible Spending Account

A Dependent Care FSA (DCFSA) is a pre-tax benefit account used to pay for eligible dependent care services, such as preschool, summer day camp, before or after school programs, and child or adult daycare. It's a smart, simple way to save money while taking care of your loved ones so that you can continue to work.

Health Care Flexible Spending Account

A Health Care Flexible Spending Account (FSA) is a pre-tax benefit account that's used to pay for eligible medical, dental, and vision care expenses that are not covered by your health care plan or elsewhere. With an FSA, you use pre-tax dollars to pay for qualified out-of-pocket health care expenses.

In-Network

Service paid for when participants use providers that are in the Plan's network. These providers and facilities have contractual discounted rates with the carrier.

Inpatient

A person who receives medical treatment or services requiring one or more overnight stay(s) in a hospital or other approved care facility.

Maximum Annual Out-of-Pocket

The maximum amount you will have to pay for covered medical expenses in a plan year (1/1-12/31).

Out-of-Network Benefits

The benefits, which are available to participants when they use out-of-network providers that are subject to deductibles, coinsurance and usual, customary and reasonable (UCR) benefits levels.

Plan Year Deductible

The amount you pay up front for covered services each plan year (1/1-12/31) before the plan starts to pay benefits.

Contacts

If you have questions about your benefits, please contact a member of our **Human Resources** team below or refer to the list of contact information for our benefit plan carriers.

Plan Administrators	Phone Number	Email
Carrie James Director of Human Resources	603-924-0348	<u>cjames@rivermead.org</u>
Kate Wasserloos Human Resources Manager	603-924-0314	kwasserloos@rivermead.org
Plan / Carrier	Phone Number	Website
Medical Insurance Health Plans, Inc.	877-906-5730	www.healthplansinc.com/ members
Health Coaching & Case Management AchieveHealth by Health Plans, Inc.	866-325-1550	www.healthplansinc.com/ members
Prescription Plan Liviniti Healthdyne Mail Order Pharmacy	800-710-9341 855-772-9384	www.liviniti.com liviniti.healthdyne.com
Health Care Flexible Spending Account, Dependent Care Flexible Spending Account Flores	800-532-3327	www.Flores247.com
Dental Insurance Northeast Delta Dental	800-832-5700 or 603-223-1234	www.nedelta.com
Voluntary Vision Ameritas	800-487-5553	www.ameritas.com
Life Insurance and AD&D The Standard - Formerly AnthemLife	Life Claims: 800-552-2137	www.thestandard.com
Short and Long Term Disability The Standard - Formerly AnthemLife	Disability Claims: 800-232-0113	www.thestandard.com
Medicare Solutions Ed Estey, Borislow Insurance	978-722-1120	EEstey@Borislow.com
Sullivan Tire Employee Discount Program	877-855-4826	www.sullivantire.com
Working Advantage Employee Perks & Savings	customerservice@workingadvantage.com	







Mental Health First Aid Task Force

Please reach out to members of the team if you need assistance or use any of the resources below or on page 20.

Mental Health First Aid

Jennifer Coles

Director of Marketing & Community Relations

603.924.0033, ext. 252

Direct: 603.371.0452

icoles@rivermead.org

Location: Mead Community Center, 1st floor

Jennifer Fife

Director of Environmental Services

603.924.0033, ext. 212

Direct: 603.371.0412

ifife@rivermead.org

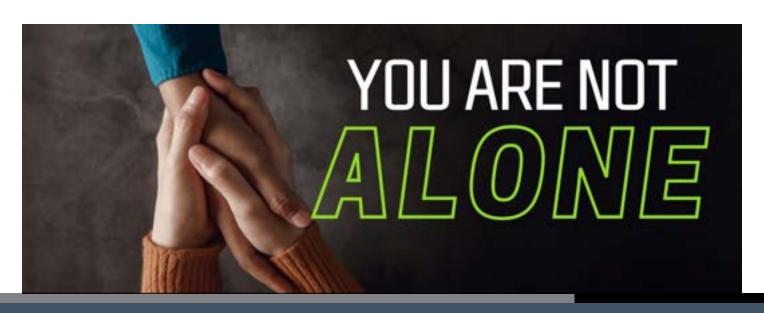
Location: Mead Community Center, 1st floor

Carol Leger

RiverMead Fitness Manager 603.924.0033, ext. 647

cleger@rivermead.org

Location: Mead Fitness Center, Upper Level



MONADNOCK REGION SUPPORT RESOURCES

Peterborough Human Services Fund

AKA The Peterborough Food Pantry

Provides assistance with auto repairs, housing, utilities, medical or dental bills and provides food to clients.

603-924-3008

MCH Behavioral Health Services

Offers treatment for a full-range of emotional and mental health issues like symptoms of anxiety, depression, mood disorders, substance abuse, personal crises, stress related disorders, and relationship conflicts. 603-924-4690

Reality Check

Provides support finding treatment, and offers recovery support groups and programs to those struggling with addiction.

603-532-9888

The River Center

Provides programs for families, parents, and youth in the Monadnock Region. They also provide financial literacy services and free tax preparation.

603-924-6800

Life Stance Health

This organization offers telehealth and in person visits to provide treatment to their clients and specialize in a variety of mental health related conditions. 603-689-7890

Focus on Recovery Helpline: 211

Helpline: 211

Community Volunteer Transportation (CVTC)

This volunteer based network provides "no fee" transportation to those who do not have access to transportation because of age, ability, economic situation or other limiting circumstances.

877-428-2882

MAPS - Peterborough

MAPS offers counseling services for all age groups and a wide variety of mental health conditions. They have clinicians that provide therapy for families, couples, substance misuse issues, and a cancer patient support group. 603-924-2240

AA MEETINGS: NHAA.NET 800-839-1686

NATIONAL CRISIS RESOURCES:

- National Suicide Prevention Lifeline: 800-273-8255
- Crisis Text Line: Text "MHFA" to 741741
- Lifeline Crisis Chat: www.crisischat.org
- The Trevor Project: Call 866-488-7386 or text "Start" to 678678
- Substance Abuse and Mental Health Services Administration's Disaster Distress Helpline: 800-662-4357

This benefit booklet is provided to Team Members of



courtesy of
Borislow Insurance



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