

2020 Benefits Guide



Hourly Associates

January 1 - December 31, 2020

OTO DEVELOPMENT



People, Properties and Performance.

Welcome to your Annual Benefit Enrollment!

Here's where to find...

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At OTO Development, our people are our priority and the key to our success. We know you work hard each day to make a significant contribution to our Company. In return, we strive to give you a safe place to work that fosters your talents, and a rewards package that provides more than a paycheck. The benefits and programs you have access to make up a significant part of your experience here. This guide will help you understand what you have, and how you can make the most of it.

OTO has partnered with Explain My Benefits (EMB) to give you easy access to your benefit information. Please download the EMB App on your phone to take advantage of this information and program. **EMB will have Spanish and Creole speaking benefit counselors available.**

Availability of Summary Health Information Your plan makes available a Summary of Benefits and Coverage (SBC) which summarizes important information about any health coverage option in a standard format. The SBC is available on the EMB website.

Additional required notices are also available including Mental Health Parity, Newborn & Mother Health Protection Act, Cancer Rights Act and HIPAA Privacy Notice.

What's New this Year?

1. Revised health premiums - please review to understand how it impacts you.
2. The addition of voluntary benefits including Accident and Critical Illness Insurance.
3. An additional life insurance option.
4. The Explain My Benefits benefit portal website and mobile app.
5. Additional matching dollars for 401(k) contributions.

Please review this booklet for more information.

Eligibility & Status

Who is eligible for coverage?

Full-time OTO Team Members scheduled to work on average a minimum of 30 hours per week are eligible to participate on the first of the month following 60 days of employment.

Insurance benefits must be elected within the first 30 days of hire or during an Open Enrollment period, unless you have a qualifying event/status change.

You also have the option to enroll your eligible dependent(s) for many of these plans. Eligible dependents include:

- Your legal spouse (if they do not have other coverage available through their employer).
- Your natural or adopted children as well as any foster children, stepchildren or children for whom an employee has custody or legal guardianship.
- Your dependent children under age 26. (Coverage ends the end of the month in which they turn 26.)
- Your children of any age, if they have a physical or mental disability that makes them dependent on you for support (subject to plan rules). The disability must have started before the date the child reached age 25. Verification of the disability may be required.

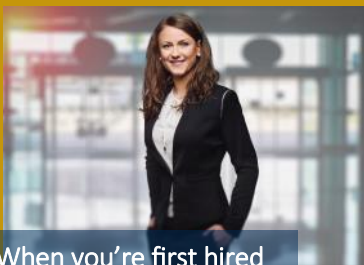
Status Changes

Keep these things in mind as you have changes in your life. The choices you make during Open Enrollment remain in effect until midnight, December 31, 2020. You cannot change coverage for yourself or add or drop dependents during the year, unless you have a family status change. If you need to make changes to your or any of your dependent(s)' benefits throughout the year, you must do so within 31 days of the event. You can make changes by contacting your Benefits representative, Michelle Leach at: mleach@otodevelopment.com.

Examples of family status changes/qualifying events that allow you to change some of your benefits during the year include:

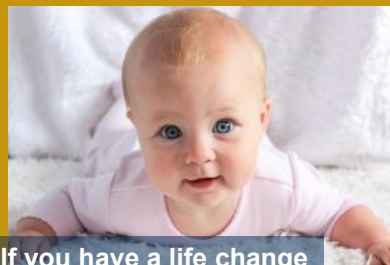
- Marriage or Divorce
- Death of your dependent child or spouse
- Change in your or your dependent's employment status that results in loss or gain of coverage
- Birth, adoption, or change in the custody of your child

When can I enroll?



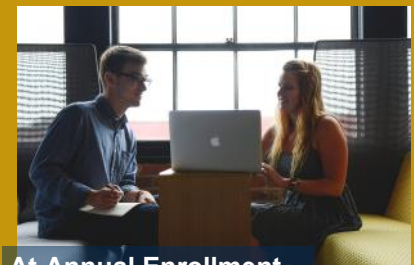
When you're first hired

This is the time to enroll in any of the plans without a qualifying event. You must enroll within 30 days of hire.



If you have a life change

Certain life events like birth or adoption of a child, change in marital status, death, or loss of coverage due to no fault of your own may allow you to change your coverage during the year. You must make your requested changes and provide your supporting documentation within 30 days of the qualifying event.



At Annual Enrollment

Annual Enrollment is your opportunity once each year to evaluate your benefit options and make selections for the following year. Benefits selected at Annual Enrollment are effective January through December.

