

Taylor's mission is to create opportunity and security for all. This Guide outlines our comprehensive benefit programs which support our mission. The following pages outline a robust benefit program that encourages healthy lifestyles, promotes wellness by providing premium discounts, fun wellness challenges throughout the year and providers like Vida, Wellworks for You and Lockton Nurse Advocate to assist with managing your chronic conditions. We also provide for your future security with life, disability and retirement offerings summarized in this Guide.

If you are new to Taylor — welcome to the team! If you are using this Guide for Open Enrollment, please review the changes for 2025 carefully to ensure you enroll in the benefits needed for you and your family.

Thank you!

Carolyn Erickson

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Chief Human Resources Officer

Here's where to find ... New for 2025 3 Public benefit advocacy Enrolling in benefits ______4 Dental plan_____ 23 24 Medical 6 Vision plan Plan summaries _____7 Spending accounts 25 Supplemental health benefits_____9 Life insurance 27 Kaiser-California plan 10 Disability plans 29 Pharmacy 11 Employee Assistance Program (EAP) 30 Health savings account (HSA) _____13 More Perks_____31 Wellness 15 401(k) retirement plan 32 Vida 18 Qualifying life events 33 Hinge Health 19 34 Employee eligibility Lockton Nurse Advocate 20 34 Dependent eligibility Addiction support 21 Help and support 35

NEW FOR 2025

Moving to UnitedHealthcare

We are excited to announce that starting January 1, 2025, UnitedHealthcare (UHC) will be our new medical carrier, replacing Blue Cross Blue Shield of Minnesota (BCBSMN). UHC is at the forefront of providing innovative healthcare solutions.

Surest: Find the best care for the best price

With the move to UHC, you now have the choice of enrolling in two new plans: Surest Plus and Surest. These innovative programs are designed to give you more control over your healthcare costs. With Surest, you'll know the true cost of your care before you receive it. It's as simple as using the Surest mobile app to:

- 1. Pick the type of care you need,
- 2. Choose the provider you want,
- 3. Know the cost up front.

This means no surprises and better-informed decisions about your healthcare. Surest makes it easy to find and choose the best options for you and your family.

Get accident and hospital indemnity coverage

If you enroll in the Surest plan or the HSA plan, you receive accidental and hospital indemnity coverage. This new feature pays you a set amount when you are accidentally injured or admitted to the hospital. Look for additional details later in this book.

If you don't pick a new plan, you'll be moving to the closest option

Each year, you have the option to choose which medical plan is best for you and your family. If you do not select a medical plan during open enrollment, you will be enrolled in the plan that is the closest fit to your 2024 election.

Old plan	New plan (UHC)
PPO Plus	Surest Plus
PPO	Surest
HSA Plus	HSA Plus
HSA	HSA
Kaiser HMO	Kaiser HMO

Alternative insurance fee for working spouses

If you would like to cover your spouse (non-Taylor employee) and they have access to medical coverage through their **employer**, \$34.62 will be added to your bi-weekly premium.

If your spouse is employed by Taylor, covered by Medicare or you enroll in Kaiser, the Alternative Insurance Fee does not apply.

Alex has been updated — a tool to help you find the right plan

Alex by Jellyvision has been updated to help you select the right plan for you and your family. Alex will ask you a few questions about your health, upcoming care and prescriptions. Alex then compares available plans and guides you through the decision making process. We encourage you to take a look.

ENROLLING IN BENEFITS

Open enrollment

Open enrollment is your opportunity to elect your coverage options for the new year. This year, open enrollment is October 28 through November 11.

New hires

If you're new to Taylor, you have 30 days from your hire date to enroll in benefits. Your date of hire counts as day one.

Next steps

- Log in to myworkday.com/taylor or use the Workday app to locate your benefit task in your inbox.
- Instructions are provided for you at each step along the way.
- Be prepared with the names, dates of birth and Social Security Numbers of the dependents you will be covering.
- Remember, FSA elections need to be made every year. If you are contributing, your current year election will not carry over. You will need to enroll again for next year.

What happens if I don't enroll by the deadline?

If you don't enroll by the deadline

If you do not submit your Open Enrollment elections by November 11, you will have the same plans in 2025 that you have today with two exceptions.

- 1. If you do not enroll in healthcare or dependent day care flexible spending accounts, your contributions will not carry forward.
- 2. If you have medical coverage in 2024 and do not select a plan for 2025, your coverage will be moved for you.
 - PPO Plus to Surest Plus

HSA to HSA

PPO to Surest

Kaiser HMO to Kaiser HMO

HSA Plus to HSA Plus

Independent elections

 You have the flexibility to enroll in the benefits you need. You are not required to enroll in medical to have dental or vision coverage.



Here are some terms you'll see in this guide:

COINSURANCE: The percentage you pay for the cost of covered services after you meet your deductible.

COPAY: A fixed amount you pay for a specific service. The copay can vary depending upon provider and type of service received. Copays count toward your annual out-of-pocket maximum.

DEDUCTIBLE: The amount you pay for healthcare services before your plan begins to pay.

IN-NETWORK: A group of doctors, clinics, hospitals and other healthcare providers that have an agreement with your medical plan provider. You'll pay less when you use in-network providers.

OUT-OF-POCKET MAXIMUM: This is the most you must pay for covered services in a plan year. After meeting your out-of-pocket maximum, the plan pays 100% of the cost of covered services. However, you must pay for certain out-of-network charges above reasonable and customary amounts.

PREVENTIVE SERVICES: Taylor provides certain preventive services at no cost to all members. These services include:

- Medicine and supplements to prevent certain health conditions for adults, women and children
- Medicine and products for quitting smoking or chewing tobacco (tobacco cessation)
- Medicine used prior to screenings for certain health conditions in adults
- Vaccines and immunizations to prevent certain illnesses in infants, children and adults
- Contraceptives for women

Plans-at-a-glance	Surest Plus	Surest	HSA Plus	HSA	Kaiser HMO
Deductible			✓	✓	
Coinsurance			✓		✓
Copays	✓	✓	✓		✓
Out-of-pocket maximum	✓	✓	✓	✓	✓
Out-of-network coverage	✓		✓	✓	
Preventive services	✓	✓	✓	✓	✓

The Surest Plan has only out-of-network coverage for emergency services.



