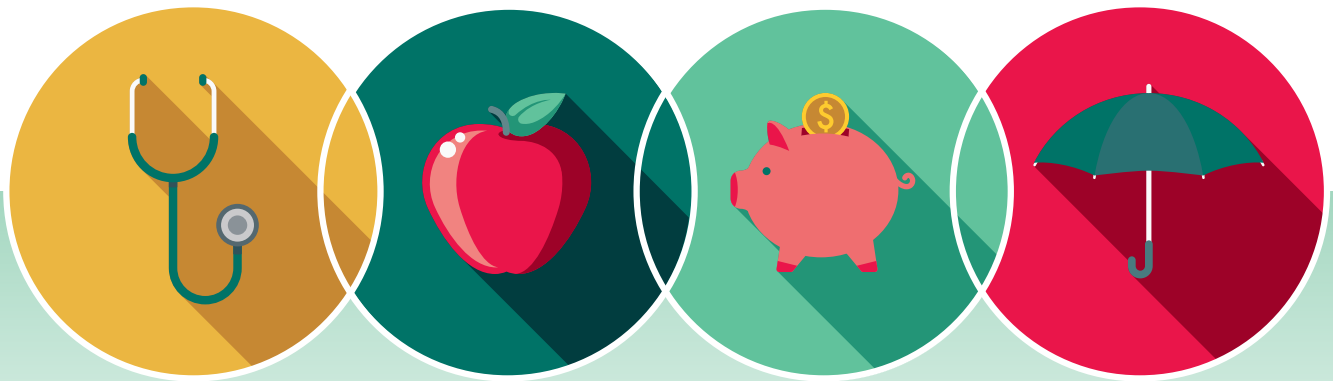


Retail Associates

2021

Benefits Guide



Health • Financial • Work-Life

January 1, 2021 - December 31, 2021

Welcome

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Your benefits are an important part of your overall compensation. Goodwill of Western Missouri & Eastern Kansas is pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

Eligibility

You are eligible for full-time benefits if you work 30 or more hours per week. You are eligible for part-time benefits if you work 20 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- Your legally married spouse
- Your registered domestic partner (RDP) and/or his/her children, where applicable by state law
- Your children who are your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

When Coverage Begins

- **New Hires:** If you enroll on time, coverage is effective on the first of the month following 60 days of employment. If you fail to enroll on time, you will **NOT** have benefits coverage (except for company-paid benefits).
- **Open Enrollment:** Changes made during Open Enrollment are effective January 1 - December 31, 2021.
- **New Hire & Annual Open Enrollment:** If you are a new hire and you signed up for benefits in October or November of 2020, with an effective date of November or December 1, 2020. You will still need to sign up for benefits during the annual open enrollment effective January 1, 2021.

Choose Carefully

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, RDP, or child
- You lose coverage under your spouse's/RDP's plan.
- You gain access to state coverage under Medicaid or CHIP

Making Changes

To make changes to your benefit elections, you must contact Human Resources within 31 days of the qualified life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

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Required Information—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

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(Full-time employees only)

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(Full-time employees only)

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(Full-time employees only)

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Contact information

Enrollment

Visit www.paycor.com and go to your home page and select task to view and select your 2021 benefits.

Medical Plans

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We are proud to offer you a choice among five different medical plans that provide comprehensive medical and prescription drug coverage.

The 2021 PPO Medical Plans:

- \$3,000 PPO Broad Plan
- \$3,000 PPO Optimized Plan
- \$6,500 Value PPO Broad Plan
- \$6,500 Value PPO Optimized Plan
- \$3,000 SpiraCare EPO Plan

▪ The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

BlueKC 3000 PPO Broad Plan (Preferred Care Blue)

This is a **NEW plan design** with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Preferred-Care Blue network. The calendar-year deductible must be met before certain services are covered.

BlueKC 3000 PPO Optimized Plan (BlueSelect Plus)

This is a **NEW plan** with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Blue Select network. The calendar-year deductible must be met before certain services are covered.



Plan Defentions:

- **Annual Deductible:** You must meet the entire annual deductible before the plan starts to pay for non-preventive medical and prescription drug expenses.
- **Coinsurance:** Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80 percent and you may pay 20 percent.
- **Out-of-Pocket Maximum:** Once your deductible and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100 percent of all eligible covered services for the rest of the calendar year.

Medical Plans Continued

BlueKC 6500 Value PPO Broad Plan (Preferred Care Blue)

This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **Preferred-Care Blue network**. The calendar-year deductible must be met before certain services are covered.

BlueKC 6500 Value PPO Optimized Plan (BlueSelect Plus)

This is a **NEW** plan design with premium savings, but still utilizing the Blue Network Savings. This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **BlueSelect Plus network**. The calendar-year deductible must be met before certain services are covered.

BlueKC 3000 SpiraCare EPO Plan (Exclusive Provider Organization)

SpiraCare is built on an Exclusive Provider Organization (EPO) insurance model. While this plan is ideal for members who utilize the no-additional-cost primary and pediatric care at the Care Centers, members still have access to more than 3,000 providers in the **BlueSelect Plus network**. Members will also have the nationwide coverage of the BlueCard network outside of the 32-county Blue KC service area.

SpiraCare Clinic Locations:

- Crossroads
- Lee's Summit
- Liberty
- Overland Park late 2020
- Olathe
- Shawnee
- Wyandotte
- Tiffany Springs

Additional Benefits With Medical Enrollment

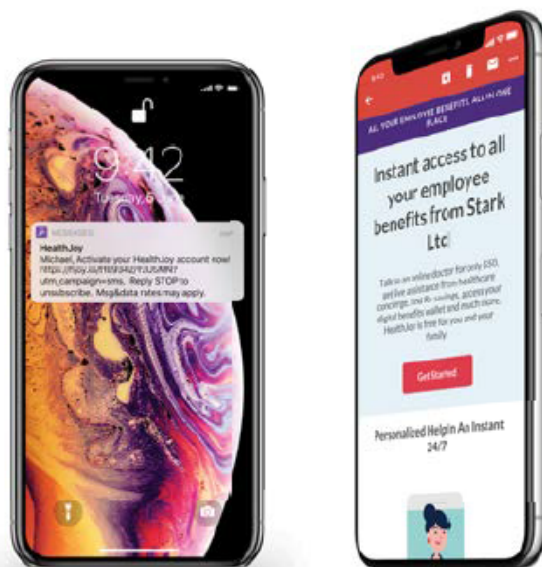
Health Risk Assessment Incentive:

Visit "A Healthier You" on www.mybluekc.com to take your Health Risk Assessment today for the opportunity to reduce your monthly premiums by \$25 each month. See A Healthier You Flyer for instructions on how to take the assessment.



HealthJoy TeleHealth App:

HealthJoy is an all-in-one cost containment and guidance platform that helps employees make better health decisions. The platform brings together medical professionals, advocates, Rx savings, an artificial intelligence-powered virtual assistant, and an easy-to-use app.



TAKE YOUR HEALTH RISK ASSESSMENT TODAY

Know your risks. Easily complete a Health Risk Assessment (HRA) by accessing your personalized A HealthierYou™ wellness portal online.

1 Visit MyBlueKC.com.

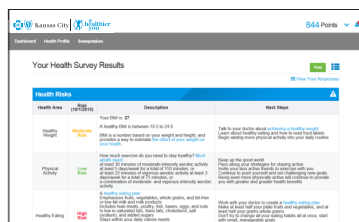
2 If you are a first time visitor, click on **REGISTER NOW**. Please have your member ID card available to reference.

3 Once logged in, click on **A HEALTHIER YOU**.

4 Once on your portal home page, click on **HEALTH RISK ASSESSMENT** to complete your confidential questionnaire.

5 Review your results and personal health summary. If you wish, share your results with your primary care doctor. Remember, your results are not shared with your employer and are intended to assist you in taking steps toward achieving your health goals.

