

# 2024 BENEFITS GUIDE



Coca-Cola Beverages Florida



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## WELCOME TO ANNUAL ENROLLMENT!

Coke Florida appreciates your commitment to our success. We're equally committed to providing you with competitive, affordable health and wellness benefits to help you take care of yourself and your family.

Please read this guide carefully. It has a summary of your plan options and helpful tips for getting the most value from your benefits plans. We understand that you may have questions about annual enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource, of course. Any time you have questions about benefits or the enrollment process, you can contact the HR Benefits Hotline at 1-877-340-0929, select option 3 for Benefits. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD) at [cokefloridatotalrewards.com](http://cokefloridatotalrewards.com).

## WHO IS ELIGIBLE?

Benefits are available to all full-time Associates working a minimum of 30 hours per week and their dependents. For those enrolling during Open Enrollment, your benefits will become effective on 1/1/2024. For new hires, all benefits except for Long-Term Disability Insurance will become effective on 1st of the month following 60 days. Long-term Disability goes into effect on the 1st of the month following 90 days of continuous employment.

Eligible dependents include:



Your legal spouse



Your children from birth to age 26

*(Including your natural/legally adopted/stepchildren, and/or your unmarried dependent children of any age who are mentally or physically disabled and who are dependent on you for support)*

You must submit proof that your dependents are eligible to be covered on our plan before we can complete your election or change request. Supporting documents include:

- Birth Certificate
- Social Security Card
- Marriage License (for spouse)
- Legal Documents (disabled children over age 26)

## MAKING CHANGES

You may only make changes to your elections during Open Enrollment each year or during the year if you experience a qualifying event. Qualifying events include, but are not limited to:

- Birth, legal adoption, or placement for adoption.
- Marital status.
- Dependent child reaches age 26.
- Spouse gains or loses employment or eligibility with current employer.
- Death of a covered dependent.
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or CHIP.
- Change in residence that changes eligibility for coverage.
- Court-ordered change.

Changes to your coverage due to a qualifying life event must be made within 30 days of that life event. Proof of the qualifying life event is required (marriage certificate, divorce decree, birth certificate, or loss of coverage letter).

Note: Any change you make to your coverage must be consistent with the change in status.

## ENROLLMENT DEADLINES

Type of Associate/Dependent	Enrollment opportunity	Coverage effective date
Current Associate	Annually during the enrollment period	Start of plan year
New hire	Must enroll within 31 days of hire	1st of the month following 60 days
Qualified life event	Changes must be made within 30 days of life event	Date of life event



# HOW TO ENROLL

There are two ways to enroll (listed below). Complete enrollment in Dayforce either by yourself or with help from a Benefits Counselor through Prepare My Benefits. Additional details are provided on the following pages for each benefit.



## Online:

Log in to [Dayforce](#) or scan the QR code.  
Then follow the prompts to complete your enrollment.



## Virtual:

Schedule an appointment to meet with a Benefits Counselor virtually. Counselors are available to assist you with enrollment and/or answer any questions you may have about benefits. While we hope you take advantage of their help, you are not required to speak to a counselor to complete your enrollment.

New hires can schedule an appointment at:  
[coca-cola-florida.benefitsinfo.com/schedule-a-call](https://coca-cola-florida.benefitsinfo.com/schedule-a-call)

During Open Enrollment, Associates can schedule an appointment at:  
[coca-cola-florida.benefitsinfo.com/schedule-a-call](https://coca-cola-florida.benefitsinfo.com/schedule-a-call)

Contact the Benefits Call Center at **904-468-3223** or [enrollassist@preparebenefits.com](mailto:enrollassist@preparebenefits.com)

Operating hours are Monday-Friday between 9am-6pm EST



Scan the QR code to view the [Benefits Presentation](#) to learn more about each of the benefits in detail.

# MEDICAL

## AETNA



[www.aetna.com](http://www.aetna.com)  
1-888-699-1005

Your medical benefits are provided by Aetna and provides coverage for both in-network and out-of-network providers. You will always have stronger benefits when visiting in-network providers. Since health care needs are not one size fits all, Coke Florida offers two medical plan options, so you can choose the coverage level best suits your needs and budget. With the Choice Plus HDHP Plan, you are eligible to open a Health Savings Account (HSA).

### Which Plan is Right for You?

Balance your premium cost with the amount you expect to spend on medical services. If you do not require a lot of medical care, you can greatly reduce your upfront premium spend by choosing the Choice Plus HDHP plan. If you require a lot of medical care and need to limit out-of-pocket expenses, the Choice Plus Value plan might make more sense.