UnitedHealthcare | whyuhc.com/taylor | (888) 507-9379 Surest | britehr.app/taylorcorp-2025 | (888) 299-2070

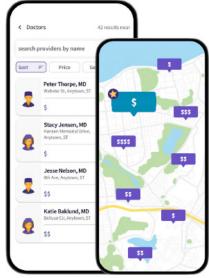
UnitedHealthcare (UHC) is an innovative medical plan provider who has committed to being a strategic partner for Taylor and our employees.

With UHC, Taylor employees and their dependents will have access to services and resources such as:

- A dedicated team of customer service professionals
- Single point of contact to resolve issues
- Nurses and advocates
- Advocates who specialize in resolving complex claim issues and other challenges in real time
- Behavioral Health specialists who can connect members to mental health programs and providers
- Care coordination

The Surest plans are one of UHC's innovative offerings providing you with actual copay amounts before you book your appointment. When providers or locations are evaluated as high-value, Surest assigns a lower copay. Surest assigns copays based on several factors. Providers and locations who achieve better patient health outcomes, have lower rates of complications, and use resources more efficiently typically have lower copays.

After completing your enrollment in a medical plan, ID cards will be mailed to your home address from UHC and CVS for pharmacy coverage.



Illustrative example only. Costs and coverage may vary.

Surest Plus and Surest medical and prescription drug plan summary

	Surest Plus	Surest
Deductible	\$0	\$0
Out-of-pocket maximum		
Employee only	\$6,600	\$9,000
Family	\$13,200	\$18,000
Preventive care	\$0	\$0
Office visits (both primary care and specialist)	\$35-\$140	\$55-\$175
Hospital (both inpatient and outpatient care)	\$70-\$4,500	\$80-\$7,500
Complex imaging (both inpatient and outpatient)	\$200-\$1,050	\$250-\$1,100
Emergency room	\$850	\$1,200
Urgent care	\$90	\$110
Supplemental benefits	N/A	Hospital: \$100-\$500 daily

Accident: \$100-\$300 per incident

Prescription drugs	Employee pays per prescription	
Retail (30-day supply)		
Generic	\$10	\$20
Preferred brand	\$90	\$100
Non-preferred brand	\$160	\$250
Specialty	\$480	\$750
90-day supply (mail order or retail)		
Generic	\$25	\$50
Preferred brand	\$225	\$250
Non-preferred brand	\$400	\$625

Medical and prescription bi-weekly payroll contributions

	Sures	t Plus	Sur	est
	Taylor cost	Your cost	Taylor cost	Your cost
Employee	\$195.30	\$134.04	\$233.40	\$65.18
Employee + child(ren)	\$400.37	\$274.79	\$478.40	\$133.13
Employee + spouse	\$488.25	\$335.11	\$594.10	\$149.73
Family	\$624.96	\$428.94	\$747.18	\$207.96

HSA Plus and HSA medical and prescription drug plan summary

NOT SURE IF THIS PLAN IS RIGHT FOR YOU? CLICK HERE!

	HSA Plus	HSA
Deductible (what you pay before insurance starts to	pay)	
Employee only	\$3,300	\$6,600
Family	\$6,600	\$13,200
Coinsurance (what you pay after the deductible)	80% after deductible	100% after deductible
Out-of-pocket maximum (includes deductible)		
Employee only	\$6,600	\$6,600
Family	\$13,200	\$13,200
Preventive care services (immunizations, routine	100%	100%
physical exams, gynecological exams, etc.)		
Office visits (both primary care and specialist)	80% after deductible	100% after deductible
Hospital (both inpatient and outpatient care)	80% after deductible	100% after deductible
Complex imaging (both inpatient and outpatient)	80% after deductible	100% after deductible
Emergency room	80% after deductible	100% after deductible
Urgent care	80% after deductible	100% after deductible
Supplemental benefits	N/A	Hospital: \$100-\$500 daily Accident: \$100-\$300 per incident

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Prescription drugs	Employee pays p	er prescription
Retail (30-day supply)		
Generic	\$10 after deductible	100% after deductible
Preferred brand name	\$40-\$80 after deductible	100% after deductible
Non-preferred brand name	\$60-\$120 after deductible	100% after deductible
Specialty	\$75-\$150 after deductible	100% after deductible
90-day supply (mail order or retail)	Three times the medication	for only 2.5 times the cost
Generic	\$25 after deductible	100% after deductible
Preferred brand name	\$100-\$200 after deductible	100% after deductible
Non-preferred brand name	\$150-\$300 after deductible	100% after deductible

Medical and prescription bi-weekly payroll contributions

	HSA	Plus	HS	SA
	Taylor cost	Your cost	Taylor cost	Your cost
Employee	\$239.27	\$93.84	\$238.74	\$65.27
Employee + child(ren)	\$490.80	\$192.06	\$490.01	\$139.87
Employee + spouse	\$609.29	\$223.48	\$607.47	\$160.25
Family	\$766.30	\$299.65	\$765.65	\$222.00

Employer contribution to HSA

- \$150 annually or \$5.77 per bi-weekly payroll.
- See health savings account section for details and features.

SUPPLEMENTAL HEALTH BENEFITS

UnitedHealthcare | whyuhc.com/taylor | (888) 507-9379

Accident insurance

What is it?

If you enroll in either the Surest Plan or the HSA Plan, you will be automatically enrolled in this benefit. These benefits are included in your medical plan. With accident insurance, you will receive a cash benefit for each covered injury and related services for accidents that occur outside of work.

This includes:

- X-rays and diagnostic exams
- Initial treatment and follow-up physician visits
- Ambulance
- Fractures and dislocations
- Concussions
- Recovery services

Benefit payment varies based on type and severity of accident.

Why may one need it?

Out-of-pocket expenses add up quickly, especially since major medical insurance may only pick up part of the tab. It helps ease the unplanned financial burden of an accident and is especially useful for parents of young children and people who are active.