Terms



BEFORE WE BEGIN: QUICK TERMS TO KNOW

Benefits jargon can be confusing. Before we begin, review these terms so you can better understand your insurance options.

Deductible – The amount of money you must pay each year to cover your medical care expenses, including prescriptions before the Plan starts paying. Deductibles do not apply where a copay is noted. Your deductibles start over on January 1 each year.

Out-of-Pocket Maximum – The maximum amount you will spend out of your own pocket for eligible health care expenses during a calendar year while covered under the Plan.

Keep in mind that not all expenses count toward the out-of-pocket maximum. Those expenses include:

- Premium deductions from your paycheck
- Balance bills from out-of-network providers
- Non-covered benefits

Preferred Provider Organization (PPO) Plan – A medical plan designed to give you the freedom to see providers both in- and out-of-network and see specialists without referral. You do not have to choose a primary care physician. With the PPO, there is an annual deductible, but once the deductible is satisfied, the plan begins paying its share of covered services.

High Deductible Health Plan (HDHP) – The IRS defines a high deductible health plan as any plan with a deductible of at least \$1,350 for an individual or \$2,700 for a family. An HDHP's total yearly out-of-pocket expenses (including deductibles, copayments and coinsurance) can't be more than \$6,750 for an individual or \$13,500 for a family. This limit does not apply to out-of-network services. A high deductible health plan can be combined with a health savings account (HSA), allowing you to pay for certain medical expenses with money free from federal taxes.

Health Savings Account (HSA) – A type of savings account that allows you to set aside money on a pre-tax basis to pay for qualified medical expenses. You may only contribute to a Health Savings Account while you are enrolled in a High Deductible Health Plan (HDHP).

By using the untaxed funds in an HSA to pay for expenses before you reach your deductible and other out-of-pocket costs, you may reduce your overall health care costs.

The money in the HSA bank account is yours. There is no "use it or lose it", the HSA funds roll over year-to-year if you don't spend them. You take the funds with you if you leave OTO.



Enrollment Process

Open Enrollment

Nov 11 - Nov 22

ENROLLMENT DETAILS

- You will speak with a benefits counselor via the Enrollment Call Center. This is your opportunity to ask questions and learn about any changes. You will confirm your elections during this meeting.
- You will confirm all data entered in the new enrollment system is accurate to include demographic, elections and beneficiary information.
- Bring your SSN information and dates of birth for all covered dependents.
- *You will be introduced to our new Benefits Mobile App, assistance with downloading this App is also available, changing the way benefits are communicated!*

Enrollment Meetings

All benefit eligible employees must schedule a meeting with Explain My Benefits in order to receive benefits for the new plan year

Visit the link below to schedule your telephonic enrollment meeting date & time.

Spanish and Creole speaking benefit counselors will be available.

Visit our new benefits website to review the Benefit Guide, important documents and watch benefit education videos.

www.OTO-Benefits.com
Click here to schedule your call.

Mobile App



NEW! BENEFITS ENROLLMENT APP

OTO Development has provided you a brand new app to manage your benefits that allows you to:

- ✓ Enroll in your benefits from your phone
- ✓ View your current benefits
- ✓ Watch benefit education videos, review benefit guides and plan summaries
- ✓ Receive important message notifications about your benefits

Benefits at your fingertips!



TO DOWNLOAD:

1. Text emb to 71441
2. Download by clicking the link for ios or android
3. Enter company code: oto



Medical Plans

	UHC PPO Plan In / Out of Network	UHC HSA High Plan In / Out of Network
Deductible		
Individual	\$2,000 / \$4,000	\$3,000 / \$6,000
Family	\$4,000 / \$8,000	\$6,000 / \$12,000
Coinsurance	20% AD / 40% AD	0% AD / 30% AD
Out of Pocket Maximum		
Individual	\$7,350 / \$14,700	\$5,000 / \$10,000
Family	\$14,700 / \$28,400	\$12,000 / \$24,000
Office Visit		
Routine Preventive Care	100% / Not Covered	100% / 30% AD
Primary Care	\$35 copay / 40% AD	0% AD / 30% AD
Specialist	\$60 copay / 40% AD	0% AD / 30% AD
X-Ray / Lab	\$35 copay / 40% AD	0% AD / 30% AD
Hospitalization		
Urgent Care	\$60 copay / 40% AD	0% AD / 30% AD
Virtual Visits	\$35 copay	\$49*
Emergency Services (waived if admitted)	\$500 copay	0% AD / 30% AD
Inpatient Hospital Services	20% AD / 40% AD	0% AD / 30% AD
Outpatient Services	20% AD / 40% AD	0% AD / 30% AD
Prescriptions		
Retail Pharmacy (30-day supply)		Subject to Additional \$2,000 Individual/\$4,000 Family Max OOP
Tier 1	\$15 copay / \$15 copay + 40%	\$15 copay (After Ded) / 30% AD
Tier 2	\$40 copay / \$40 copay + 40%	\$40 copay (After Ded) / 30% AD
Tier 3	\$75 copay / \$70 copay + 40%	\$75 copay (After Ded) / 30% AD
Specialty	50% to \$500 / Not covered	50% to \$500 (After Ded) / 30% AD
Mail Order (90-day supply)		
Tier 1	\$25 copay / Not covered	\$25 copay (After Ded) / Not covered
Tier 2	\$90 copay / Not covered	\$90 copay (After Ded) / Not covered
Tier 3	\$175 copay / Not covered	\$175 copay (After Ded) / Not covered
Specialty	N/A	N/A