Medical	Aetna Choice Plus Value Plan		Aetna Choice Plus HDHP w/ HSA	
	In-network	Out-of-network	In-network	Out-of-network
<b>HSA Fund</b>				
Individual	N/A		\$200	
Family	N/A		\$400	
<b>Annual deductible</b>				
Individual	\$1,250	\$2,500	\$2,200	\$4,500
Family	\$3,125	\$6,250	\$5,500	\$11,250
<b>Out-of-pocket maximum*</b>				
Individual	\$5,000	\$8,000	\$4,000	\$8,000
Family	\$10,000	\$20,000	\$10,000	\$20,000
Preventive care	100% Covered	100% Covered	100% Covered	40% AD
Primary physician office visit	20% AD	20% AD	20% AD	40% AD
Specialist office visit	20% AD	20% AD	20% AD	40% AD
Telehealth	100% Covered	Not Covered	100% Covered AD	Not Covered
Inpatient hospital services	20% AD	20% AD	20% AD	40% AD
Outpatient hospital services (lab, x-ray, diagnostic)	20% AD	20% AD	20% AD	40% AD
Advanced diagnostics	20% AD	20% AD	20% AD	40% AD
Urgent care	20%AD	20% AD	20% AD	40% AD
Emergency room care	\$250 Copay	\$250 Copay	20% AD	20% AD
<b>Prescription drugs</b>				
<b>Retail (30-day supply)</b>				
Generic	\$15	Not Covered	\$5	Not Covered
Brand preferred	20% up to \$50	Not Covered	25% AD	Not Covered
Brand non-preferred	35% up to \$100	Not Covered	25% AD	Not Covered
<b>Mail order (90-day supply)</b>				
Generic	\$30	Not Covered	\$10	Not Covered
Brand preferred	20% up to \$125	Not Covered	25% AD	Not Covered
Brand non-preferred	35% up to \$250	Not Covered	25% AD	Not Covered

This is a summary of coverage; please refer to your summary plan description for the full scope of coverage. In-network services are based on negotiated charges; Out-of-network services are based on a percentage of Medicare charges.

AD = After Deductible

\* Includes Deductible and Copayments

# MEDICAL AND RX PROGRAMS

## Pharmacy

Find an in-network pharmacy or use the drug cost estimator tool by visiting CVS Caremark.

- Discount sites like Good Rx and WellRx can help you instantly save (please note: prescriptions acquired under these plans do not go through your insurance).
- Ask if generic/mail order is available.
- Generic contraceptives and diaphragms are covered and available at no cost.
- See if your drug has a Patient Assistance Program.

## Aetna Transform Oncology

Aetna Transform Oncology is included with your medical plan at no cost to you. This program provides assistance and support to members through their cancer treatment. The program aims to provide a better patient experience, faster treatment options, and lower costs.

### Program Features:

- Proactive patient support through Aetna Personal Navigator
- Aetna Genetic Testing to help identify risks earlier
- Precision medicine to treat the member's specific cancer
- Clinical trial recommendations

For details, log in to your Aetna account at [www.aetna.com](http://www.aetna.com) and visit the Cancer Support Center.

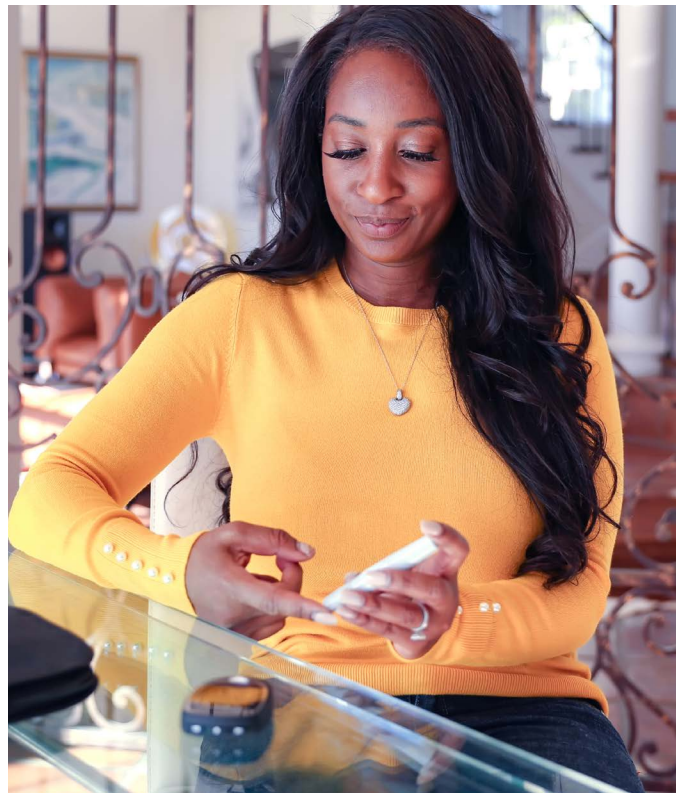
## CVS Transform Diabetes

CVS Transform diabetes is included with your prescription plan at no cost to you and offers tools, education, and support to members managing diabetes.

### Program Features

- Customized diabetes care plan
- Clinical support in monitoring blood glucose, lifestyle management, screenings, and medication
- Face-to-face pharmacist and care team consultations and remote support, including email, text, and phone
- BioTel Care blood glucose monitor

If you're managing diabetes, you're enrolled automatically - CVS will reach out to you to help you get started.



# Your care. Your way.

## Convenient and affordable virtual care wherever you need it\*

From wellness visits to quick care, we've got you covered. You can use CVS Health Virtual Primary Care™ in addition to your traditional network of providers. Access is included as part of your medical plan from Aetna®, a CVS Health® company because **healthier happens together™**.