Hospital indemnity

What is it?

If you enroll in either the Surest Plan or the HSA Plan, you will be automatically enrolled in this benefit. These benefits are included in your medical plan. Hospital indemnity insurance provides a cash benefit in the event of a hospital stay for a covered illness and/or injury, including pregnancy. You and your covered dependents are paid out on a schedule of benefits and pre-existing conditions are waived. You can use the payment in any way you choose from medical expenses like deductibles, to everyday costs like housekeeping and childcare

Benefits pay for hospital care, including:

- \$500 hospital admission (up to three days per year)
- \$100 daily confinement benefit (up to 59 days per year)
- \$100 daily ICU confinement benefit (up to 59) days per year)

Why may one need it?

It's unlikely that your medical plan will cover all the costs incurred by a hospital stay. Aside from hospital bills, there may be additional costs attached to time away from home, like meals, travel and lodging expenses for loved ones. That's where hospital indemnity insurance can help. It can give you the peace of mind to focus on what's most important — getting better.

Kaiser-California plan

Kaiser Permanente | kp.org | 800.464.4000

Taylor is pleased to offer employees living in California the choice to enroll in the HMO (Health Maintenance Organization) plan with Kaiser Permanente. There are a few important considerations to make before you decide if the Kaiser plan is right for you.

Copayments

 Most services include copayments, except for routine and preventive care which are offered at no charge. All copayments apply to the out-of-pocket maximum.

Coinsurance

 While most services include copayments, there are a few services that now require 30% coinsurance payment. These include specialty drugs, emergency room, inpatient hospital care and outpatient care.

No out-of-network coverage

This plan only includes coverage with Kaiser providers.

Medical	Kaiser
	In-network
Deductible	
Employee only	\$0
Family	\$0
Coinsurance	0%
Out-of-pocket maximum	
Employee only	\$4,000
Family	\$8,000
Preventive care services	No charge
(immunizations, routine physical	
exams, gynecological exams, etc.)	
Retail health clinic visit	\$40
Physician office visit	\$40
Specialist visit	\$50
Urgent care	\$40
Emergency room	30% coinsurance
Inpatient care	30% coinsurance
Outpatient care	30% coinsurance
Prescription drugs	Employee pays
Retail (30-day supply)	
Generic	\$15 copay
Brand name	\$40 copay
Specialty	30% coinsurance up to \$250
•	max.
Mail order (100-day supply)	
Generic	\$30 copay
Brand name	\$80 copay

Kaiser bi-weekly payroll contributions

Kaiser	Taylor cost	Your cost
Employee	\$231.49	\$135.43
Employee + child(ren)	\$474.90	\$277.30
Employee + spouse	\$590.80	\$326.52
Family	\$741.48	\$432.68

Employees may elect Kaiser without enrolling in the dental or vision plan.

Registered domestic partners

Registered domestic partners may be enrolled in the Kaiser Plan and you will be required to provide documentation prior to January 1.

In accordance with current tax regulation, if your registered domestic partner is not a tax dependent for you, there will be taxable income reported on your W2.

PLEASE NOTE: Kaiser is removing coverage for medications prescribed solely for the purpose of losing weight loss.



Prescription drug coverage for all plans (except Kaiser) continues to be provided through CVS/Caremark.

What you pay for your prescriptions will depend on which medical plan you choose and what type of prescriptions you need. The plan classifies drugs by four levels; generic, preferred brand, non-preferred brand and specialty. Each level of drug has a different cost. Generic medications are the lowest cost options. See medical and prescription drug plan summary pages for details on coverage.

Maintenance medications may be filled at any pharmacy in the CVS/Caremark network. When filling a 90-day cycle, you receive three times the medication for only 2.5 times the cost, saving you money and time!

From time to time you may have a need for short term prescription (antibiotic, pain medication, etc). In these cases, the prescription may be filled at any pharmacy within the CVS/Caremark network.

Save money with mail service pharmacy

The mail order service remains an easy and cost efficient way to receive maintenance medication. With one 90-day supply, you pay only 2.5 times instead of 3 times the monthly copayment, so you can be sure you're paying a lower price. Mail delivery also means no more monthly trips to the pharmacy, and with automatic refills, you won't need to keep track of refill schedules either. CVS will alert you ten days before a refill in case you need to change the delivery date or location. To get started, visit caremark.com/mailservice or call customer care at (800) 405-6432.

CVS value formulary

To avoid paying more for your medication, ask your doctor to write you a prescription for a generic or listed brand prescription drug. More information can be found on the value formulary, including the formulary itself, at the following location: info.caremark.com/highvalueplan









DID YOU KNOWS

You can save money on prescriptions by using online tools like GoodRx and CostPlus. These tools are available to you regardless of your medical plan selection.

GoodRx: An online pharmacy database that allows you to find the cheapest pharmacy for your specific prescription. Additionally, you may be able to find a coupon that will greatly reduce your cost. It is important to remember that many of the coupons can only be used outside of your plan. (They will not count toward your maximums.)

CostPlus: Offers prescription drugs at a lower cost by eliminating the need for a pharmacy benefit manager (PBM) and openly displaying the market price of drugs.

PrudentRx (applies to Surest Plus and Surest plans)

What is PrudentRx?

The PrudentRx Copay Program offers select specialty medications at no cost to you, meaning \$0 out of pocket for medications on your plan's exclusive specialty drug list when filled through CVS Specialty Pharmacy.

PrudentRx handles copay card assistance, enrollment, and renewals. Even without a copay card program, your cost remains \$0 while enrolled. This program secures financial support from drug manufacturers to cover most or all of your cost share for eligible specialty medications, reducing your outof-pocket expenses.

All eligible members will be automatically enrolled in The PrudentRx Copay Program, but you can choose to opt out of the program by calling (800) 578-4403.





Fidelity | netbenefits.com | (800) 835-5095

One of the advantages of having an HSA account is that you can use those funds as a retirement account. You will see your HSA account alongside your 401k account making it easier to track your consolidated savings.

If you are enrolled in either the HSA Plus or HSA medical plan, this program applies to you.