AD=after deductible

*applies to deductible

Medical Plans

	UHC HSA Low Plan Network Only	Kaiser HMO (California Only) Network Only
Deductible Individual / Family	\$5,000 / \$10,000	\$2,500 / \$5,000
Coinsurance	30% AD	30% AD
Out of Pocket Maximum Individual / Family	\$6,650 / \$13,300	\$5,000 / \$10,000
Office Visit		
Routine Preventive Care	100%	100%
Primary Care	30% AD	\$40 copay
Specialist	30% AD	\$40 copay
X-Ray / Lab	30% AD	\$10 AD
Hospitalization		
Urgent Care	30% AD	\$40 copay
Virtual Visits	\$49*	N/A
Emergency Services	30% AD	Deductible + coinsurance
Inpatient Hospital Services	30% AD	30% AD
Outpatient Services	30% AD	30% AD
Prescriptions		
Retail Pharmacy (30-day supply)		
Tier 1	30% (After Ded)	\$10
Tier 2	30% (After Ded)	\$30
Tier 3	30% (After Ded)	N/A
Specialty	30% (After Ded)	N/A
Mail Order (90-day supply)		
Tier 1	30% (After Ded)	2x copay
Tier 2	30% (After Ded)	2x copay
Tier 3	30% (After Ded)	N/A
Specialty	N/A	N/A

AD=after deductible

*applies to deductible

Contributions

Bi-Weekly Employee Contributions	UHC PPO Plan	UHC HSA High Plan	UHC HSA Low Plan	Kaiser HMO California Only
2020 Rates with Wellness Discount*				
Employee Only	\$92.31	\$46.15	\$27.69	\$55.80
Employee + Spouse	\$346.15	\$265.38	\$219.23	\$295.58
Employee + Child(ren)	\$276.92	\$207.69	\$103.85	\$234.58
Employee + Family	\$553.85	\$415.38	\$323.08	\$474.36
2020 Rates without Wellness Discount				
Employee Only	\$138.46	\$92.31	\$60.00	\$55.80
Employee + Spouse	\$392.31	\$311.54	\$251.54	\$295.58
Employee + Child(ren)	\$323.03	\$253.85	\$136.15	\$234.58
Employee + Family	\$600.00	\$461.54	\$355.38	\$474.36

*Wellness discount is obtained by completing an annual physical, being a non-smoker or if a smoker, completing a smoking cessation program. More information is located in the Wellness section of this booklet.



Wellness



As part of our continuing efforts to provide you and your family with quality health care coverage, we are pleased to continue our partnership with Wellvibe™. Discount is available to employees enrolled in a UHC medical plan. Associates who complete activities during the plan year can earn the opportunity to pay lower health insurance premiums in the next plan year.



Be a Non-Smoker

If you use tobacco, complete the *Quit for Life* Program to qualify for the Wellness discount, even if you are unsuccessful in your attempt to quit.



Complete an Annual Physical

Annual physicals are covered at 100% once every 12 months. See your doctor for an annual physical between 9/1/19 and 8/31/20 to ensure eligibility for the wellness discount.

You must complete both to earn the wellness discount. You must submit proof of your physical to Wellvibe™. If you are new to Wellvibe™, registration instructions are on the next page.

For more information on these and other wellness initiatives, please login to Wellvibe™.