### On-demand care

Access 24/7 quick care for minor illnesses and injuries



### Mental health services

Get counseling for things like anxiety and stress, plus psychiatry services for medication management



### Primary care services

Schedule a visit with a dedicated provider within days for preventive care, wellness screenings, sick visits, prescriptions, and chronic disease management

**Get coordination of in-person care, when needed, to nearby MinuteClinic® locations\*\* or in-network provider clinics.**

## Get started today with CVS Health Virtual Primary Care

- 1 Activate your virtual care benefit by visiting [CVS.com/virtual-care](https://CVS.com/virtual-care) or scan the QR code below
- 2 Create an account and confirm your details
- 3 Schedule a virtual primary care or mental health appointment, or request on-demand care 24/7/365



## Choose your Virtual Primary Care Team

Select a physician who leads the Care Team. Once selected you can start to get the care you need.

Angelina Arvis,  
MD



Register today at [CVS.com/virtual-care](https://CVS.com/virtual-care)

\*Age restrictions do apply. Mental Health services coverage varies by employer. Make sure to check specific plan benefits to better understand covered mental health services.

\*\*MinuteClinic® in-person services are not included with this product and are subject to plan benefit.

Aetna® and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health® family of companies.

Limitations may apply based on services and location.

This material is for informational purposes only. Refer to [aetna.com](https://aetna.com) for more information about Aetna plans and for a full list of participating providers.

# DENTAL

## DELTA DENTAL



[deltadentalins.com](http://deltadentalins.com)

1-800-521-2651

Although you can choose any dental provider, when you use an in-network dentist, you will generally pay less. If you choose an out-of-network provider, you may be billed the difference between what Delta Dental pays, and what your out-of-network provider charges for the services. To locate an in-network provider, please visit [deltadentalins.com](http://deltadentalins.com). You can also call the Customer Service line for assistance at 1-800-521-2651.

Dental	Delta Dental PPO	
	In-network	Out-of-network
Annual deductible (Individual/Family)	\$50 / \$150	\$50 / \$150
Annual maximum (per person)	\$2,000	\$2,000
Diagnostic and preventive care Includes cleanings, fluoride treatments, sealants, and x-rays	no charge	no charge
Basic services Includes fillings, periodontics, scaling and root planning, and oral surgery	20%	50%
Major services Includes crowns, bridges, and full and partial dentures	50%	60%
Orthodontia	50%	50%
Lifetime maximum	\$3,000	\$1,000

Plan includes out-of-network benefits, see plan summary for additional details.

Note: When you use out-of-network providers, higher charges and balance billing may apply.

Note: Associates can elect dental and/or vision regardless of whether they are enrolled in medical.

## What Does Preventative Dental Care Typically Cover?

Preventative care can save you money later on procedures that are more urgent, complex, and costly.

- Routine dental checkups and cleanings should be scheduled every six months.
- Professional fluoride treatments can be a key defense against cavities.
- Dental sealants go a step beyond fluoride by providing a thin coating to the surface of your teeth.
- X-ray images of your mouth may be taken to better evaluate your oral health, as they provide a more detailed look inside your teeth and gums.



# VISION

VSP



[www.vsp.com](http://www.vsp.com)  
1-800-877-7195

Our vision care benefits include coverage for eye exams, lenses and frames, contact lenses, and discounts for laser surgery. The vision plan is built around the VSP providers, who have higher benefits at a lower cost to you. When you need services, consider using an in-network provider for the most bang for your buck! When you use an out-of-network provider, you will be reimbursed for services according to the grid below. To locate an in-network provider, visit [www.vsp.com](http://www.vsp.com). You can also call the Customer Service line for assistance at 1-800-877-7195.

Vision	VSP Vision Plan	
	In-network	Out-of-network
Examination (every 12 months)	\$20 copay	\$30
Lenses (every 12 months)		
Single	100% after copay	Up to \$20
Bifocal	100% after copay	Up to \$30
Trifocal	100% after copay	Up to \$40
Frames (every 24 months)		
New frames	\$20 copay, then up to \$150 allowance for featured frame brands, \$130 for other frames	Up to \$30
Contact lenses (every 12 months)		
Elective	\$150 allowance 100%	Up to \$100
Medically necessary	Covered in full	Up to \$200

*Note: Lenses and Frames are fully covered when combined with the Eye Exam. If you elect to not have your Eye Exam a \$20 copay would apply to Lenses and Frames.*

*Associates can elect dental and/or vision regardless of whether they are enrolled in medical.*

## 5 Tips for a Lifetime of Healthy Vision

1. Schedule yearly eye exams. Visiting your eye doctor regularly helps you see your best, protect your eyesight, and even detect serious health conditions such as diabetes.
2. Protect your eyes against UV rays. No matter what the season, it is important to wear sunglasses. When purchasing sunglasses, be sure to confirm they offer 100% UV/UVB protection.
3. Give your eyes a break from digital devices. Digital screens emit a specific type of blue and violet light which can negatively impact eye health and cause eye strain.
4. Quit smoking. Smoking increases your risk of developing macular degeneration, optic nerve damage, and cataracts.
5. Practice safe wear and care of contact lenses. Keep them clean and follow your optometrist's recommendations for use and wear.

# HEALTH SAVINGS ACCOUNT (HSA)

[www.inspirafinancial.com](http://www.inspirafinancial.com)

1-888-678-8242

## INSPIRA FINANCIAL (PAYFLEX)

AVAILABLE TO PARTICIPANTS IN THE CHOICE PLUS HDHP PLAN.