The account is YOURS

It is an individual account that you own. Funds can be used to pay for out-of-pocket medical, dental and vision expenses that are not covered by your HSA medical plan.

You receive a triple tax advantage with an HSA:

- Contributions are made pre-tax
- Funds used to pay medical expenses are not taxed
- Account balances may be invested and earnings/interest grow tax free

You decide:

- How much to contribute (up to the IRS limits)
- When to use the funds and
- How to invest your account balance

Employer contributions

Taylor will continue to contribute \$5.77 bi-weekly, up to \$150 per year, to the Health Savings Accounts of all employees who are enrolled in either the HSA Plus or HSA plans.

Your balance carries over at the end of the year — no "use it or lose it."

Once you reach age 65, you may use funds in the account for non-medical expenses (subject to income tax since they are not medical expenses).

You are eligible to contribute to an HSA in 2025 if:

- You are enrolled in a high-deductible health plan (HDHP) such as the HSA Plus or HSA plan.
- You are not covered by your spouse's medical plan (unless it is a qualified HDHP), flexible spending account (FSA) or health reimbursement account (HRA).
- You are not eligible to be claimed as a dependent on someone else's tax return.
- You are not enrolled in Medicare, TRICARE or TRICARE for Life.
- You have not received Veterans Administration (VA) benefits in the past three months, with the exception that if you are a veteran with a disability rating from the VA, any hospital care and/or medical services received from the VA may be disregarded for purposes of HSA eligibility.
- You are not opening a healthcare flexible spending account (FSA) in 2025.

IMPORTANT! How much you can contribute into an HSA in 2025

Age bracket	Employee maximum contribution	Taylor contribution	IRS combined limit
Under age 55 in 2025	\$4,150 individual or \$8,300 family	\$150.00	\$4,300 individual or \$8,550 family
55 or older in 2025 catch-up eligible	\$5,150 individual or \$9,300 family	\$150.00	\$5,300 individual or \$9,550 family

How to access/make contributions to your HSA

Once your Fidelity account is open, you can access it via netbenefits.com. You'll set up your payroll contributions in Workday and may change your contribution anytime during the year.

More details about health savings accounts

The company pays the monthly administrative fee for your HSA. If your coverage status or employment status changes, you will be responsible for all HSA account holder fees.

If you decide to contribute to your Health Savings Account, you will see two separate pre-tax deductions on your payroll: one for your medical plan premium and one for your contribution to your HSA.

How to pay expenses from your HSA

Debit card

 To help prevent misuse of HSA funds, the debit card is only authorized at merchants that provide medical products and services

Online transfers (through member website)

- Establish and verify external bank account
- One-time or recurring transfers (both incoming and outgoing transfer options)











Wellworks For You | wellworksforyoulogin.com | (800) 425-4657

We all know how important it is to proactively manage your and your family's health. We are committed to helping you achieve optimal health — encouraging you to be active, live a healthy lifestyle and make good health decisions. Our plans reward healthy behaviors with discounts on your medical premiums.

When you (and your spouse) enroll in a medical plan, you have the opportunity to earn points based on your individual wellness screening. Each point is worth \$120 annually. Discounts to premiums for wellness do not carry over from a prior year.

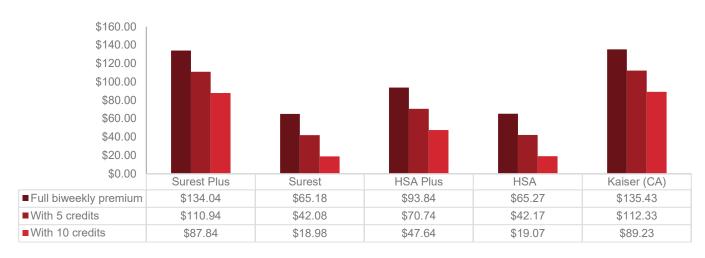
Additional details on the Wellness Program for next year will be shared soon.



How you can save on your premiums (you pay bi-weekly)

Below are a few examples of the impact of achieving your wellness credits and receiving discounts on your 2025 premiums. For the full chart of savings, visit Your Benefits Hub: https://employees.taylor.com

Employee only



Employee + Child(ren) coverage



Employee + spouse coverage



Family coverage



If you are unable to achieve full credits, you may qualify for the incentive by meeting an alternative requirement. Please contact Wellworks For You (800) 425-4657 or wellworksforyoulogin.com if you have any questions about the wellness program and/or determine whether you may be eligible to receive an incentive by meeting an alternative requirement.

Please contact Lockton Nurse Advocate at taylorlna@lockton.com or by calling (833) 782-7403 to discuss how to meet the alternative requirements.



What do you get with Vida Health?

Vida Health matches you to a free health coach or therapist who can help you:



Lose weight



Lower your blood sugar to manage or prevent diabetes



Feel less stressed



Improve blood pressure or cholesterol to improve your heart health



Feel healthier and happier overall

Your coach or therapist will develop a personal plan and guide you every step of the way.

With Vida's human coaches and therapists empowered by a mobile app, you can access a customized program designed for you and your health goals.

To get started

- 1. Download the free Vida Health app to your phone.
- 2. Choose "Taylor" as your organization to activate your free account.
- 3. Pick the health areas you want to focus on, then choose a coach or therapist to work with.
- 4. Schedule your first session to get started reaching your goals.

If you have any questions or need help signing up, you can contact Vida's support team at support@vida.com.

To be eligible for the Vida program, you need to be enrolled in one of Taylor's health plans and you need to have a chronic condition that is supported by this program. Your spouse and any dependents covered on your health plan who are 18 years or older and who have a chronic condition, are also eligible. This program is not available to those under age 18.