YOUR RESULTS

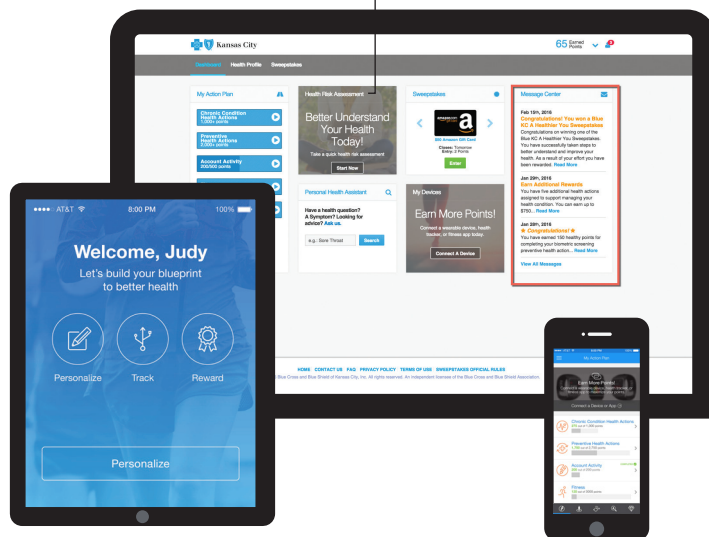


Health Area	Status	Description
Health Weight	At Risk	A healthy diet is essential to living well. It's a healthy diet that can help you manage your weight and health. It's a healthy diet that can help you manage your weight and health. It's a healthy diet that can help you manage your weight and health.
Physical Activity	Good	Physical activity is an important part of staying healthy. It can help you manage your weight and health. It can help you manage your weight and health. It can help you manage your weight and health.
Health Eating	Good	Healthy eating is an important part of staying healthy. It can help you manage your weight and health. It can help you manage your weight and health. It can help you manage your weight and health.

TAKE YOUR HRA ON YOUR COMPUTER, TABLET OR SMARTPHONE!

START HERE

Take the Health Risk Assessment



NOW AVAILABLE TO DOWNLOAD ON THE APP STORE & GOOGLE PLAY STORE



Blue KC A Healthier You HealthMine Services, Inc.

HAVING TROUBLE?

Call Blue KC Customer Service at the number on your member ID card and we can assist!

Medical Plans

Following is a high-level overview of the coverage available. For complete coverage details, please refer to certificate or the Summary Plan Description (SPD) located at www.mokangoodwill.org/benefits.

NOTE~ Only full-time employees working 30 or more hours per week are eligible to enroll in the medical plans.

Key Medical Benefits	Preferred-Care Blue	
	3000 PPO Broad Plan	BlueSelect Plus
	In-Network Only	3000 PPO Optimized Plan Value Plan In-Network Only
Deductible (per calendar year)		
Individual / Family	\$3,000 / \$9,000	\$3,000 / \$9,000
Out-of-Pocket Maximum (per calendar year)		
Individual / Family	\$3,000 / \$9,000	\$3,000 / \$9,000
Covered Services		
Office Visits (physician/specialist)	\$30 / \$60 co-pay	\$30 / \$60 co-pay
SpiraCare Visit (physician/specialist/Urgent Care)	N/A	N/A
Routine Preventive Care	No charge	No charge
Outpatient Diagnostic (lab/X-ray)	Deductible	Deductible
Hi Tech Diagnostics	Deductible	Deductible
Emergency Room	Deductible	Deductible
Urgent Care Facility	\$60 co-pay	\$60 co-pay
Inpatient Hospital Stay	Deductible	Deductible
Outpatient Surgery	Deductible	Deductible
Prescription Drugs (Tiers 1 / 2 / 3) : Optum Rx		
Retail Pharmacy (34-day supply)	\$10 / \$30 / \$50	\$10 / \$30 / \$50
Mail Order (102-day supply)	\$30 / \$90 / \$150	\$30 / \$90 / \$150

Out of Pocket Maximum includes deductible, coinsurance, and co-payments.

Medical Plans (Cont'd)

Following is a high-level overview of the coverage available. For complete coverage details, please refer to certificate or the Summary Plan Description (SPD) located at www.mokangoodwill.org.benefits.

NOTE~ Only full-time employees working 30 or more hours per week are eligible to enroll in the medical plans.

Key Medical Benefits	Preferred Care Blue 6500 Value PPO Broad Plan	BlueSelect Plus 6500 Value PPO Optimized Plan	BlueSelect Plus 3000 SpiraCare EPO Plan
	In-Network Only	In-Network Only	In-Network Only
Deductible (per calendar year)			
Individual / Family	\$6,500 / \$13,000	\$6,500 / \$13,000	\$3,000 / \$9,000
Out-of-Pocket Maximum (per calendar year)			
Individual / Family	\$6,500 / \$13,000	\$6,500 / \$13,000	\$3,000 / \$9,000
Covered Services			
Office Visits (physician/specialist)	Deductible	Deductible	Deductible
SpiraCare Visit (physician/specialist/Urgent Care)	N/A	N/A	No charge
Routine Preventive Care	No charge	No charge	No charge
Outpatient Diagnostic (lab/X-ray)	Deductible	Deductible	Deductible
Hi Tech Diagnostics	Deductible	Deductible	Deductible
Emergency Room	Deductible	Deductible	Deductible
Urgent Care Facility	Deductible	Deductible	Deductible
Inpatient Hospital Stay	Deductible	Deductible	Deductible
Outpatient Surgery	Deductible	Deductible	Deductible
Prescription Drugs (Tiers 1 / 2 / 3) : Optum Rx			
Retail Pharmacy (34-day supply)	\$12 / 100% after deductible Tier 2 & 3	\$12 / 100% after deductible Tier 2 & 3	\$15 / \$50 / Deductible
Mail Order (102-day supply)	\$30 / 100% after deductible Tier 2 & 3	\$30 / 100% after deductible Tier 2 & 3	\$15 / \$125 / Deductible

Out of Pocket Maximum includes deductible, coinsurance, and co-payments.

SpiraCare Enrollment:

- **You must live in one of the following counties to be eligible for the Spira Care Plan:** KS - Johnson and Wyandotte; MO - Jackson, Clay, Cass, Clinton, DeKalb, Johnson, Lafayette, Ray, Caldwell and Platte.
- **Hospitals Include:** Children’s Mercy Hospital, Children’s Mercy Hospital – South; Liberty Hospital; North Kansas City Hospital; Olathe Health –Olathe Medical Center; Truman Medical Center – Hospital Hill; Truman Medical Center – Lakewood; Shawnee Mission Medical Center; The University of Kansas Health System
- **SpiraCare Clinic Locations Include:** Crossroads, Lee’s Summit, Liberty, Olathe, Shawnee, Wyandotte, Tiffany Springs, and Overland Park.



SPIRA CARE CENTERS OFFER:

INTEGRATED PRIMARY CARE



Routine Preventive Care



Adult & Pediatric
Primary Care



Chronic Condition
Management



Behavioral Health
Consultations



Digital X-Rays**



Routine Lab Draws



Patient Wellness
Follow-Ups



Health Coaches
On-Site

CONVENIENT BENEFITS



Select Number of Generic
Prescriptions Filled On-Site*



Referrals & Scheduling for
In-Network Specialists



Support in Understanding
Your Plan's Network



Extended Hours
for Appointments



Access to *A Healthier
You* Platform



Online Appointment
Scheduling



Virtual Care and Online
Communication with Your
Care Team

All services and benefits provided at Spira Care Centers are based on your primary care needs only and must be ordered by a member of the Care Team. This includes digital X-rays, routine lab draws and prescriptions. Orders by a specialist or someone outside of the Care Center cannot be completed or fulfilled at Spira Care.

*For Spira Care members, there are no additional costs for any procedure provided at Spira Care Centers, but a select number of generic prescriptions can be filled on-site at your copay or deductible level.

**X-rays are available at select locations only, must be ordered by a Spira Care provider and are at no additional cost to members.

Understanding Your Plan's Network

Check with your HR department to determine if your company is offering an EPO and/or PPO Spira Care plan.



While your primary care needs can be handled at your Spira Care Center, we recognize that certain circumstances call for outside care – like seeing a specialist, long-term behavioral health support or being admitted to a hospital.