Wellness



1

go to www.wellvibelogin.com

click on "let's begin"

2

fill in registration fields

your group key is: 3WXCSU

3

enter your email and create a password to sign in with

click on "let's begin"

4

Sign into wellvibe with the email and password you created in step 3

5

after you sign in:

- click on the activities tab in the top navigation
- review and complete activities that have been assigned to you

Health Savings Account (HSA)



If you are enrolled in either of the two High Deductible Health Plans, you can use a Health Savings Account (HSA) to pay for medical expenses with pre-tax dollars.

Why use a Health Savings Account (HSA)?

Using an HSA can give you a triple tax advantage:

- Your contributions to an HSA are pre-tax, meaning you don't pay federal income tax, Social Security tax, and in most cases, state income tax on the money you contribute. That can save you 30% or more on eligible medical expenses.
- Earnings on your investments in an HSA are tax-free.
- Withdrawals are tax-free. (This is true unless you use money from your HSA for something other than qualified medical expenses; if you do that, you'll have to pay federal income taxes and a 20% penalty tax. These rules don't apply past the age of 65.)

HSA Tip: Your HSA Bank account must be open when you enroll to ensure that contributions are available for use.

Services rendered before your HSA Bank account is open are not eligible for reimbursement.

Health Savings Account

IRS Contribution Limits	Individual: \$3,550 Family: \$7,100
Over 55?	You may add an additional \$1,000 contribution.
Use It or Lose It?	No. Your funds carry over in an interest bearing account.
Are these funds pre-tax?	Yes. Both your contributions and the interest you earn are tax-free.



Did You Know?

If you are enrolled in one of the OTO High Deductible Health Plans, HSA Bank administers the HSA. You will receive a debit card to use when you open your bank account. You can manage your account and view your funds online at www.hsabank.com.

UHC Virtual Visits



See a doctor whenever, wherever. Virtual Visits

Get access to care 24/7 with Virtual Visits. A Virtual Visit lets you see a doctor from your mobile device or computer without an appointment.

Choose from an AmWell or Doctor on Demand network provider

To learn more and start a visit, go to uhc.com/virtualvisits. You can also go directly to amwell.com or doctorondemand.com—or the AmWell or Doctor On Demand mobile apps.

Virtual Visits are covered under your health plan benefits either way you decide to access care.



AmWell app



Doctor On Demand app*

Tips for registering:

1. Locate your member ID number on your health plan ID card.
2. Have your credit card ready to cover any costs not covered by your health plan.
3. Choose a pharmacy that's open in case you're given a prescription.**



To learn more about Virtual Visits, go to uhc.com/virtualvisits or myuhc.com.

These visits have a copay of \$40 to anyone on a UHC plan—before any deductible. This is an affordable way to see a doctor!

* Doctor On Demand does not support any version of Internet Explorer®.

** Prescription services may not be available in all states.

All trademarks are the property of their respective owners.

Virtual Visits are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations. The Designated Virtual Visit Provider's reduced rate for a virtual visit is subject to change at any time.

Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Facebook.com/UnitedHealthcare Twitter.com/UHC Instagram.com/UnitedHealthcare YouTube.com/UnitedHealthcare

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Find a UHC Provider



Find a network provider.

How to find one.

Log in to myuhc.com to find a doctor, clinic, hospital or lab based on location, specialty condition, reputation, estimated cost of services, availability, hours of operation and more. You can even see patient ratings and compare quality and costs before you choose services.

Take advantage of network care.

Network doctors, mental health professionals, hospitals, clinics and laboratories charge discounted rates, which typically saves you money. Even if your plan allows you to receive care outside of your network, be aware that it could cost you more.

Choose with confidence.

The **UnitedHealth Premium® Program** uses national, evidence-based, standardized measures to evaluate physicians in various specialties to help you locate quality and cost-efficient providers. Find UnitedHealth Premium Care Physicians by going to myuhc.com and clicking on "Find a Doctor." Choose smart. **Look for blue hearts.** ♥♥

If you need hospital care.

Talk to your doctor first to determine which hospital in your network can meet your medical or surgical needs. You or your doctor may be required to notify UnitedHealthcare before you're admitted.

Choose a primary care provider (PCP).

Although your plan may not require you to choose a PCP, it's a good idea to have one main doctor with in-depth knowledge of your health. Find one at myuhc.com or call the toll-free member number on your ID card.

Schedule your preventive care screenings.

Most UnitedHealthcare plans pay 100 percent of the cost of certain preventive care services with a network provider. Check your health plan documents for details.

Visit uhcpreventivecare.com to find age- and gender-appropriate preventive care recommendations for everyone covered under your plan.