HINGE HEALTH

hinge.health/taylor | help@hingehealth.com | (855) 902-2777

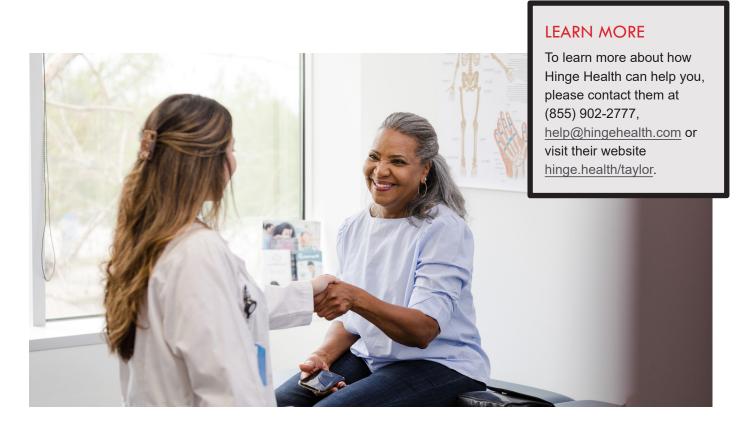
Hinge Health focuses exclusively on our musculoskeletal (joint and muscle) needs and provides personalized exercise and physical therapy in a digital environment. Hinge Health is provided at no cost to employees and dependents enrolled in a UnitedHealthcare medical plan.

Hinge Health gives you the tools you need to lessen pain, recover from injuries and prepare for surgery when needed.

Here are three reasons to consider Hinge Health:

- Simple access to digital joint and muscle clinic to get you moving on your time schedule when and where you want to
- Complete care team including physical therapists, board certified health coaches, physicians and orthopedic surgeons to guide you through the process
- Personalized care plan developed specifically for you with dedicated support

Here's one more reason to consider Hinge Health — if you don't have the technology to use their digital offerings, Hinge Health will provide you with a tablet with access to their website to help you achieve your goals.





LOCKTON NURSE ADVOCATE

Lockton Nurse Advocate | taylorIna@lockton.com | (833) 782-7403

Taylor is committed to helping you stay healthy and has partnered with Lockton Nurse Advocate to provide a supportive benefit to help you understand your current health and support you to improve or maintain your overall health.

Through the voluntary Lockton Nurse Advocate Program, you are provided with a dedicated registered nurse that will:

- Learn about your health and lifestyle.
- Listen to your specific needs and obstacles, and work with you to set goals while supporting you in achieving them.
- Discuss risk factors and best practice medical care.
- Help you effectively use your health insurance plan benefits.
- Inform you about company wellness activities.
- Connect you with appropriate health resources.
- Provide in-network physician information and answer health questions.

Your participation is important! Our nurse advocates are an important resource for helping you live your healthiest life. A nurse may reach out to you, and we encourage you to participate — it could be the most important decision you make.

Information shared between you and your nurse is confidential.

If you would like to schedule a meeting use the following link: https://calendly.com/d/ck7j-443-2mj or scan the QR code.







Shatterproof | justfive.org/taylor

Addiction is not a choice but a disease that changes the brain. It can impact anyone and that is why Taylor has partnered with Shatterproof, an advocacy group dedicated to ending the devastation that addiction causes families. Shatterproof is a national nonprofit organization dedicated to reversing the addiction crisis in the U.S.

Shatterproof ...

- Transforms addiction treatment.
- Is shifting attitudes and behaviors to remove the stigma that surrounds our loved ones with this chronic condition.
- Educates and empowers our employees to learn more about substance abuse and get support.

To learn more about substance use and addiction support, visit Shatterproof.



fedlogicgroup.com | services@fedlogicgroup.com | Employee access code: tayl21 | (877) 837-4196

Taylor has partnered with FEDlogic to provide state and federal benefits information and advocacy to you and your household members. The service is confidential, unlimited and provided at no cost to you.

Reasons to call FEDlogic

- You've reached or are approaching Medicare age and need to learn more
- You're approaching retirement age and want to learn more about your Social Security benefits
- You or a household family member has been diagnosed with a major illness
- You have a child with a disability or who was born prematurely

- You have lost a spouse
- You need assistance navigating Medicaid, Marketplace or COBRA
- You need help exploring alternative healthcare avenues based on your income
- You are currently on dialysis (ESRD)
- You need help exploring unemployment benefits

How FEDlogic works

MAKE A PHONE CONSULTATION APPOINTMENT. Be sure to make the appointment at a time when family members are available to listen and ask questions as well. Calls typically last an hour.

TELL FEDLOGIC YOUR STORY, ASK QUESTIONS AND LEARN. You don't have to go through complex and confusing information to try to figure out what applies to you. They take the time to listen to your story and understand your needs, concerns and goals. Then they empower you with the information you need so you can maximize your benefits and make the best decision for your situation.

ENROLL FOR BENEFITS. Once you feel confident you have the information you need to make the best decision for you and your family, FEDlogic will walk you through the application and approval process.

RELAX AND CELEBRATE. Without education and advocacy, many people don't tap into all the Social Security and Medicare benefits they've paid into during a lifetime of employment. You'll have the peace of mind knowing that you're getting all the benefits you deserve.



Your dental plan is designed to encourage you to visit the dentist and help ensure your basic dental

needs are met in a timely, cost-effective manner.

Since regular checkups and preventive care is key to long-term oral health, the cost of your diagnostic and preventive dental care dos not count against your annual maximum.

When you enroll in the dental plan, you may visit any provider in either the Delta Dental Premier or Delta Dental PPO network. If you choose to use an out-of-network dentist, your out-of-pocket cost will be higher because those providers can charge amounts that would otherwise not be accepted by Delta Dental of Minnesota.

Once enrolled, Delta will mail your ID card(s) to your home.

Dental plan highlights

Deductible	Benefit
Individual	\$50
Family	\$150
Annual maximum	\$1,250/person
Preventive	
Oral exams, X-rays These costs do not count against your annual maximum.	100%
Basic	
Fillings, endodontic treatment, periodontic treatment	80%
Major	
Crowns, prosthetics	50%
Orthodontia	
Adults and dependent child(ren)	50%
Lifetime orthodontia plan maximum (per individual)	\$1,750

Dental bi-weekly payroll contribution

	Taylor cost	Your cost
Employee	\$6.13	\$9.20
Employee + child(ren)	\$16.50	\$24.76
Employee + spouse	\$12.27	\$18.41
Family	\$24.66	\$37.00



VISION PLAN

VSP | vsp.com | (800) 877-7195

You now have more to spend under your plan. The plan is designed to cover much of the cost for affordable care and materials when you use in-network providers and shop smart.