For needs outside of a Care Center, you will have access to your plan's network within the Kansas City metro area and the nationwide BlueCard network for care when traveling outside your service area (applies toward your annual deductible).

It is important to understand if your plan is on an EPO or PPO insurance model. Ask your human resources representative or look on your member ID card.

EPO

In an Exclusive Provider Organization (EPO) insurance model, members must receive all care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county service area) except for emergency services. Non-emergency services received out-of-network will not be covered.

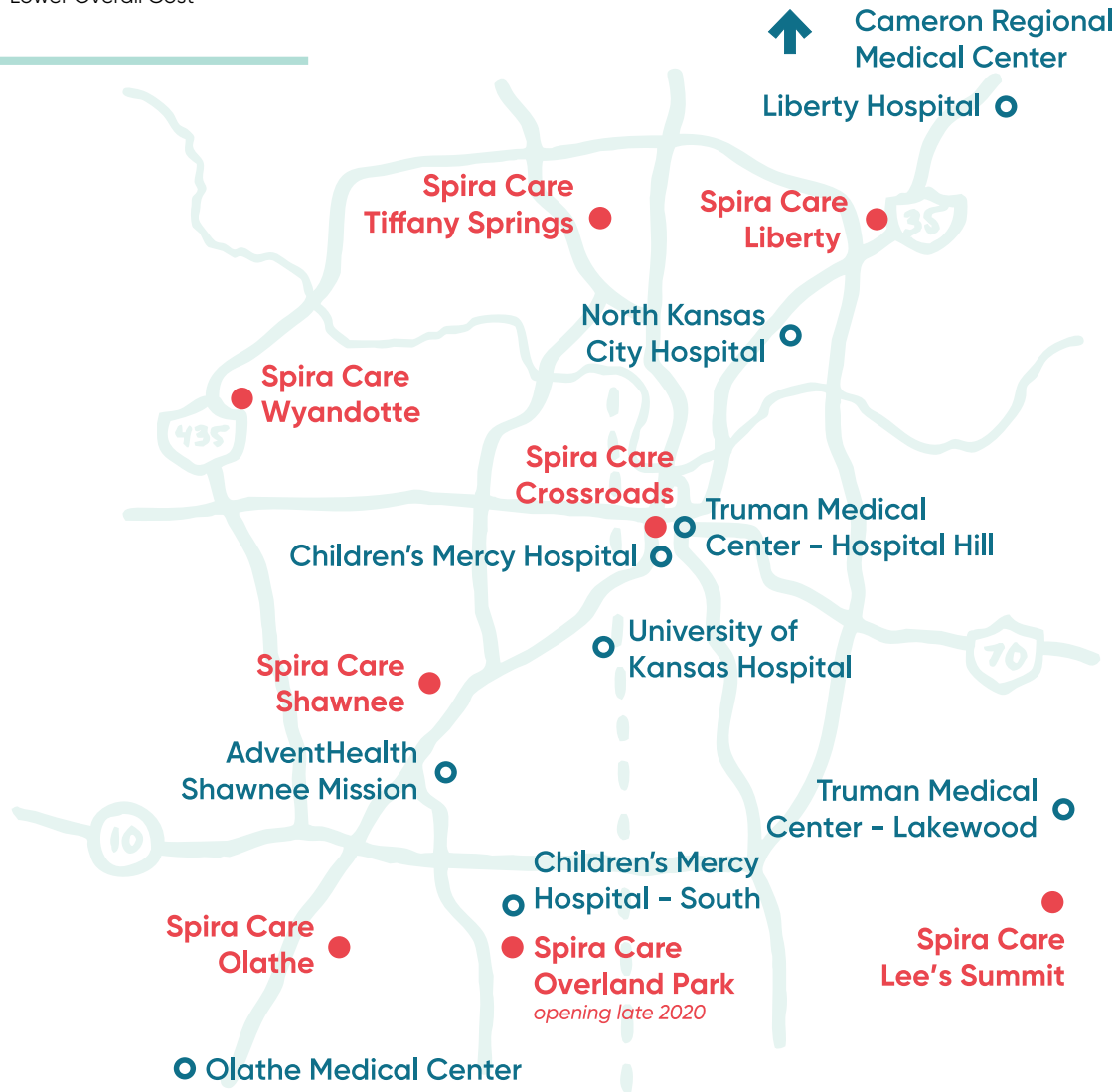
PPO

In a Preferred Provider Organization (PPO) insurance model, members are encouraged to receive care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county service area) but have the option to receive care from out-of-network providers at a higher cost.

Spira Care & BlueSelect Plus Network

Spira Care Centers serve members' primary care needs while access to the BlueSelect Plus network offers coverage for any specialty needs outside the Care Centers.

- 4,100+ Physicians & Specialists
- 11,000 Access Points
- Lower Overall Cost
- In- & Out-of-Network Emergency Room Coverage
- Higher-Quality Care



To learn about the Care Teams at the Care Centers and for hours, visit SpiraCare.com.

Members must receive all care from in-network providers (BlueSelect Plus network in the Kansas City area or BlueCard network outside the 32-county Blue KC service area, when traveling or on vacation, for example). If a member is on a Preferred Provider Organization (PPO) insurance plan, they do have out-of-network coverage, meaning higher out-of-pocket costs will apply.*

Out-of-network benefits are subject to the plan's allowable charge.
Out-of-network providers may bill the member for the remaining balance.

Dental Plan

We are proud to offer you a dental plan.

Delta Dental PPO: This plan offers you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist who participates in the Premier & PPO networks.

Following is a high-level overview of the coverage available.

Key Dental Benefits	Delta Dental PPO
	In-Network Only
Deductible (per calendar year)	
Individual / Family	\$50 / \$150
Right Start 4 Kids (RS4K)	
Kids 12 and under receive 100% coverage, with no deductible, for all services covered under the plan excluding orthodontics, when in-network dentist is seen.	100% coverage excluding orthodontics
Benefit Maximum (per calendar year; Preventive, Basic, and Major Services combined)	
Per Individual	\$1,500
Covered Services	
Unlimited Cleanings (includes regular/prophylaxis cleanings and periodontal maintenance cleanings)	No Charge
Preventive Services	No charge
Basic Services (endo/periodontic, composite fillings, oral surgery)	80%
Major Services (crowns, bridges, root canal)	50%
Orthodontia (child only)	50%; (Lifetime max \$1,000)

Coinsurance percentages shown in the above chart represent what the member is responsible for paying.
If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.



Vision Plan

We are proud to offer you a vision plan.

The **SunLife** vision plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the **Vision Service Provider (VSP)** network.

Following is a high-level overview of the coverage available.

Key Vision Benefits	Frequency	Benefit
Exam	Every 12 months	\$10 Co-pay
Materials Copay		\$25 Co-pay
Lenses		
Single Vision	Every 12 months	\$25 Co-pay
Bifocal	Every 12 months	\$25 Co-pay
Trifocal	Every 12 months	\$25 Co-pay
Frames	Every 24 months	\$130 Allowance, 20% off balance over \$130
Contact Lenses (in lieu of glasses)	Every 12 months	\$130 Allowance
Lasik Discount	Once Per Lifetime	15% off retail price, 5% off promotion price

Cost of Benefits

2021 Goodwill of Western Missouri and Eastern Kansas EMPLOYEE CONTRIBUTIONS

January 1, 2021 - December 31, 2021



Your contributions toward the cost of your medical, dental, and vision benefits are automatically deducted from your paycheck before taxes. The amount will depend upon the plan you select and if you choose to cover eligible family members.