Find a Kaiser Provider

California Associates Only



It's easy to get started

with Kaiser Permanente



Choose your doctor – and change anytime

Connecting you with a doctor who suits your needs is our top priority. At kp.org/searchdoctors, you can browse our physician bios and choose one based on what's important to you – like the specialty care you need or languages you speak.

Select one doctor for your whole family or a different doctor for each family member. You can also change your doctor anytime.

Find convenient locations

You have many facilities to choose from, and you're free to see different doctors at different locations. For example, you can choose a personal doctor close to your work and a pediatrician near your child's school.

Search locations in your area at kp.org/kpfacilities.

Register on kp.org

Your connection to great health is kp.org, where you can manage your health care anytime, anywhere. Email your Kaiser Permanente doctor's office with nonurgent questions, schedule and cancel routine appointments, view most lab test results, and more.*

Once you get your Kaiser Permanente ID card, getting started is a snap at kp.org/register.

Get prescriptions

It's easy to get your prescriptions. After you join, just call us or go online, and we'll help you transition your prescriptions to the Kaiser Permanente pharmacy of your choice.

You can also order most refills online at kp.org/refill and have them shipped to your home at no charge for shipping.

Learn more at kp.org/newmember

KAISER PERMANENTE. **thrive**

Dental



Good dental health is just as important as your annual physical. If left unattended, dental disease can contribute to health issues like heart disease, stroke, pre-term birth, and diabetes. In fact, gum health is as good an indicator of heart disease as high cholesterol is!

To find a provider, visit www.ameritas.com and select FIND A PROVIDER, then DENTAL, then choose our network, Classic PPO. Enter your criteria to search by location or for a specific dentist or practice. **California Residents:** When prompted to select your network, choose the Ameritas Network found on your ID Card or contact Customer Connections at 800-487-5553.

Ameritas Dental	
2020	In Network / Out of Network
Preventive (Type 1)	100%
Basic (Type 2)	80%
Major (Type 3)	50%
Deductible	\$50 per Calendar Year Type 2 & 3 Waived Type 1
Maximum per person	\$1,500 per calendar year
Orthodontia (children up to age 18)	
Benefit	50%
Lifetime Maximum	\$1,000

Benefits are the same for both in and out of network, however you will realize the most savings by using a network dentist.

Bi-Weekly Employee Contribution	2020 Rates
Employee Only	\$7.14
Employee + Spouse	\$20.60
Employee + Child(ren)	\$29.30
Employee + Family	\$45.53

Vision

Even if you have 20/20 vision, you should still consider enrolling in a vision plan. Why? Vision exams are a good preventive care for your eyes. They can help find eye problems early, when they are most treatable.

Focus eye care from Ameritas Group features the money-saving eye care network of VSP. Customer service is available to plan members through VSP's well-trained and helpful service representatives. Call or go online to www.ameritas.com to locate the nearest VSP network provider, view plan benefit information and more.



Ameritas Vision		
2020	VSP Choice Network + Affiliates	Out of Network
Deductible	\$10 Exams, Lenses or Frames	\$10 Exams, Lenses or Frames
Annual Eye Exam	Covered in Full	Up to \$45
Lenses (per pair)		
Single	Covered in Full	Up to \$30
Bifocal	Covered in Full	Up to \$50
Trifocal	Covered in Full	Up to \$65
Lenticular	Covered in Full	Up to \$100
Progressive	See Lens options	n/a
Contacts		
Fit & Follow up	Member cost up to \$60	No benefit
Elective	Up to \$150	Up to \$120
Medically Necessary	Covered in Full	Up to \$120
Frames	\$150	Up to \$70
Frequencies	Exam/Lens/Frame	12/12/12

Bi-Weekly Employee Contribution	2020 Rates
Employee Only	\$3.84
Employee + Spouse	\$7.00
Employee + Child(ren)	\$7.23
Employee + Family	\$10.91

Short Term Disability

An illness or injury that keeps you out of work for an extended time can be a serious financial hardship. OTO Development provides optional income replacement benefits to assist you and your family if you become disabled and cannot work due to a non-work-related illness or injury.

OTO Development offers Short Term Disability (STD) on a voluntary basis to all eligible employees. Sometimes an illness or injury that keeps you out of work for an extended period of time can be a serious financial hardship. In the event that you are ever in this situation, having STD will help protect your income through weekly benefit payments to help pay for every day expenses, doctor bills, or whatever you need until you are able to get back to work.