Eyeconic seamlessly connects your eyewear, your insurance coverage, and the VSP doctor network. Plus, you get the convenience of online shopping along with the personal touch from a VSP network doctor. Visit eyeconic.com for more information.

ENJOY SAVINGS BEYOND YOUR VISION BENEFITS!

Take advantage of Exclusive Member Extras for you and the whole family! Get access to more than \$3,00 in savings from VSP and other popular brands. See how your savings can add up at vsp.com/offers.

	In-network	Out-of-network
Annual exam	\$15 copay	Up to \$50
Frames (every 24 months)	\$170 allowance + 20% off amounts over allowance	Up to \$70
Standard lenses (every 12 months)		
Single vision	\$20 copay	Up to \$50
Lined bifocal	\$20 copay	Up to \$75
Lined trifocal	\$20 copay	Up to \$100
Lined lenticular	\$20 copay	Up to \$125
Standard progressive lenses	Covered in full	Up to \$75
Contact lenses		
Contact lenses	\$60 copay for lens exam \$170 allowance	Up to \$105
KidsCare plan (up to age 26)		
 Exams, frames and lenses every calendar year Contacts (every calendar year in lieu of glasses) 	Two covered exams \$170 frame and contact allowance Polycarbonate lenses covered in full	Not covered

Vision bi-weekly payroll contribution

	Employee contribution
Employee	\$3.96
Employee + child(ren)	\$6.78
Employee + spouse	\$5.69
Family	\$10.84

You will not receive a vision ID card. Your ID number is your employee number or the last four digits of your Social Security Number. You can find your employee number on Workday>Personal Information>About Me.

VSP DIABETIC EYECAREPLUS **PROGRAM**

If you have diabetic eye disease, glaucoma or age-related macular degeneration, you can receive:

- A covered-in-full retinal screening (digital imaging of the inside of the eye)
- Additional services that track and monitor diabetic eye disease progression
- Follow-up medical eye exams deemed necessary by your VSP doctor
- An additional eye exam with refraction for changes in vision due to diabetes medication(s)



SPENDING ACCOUNTS

Optum | optumhealthfinancial.com | (800) 243-5543

Flexible spending accounts let you set aside pre-tax money to help pay for eligible expenses relating to healthcare, dependent day care, parking and/or transit expenses.

	Healthcare FSA	Dependent day care FSA	Commuter expense reimbursement accounts (parking/transit)
Eligible expenses	Copayments, coinsurance, deductibles, dental expenses, vision expenses, prescription drugs. See IRS Publication 502 for a complete list.	Eligible child (under 13) and adult care expenses such as day care, before and after-school care, preschool, nursery school, summer day camps. See IRS Publication 503 for a complete list.	The Commuter Expense Reimbursement Accounts (CERA) allow you to pay for qualified transit and parking expenses using money you have set aside pre-tax. See IRS Publication 15-B for details.
Maximum contribution	\$3,200 (min. of \$100) annually	\$5,000 annually (\$2,500 per year if you are married and file a separate tax return.)	Transit passes or commuter highway vehicle — \$315/month Parking — \$315/month
Funds availability	Your entire election is available to you at the beginning of the plan year.	Works on a "dollar in/dollar out" process. You are only eligible to be reimbursed for the current balance that has been withheld as of the date of your request.	Works on a "dollar in/dollar out" process. You are only eligible to be reimbursed for the current balance that has been withheld as of the date of your request.
Portability	No	No	No
Forfeiture	IRS rules require you to forfeit any unused money in your healthcare FSA if you do not submit expenses by March 31 of the following plan year.	IRS rules require you to forfeit any unused money in your dependent day care FSA if you do not submit expenses by March 31 of the following plan year.	Unused amounts are carried over from year to year.
Grace period	Medical claims incurred in the first 75 days following the plan year can be covered by outstanding funds from the previous year.	N/A	N/A

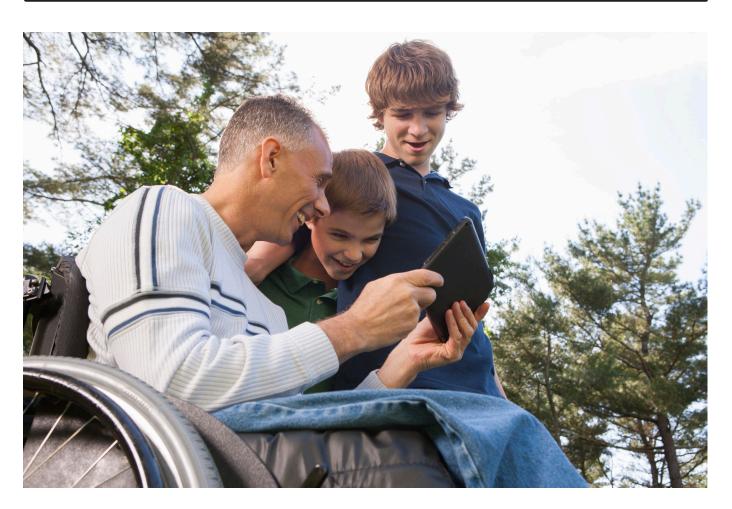
Payment card

The Optum healthcare FSA payment card allows you to get faster access to your FSA dollars. Pay for eligible expenses with your card instead of paying cash.

Note: Purchases you make with your FSA payment card may require supporting documentation, so always keep your receipts! Optum will make every effort to electronically verify your card transactions, as required by the IRS. If Optum is not able to verify a transaction, you will receive a letter requesting an itemized receipt or explanation of benefits (EOB). If the required documentation is not received within the stated time period, your card will be suspended. If you are not able to provide appropriate documentation, any unverified card purchases will be reported as taxable income.

IMPORTANT NOTES

- If you elect to participate in the HSA Plus or HSA medical plan, you will not be eligible to participate in the Healthcare Flexible Spending Account. You can still participate in the Dependent Day Care and/or the Commuter program.
- Flexible Spending Account elections must be made every year if you choose to participate. Current year enrollments do not carry over into the following year.