A Health Savings Account (HSA) is a tax-advantaged savings account that can be used for your qualified healthcare expenses. You own your HSA and can contribute to the account with pre-tax payroll deductions based on your needs.

Did you know an HSA provides triple tax benefits? The money you contribute is pre-tax, and the interest that accumulates in the account is tax-free. In addition, money withdrawn from an HSA isn't taxed, provided you use it for qualified healthcare expenses. Like a savings account, you will only be able to withdraw funds that are in the account.

As an added benefit, Coke Florida will annually contribute \$200 to those enrolled in the Associate Only tier and \$400 to those in the Associate + Dependent(s) tiers.

### OTHER HSA ADVANTAGES



You can use the account to pay for qualified healthcare expenses.



Unspent dollars roll over each year and are yours to keep if you retire or leave the company.



You can invest your HSA fund balance (amount over \$1,000), so your available healthcare dollars can grow over time.

#### You are eligible if:

You are enrolled in the HDHP

You are not covered by a spouse's plan

No one else can claim you as a dependent

You are not enrolled in Medicare, TRICARE, or TRICARE for Life

You have not received VA benefits in the past 3 months



## How Do I Access / Make Contributions to My HSA?

You can manage your HSA at [www.inspirafinancial.com](http://www.inspirafinancial.com). You'll set up your payroll contributions during your enrollment period and can make changes at any time throughout the year (although it may take between 1-2 payroll periods for any changes to be processed). You can also call the Customer Service line for assistance at 1-888-678-8242.

## How Much Can Be Deposited into an HSA in 2024?

<55\*

- Up to \$4,150 for individual
  - Up to \$8,300 for family
- \*Not enrolled in Medicare

The maximum contribution increases by \$1,000

\*Not enrolled in Medicare

55+\*

# FLEXIBLE SPENDING ACCOUNT (FSA)

[www.inspirafinancial.com](http://www.inspirafinancial.com)

1-888-678-8242

## INSPIRA FINANCIAL (PAYFLEX)

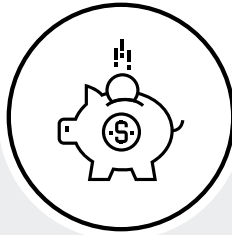


### What is a Flexible Spending Account?

A Flexible Spending Account (FSA) is an account that can reimburse you for qualified healthcare or dependent care expenses. You can fund qualified expenses with pre-tax dollars deducted from your paychecks.

When electing an FSA, you will set an annual contribution amount. FSAs do not rollover year to year, so you will have until the end of the plan year to use the funds. According to the IRS rules, any money remaining in a Health Care or Dependent Care FSA after the claims submission deadline must be forfeited. The goal is to choose an amount that will cover medical or dependent care expenses, but that is not so high that the money will be forfeited at the end of the year.

You can choose to participate in one or both accounts, and it's not necessary to "sign up" specific family members for these accounts.



#### Health Care FSA

A Health Care FSA reimburses Associates for eligible medical expenses, up to the amount contributed for the plan year. Eligible healthcare expenses include many of the out-of-pocket expenses you pay to maintain your health and well-being. Visit [irs.gov](http://irs.gov) for a full list of eligible expenses.

You may contribute up to \$3,200 annually (funds will be available as of the election effective date).

Please note: If the IRS increases the annual maximum amount you will be given the option to increase your election.

#### Dependent Care FSA

You may use pre-tax dollars from your Dependent Care FSA to pay expenses for the care of a dependent child (under the age of 13), spouse or elderly parent inside your home (from a qualified provider), and expenses outside your home, such as baby-sitters, nursery schools, or day care centers.

You may contribute up to \$5,000 annually (or \$2,500 if you are married and file a separate tax return). You can only be reimbursed up to the amount that you have contributed.

# VOLUNTARY BENEFITS

[www.MyAetnaSupplemental.com](http://www.MyAetnaSupplemental.com)

1-888-699-1005



## AETNA

Our medical plans provide great coverage for you and your family's healthcare needs. Still, everyone's needs are slightly different. That's where voluntary health options come in! These benefits are designed to protect your family's finances in case of an unforeseen injury or illness. These benefits are offered to you through Aetna. Please visit [www.MyAetnaSupplemental.com](http://www.MyAetnaSupplemental.com) or call 1-888-699-1005 for additional details.



### Accident Insurance

Accident plans pay cash benefits directly to you to help pick up some of the costs remaining after your health insurance plan kicks in following a covered accident.



### Critical Illness Insurance

Critical illness insurance helps protect your income and personal assets when out-of-pocket expenses increase as a result of a specified illness. This plan covers conditions like: heart attack, stroke, end stage renal failure, invasive cancer, and more.



### Hospital Indemnity Insurance

An unexpected or even planned stay in the hospital can be expensive as you meet your deductible and out-of-pocket obligations under the medical plan. The Hospital Indemnity plan is designed to provide financial protection by paying you a direct benefit to meet out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to you based on the type of facility and number of days of confinement.