Coverage	Voluntary Short Term Disability
Maximum Benefit	Up to 60% of weekly covered earnings
Maximum Weekly Benefit	\$2,500
Benefits Begin	8th day following non-occupational injury/illness
Maximum Benefit Period	12 Weeks

If you do not have STD with OTO currently, your plan will be subject to a pre-existing condition limitation. The pre-existing condition limitation under this plan is 3/12 which means any condition that you received medical attention for in the 3 months prior to your effective date of coverage that results in disability during the first 12 months of coverage would not be covered until you've

Bi-Weekly Employee Contribution	
Salary	Premium
\$15,000	\$3.04
\$30,000	\$6.07
\$50,000	\$10.12
\$70,000	\$14.17
\$90,000	\$18.21
\$120,000	\$24.28
\$150,000	\$30.36
\$200,000	\$40.47
\$216,667+	\$43.85

Voluntary Benefits

NEW!

What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on your needs and affordability.

- Ownership - Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted like any other benefit
- **Cash benefits are paid directly to you, not to a hospital or a doctor**
- **Benefits are paid in conjunction with other coverage you may have**
- Level premiums - Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out-of-pocket medical costs and other bills

The Voluntary Benefits offered are through **Lincoln and Chubb**.

Lincoln Accident Plan

Life is full of unexpected moments. Some are ones you'd rather forget—like accidental injuries. Lincoln Accident Insurance pays cash should you or a family member suffer an accidental injury, and you decide the best way to spend it.

Just a few examples of benefits included in the plan:

- Emergency room Visits - \$150
- Hospitalization - \$1,250 admission benefit, \$300 per day benefit
- Intensive Care - \$2,000 admission benefit, \$600 per day benefit
- Fractures - up to \$3,500
- Dislocations - up to \$2,625
- Physician follow-up visits (up to 2 visits) - \$100
- More detail is available on the EMB portal



Bi-Weekly Employee Contribution	2020 Rates
Employee Only	\$7.84
Employee + Spouse	\$13.29
Employee + Child(ren)	\$15.18
Employee + Family	\$20.45

Voluntary Benefits

Lincoln Critical Illness

If serious illness strikes, the last thing you need to be concerned with is how to pay the bills: copayments, car payments, rent or mortgage, utilities and food.

That's why Lincoln Critical Illness Insurance provides cash to help with extra expenses—so you can focus on your recovery and not have to worry about money if you get sick.

If you are diagnosed with a covered illness, you get a lump-sum cash benefit to use however you wish—even if you receive benefits from other insurance. Use it how you need it: for treatments not covered by other insurance or a dream vacation to celebrate your recovery. You decide.

Guaranteed Issue (No Medical Exam Required)

\$30,000 employee / \$15,000 spouse / \$10,000 children

Regardless of other coverage in force, the benefit is paid out in a full lump sum.

Examples of covered conditions:

100% Benefit: Heart Attack, Stroke, Invasive Cancer, Renal (kidney) Failure, Major Organ Failure (heart, lung, liver, pancreas or intestine), Additional Childhood Conditions, Severe Burns, Permanent Paralysis or Traumatic Brain Injuries

30% Benefit: Noninvasive Cancer (in situ), Skin Cancer (other than melanoma) - \$250 per lifetime

25% Benefit: Arterial/Vascular Disease

A Health Assessment Benefit is included in your Critical Illness Policy and Lincoln pays \$100 for every year you and any of your covered family members complete a single covered exam, screening or immunization.

Bi-Weekly Employee Contribution*										
Employee				Spouse **			Dependent Children			
Age	\$10,000	\$20,000	\$30,000	\$5,000	\$10,000	\$15,000	Age	\$2,500	\$5,000	\$10,000
17-24	\$3.17	\$6.34	\$9.51	\$1.59	\$3.17	\$4.76	0-26	\$0.84	\$1.68	\$3.36
25-29	\$4.27	\$8.55	\$12.82	\$2.14	\$4.27	\$6.41				
30-34	\$5.51	\$11.02	\$16.53	\$2.76	\$5.51	\$8.27				
35-39	\$7.32	\$14.64	\$21.96	\$3.66	\$7.32	\$10.98				
40-44	\$10.00	\$19.99	\$29.99	\$5.00	\$10.00	\$15.00				
45-49	\$13.23	\$26.46	\$39.68	\$6.61	\$13.23	\$19.84				
50-54	\$16.82	\$33.64	\$50.46	\$8.41	\$16.82	\$25.23				
55-59	\$21.43	\$42.86	\$64.29	\$10.71	\$21.43	\$32.14				
60-64	\$28.94	\$57.89	\$86.83	\$14.47	\$28.94	\$43.41				
65-69	\$40.50	\$81.00	\$121.50	\$20.25	\$40.50	\$60.75				
70+	\$60.21	\$120.42	\$180.64	\$30.11	\$60.21	\$90.32				

**Rates are based on the insured's age at time of original election and do not increase as you get older.*

***Spouse premium is base on employee's age.*

Life Insurance

If you're like most people, when someone says Life Insurance, your first thought is to change the subject – after all, death and dying are not comfortable topics. But, Life Insurance can be just as much about living as dying. It gives you the peace of mind that the people you love will be financially secure if something happens to you. It lets your survivors focus on what they need to do, without the added stress of making ends meet.