MEDICAL COVERAGE

Retail Associates Employee Contribution				
Medical: 3000 PPO Broad Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$129.60	\$691.22	\$518.41	\$907.21
Medical: 3000 Optimized PPO Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$116.64	\$622.10	\$466.57	\$816.49
Medical: 6500 Value PPO Broad Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$53.48	\$516.94	\$376.43	\$695.19
Medical: 6500 Value PPO Optimized Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$48.13	\$465.25	\$338.79	\$625.67
Medical: 3000 SpiraCare EPO Plan	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$47.73	\$461.45	\$334.15	\$620.56

DENTAL COVERAGE

Retail Associates Employee Contribution				
Dental	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$13.71	\$26.72	\$25.57	\$38.99

VISION COVERAGE

Retail Associates Employee Contribution				
Vision	Employee	Employee + Spouse	Employee + Child(ren)	Family
Employee Semi-Monthly Rates	\$3.95	\$7.86	\$8.46	\$12.48



Flexible Spending Accounts

We provide you with an opportunity to participate in up to two different flexible spending accounts (FSAs) administered through Ameriflex. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes. **Only full-time employees working 30 or more hours per week are eligible.**

Health Care FSA

For 2021, you may contribute up to \$2,750 (subject to IRS approval) to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. Some qualified expenses include:

- Coinsurance
- Copayments
- Deductibles
- Prescriptions
- Dental treatment
- Orthodontia
- Eye exams/eyeglasses
- Lasik eye surgery

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Dependent Care FSA

For 2021, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). Some qualified expenses include:

- Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

FSA Rules

YOU MUST ENROLL EACH YEAR TO PARTICIPATE

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules:

Health care FSA: Unused funds up to \$500 from one year can carry over to the following year. Carryover funds will not count against or offset the amount that you can contribute annually. Unused funds over \$500 will NOT be returned to you or carried over to the following year.

Life and AD&D Insurance

Life Insurance provides your named beneficiary(ies) with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) Insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot, or eye). In the event that your death occurs due to a covered accident, both the Life and the AD&D benefit would be payable.

Basic Life/AD&D (100% EMPLOYEE-paid)

This benefit is provided through **USAb**le for all eligible full-time/part-time employees.

Group Life/AD&D (100% EMPLOYER-paid)

This benefit is provided through **MetLife** for eligible full-time employees only.

Basic Life AD&D Benefit Amount	\$10,000 maximum
Group Life AD&D Benefit Amount	One times your annual salary, up to a \$150,000 maximum

Voluntary Life/AD&D (100% EMPLOYEE-paid)

This benefit is provided through **MetLife** for eligible full-time employees only. If you determine you need more than the basic coverage, you may purchase additional coverage through MetLife for yourself and your eligible family members.

Benefit Option		Guaranteed Issue*
Employee	Up to 5 times base salary; \$10,000 increments up to \$500,000 maximum	\$150,000
Spouse	Up to 50% of employee coverage; \$5,000 increments up to \$250,000 maximum	\$50,000
Child(ren)	Up to 50% of employee coverage for amounts of \$1,000,	\$10,000

*During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

Voluntary Short-Term Disability Insurance

Voluntary Benefits

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness. **NOTE~Only full-time employees working 30 or more hours per week are eligible.**

Voluntary Short-Term Disability	
Provided at an affordable group rate through MetLife	
Benefit Percentage	60%
Weekly Benefit Maximum	\$1,000
When Benefits Begin	After 14th day of accident or sickness
Maximum Benefit Duration	Up to 11 weeks

Employee Assistance Program (EAP)

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at NO COST to you. This program is now being offered through **Personal Assistance Service**.

The PAS can help with the following issues, among others:

- Mental health
- Relationships or marital conflicts
- Child and eldercare
- Substance abuse
- Grief and loss
- Legal or financial issues
- Mobile App: wayForward

PAS Benefits

- Assistance for you and your household members
- Up to six short term PAS sessions with a counselor per issue, per year, per individual
- Unlimited toll-free phone access and online resources using Goodwill code: 0534 or wayFoward app code: goodwill mokan

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It's true! Our voluntary benefits through **SunLife** are designed to complement your health care coverage and allow you to customize our benefits to you and your family's needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents.

You can enroll in these plans during Open Enrollment—they're completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

Accident Insurance

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries.

Critical Illness

Did you know that the average total out-of-pocket cost related to treating a critical illness is over \$7,000? With critical illness insurance, you'll receive a lump-sum benefit if you are diagnosed with a covered condition that you can use however you would like, including to help pay for: treatment (e.g. experimental), prescriptions, travel, increased living expenses, and more.

Valuable Extras

We also offer the following additional benefits:

- Education Assistance
- Pet Insurance
- Telehealth App
- Paid Parental Leave
- VTO (Volunteer Time Off)
- 403(b) Retirement Plan
- PTO (Paid Time Off)
- Discounts Opportunities
- Helping Hands Fund

MetLife: Voluntary Life and AD&D Premiums

Deductions for voluntary Life/AD&D are taken from your paycheck after taxes.

All eligible full-time employees working 30 or more hours per week are allowed to increase their benefit amount by 1 increment (not to exceed the Guarantee Issue amount) without completing an Evidence of Insurability (EOI) form during open enrollment.

Employee / Spouse Life And AD&D Semi-Monthly Premiums										
Premium are based on the employee's age on each policy anniversary										
Benefit	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$20	1.24	1.44	1.74	2.14	3.34	5.14	8.54	14.24	26.84	43.34
\$30	1.86	2.16	2.61	3.21	5.01	7.71	12.81	21.36	40.26	65.01
\$40	2.48	2.88	3.48	4.28	6.68	10.28	17.08	28.48	53.68	86.68
\$50	3.10	3.60	4.35	5.35	8.35	12.85	21.35	35.60	67.10	108.35
\$60	3.72	4.32	5.22	6.42	10.02	15.42	25.62	42.72	80.52	130.02
\$70	4.34	5.04	6.09	7.49	11.69	17.99	29.89	49.84	93.94	151.69
\$80	4.96	5.76	6.96	8.56	13.36	20.56	34.16	56.96	107.36	173.36
\$90	5.58	6.48	7.83	9.63	15.03	23.13	38.43	64.08	120.78	195.03
\$100	6.20	7.20	8.70	10.70	16.70	25.70	42.70	71.20	134.20	216.70
\$110	6.82	7.92	9.57	11.77	18.37	28.27	46.97	78.32	147.62	238.37
\$120	7.44	8.64	10.44	12.84	20.04	30.84	51.24	85.44	161.04	260.04
\$130	8.06	9.36	11.31	13.91	21.71	33.41	55.51	92.56	174.46	281.71
\$140	8.68	10.08	12.18	14.98	23.38	35.98	59.78	99.68	187.88	303.38
\$150	9.30	10.80	13.05	16.05	25.05	38.55	64.05	106.80	201.30	325.05

Coverage available up to \$500,000 depending on employee salary. To calculate rate, multiply available rate by your desired election amount or contact Human Resources. AD&D cost required in all available Life Insurance policies.

Spouse Life and AD&D Semi-Monthly Premiums										
Premiums are based on the employee's age on each policy anniversary										
Benefit	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5	.31	.36	.44	.54	.84	1.29	2.14	3.56	6.71	10.84
\$10	.62	.72	.87	1.07	1.67	2.57	4.27	7.12	13.42	21.67
\$15	.93	1.08	1.31	1.61	2.51	3.86	6.41	10.68	20.13	32.51
\$20	1.24	1.44	1.74	2.14	3.34	5.14	8.54	14.24	26.84	43.34
\$25	1.55	1.80	2.18	2.68	4.18	6.43	10.68	17.80	33.55	54.18
\$30	1.86	2.16	2.61	3.21	5.01	7.71	12.81	21.36	40.26	65.01
\$35	2.17	2.52	3.05	3.75	5.85	9.00	14.95	24.92	46.97	75.85
\$40	2.48	2.88	3.48	4.28	6.68	10.28	17.08	28.48	53.68	86.68
\$45	2.79	3.24	3.92	4.82	7.52	11.57	19.22	32.04	60.39	97.52
\$50	3.10	3.60	4.35	5.35	8.35	12.85	21.35	35.60	67.10	108.35

Coverage available up to 50% of employee elected amount. To calculate rate, multiply available rate by your desired election amount or contact Human Resources. AD&D cost required in all available Life Insurance policies

Child Amount for Voluntary Life	\$1,000	\$5,000	\$10,000
Child Life and AD&D Premium	0.145	0.73	1.46

Employee must also be enrolled in coverage to elect for Child Life and AD&D

USAbLe: Voluntary Life Premiums

USAbLe All Staff Coverage: Voluntary Life and AD&D

\$10,000 of coverage

\$1.60 semi-monthly deduction

MetLife: Short Term Disability Premiums

All eligible full-time employees are allowed to increase their coverage benefit amount by \$50 at open enrollment if you were already enrolled up to 60% of your salary. If you did not elect short-term disability when you were initially hired, you can only elect \$100 coverage amount at open enrollment with completing an Evidence of Insurability (EOI) form.