### Health Screening Benefit

Each of the three plans provide a \$50 benefit per covered person per calendar year if you or your covered dependents complete a covered health screen test such as a physical exam, total cholesterol blood test, mammogram, lipid panel, and more. If you enroll in all three insurance plans, you can receive up to \$150 per covered person per calendar year.



# LIFE AND DISABILITY INSURANCE

LINCOLN FINANCIAL



[www.mylincolnportal.com](http://www.mylincolnportal.com)

Life: 1-888-787-2129

Disability: 1-888-408-7300

## Life Insurance

Coke Florida provides Life and AD&D insurance at no cost to you!

Insurance coverage	Benefit
Basic Life and AD&D	The amount of your annual earnings, rounded to the next higher \$1,000 times 1.5 up to \$400,000.

## Voluntary Life Insurance

If you would like additional coverage, Voluntary Life and AD&D insurance is available to you, your spouse, and your dependent children. You must enroll in coverage for yourself in order to cover your spouse or children. If you don't enroll in Voluntary Life when it's first available to you, or decide to increase your current coverage, you may be required to complete an Evidence of Insurability (EOI) form. EOI is not required for Dependent Spouse Life elections up to the \$50,000 Guarantee Issue amount. Please refer to the plan summaries for additional details.



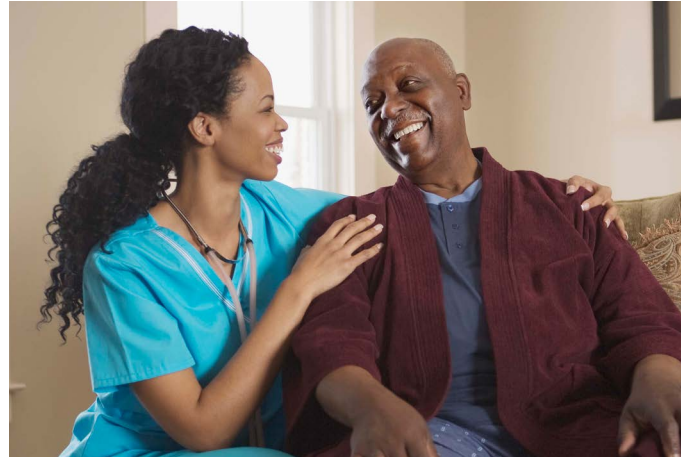
Insurance coverage	Benefit
Voluntary Associate Life & AD&D	<b>Life:</b> Choice of 1x, 2x, 3x, 4x, or 5x your basic annual earnings rounded to the next high \$1,000 times your choice up to \$1,600,000. <b>AD&amp;D:</b> Choice of 1x, 2x, 3x, 4x, or 5x your basic annual earnings rounded to the next high \$1,000 times your choice up to the lesser of 5x your basic annual earnings or \$1,000,000.
Voluntary Spouse Life & AD&D	<b>Life:</b> Increments of \$5,000 up to 50% of your Supplemental Life Benefit or \$100,000 <b>AD&amp;D:</b> Spouse Only - Equal to 70% of your Voluntary AD&D benefit up to a maximum of \$700,000. Spouse with Child(ren) - Equal to 40% of your Voluntary AD&D benefit up to a maximum of \$700,000
Voluntary Child Life & AD&D	<b>Life:</b> Choice of \$5,000 or \$10,000 <b>AD&amp;D:</b> Child(ren) Only - Equal to 20% of your Voluntary AD&D benefit for each child up to a maximum of \$100,000 for each child. Child(ren) with Spouse - Equal to 10% of your Voluntary AD&D benefit for each child up to a maximum of \$100,000 for each child.

After your benefit election in Dayforce becomes effective, further action may be required of you. If you have completed a statement of health (SOH) application, Lincoln Financial will mail you an approval letter or will provide you with any next steps if you have not been approved. To submit and view claims, you can set up an online account at the website provided above and click on "Report a New Life Claims". You can reach out to Lincoln Financial directly with any questions at 1-888-787-2129.

## Disability Insurance

Short-Term and Long-Term Disability Insurance is provided to you at no cost. These plans provide income protection, paying benefits you can use to offset out-of-pocket expenses and make up for lost wages.

After your benefit election in Dayforce becomes effective, no further action is required of you. To submit and view claims, you can set up an online account at [www.mylincolnportal.com](http://www.mylincolnportal.com) and click “Start a New Claim”. You can reach out to Lincoln Financial directly with any questions at 1-888-408-7300.



## Short-Term Disability

You are eligible to receive Short-Term Disability (STD) benefits for a qualified non-work-related illness or injury that prevents you from working for an extended period of time. Benefits depend on whether you are an hourly or salaried Associate.

Hourly Associate STD Benefit		Salaried Associate STD Benefit	
Elimination Period	7 days	Elimination Period	None
Weekly Benefit	75% of weekly earnings	Weekly Benefit	100% of weekly earnings for weeks 1-8 and 75% for the remainder of the benefit period.
Maximum Benefit Period	26 weeks	Maximum Benefit Period	26 weeks









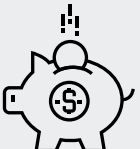

## Long-Term Disability





Coke Florida provides employer-paid Long-Term Disability (LTD) Insurance that pays a monthly benefit in the event you cannot work because of a long-term illness or injury. Voluntary LTD coverage is also available for purchase and provides an additional 10% or 20% of your monthly earnings up to a \$20,000 monthly maximum.