Basic Life

OTO Development provides life and matching accidental death & dismemberment insurance in the amount of *one times your basic annual earnings up to a maximum of \$300,000* to all eligible employees as a benefit of employment.

Voluntary Life and AD&D

OTO Development employees have the option to enroll in Voluntary Life Insurance through **Lincoln Financial**. You can elect Voluntary Life coverage for yourself, your spouse and/or your child(ren).

How much can I get?

Employee:

You may purchase in \$10,000 increments up to 5x your annual salary to a maximum of \$1,000,000.

Spouse:

You may purchase for your spouse no more than 50% of your elected amount in \$5,000 increments up to 2.5x employee's annual salary to a maximum of \$250,000.

Child(ren):

This benefit is \$10,000 for children age 6 months to age 26.

The cost is \$2.00 per month.

Guarantee Issue Newly Eligible Employee Only*

Employee - \$250,000

Spouse - \$50,000

Child(ren) - \$10,000

Age Reduction: Employee and spouse benefit amounts are reduced to 65% at age 65 and 50% at age 70.

**Evidence of Insurability required for amounts over guaranteed issue after initial enrollment period has expired.*

Employee & Spouse* Monthly Rates

Age	Rate per \$1,000	Age	Rate Per \$1,000
<35	\$0.80	55-59	\$0.610
35-39	\$0.110	60-64	\$0.670
40-44	\$0.160	65-69	\$1.200
45-49	\$0.230	70-74	\$2.440
50-54	\$0.380	75+	\$6.930

*Spouse rates based on employee's age

Example: A 36 year old female wants to purchase \$50,000 of term life insurance.

.110	X	50	=	\$5.50
Rate per \$1,000		# of units/\$1,000		Monthly Premium

Importance of Selecting a Beneficiary

Selecting a beneficiary is a very personal decision. Some people want to use a death benefit to protect their loved ones, and other people look at it as more of a financial transaction. When you designate beneficiaries, you have the final say over who receives your death benefit. If you do not choose one, your state's laws determine who gets the benefit.



Life Insurance - Voluntary Benefit



Chubb LifeTime Benefit Term provides valuable life insurance protection through age 120!

- Life base insurance premiums are guaranteed never to increase through age 100.
- No medical exams required.
- Fully portable - you own it and take it with you when you leave your employment.
- Spouse and child coverage is available.
- Employee must enroll in order to cover spouse and/or children.
- Spouse and child coverage cannot exceed 50% of associate coverage.
- Provides an Accelerated Death Benefit for Long Term Care.
- The Accelerated Death Benefit for Long Term Care is a benefit that pays 4% of the current death benefit amount payable each month for up to 25 months.

Guaranteed Issue

\$150,000 Employee / \$25,000 Spouse / \$25,000 Child(ren)

Rates: This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. **Your specific rates will be calculated for you in the EMB electronic enrollment system.**

Retirement Savings 401(k)

401(k) Plan – Retirement Plan 2020

To enroll or change contributions or allocation contact BB&T at 800-228-8076 or visit bbt.com/myretirementplan.

With your future in mind, OTO offers all associates the opportunity to contribute through the Company's 401(k) savings plan. You may enroll from first day of employment and contributions will start the first of the month following 60 days of employment.

You may elect to contribute to the 401(k) plan on a pre-tax basis or on an after-tax basis through the Roth 401(k). Plan contributions are managed by BB&T, with a variety of investment options available to individuals enrolling in the plan.

Pre Tax Contribution

You must be 18 to enroll in the Plan and are permitted to defer a percentage of your compensation up to the annual IRS limit of \$19,500. If you are age 50 or older, you may contribute an additional \$6,500 under a special catch-up rule.

Have a retirement fund from a previous company? The plan will accept roll-overs into the 401(k) Plan from other plans or Individual Retirement Accounts (IRAs).



OTO Development, LLC matches 100% of the first 5% of your contribution dollars.