Maximum Weekly Benefit	Age Scale With Semi-Monthly Deduction				
Benefit	0-44	45-49	50-54	55-59	60+
\$100	2.70	2.55	2.90	3.80	4.15
\$150	4.05	3.83	4.35	5.70	6.23
\$200	5.40	5.10	5.80	7.60	8.30
\$250	6.75	6.38	7.25	9.50	10.38
\$300	8.10	7.65	8.70	11.40	12.45
\$350	9.45	8.93	10.15	13.30	14.53
\$400	10.80	10.20	11.60	15.20	16.60
\$450	12.15	11.48	13.05	17.10	18.68
\$500	13.50	12.75	14.50	19.00	20.75
\$550	14.85	14.03	15.95	20.90	22.83
\$600	16.20	15.30	17.40	22.80	24.90
\$650	17.55	16.58	18.85	24.70	26.98
\$700	18.90	17.85	20.30	26.60	29.05
\$750	20.25	19.13	21.75	28.50	31.13
\$800	21.60	20.40	23.20	30.40	33.20
\$850	22.95	21.68	24.65	32.30	35.28
\$900	24.30	22.95	26.10	34.20	37.35
\$950	25.65	24.23	27.55	36.10	39.43
\$1,000	27.00	25.50	29.00	38.00	41.50

Coverage available up to 60% of your weekly income. Coverage is rounded to the nearest \$50.

SunLife: Accident Premiums

Semi-Monthly Accident Premiums	
Employee Only	\$7.94
Employee & Spouse	\$10.40
Employee & Child(ren)	\$12.29
Family	\$14.75

Sunlife: Critical Illness Premium

How much does Critical Illness Cost?

Your cost depends on your age as of the effective date and whether or not you use tobacco. Because issue age rating applies, your premium will not increase due to age changes.

You may elect coverage for yourself up to \$10,000. Your benefit is subject to a 50% reduction, rounded to the next higher \$1,000, when you turn age 70.

Employee Critical Illness Insurance Monthly Premiums												
Non-Tobacco User							Tobacco User					
Issue Age	<30	30-39	40-49	50-59	60-64	65+	<30	30-39	40-49	50-59	60-64	65+
\$10,000	8.40	13.60	21.80	41.60	60.30	70.60	12.30	22.70	38.50	76.80	102.90	108.80

If you elect coverage for yourself, you can elect coverage for your eligible family members. You may purchase coverage for your spouse in the amount of \$5,000.

If your dependents first became eligible for this coverage within the last 90 days, you can enroll your spouse for the amount of \$5,000 and \$5,000 for each child without answering health questions. You will need to complete a simple health questionnaire if your dependent became eligible more than 90 days ago. Once approved, the pre-existing condition limitations will apply.

Eligible family members include your spouse and children from live birth to less than 26. See your certificate of group insurance policy for additional eligibility details.

Spouse Critical Illness Insurance Monthly Premiums												
Non-Tobacco User							Tobacco User					
Issue Age	<30	30-39	40-49	50-59	60-64	65+	<30	30-39	40-49	50-59	60-64	65+
\$5,000	4.55	7.00	10.90	20.30	29.10	34.10	6.45	11.35	19.00	37.35	49.90	52.65

Child Critical Illness Insurance Monthly Premiums												
\$5,000	\$0.85											

One premium covers all of your dependent children

Goodwill requires all employees enrolled in agency medical plans to participate in HealthJoy.



Healthcare Is Complicated.
HealthJoy Makes It Simple.

No Smartphone? No Worries.

HealthJoy is the first stop for all your healthcare and employee benefits needs. We make everything simple, quick and painless. Don't try and navigate your healthcare alone. HealthJoy makes the right decision the easy decision. We'll save you time, money and a ton of aggravation.

Talk with us today by calling (877) 500-3212
or via email at groups@healthjoy.com.



HealthJoy Services



Healthcare Concierge

Confused about your benefits? Don't worry — we are here to help. We can explain deductibles, formularies, out-of-pocket expenses, co-insurance, preauthorization, copays and more.



Online Medical Consultations

Not feeling well? Connect with a doctor anytime, anywhere - 24/7/365. We can even write prescriptions. Give us a call.



Provider Recommendations

Need an awesome doctor or facility that takes your insurance? Our Concierge will extensively research every recommendation and call to confirm in-network participation and availability.



Rx Savings Review

Want to save money on your prescriptions? We'll review your medications and identify lower-cost alternatives. Let our team help reduce your medication spend.



Medical Bill Review

Got a medical bill that's confusing? Our team of experts can answer questions, explain how billing works, and negotiate with providers to save you money. Just email us your bill at groups@healthjoy.com.

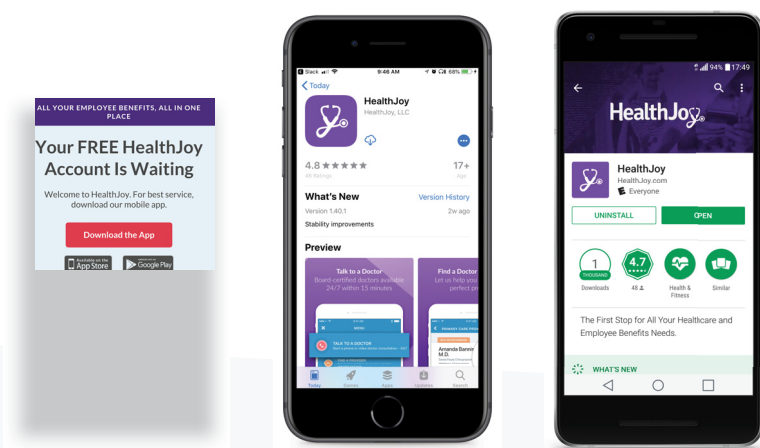


Health Spending Accounts

Trying to understand your HSA, HRA or FSA? We can explain what's a qualified expense including medical, dental, vision and prescription spending.

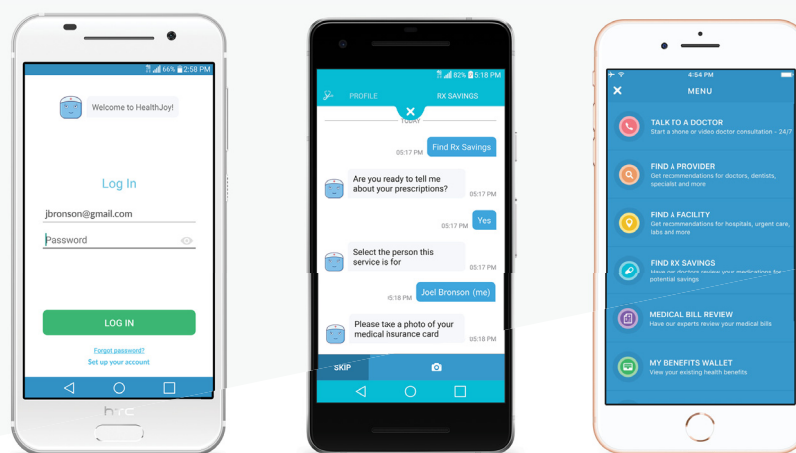
Step 4: Download the App

Next download, install and log into the HealthJoy app. The app is available for Android, iPhone, and iPad and requires an Internet connection. Just click the download button at the end of the setup process and will be taken to our app within your smartphone's app store.



Step 5: Log In

Finally, after you download the HealthJoy app, all you need to do is log in to the app with the email address where you received your invitation and the password you created. JOY, your virtual healthcare assistant, will welcome you to the app. You can start using the app within seconds.