All eligible employees are automatically covered by basic life and AD&D (accidental death and dismemberment) insurance at no cost. In addition to your basic life insurance, you have the option to enroll in supplemental coverage for yourself and your eligible family members.

Basic life insurance

The basic life plan includes life and AD&D insurance of one times your salary, up to \$400,000, at no cost.

Employee supplemental life insurance

Supplemental life and AD&D coverage is paid by you with post-tax dollars.

- Employee supplemental life provides you the ability to increase your coverage by \$10,000 or \$20,000 without proving evidence of insurability (EOI).
- If your increased level of supplemental insurance exceeds \$400,000, then EOI will be required.

Supplemental life insurance bi-weekly payroll contribution

Age	Rate	Age	Rate
Under 25	\$0.27	50-54	\$1.12
25-29	\$0.30	55-59	\$1.93
30-34	\$0.38	60-64	\$2.55
35-39	\$0.42	65-69	\$4.62
40-44	\$0.51	70+	\$7.44
45-49	\$0.73		

HOW TO CALCULATE YOUR SUPPLEMENTAL LIFE INSURANCE COST Example: \$100,000 /10,000 = 10 units of x Rate for a 30 year old (\$0.38)\$3.80 bi-weekly coverage Your bi-weekly cost Amount elected Life and AD&D rate above (based on your age on Jan. 1)

Spouse and child(ren) life insurance

Dependent life insurance provides a benefit to you in the case of the death of your spouse or your dependent child(ren).

You can enroll in spouse life insurance or increase your current coverage amount by one level (\$0-\$5,000 or \$5,000-\$10,000 or \$10,000-\$25,000).

You can add life insurance for your child(ren) or increase current coverage by one level (\$0-\$5,000 or \$5,000 to \$10,000).

Family member working for Taylor?

Every benefit eligible employee has basic life insurance provided by Taylor, so supplemental spouse coverage is not an option when your spouse is also employed by Taylor in a benefit-eligible position. If you have a child working in a benefit-eligible position, you cannot elect supplemental child life insurance since your child has basic life insurance.

Spouse life insurance bi-weekly payroll contribution

\$5,000	\$10,000	\$25,000
\$0.59	\$1.18	\$2.95

Child life insurance bi-weekly payroll contribution

\$5,000	\$10,000
\$0.76	\$1.52











DISABILITY PLANS

Lincoln Financial Group | lincolnfinancial.com | (888) 480-0156

You become eligible for these benefits on the first of the month that coincides with or follows 180 days of continuous service in an eligible status.

Short-term disability

Short-term disability is provided at no cost to you and provides income protection if you cannot work due to non-work-related illness or injury and includes maternity. Short-term disability begins to pay benefits after you cannot work for seven consecutive calendar days. After seven days, short-term disability will pay 67% of your pre-disability earnings, once approved.

Benefits will continue for up to 25 weeks following the seven day waiting period, as long as you remain disabled. When short-term disability benefits end, you may be eligible to receive long-term disability benefits.



Long-term disability

Taylor will pay the full premium cost for LTD coverage for eligible employees.

Once your disability claim is approved, these benefits begin after short-term disability benefits end. During the first 24 months of disability, you are considered disabled if unable to perform the material duties of your own occupation. After 24 months, you must not be able to perform the duties of any occupation for which you are suited by prior training, education and experience. As long as you remain disabled, the longterm disability plan will continue to pay benefits for up to when you reach Social Security normal retirement age (SSNRA).

Long-term disability benefit details

- Monthly benefit amount
 - 60%
- Monthly benefit maximum
 - \$15,000
- Benefits begin
 - After 180 days
- Benefits duration
 - Social Security normal retirement age



EMPLOYEE ASSISTANCE PROGRAM (EAP)

EmployeeConnectSM | guidanceresources.com | (888) 628-4824 |

EmployeeConnectSM with Lincoln Financial Group offers professional, confidential services to help you and your loved ones improve your quality of life.

In-person guidance

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

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

Unlimited 24/7 online resources

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

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

When you first visit guidanceresources.com, follow these steps:

- 1. Scroll down and select the Register button. When prompted, enter the Organizational Web ID of **LFGSupport**
- 2. Create a unique user ID and password when prompted.

- 3. Log in with your new user ID and password.
- 4. Complete the assessment to receive personalized articles and information.

If you prefer not to create a unique login, you can still access services by phone.

EmployeeConnectSM counselors are experienced and credentialed.

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

LifeKeys®

- EstateGuidance® will preparation
- GuidanceResources[®] Online
- Identity theft
- Assistance at a difficult time
- Financial services
- Legal support
- Support with day-to-day concerns

TravelConnect® services

- Medical assistance
- Safety services



MORE PERKS

Looking for great discounts? Check out the "Offers and Discounts" page on Compass where you will find details on the following:

Perks at Work provides discounts on:

- Pet insurance and pet product discounts
- Entertainment discounts
- Discounts on travel, household needs, electronics, tax preparation and more.

Taylor Discounts

- Available on invitations, announcements, cards and other Taylor-produced items
- Direct discounts with companies including Delta, Verizon, T-Mobile, AT&T and more
- Educational discounts with Rasmussen University and Capella University





401(K) RETIREMENT PLAN

Fidelity | netbenefits.com | (800) 835-5095

Your retirement plan is an important part of your benefits package. It's an excellent way to prepare for your future while enjoying tax benefits along the way. Taylor will match a percentage of your contributions after you complete six months of service.

Automatic enrollment

As a new employee, you are eligible for the plan if you have been hired into a regular position and have attained age 21. If you take no action, you will be automatically enrolled in the plan with a contribution of 5% of your pay. You will receive additional information from Fidelity regarding this enrollment and how you may change this contribution level, either up or down; how to select investments; and name your beneficiary.

There is no need to wait for the 35 days to enroll. After your first week of employment, Fidelity will have your employment details and you will be able to update your enrollment.

Automatic increase

Your contribution rate will auto-increase by 1% annually unless you opt out.

