

CHUBB®

Take a moment

Your 2024 Annual Enrollment Guide

This year's Annual Enrollment
is: October 20 to November 10

LET'S GET STARTED ►



It's time to enroll!

Choosing the right benefits is one of the most important decisions you can make. At Combined, a Chubb company, we invest in meaningful programs that protect you and your family's health and well-being, and offer you a comprehensive array of benefits options.

Elections made during the enrollment window will be effective January 1, 2024. To help you make informed decisions, this guide is designed to help you navigate next year's benefits options and changes. It's the perfect time to evaluate your plan options and ensure you have the right coverage for you and your family.

Take action during Annual Enrollment	Action anytime	No action required
<ul style="list-style-type: none"> • Medical/Rx plan • Supplemental medical plans (accident, hospital indemnity, critical illness) • Dental plan • Vision plan • Health savings and flexible spending accounts • Long-term disability insurance 	<ul style="list-style-type: none"> • Supplemental life and AD&D insurance • Personal Cyber Insurance from BlinkSM by Chubb[®] 	<ul style="list-style-type: none"> • Basic life and AD&D insurance • Employee Assistance Program



2024 Benefits Annual Enrollment
October 20 to November 10, 2023

Life event changes

The benefits you elect will be in effect until the end of 2024, unless you experience a qualifying life event. Read more on Page 10.

Changes for 2024

- Plan changes
- Cancer Advocate Plus



It's time to enroll

Changes for 2024

How to enroll

Medical plans

Dental and vision plans

Health savings and spending accounts

Wellness

Life and disability

Retirement savings and investment plans

Resources and contacts

What's New for 2024

No changes to medical plan options or networks: During Annual Enrollment you will have the same medical plan options to choose from as were offered last year. These plans will use the same provider networks they use today. If you make no changes to your medical plan coverage, your current coverage will continue.

- \$1,850 Deductible Plan
- \$4,500 Deductible Plan

Cancer Advocate Plus: If you missed enrolling in this innovative cancer screening and support benefit from Chubb Worksite Benefits earlier this year, you have another opportunity to do so. This program combines financial protection, cancer care and cancer screening to help employees determine their risk and the best treatment.

- You can save more in the HSA and FSAs in 2024:



Year	Health Savings Account (HSA)	Health Care or limited purpose flexible spending accounts
2023	\$3,850/\$7,750 (employee/family)	\$3,050
2024	\$4,150/\$8,300 (employee/family)	To be announced

How to enroll

- bswift, Chubb's benefits partner
- Accessing the Chubb Benefits Portal
- Enroll by November 10
- Decision-support tools, including *Ask Emma*
- Health savings and flexible spending account plans
- Enrollment checklist
- Eligibility
- Life event changes



It's time to enroll

Changes for 2024

How to enroll

Medical plans

Dental and vision plans

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Life and disability

Retirement savings and investment plans

Resources and contacts

How to enroll

bswift, Chubb's benefits partner

bswift is Chubb's benefits partner—a full-service benefits administrator whose goal is to “make benefits easy.” When you enroll, you will access the **Chubb Benefits Portal** (managed by bswift).

On the Portal, you will be introduced to *Ask Emma*, an interactive decision guide that will help you select the right plan and provide information about Chubb's benefits programs. Think of the Portal as our hub for benefits information.



With bswift, we have a partnership that delivers a great service experience, and helps you feel supported and confident in the benefits choices you make for you and your family.

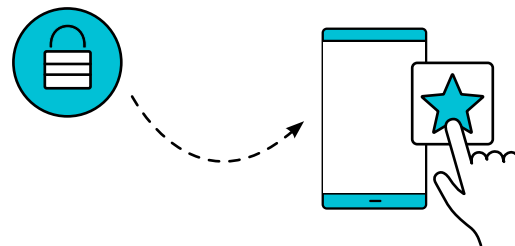


Reminder: Update your favorites

Update your browser favorites to include the Chubb Benefits Portal: chubb.bswift.com.

Accessing the Chubb Benefits Portal

You can access your account on the **Chubb Benefits Portal** using **single sign-on** if you are logged into the Combined network. Go to **MyPay** to access the link. If you want to access the **Chubb Benefits Portal** from your smartphone or tablet, or if you are not on the Combined network, go to chubb.bswift.com and enter your username and password. If you haven't created a Portal account, take a moment to do so.



Multi-factor authentication

When you visit the **Chubb Benefits Portal** through chubb.bswift.com for the first time and set up an account, you'll be asked for information that confirms your identity (known as multi-factor authentication). In the login window, click “First Time User” to create an account.

Mobile friendly

When you're on the go and need to access the **Chubb Benefits Portal**, visit chubb.bswift.com. It's mobile friendly—ready to use on your smartphone or tablet—making it the perfect spot for Annual Enrollment activities. While bswift does provide an app, its capabilities are limited to listing your benefits and uploading some verification documents.

Chubb Benefits Service Center:
1-844-58CHUBB (1-844-582-4822)

Enroll by November 10

Enroll during Annual Enrollment: October 20 to November 10. Once the enrollment window closes, you will not be able to change your benefits for 2024 unless you experience a qualified life event and make changes within 30 days of the event. See [Page 10](#) for more details.

Decision-support tools, including Ask Emma

Ask Emma is an interactive decision-support tool on the [Chubb Benefits Portal](#). Emma can help you decide which benefits are best for you and your family. She can explain health care and insurance terms, help you estimate your out-of-pocket costs, model potential health scenarios and personalize cost comparisons among Chubb's medical plans.