Employer-Paid LTD Benefit		Voluntary LTD Buy-Up Benefit	
Elimination Period	180 days	Elimination Period	180 days
Weekly Benefit	50% of monthly earnings (up to \$20,000)	Weekly Benefit	<b>Option 1:</b> 60% of monthly earnings (up to \$20,000) <b>Option 2:</b> 70% of monthly earnings (up to \$20,000)
Maximum Benefit Period*	Retirement Age	Maximum Benefit Period*	Retirement Age

\*Please see the plan summaries for more detailed information on the maximum benefit period.

# ADDITIONAL BENEFITS

Benefit	Description	Contact information	Who pays?
 <p>Employee Assistance Program</p>	<p>We are pleased to offer an Employee Assistance Program to assist you and your family through difficult times. This benefit is available for all household members.</p> <ul style="list-style-type: none"> <li>• Unlimited access to Master's-level counselors by phone 24/7.</li> <li>• Up to 8 face-to-face visits with a counselor at no cost.</li> <li>• Unlimited access to helpful tools and resources online.</li> <li>• Referrals available.</li> </ul>	 <p>ComPsych 1-888-664-6512 <a href="http://www.guidanceresources.com">www.guidanceresources.com</a> User ID: CCBF</p>	Employer Paid
 <p>Pet Insurance</p>	<p>With Pet Insurance, you'll have peace of mind knowing you can get help with some of your pet's medical bills. The plan reimburses eligible veterinary expense relating to accidents, illnesses, and injuries for dogs, cats, birds, and several exotic pets.</p> <p>You can choose the level of reimbursement that best fits your needs, either 50% or 70% of your vet bill. A \$250 annual deductible and \$7,500 maximum annual benefit apply. For more details, call or visit the website to get a free quote.</p>	 <p>Nationwide Pet Insurance 1-877-738-7874 <a href="http://www.petinsurance.com/cocacolafloida">www.petinsurance.com/cocacolafloida</a></p>	Associate Paid Discounted rates available
 <p>Identify Theft Protection</p>	<p>Every online transaction leaves a trace behind, taking on a life of its own, which can put your credit and identity at risk. Norton LifeLock can help monitor your credit and protect your identity. Please be aware, if you have a personal Norton account, you will have to terminate that account to enroll in this benefit.</p>	 <p>Norton LifeLock 1-800-607-9174 <a href="http://my.norton.com">my.norton.com</a></p>	Associate Paid Discounted rate available
 <p>DayForce Wallet</p>	<p>Dayforce Wallet lets Coke Florida Associates make any day payday! It is a modern way to give you access to your net earned wages on demand. Funds are deposited in real-time to the Dayforce Prepaid MasterCard, which comes from Dayforce Wallet. You can access 85% of your net pay which will be available to you in Dayforce Wallet. All taxes, deductions, and garnishments will be applied before you see any available earnings. To get started with Dayforce Wallet, <a href="#">click here</a>.</p>	 <p><a href="#">DayForce Wallet</a></p>	Employer Paid
 <p>401(k) Retirement Savings Plan</p>	<p>You are eligible to participate in the 401(k) Retirement Savings Plan once you have completed 60 days of service. You may elect to defer a percentage of your pay each period. Your current taxable income is reduced by the amount you contribute through pre-tax salary deferral. This plan allows you to defer 100% of your pay. In addition, you may also elect to defer a percentage of your pay each period as Roth deferral, which are after-tax contributions. <b>For any contributions up to 6% of your pay, Coke Florida will match \$1.00 for each dollar you invest for the first 1% and \$0.50 for every dollar for the next 5%.</b></p> <p>This retirement plan includes an automatic contribution arrangement that applies to all eligible participants. If you are a new participant, you will be automatically enrolled in the retirement plan, meaning 3% of your pay will be deducted from paychecks and contributed to the retirement plan on your behalf unless you elect a different salary deferral percentage.</p>	 <p>Principal 1-800-547-7754 Monday - Friday 7a.m. - 9p.m. (CT) <a href="http://www.principal.com/welcome">www.principal.com/welcome</a> or <a href="http://www.principal.com/LearnNow">www.principal.com/LearnNow</a></p>	Associate Paid with Employer Contribution

Benefit	Description	Contact information	Who pays?
 <b>Auto &amp; Home Insurance</b>	<p>This voluntary program offers discounted coverage for your home, condo, car, boat, motorcycle, recreational vehicle, and other possessions. Good driving rewards, loyalty discounts, and multi-policy savings are also available. Enroll directly through the carrier at any time throughout the year. Rates are based on your personal history.</p> <p>After enrollment directly with the carrier, you will be mailed your Policy ID card (if applicable), and welcome documents. Farmers will contact you directly to renew your Policy each year.</p>	 Farmers GroupSelect 1-800-438-6381 <a href="http://www.myautohome.farmers.com">www.myautohome.farmers.com</a> Use discount code "FBP" to access quotes.	Associate Paid
 <b>Legal Insurance</b>	<p>Unexpected legal concerns can be difficult to handle alone. The LegalEASE legal insurance plan provides support and protection for a variety of personal legal issues. As a member, you will have access to a national network of over 20,300 attorneys who can help with matters such as:</p> <ul style="list-style-type: none"> <li>• Home and Consumer</li> <li>• Financial</li> <li>• Auto and Traffic</li> <li>• Family</li> <li>• Estate Planning and Wills</li> </ul>	 LegalEASE 1-800-248-9000 (reference Coke Florida) Member Services: 1-888-416-4313 <a href="http://www.legaleaseplan.com/cocacolaflorida">www.legaleaseplan.com/cocacolaflorida</a>	Associate Paid

## VACATION TIME

Paid vacation is available to full-time Associates and, on a reduced basis, to part-time Associates.