Company match

The company will match 50% of your contributions up to the first 5% of your eligible pay. You become eligible for the match after six months of service from your hire date.

WHAT'S RIGHT FOR YOU?

It's your plan, and you're in control of your account.

You can set your contribution rate, pick the investments that you think are best for you, and choose between pre-tax and/or Roth (after-tax) contributions.

CONTRIBUTION LEVELS

You can contribute up to 80% of your eligible pay subject to IRS dollar limits. If you want to get the full company match, you'll need to contribute at least 5%. Contributing less is like leaving money on the table.

CONTRIBUTION TYPES

You can choose pre-tax and/or Roth (after tax) contributions in any combination. Pre-tax and Roth contributions have different tax benefits, so one may be more advantageous to you than the other.

CONTRIBUTION LIMITS

The IRS limits how much you can contribute to a 401(k) plan in any year. For 2024, that limit is set at \$23,000. If you are age 50 or older at the end of the calendar year, you can also make a catch-up contribution of up to \$7,500. The 2025 limit is expected to be announced soon.

QUALIFYING LIFE EVENTS

If you need to add or remove coverage for yourself or your dependents after the enrollment period, you must wait until the next open enrollment period unless you have a qualifying life event as defined by the IRS.

Here are some examples of qualifying life events:

- Birth, legal adoption, or placement for adoption
- Marriage, divorce, or legal separation
- Dependent child reaches age 26
- Spouse or dependent loses or gains coverage elsewhere
- Death of your spouse or dependent child
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or the state children's health insurance program
- Change in residence that changes coverage eligibility

- Court-ordered change
- Spouse's open enrollment that occurs at a different time than yours
- You or your dependents lose coverage under a state Medicaid or children's health insurance program (CHIP)
- You or your dependents become eligible for premium assistance under state Medicaid or CHIP. You must request enrollment within 60 days from the date of the Medicaid/CHIP event.

It is your responsibility to complete a Change Benefit task in Workday or to contact HRConnect for assistance. The change MUST be completed within 30 days of your life event.

Questions?

HRConnect is available to answer your questions (877) 252-9861 or HRConnect@taylor.com.

EMPLOYEE ELIGIBILITY

You are eligible for the following benefits on your date of hire if you are regularly scheduled to work 20 or more hours per week and are classified as a regular employee.

- Medical insurance
- Dental insurance
- Vision insurance
- Basic life insurance
- Supplemental
 Employee life insurance
- Flexible spending account
- Health savings account
- assistance program
- Wellness
- FEDlogic

On the first day of the month following 180 days in which you are regularly scheduled to work 20 or more hours per week, you are eligible for the following benefits:

- Short-term disability
- Long-term disability

401(k) eligibility

If you are age 21 or older and employed in a regular classification, you will be automatically enrolled in the 401(k) plan.

Eligibility and leave of absence

During an approved leave of absence, benefits may be continued for up to 6 months provided you continue to pay your portion of the required premium for the coverages you have elected. If your continuous leave of absence extends beyond six months, your coverage will end, and COBRA may be offered as applicable.

DEPENDENT ELIGIBILITY

Generally, the following individuals may be eligible dependents for our benefit plans. The company reserves the right to audit dependent elections.

Spouse

- Legally married for purposes of federal law
- · Common law when recognized by the state of residence

Dependent children to age 26

- Natural born
- Adopted
- Stepchildren and/or foster children
- Eligible dependents include adopted children, disabled dependents, dependent grandchildren (who meet the plan's eligibility requirement) and children under legal guardianship. Dependents such as grand/disabled/adopted child(ren) are subject to review/approval by the insurance carrier.

Family members working at Taylor

We are fortunate to have employees who also have family members working within Taylor. As a reminder, employees may be covered as an employee or a dependent, but not both (no double coverage). A few examples:

- Both spouses work for Taylor: If the employee is enrolled in their own medical, dental or vision coverage, they cannot be covered as a dependent on their spouse's plan. Children may be covered by one parent, but not by both parents.
- Both spouses (or a child) work for Taylor: Every benefit eligible employee has basic life insurance provided by Taylor, so supplemental spouse coverage is not an option when your spouse is also employed by Taylor in a benefit eligible position. If you have a child working in a benefit eligible position, you cannot elect supplemental child life insurance since your child has basic life insurance.

HELP AND SUPPORT

You have lots of help and support when it comes to benefits. Use this page to find the support you need. Remember, HRConnect should be your first stop regarding general enrollment and eligibility questions.

Contact the specific plan administrators listed for questions regarding claims or information specific to coverage, providers, etc.

CVS

Pharmacy

(800) 405-6432 caremark.com

Delta Dental of Minnesota

Dental

(800) 448-3815 deltadentalmn.org

EmployeeConnect

Employee assistance program

(888) 628-4824

guidanceresources.com Username: LFGSupport Password: LFGSupport1

FEDlogic

Public benefit advocacy

(877) 837-4196 fedlogicgroup.com

Employee access code: tayl21

Fidelity

Retirement

(800) 835-5095 netbenefits.com

Health Savings Account

(800) 835-5095 netbenefits.com

Hinge Health

Virtual Physical Therapy

(855) 902-2777 hinge.health/taylor help@hingehealth.com

Kaiser Permanente

Medical

(800) 464-4000 kp.org

Lincoln Financial Group

Disability insurance

(888) 480-0156 lincolnfinancial.com

Life insurance

(888) 480-0156 lincolnfinancial.com

Lockton Nurse Advocate

Wellness

(833) 782-7403

Email: taylorlna@lockton.com

Optum

COBRA

(866) 301-6681 optumhealthfinancial.com

Flexible spending accounts

(800) 243-5543 optumhealthfinancial.com

Shatterproof

Addiction support resource

justfive.org/taylor/

UnitedHealthcare and Surest

Medical — UHC

(888) 507-9379 whyuhc.com/taylor

Medical — Surest

(888) 299-2070 britehr.app/taylorcorp-2025

Vida

Wellness

vida.com/taylor

VSP

Vision

(800) 877-7195 vsp.com

Wellworks For You

Wellness

(800) 425-4657 wellworksforyoulogin.com The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.