Did you forget your password or missed your activation email?

Forgot password — If you forgot your password, all you need to do is open the HealthJoy app and tap the “Forgot Password?” link at the bottom of the login screen. We will send you a link to create a new password to the email your company supplied us.

New Activation Email — If you can't find or accidentally deleted our activation email, click “Set up your account” at the bottom of the login screen to request a new one. We will ask you for your email address, and our Concierge will confirm your eligibility. We'll send a new activation email as soon as possible.

If you have any other issue with activation or logging into our system, please call or email us at:

groups@healthjoy.com

(877) 500-3212



How to Download and Activate HealthJoy

HealthJoy is the first stop for all your healthcare and employee benefits needs. Getting started is simple, all you need to do is activate your HealthJoy account and download our app.



SMS

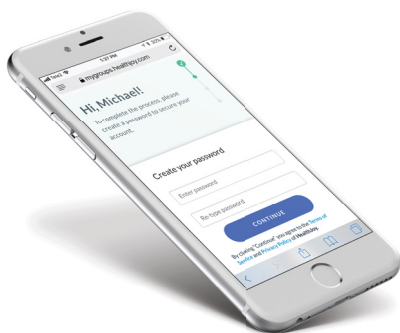
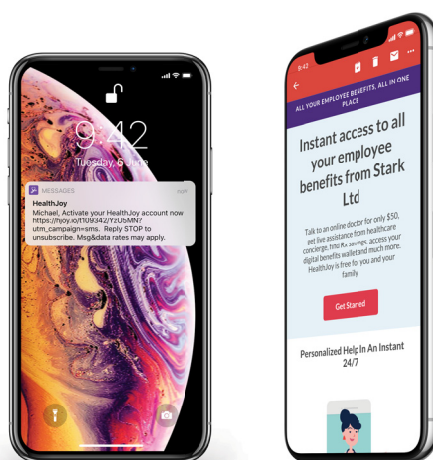


Email

You'll receive a welcome message in two ways: email and text messages to your smartphone (when supplied by your company).

Step 1: Receive Activation Email

To activate, click the web link in either message from your smartphone. The link will take you to an activation screen where you can create an account.

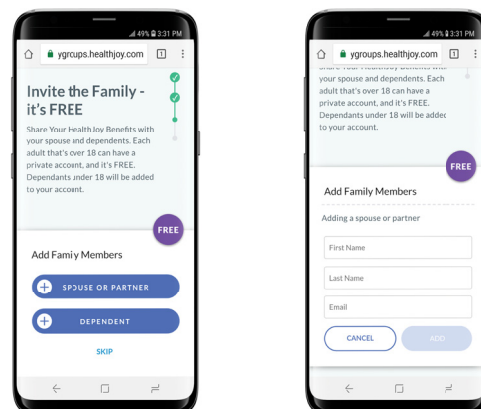


Step 2: Create Password

You'll be taken to a web page asking you to create an 8 character password (minimum).

Step 3: Add Family Members

Adding family members is free, and we encourage you to invite all members of your immediate family that are over 18 years old. They will get access to all the same services including access to free healthcare Concierges and online doctors.



Employee Assistance Program



Your Resource for Life's Questions

Each of us experiences demands for our time and energy, both on and off the job. In addition to our responsibilities at work, we also seek to fulfill our family responsibilities, meet our financial obligations, enjoy personal interests, and maintain a healthy family and social life. The key to balancing it all is having access to the right tools, resources and support.

Personal Assistance Services (PAS) provides you with a wealth of confidential, professional services that can help you address challenges and strengthen your work and home life.

This is a pre-paid benefit funded completely by your employer and free to you and your dependents. The EAP is confidential - PAS does not disclose information to anyone about your participation unless you give your consent to do so (except as required by law).



Through PAS you have access to:

- Elder care managers
- Child care specialists
- Certified child development and parenting professionals
- Organization and time management specialists
- Retirement coaches
- Career coaches
- Tobacco cessation coaches
- Master's level licensed counselors
- Registered and licensed dietitians
- Certified financial counselors
- Attorneys
- Life coaches
- Health coaches
- Self-paced cognitive behavioral therapy through the wayForward digital app
- Downloadable resources, financial tools, legal forms and more on the PAS website

website: <https://www.paseap.com>

To register, use organization code: **0534**

wayForward app code: **goodwill mokan**



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800.356.0845 • www.paseap.com

[Click here](#) or scan

to download the wayForward app

My Pet Protection[®] from Nationwide[®]

Now with options to meet every budget.

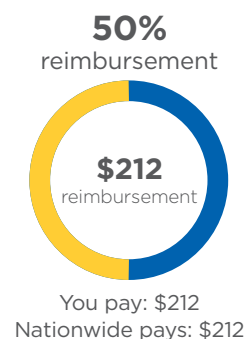
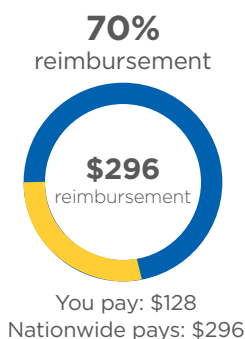
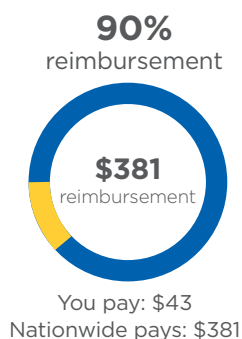


Our popular My Pet Protection pet insurance plans now feature more choices and more flexibility

- ✓ Get **cash back** on eligible vet bills
Choose from three levels of reimbursement:
90%, 70% or 50%*
- ✓ Available **exclusively for employees**
These plans aren't available to the general public
- ✓ **Same price for pets of all ages**
Your rate won't go up because your pet had a birthday
- ✓ Use **any vet**, anywhere
No networks, no pre-approvals
- ✓ Optional **wellness coverage** available
Includes spay/neuter, dental cleaning, exams, vaccinations and more

Choose the reimbursement level that fits your needs

Problems such as upset stomach are among the most common reasons dogs and cats go to the vet. The average cost for this kind of visit is **\$424**. Here's how My Pet Protection would cover the bill.*



Examples reflect reimbursement after \$250 annual deductible has been fulfilled.

Get more—enjoy these extras when you protect your pet with a Nationwide pet insurance policy

vethelpline[®]

Unlimited, 24/7 access to a veterinary professional (\$150 value).



Multiple-pet discounts available.[†]



Mobile claims submission with the free VitusVet app.



Fast, convenient electronic claim payments.



Access to our award-winning magazine, *The Companion*.



Discounts on hand-picked pet products and services.

Get a fast, no-obligation quote today at Petinsurance.com/mokangoodwill





Choose the level of coverage that fits your needs

Get 90%, 70% or 50% reimbursement on these vet bills and more.*



Accidents, including poisonings and allergic reactions	✓	✓
Injuries, including cuts, sprains and broken bones	✓	✓
Common illnesses, including ear infections, vomiting and diarrhea	✓	✓
Serious/chronic illnesses, including cancer and diabetes	✓	✓
Hereditary and congenital conditions	✓	✓
Surgeries and hospitalization	✓	✓
X-rays, MRIs and CT scans	✓	✓
Prescription medications and therapeutic diets	✓	✓
Wellness exams	✓	
Vaccinations	✓	
Spay/neuter	✓	
Flea and tick prevention	✓	
Heartworm testing and prevention	✓	
Routine blood tests	✓	

Both plans feature a \$250 annual deductible and have a maximum annual benefit of \$7,500.

Pre-existing conditions are not covered. Any illness or injury a pet had prior to start of policy will be considered pre-existing.*

How to use your pet insurance plan

1



Visit any vet, anywhere.

2



Submit claim.

3



Get reimbursed.

Get a fast, no-obligation quote today at [Petinsurance.com/mokangoodwill](https://petinsurance.com/mokangoodwill)

To enroll your bird, rabbit, reptile or other exotic pet, call 877-738-7874.

*Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions. Reimbursement options may not be available in all states. *Pet owners receive a 5% multiple-pet discount by insuring two to three pets or a 10% discount on each policy for four or more pets.

Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Such terms and availability may vary by state and exclusions may apply. Underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH, an AM Best A+ rated company (2018); National Casualty Company (all other states), Columbus, OH, an AM Best A+ rated company (2018). Agency of Record: DVM Insurance Agency, Nationwide, the Nationwide N and Eagle, and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. ©2019 Nationwide. 19GRP5915



The Agency awards PTO (Paid Time Off) to employees on a per-payroll basis to allow employees to take time away for illness or personal reasons with the peace of mind that no income will be lost for that time off.

PTO is eligible to all full-time employees immediately upon hire and part-time employees after one year of service. PTO may be used if the employee has accrued time available. Employees should submit PTO requests on the approved form and provide two weeks' notice to the supervisor when PTO is planned. PTO for unplanned or last minute requests may be approved at supervisor discretion. Supervisors are to take Agency and business needs into consideration when approving requests. Hourly staff may use PTO in 1 hour increments; salaried staff may use PTO in half-day (4 hour) increments. If an employee takes time off and does not have PTO to cover the absence, it will be time off without pay. Actual time worked plus PTO should not exceed regular work schedule.

Unused PTO at time of termination

Unused PTO will be paid to an employee upon separation from the Agency when a written 2-week notice of resignation is given. Time will not be paid when an employee is terminated for cause or leaves without a 2-week written notice. Unused PTO time will be paid on the employee's final paycheck. The final 2 weeks must be worked unless agreed upon in advance by senior management. Executive staff will be required to give 3 week notice.

Cashing out PTO

Full time employees will be eligible each year to cash out up to 10 days (or 80 hours) of PTO. Part time employees will be eligible each year to cash out up to 10 days (or 56 hours) of PTO. This is allowed once per rolling 12 month period. PTO is cashed out on a 1-for-1 ratio. All request will be paid out on the next pay cycle.

PTO Banks at the end of the year

If an employee has unused PTO at the end of the calendar year, it will be rolled over into their PTO bank for the following year according to the chart below. The eligible amount for rollover directly relates to the employee's tenure. If the amount of unused time exceeds the amount allowed to roll over, the employee may place unused time in a "sick bank" (see below).

PTO	0-10 years Tenure	10-20 years Tenure	20 + Years Tenure
Amount of PTO that can be rolled into next year's PTO Bank	Up to 10 days	Up to 15 days	Up to 20 days
What happens to remaining PTO after rolling amount into next year's PTO Bank?	PTO hours can be placed in the Sick Bank or cashed out as a 1 for 1 ratio. (See cashing out PTO)		
Maximum bankable hours	No Maximum in either PTO or sick bank		

Sick Bank

The sick bank is PTO time that was unused by an employee the previous year. This bank is meant to be a short-term disability (STD) fund for employees to allow for paid time off during FMLA-qualifying events that will require the employee to be gone at least 3 days. This bank of time may be used in lieu of PTO and unused time in their bank will not be paid upon separation from the agency.

Employees will be eligible each year to cash out up to half of their sick bank balance. This is allowed once per rolling 12 month period. Sick bank is cashed out on a 1-for-1 ratio. Unused sick bank will not be payable upon separation. All request will be paid out on the next pay cycle.

PTO Grid for 2021		Numbers represent hours accrued per pay period	
Years of Service	PTO –A	PTO –B	PTO - C
0	0	3.69	4.27
1	2.15	3.69	4.27
2	2.15	5.23	5.81
3	2.15	5.23	5.81
4	2.15	5.23	5.81
5	2.15	6.77	7.35
6	2.15	6.77	7.35
7	2.15	6.77	7.35
8	2.15	8.31	8.89
9	2.15	8.31	8.89
10	2.15	9.23	9.81
	Part Time Employees (after one year of service)	Full Time Employees	Retail Management (with <u>required</u> 45 hour work week)

Retail Holidays:

- Easter: paid straight time unless worked, then paid double time
- Thanksgiving: closed, paid straight time
- Christmas: closed, paid straight time
- Employees Birthday: floating holiday, paid straight time.
- Anniversary Date: floating holiday, paid straight time.

Federally recognized holidays that are not included on the above list will be paid as straight time.

Bereavement Leave

Bereavement leave consists of up to 5 paid days off per year for immediate family only:

- Up to 3 days will be granted for grandparent and grandchild and spousal equivalent, parent-in-law, brother/sister-in-law or daughter/son-in-law.
- Up to 5 days will be granted for child, step-child, spouse, domestic partner, siblings, parent or step-parent.

Goodwill will provide 6 weeks of paid parental leave to employees following the birth of an employee's child or the placement of a child with an employee in connection with adoption. The purpose of paid parental leave is to enable to employee to care for their newborn or newly adopted child. This policy will run concurrently with the Family Medical leave Act (FMLA), as applicable.

Eligibility

Eligible employees must meet the following criteria:

- Have been employed with the company for at least 12 months.
- Have worked at least 1,250 hours during the 12 consecutive months immediately preceding the date the leave would begin.
- Be a full-time, regular employee (temporary employees and interns are not eligible for this benefit).

In addition, employees must meet one of the following criteria:

- Have given birth to a child.
- Be a spouse or committed partner of a woman who has given birth to a child.
- Have adopted a child (the child must be age 17 or younger). The adoption of a new spouse's child is excluded from this policy.

Amount, Time Frame, and Duration of Paid Parental Leave

- Eligible employees will receive a maximum of 6 weeks of paid parental leave per birth or adoption of a child/children.
- Employee who has one full year of service qualifies for 50% of their average weekly salary. Employee who has three full years of service qualifies for 100% of their salary. Paid parental leave will be paid on a biweekly basis on regularly scheduled pay dates. A work week cannot exceed 40 hours unless designated by the Agency.
- Employees must take paid parental leave in one continuous period of leave during a three-month period surrounding the birth or adoption of a child. Any unused paid parental leave will be forfeited at the end of the 3-month time frame.
- Upon termination of the individual's employment at the Agency, s/he will not be paid for any unused paid paternity leave for which s/he was eligible.

After the paid parental leave is exhausted, the balance of FMLA leave (if applicable) will be compensated through employee's accrued sick, vacation, or PTO. Upon exhaustion of accrued sick, vacation or PTO, any remaining leave will be unpaid leave. Please refer to the Family and Medical Leave Policy for further guidance on the FMLA.

The Agency will maintain all benefits for employees during the paid parental leave period just as if they were taking any other Agency paid leave such as paid vacation leave, PTO or paid sick leave. If a company holiday occurs while the employee is on paid parental leave, such day will be charged to holiday pay; however, such holiday pay will not extend the total paid parental leave entitlement.

Requests for Paid Maternity Leave

The employee will provide his or her supervisor and the Human Resources Department with notice of the request for leave at least 30 days prior to the proposed date of the leave (or if the leave was not foreseeable, as soon as possible). The employee must complete the necessary HR forms and provide all documentation as required by the HR department to substantiate the request. As is the case with all company policies, the organization has the exclusive right to interpret this policy.

Goodwill of Western MO & Eastern KS recognizes the need to volunteer time to our community. Goodwill encourages employees to participate in volunteer activities by providing the benefit of paid time off to volunteer, also referred to as Volunteer Time-Off (VTO). Goodwill's VTO policy is designed to encourage individuals and work teams to conduct volunteer projects that support community needs. Employees may use VTO to contribute their time and talents to recognized charities, causes and not-for-profit organizations that make a positive difference in deepening community connections.

Eligibility

- All FT and PT employees in good standing can use the VTO policy subject to supervisor approval.
- Supervisors have the right to deny a request on account of organizational demands.
- Full-time employees can volunteer up to 16 hours per calendar year (one day every 6 months). FT employees may take VTO in 4 hour or 8 hour increments not to exceed 2 days in a calendar year.
- Part-time employees are eligible to take VTO up to 5 hours increments. To qualify as paid VTO the volunteer work must be performed during the employee's scheduled working hours.
- Temporary employees are not eligible to participate.
- The full balance of the VTO hours are available starting on January 1 of every year. Unused hours cannot be accrued or carried-over into the following year.
- VTO is never paid out if it is not used. Usage of VTO or lack of usage does not affect the accrual of vacation or any other type of time off.