EXEMPT & NON-EXEMPT VACATION TIME	
January 1 of the Calendar Year in Which You Will Complete	Total Weeks Accrued
1 - 9 years of service	3 weeks
10 - 19 years of service	4 weeks
20 - 29 years of service	5 weeks
30+ years of service	6 weeks

### Exempt Associates

As a newly hired exempt Associate, you will be eligible to take vacation as of your date of hire with the Company. Your vacation time may be prorated your first year, depending on your hire date.

### Non-Exempt Associates

As a newly hired non-exempt Associate, you will be eligible to take vacation after you have worked for the Company for 6 months from your date of hire. Your vacation time may be prorated your first year, depending on your hire date.





# BI-WEEKLY ASSOCIATE PAYROLL CONTRIBUTIONS

## Medical/Rx

	Choice Plus Value Plan	Choice Plus HDHP
Tobacco Use	Non-Tobacco User/1 Tobacco User/2 Tobacco Users	Non-Tobacco User/1 Tobacco User/2 Tobacco Users
Associate	\$98.61 / \$121.69 / N/A	\$36.73 / \$59.81 / N/A
Associate + Spouse	\$329.18 / \$352.26 / \$375.34	\$151.96 / \$175.04 / \$198.12
Associate + Child(ren)	\$229.83 / \$252.90 / N/A	\$93.98 / \$117.06 / N/A
Family	\$413.70 / \$436.77 / \$459.85	\$193.90 / \$216.97 / \$240.05

## Dental

	Dental Plan
Associate	\$7.44
Associate + Spouse	\$14.41
Associate + Child(ren)	\$16.77
Family	\$24.10

## Vision

	Vision Plan
Associate	\$2.01
Associate + Spouse	\$4.89
Associate + Child(ren)	\$4.04
Family	\$6.99

## Supplemental Life and AD&D Insurance

Life Insurance: Associate & Spouse Monthly Rates per \$1,000 of Coverage											
Age	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
Associate Rates	\$0.039	\$0.055	\$0.062	\$0.068	\$0.105	\$0.177	\$0.306	\$0.474	\$0.880	\$1.429	\$1.552
Spouse Rates	\$0.068	\$0.092	\$0.104	\$0.116	\$0.174	\$0.266	\$0.497	\$0.762	\$1.466	\$2.378	\$2.378
Life Insurance: Child(ren) Monthly Rate per \$1,000 of Coverage											
Child(ren) Rates	\$0.065										
AD&D Insurance: Monthly Rates per \$1,000 of Coverage											
Associate Rates	\$0.016										
Spouse Rates	\$0.024										

## Voluntary Long-Term Disability (LTD) Insurance

Monthly Rates per \$100 of Covered Payroll	
Benefit	Rate
LTD Buy-Up: 10%	\$0.240
LTD Buy-Up: 20%	\$0.350

Disability Benefits are based on your salary, but your coverage is not automatically increased when your salary changes. Annual Enrollment is the only time you can change your coverage. Covered Payroll references the total salary/compensation paid to all active members.

How to Calculate Your LTD Cost per Paycheck		
\$ _____ X _____ ÷ 100 = \$ _____		
Monthly Income*	Your Rate**	Monthly Associate Cost
\$ _____ 12 ÷ _____ = \$ _____		
Monthly Associate Cost	Pay Periods Per Year	Pay Period Deduction

## Accident Insurance

Bi- Weekly Rates	
Associate Only	\$2.91
Associate + Spouse	\$5.16
Associate + Child(ren)	\$6.50
Associate, Spouse, & Child(ren)	\$8.64

## Hospital Indemnity

Bi- Weekly Rates	
Associate Only	\$4.08
Associate + Spouse	\$11.52
Associate + Child(ren)	\$8.27
Associate, Spouse, & Child(ren)	\$12.88

## Legal Plan

Bi- Weekly Rates	
Associate, Spouse, & Child(ren)	\$7.13

## Identity Theft Protection

Bi- Weekly Rates	
Associate Only	\$3.69
Associate, Spouse, & Child(ren)	\$6.91

## All Other Benefits

Rates for benefits including Critical Illness Insurance, Pet Insurance, and Auto & Home Insurance will vary based on Individual factors and will be provided at the time of enrollment.

Note: Every Effort has been made to ensure the information in this document is accurate. However, if there is any inconsistency between this document, and the applicable plan documents, the official plan documents will always govern.

## GLOSSARY OF TERMS

**COPAYMENT:** A copayment (copay) is the fixed dollar amount you pay for certain in-network services on a PPO-type plan. In some cases, you may be responsible for coinsurance after a copay is made.