Additional Benefits

Travel Discount Program

Through our brand partner- Marriott, OTO is able to extend to associates great hotel discounts throughout the year for yourself, family and friends. For more information please check with your General Manager or go to Share Point <http://sharepoint.otodevelopment.com/HumanResources/Benefits>

Tickets At Work

OTO is a partner with Tickets At Work offering exclusive discounts, special offers and access to preferred seating and tickets to top attractions, theme parks, shows such as all Disney Parks, Dinner Shows, Las Vegas Performances, Cirque du Soleil, City and Canyon Tours, and New York Broadway Shows. This discount program is free and is available to all Associates!

It is easy to receive a discount -- all you need to do is:

Log into www.ticketsatwork.com

On the right side of the page you will need to enter information in the box "Create a New Account". Enter your name, email address, a personal password, confirm your password, company code (OTOLLC), country, state, and zip code.

Click: "SAVE ACCOUNT"

You will automatically receive an email confirming you have registered. You are now ready to purchase tickets or to view the discounts available for the month.

Website is: www.ticketsatwork.com Company Code: OTOLLC

Tuition Assistance Policy

OTO's new benefit provides up to \$5,000 annually in education reimbursement to qualified associates who are enrolled in a career related undergraduate program, advanced degree and/or certifications.

Full-time associates employed at least 6-months consecutively and demonstrate a satisfactory level of work performance may apply for this benefit.

Below is the link to the Tuition Policy and Form. If you are having trouble with the link, please see your General Manager or contact People Services.
<http://sharepoint.otodevelopment.com/HumanResources/Benefits/Tuition%20Policy>

Holiday Schedule 2020

New Year's Day	Thanksgiving Day
Memorial Day	Day after Thanksgiving
Independence Day	Christmas Eve
Labor Day	Christmas Day

Note: In following Home Office building closure policy, when Christmas Eve falls on a weekend it will not be considered a Paid Holiday. If the Home Office building is scheduled to close on a weekday in observance of Christmas Eve, OTO will observe it as a Paid Holiday Company wide.

Eligibility: Full-time associates who have completed a probationary period of employment will be eligible for a Paid Holiday. You will receive up to eight (8) hours of compensation at your base rate of pay ("Holiday Pay") for a Company approved Holiday. From time to time you may be asked to work on a holiday. If that occurs, you will have the option to take another paid day off in the same work week, or, if your supervisor approves, you may elect to receive pay in lieu of taking the holiday.

To be eligible for any Holiday Pay, hourly associates must work their regularly scheduled work day before and after the holiday and work the holiday if required (unless the holiday ends or precedes your scheduled vacation). Associates on leaves of absence or lay off are not eligible for holiday pay.

This schedule modifies the Holiday Schedule in OTO Employee Handbook. The Company reserves the right to make changes to the Annual Holiday Schedule.

Vacation & Sick Leave

Eligible Associates accrue vacation and sick from their start date and are eligible to use after satisfying the 90 day probationary period. Vacation and sick leave may vary according to state laws, please review your OTO Team Member Handbook for a complete explanation of your vacation and sick leave benefits.

Important Contacts

Vendor	Phone	Website
Medical & Pharmacy United HealthCare Group #912740	844-333-8010	www.myuhc.com
Kaiser Group # Northern CA - 605706 Southern CA - 233690	800-464-4000 - English 800-788-0616 - Spanish	www.kp.org
HSA HSA Bank	800-357-6246	www.hsabank.com
Dental Ameritas Group #010-350929	800-487-5553	www.ameritas.com
Vision Ameritas Group #010-350929	800-487-5553	www.ameritas.com
Term Life and Disability Lincoln Financial Group Group ID: OTODEV	800-423-2765	www.lincolnfinancial.com
Accident & Critical Illness Lincoln Financial Group	877-815-9256	www.lincolnfinancial.com
Permanent Life Insurance Chubb	800-544-9382	www.chubb.com
Accident, Critical Illness & Chubb Claims Assistance Explain My Benefits	321-296-8060, Option 2	service@explainmybenefits.com
401(k) Retirement BB&T	800-228-8076	bbt.com/myretirementplan
Corporate Benefit Contact Michelle Leach	864-327-4051	mleach@otodevelopment.com



Benefit Guide Description

This summary of benefits is not intended to be a complete description of OTO Development's insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although OTO Development maintains its benefit plans on an ongoing basis, OTO Development reserves the right to terminate or amend each plan in its entirety or in any part at any time.

For questions regarding the information provided in this overview, please contact your OTO Development human resources representative.