Exceptions

Employees on leave of absence of any kind may not participate. Employees who have been placed on a Performance Improvement Plan (PIP), have a written attendance warning or have been subject to disciplinary action in the six month prior are not eligible to participate.

Guidelines for Volunteering

Goodwill employees can use their VTO to support programs and activities encouraging health and well-being in the community and the workplace, as well as human rights.

Examples of projects approved for VTO:

- Donating time at a food bank
- Cleaning up a public area, highway or park
- Collecting items, then filling and distributing back to school packs
- Participating in a Multiple Sclerosis bike-a-thon fundraiser
- Organizing a Cancer walk or run
- Playing in a fundraising tournament
- Volunteering in a classroom or school field trip
- Volunteering at an animal shelter
- Helping with events for a hospital program on health and wellness
- Doing skills-based volunteering at a not-for-profit location

Goodwill's organizational needs take precedence should there be a conflict with scheduling. If any concerns arise, your manager or Human Resources should be contacted.

Goodwill of Western MO and Eastern KS provides education assistance to employees to encourage career development through further education. An employee may qualify for up to \$5,000 per calendar year in education assistance. Education assistance is available to employees seeking an Associate Degree, Bachelor's Degree, Master's Degree, or Doctoral Degree. Education assistance is available based on a calendar year and dependent on the financial success of the Agency

To be eligible for the educational assistance program, an employee must: be an active, regular, full-time employee.

- Have completed one year of full-time employment before the course begins.
- Be in good standing, which means the employee cannot be on any disciplinary action or performance improvement plan at the time of application.
- Education assistance must be approved in advance by the employee's supervisor and Human Resources.

Additional guidelines:

- Employee must submit their application for approval to their supervisor and to the Benefits Manager. The application must be submitted prior to the start of classes.
- Employee must receive the grade of a "C" or above.
- Employee will have 30 days from course completion to submit receipts/course grades.
- Employee who does not meet the requirements of the class or provide required documents as outlined by this policy will be required to pay back funds through a repayment agreement over a 12-month period.
- Eligible expenses include tuition, fees and course materials like textbooks, supplies and equipment.
- Eligible expenses do not include the cost of computer or other supplies that can be retained by the employee after completing the course instruction. Supplies are those considered necessary for a course and stated in syllabus. (HR will make the final decision if an expense will be covered)
- Eligible employee can receive up to \$5,000 per calendar year in reimbursements for tuition, fees and course materials at an accredited institution.
- Assistance should not exceed \$2,500 per semester.
- Maximum assistance will not exceed \$20,000 per employee, over the total course of their employment.
- The employee must agree to stay with the company for one year after completing course work or earning a degree, or they must repay the tuition assistance on a prorated basis.

Acceptable Hours:

Approved course(s) and or program(s) are not to be taken during regular working hours. Class attendance should not conflict with the employee's job in any way.

Please contact your Benefits Manager for full details.

**Goodwill has many additional benefits for you to enjoy.
Take a look here to find other opportunities for you and your family!**

Goodwill Store Discount:



Employee discount of 30% at all the stores.

Goodwill GED Scholarship Program:



If you have not completed your GED and are interested in attending classes and sitting for the GED exam, we can help with scholarships for approved employees. Please contact your Benefits Specialist for more information.

Cell Phone Plans and Equipment:



Sprint Phone Service: Receive up to 10% discounts on select plans and special promotions on equipment. New customers visit www.sprint.com/goodwill or visit a retail store and mention code: NAGOI_ZZZ. Existing customers visit www.sprint.com/verify or call (866) 639-8354 and mention code: NAGOI_ZZZ.



AT&T Phone Service: Go to www.att.com/wireless/goodwillintl, or visit an AT&T store and mention FAN: 2408927 to save 21% on select plans and to waive selected activation fees.

Office Supplies:



Dell Computers: Visit www.dell.com/mpp/goodwill for discounts up to 20% all personal purchases, or call (800) 695-8133 and reference Member ID: GS17104034

Home Care:



Penske Truck Rental: Call (800) 467-3675 and mention "Goodwill" to save 10% on truck rentals.

Goodwill's retirement plan, called a 403b, is available to you now, if you are over the age of 18. All employees are eligible for a 4% match of contributions after one year of employment.

Vesting:

50% after one year

100% after two years

A few details to get you started:
403b Retirement Plan #7-13400

Questions about how to enroll?

Visit www.principal.com/enroll or go to www.mokangoodwill.org under Work for Goodwill/Retirement Plan Information.

Questions about your plan?

Contact Principal Financial at 800-547-7754 or online at www.Principal.com

Questions about investment choices?

Contact Gary Liberty or Grant Ingram at 913-253-1400

When can I begin receiving benefits from the retirement plan?

- Retirement (age 59.5)
- Age 59-1/2 and still working
- Qualified reservist
- Death
- Disability
- Termination of Employment

What if I need to access the money for an emergency?

The plan offers financial hardship withdrawals for "immediate and heavy financial need".

The plan also offers the loan option of borrowing up to 50% of the vested account balance.

How often can I make changes to the investment options in the retirement plan?

Anytime.





Looking for an opportunity to pay it forward? Goodwill has a program to help your coworker when they are in need of financial assistance!

The Helping Hand Fund was created by the Agency to aid employees who need assistance with a significant financial hardship situation. A committee composed of employees representing each division administers the fund. The committee establishes the eligibility requirements, the procedures for the distribution of funds and determines whether the requests meet the established guidelines.

If you would like to become a contributor to the Employee Emergency Fund, please contact the Human Resources Department or complete this election form. Contributions to the Fund are made via payroll deductions and employees may contribute any amount between 50 cents and \$10 per paycheck. Contributions are not tax deductible.

Contributing employees will be allowed a 35% discount at any local Goodwill store instead of the usual 30

I understand contributions to the fund are voluntary and will be automatically deducted from my paycheck until I request otherwise, in writing. Please return this to your manager or HR.

Employee Name _____

Location _____

I would like to donate _____ **per paycheck.**

Contributions are not tax deductible and will not be returned upon separation from the Agency.

Signature _____

Date _____

For information on applying to receive assistance from the fund, please visit
www.mokangoodwill.org/benefits.

Please return to Human Resources via fax (816-842-7616) or scan to benefits@mokangoodwill.org

Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	BlueKC SpiraCare	(816) 395-2950 (913) 297-7472	www.bluekc.com www.Spiracare.com
Dental	Delta Dental of Kansas	(800) 733-5823	www.deltadentalks.com
Vision & Voluntary Benefits	Sun Life	(800) 733-7879	www.slfserviceresources.com
Flexible Spending Accounts (FSAs)	Ameriflex	(888) 868-3539	www.myameriflex.com
Basic Life/AD&D	USABLE	(800) 370-5856	www.usablelife.com
Voluntary Life/AD&D & Disability	MetLife	(800) 638-5433	www.metlife.com
Telehealth App	HealthJoy	(877) 500-3112	groups@healthjoy.com
Employee Assistance Program (EAP)	Personal Assistance Service	(800) 356-0845	www.paseap.com Goodwill Code: 0534
Pet Insurance	Nationwide	(877) 263-6008	www.petinsurance.com

Benefits Website

Our benefits website www.mokangoodwill.org/work-for-goodwill/your-benefits can be accessed anytime you want additional information on our benefit programs. Or you can call (816) 842-7425 x123.

Questions?

If you have additional questions, you may also contact:

My Benefits Champion
Account Administrator: Trease Smith
(816) 708-4681
Trease.Smith@hubinternational.com
Account Manager: Carri Guinn
(816) 708-4658
Carri.Guinn@hubinternational.com
Claims Advocacy
(816) 708-4666
HUB-KC.EBCclaims@hubinternational.com



DISCLAIMER: The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern. **Annual Notices:** ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The company will distribute all required notices annually.



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