**COINSURANCE:** Your share of the costs of a healthcare service, usually figured as a percentage of the amount charged for services. You start paying coinsurance after you've met the deductible. Your plan pays a certain percentage of the total bill, and you pay the remaining percentage.

**DEDUCTIBLE:** A deductible is the amount of money you must meet before your plan begins paying for services covered by coinsurance. Some services, such as office visits that require copays do not apply to the deductible. For example, if your plan's deductible is \$1,000, you'll pay 100 percent of eligible healthcare expenses until you have met the \$1,000 deductible. After that, you share the cost with your plan by paying coinsurance.

**FORMULARY:** A list of prescription drugs covered by the plan. Also called a drug list.

**HIGH DEDUCTIBLE HEALTH PLAN (HDHP):** This is a type of medical plan that requires the member to reach a deductible prior to having services covered by coinsurance. All expenses paid by the member count toward the deductible and out-of-pocket maximum.

**IN-NETWORK:** A group of doctors, clinics, hospitals, and other healthcare providers that have an agreement with your medical plan provider. You pay a negotiated rate for services when you use in-network providers.

**OUT-OF-NETWORK:** Care received from a doctor, hospital, or other provider that is not part of the plan agreement. You'll pay more when you use out-of-network providers since they don't have a negotiated rate with your plan provider. You may also be billed the difference between what the out-of-network provider charges for services and what the plan provider pays for those services.

**OUT-OF-POCKET MAXIMUM:** This is the most you must pay for covered services in a plan year. After you spend this amount on deductibles and coinsurance, your health plan pays 100 percent of the costs of covered benefits. However, you must pay for certain out-of-network charges above reasonable and customary amounts.

# CONTACTS

Benefit	Contact	Phone Number	Website	Plan/Group ID
Medical Plan(s)	Aetna	1-888-699-1005	<a href="http://www.aetna.com">www.aetna.com</a>	868660
Prescription Services	CVS Caremark	1-855-383-9428	<a href="http://www.caremark.com">www.caremark.com</a>	1586
Telemedicine	CVS Health Virtual Care	N/A	<a href="http://CVS.com/virtual-care">CVS.com/virtual-care</a>	N/A
Dental	Delta Dental	1-800-521-2651	<a href="http://deltadentalins.com">deltadentalins.com</a>	17681
Vision	VSP	1-800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>	30057528
Health Savings Account (HSA) and Flexible Spending Account (FSA)	Inspira Financial (formerly PayFlex)	1-888-678-8242	<a href="http://www.inspirafinancial.com">www.inspirafinancial.com</a>	145812
Life & Disability	Lincoln Financial	Life: 1-888-787-2129 Disability: 1-888-408-7300	<a href="http://www.mylincolnportal.com">www.mylincolnportal.com</a>	09-LF0935 Company Code: CokeFL
Accident, Critical Illness, and Hospital Indemnity	Aetna	1-888-699-1005	<a href="http://www.MyAetnaSupplemental.com">www.MyAetnaSupplemental.com</a>	803165
Employee Assistance Program	ComPsych	1-888-664-6512	<a href="http://www.guidanceresources.com">www.guidanceresources.com</a>	User ID: CCBF
Pet Insurance	Nationwide Pet Insurance	1-877-738-7874	<a href="http://www.petinsurance.com/cocacolaflorida">www.petinsurance.com/cocacolaflorida</a>	Coca-Cola Beverages Florida, LLC
Identify Theft Protection	Norton LifeLock	1-800-607-9174	<a href="http://my.norton.com">my.norton.com</a>	E0011712
DayForce Wallet	DayForce Wallet	1-877-723-7434	<a href="http://DayForce">DayForce</a>	N/A
401(k) Retirement Savings Plan	Principal	1-800-547-7754	<a href="http://www.principal.com/welcome">www.principal.com/welcome</a> <a href="http://www.principal.com/LearnNow">www.principal.com/LearnNow</a>	N/A
Auto & Home Insurance	Farmers GroupSelect	1-800-438-6381	<a href="http://www.myautohome.farmers.com">www.myautohome.farmers.com</a>	Group #: 160264 Website Employer ID: Coke Florida Discount Code: FBP
Legal Insurance	LegalEASE	1-800-248-9000 (reference Coke Florida) Member Services: 1-888-416-4313	<a href="http://www.legaleaseplan.com/cocacolaflorida">www.legaleaseplan.com/cocacolaflorida</a>	Coke Florida
Human Resources		Coke Florida Benefits Hotline Phone: 1-877-340-0929, select option 3 for Benefits	<a href="https://cokefloridatotalrewards.com">https://cokefloridatotalrewards.com</a>	N/A

## Virtual Enrollment



Schedule a virtual session with a Benefits Counselor.

- New Hires [cocacola-florida.benefitsinfo.com/schedule-a-call](http://cocacola-florida.benefitsinfo.com/schedule-a-call)
- During Open Enrollment [cocacola-florida.benefitsinfo.com/schedule-a-call](http://cocacola-florida.benefitsinfo.com/schedule-a-call)



## Online Enrollment

Log in to [Dayforce](http://Dayforce) and follow the prompts to complete your enrollment.

Annual notices are available here:

<https://online.flippingbook.com/view/1013069330>





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.