The Portal also contains other tools and calculators, such as:

- Doctor/provider look-up through carrier sites
- The life and disability insurance estimators to determine how much coverage you may need to protect your loved ones
- Videos and articles about your benefits, health and wellness, money management and more

Health savings and flexible spending account plans

Do you want to be enrolled in a Health Savings Account (HSA) or Flexible Spending Account (FSA) for health care or dependent care in 2024? You must take action and access the [Chubb Benefits Portal](#) and enroll.

HSA contribution limits for 2024 are \$4,150 single/\$8,300 family. If you will be 55 or older during 2024, you can contribute an extra \$1,000 on top of these limits.

You must enroll in and elect amounts in your Flexible Spending Accounts (FSAs) including health care, limited purpose and dependent care benefits. Contribution limits for 2024 are:

- Health care FSA: To be announced
- Dependent care: Annual limit to be announced

Note: Amounts in your limited purpose FSA (LP FSA) are available for eligible medical expenses once you reach the IRS-required deductible for dental and vision expenses in the LP FSA: \$1,500 single/\$3,000 family.

Learn more about HSAs and FSAs on [Page 33](#).

If you don't enroll...

Most of your current benefits elections will carry over to 2024. **However, you must actively enroll in a Health Savings Account (HSA) or Flexible Spending Account (FSA) for health care and dependent care.**

Even though certain benefits and information will roll over and be available on the [Chubb Benefits Portal](#), check your bswift account to review and update information about yourself, your dependents and your beneficiaries.





Have questions?

Chat with a customer service representative at the Chubb Benefits Service Center, Monday through Friday, 8 am to 8 pm ET:

- Call 1-844-58CHUBB (1-844-582-4822)
- Chat with a customer service representative on the **Chubb Benefits Portal** for live assistance

Enrollment checklist

- ✓ Review this guide for an overview of your benefits options.
- ✓ Access your account on the **Chubb Benefits Portal** and create an account when you can't use single sign-on through the Combined network.
- ✓ Use the *Ask Emma* tool and other resources on the **Chubb Benefits Portal** to learn more about the options that work best for you and your family.
- ✓ Check your elections, dependents and beneficiaries!
- ✓ Identify changes you may want to make to your benefits.
- ✓ Enroll in your benefits on the **Chubb Benefits Portal**.
- ✓ Save your enrollment details for future reference: email, PDF and print options are available.

What you need to do

Do you want to make changes to existing coverage?

- No** → Even if you are not making changes to your benefits, it is a good idea to log into the Chubb Benefits Portal to review your elections and beneficiaries. Also, remember your spending accounts (HSA and FSA) elections do not roll over.
- Yes** → When you're on the Combined network, you can use single sign-on to access the **Chubb Benefits Portal** directly. Create a new account by going to **chubb.bswift.com**, which will give you access from your smartphone and when you're not using the Combined network.

Eligibility

Eligibility to remain a full-time employee and retain benefits

To be eligible for company provided benefits (medical (including prescription), vision, dental, life insurance, disability, AD&D, hospital indemnity and the health care or dependent care FSAs) with Chubb, U.S. employees of the Combined Field Agent Division must meet and maintain an annual income threshold each payroll year of \$20,000 or more in net first-year commissions and overrides.

Employees who do not meet this required annual income threshold must wait until February 1 following the calendar year in which the employee has met the minimum income requirements to participate in company provided benefits.

Definitions of income

Income means all first-year commissions and overrides net of cancellations and charge-backs. Income does not include the following fringe benefits: cash compensation, second and subsequent year renewal/residual commissions, bonuses, prizes, guarantees or any other miscellaneous income. All new hire employees are credited with a benefits eligible amount of \$20,000 until the end of the payroll year following their year of hire. For example, a new agent hired in March 2022 will not have to qualify for benefits under the minimum earnings threshold until the end of 2023 (for the 2024 plan year).

Continuing benefit coverage

If you don't meet these minimum income requirements, you will be notified of this in mid- to late-January and your benefits will be terminated subsequently. If you had participated in the medical, dental, vision plans and contributed to the FSA, you may be eligible to elect to continue these benefits under COBRA. Your coverage will be the same, but you will have to pay the COBRA cost for these benefits. Also, if you don't meet the minimum income requirements, you will be able to convert your life insurance coverage to an individual policy. No conversion is available for disability coverage, AD&D coverage or the hospital indemnity.

Does your spouse/partner work for Chubb or Combined?

- If your spouse/partner also works for Chubb or Combined, one of you may enroll and cover the other as a dependent (the spousal surcharge on medical coverage would not apply in this case), or you may each enroll in individual coverage. If you have children, you will need to decide who will cover them.
- Chubb/Combined couples cannot cover each other or the same dependents (i.e., children) under the Chubb medical/dental/vision plans.

Benefits eligibility for Agents

First day in the field	After 90 days of continuous service from your first day in the field	After one year of continuous service from your first day in the field
<ul style="list-style-type: none"> • Basic AD&D insurance • Supplemental AD&D insurance • Employee Assistance Program 	<ul style="list-style-type: none"> • Medical/Rx plan • Health savings and flexible spending accounts • Vision plan • Supplemental medical plans (accident, hospital indemnity, critical illness) 	<ul style="list-style-type: none"> • Basic life insurance • Dental plan • Supplemental employee life insurance • Long-term disability

Negative account balance and payroll deductions for benefits

A negative account balance results when weekly benefit deductions and charge-backs exceed weekly commissions. Benefit deductions owed, but not taken, are put into arrears, and can accumulate, along with charge-backs, if ongoing weekly commissions are not enough to cover the arrears owed. When benefit arrears and charge-backs accumulate to \$750.00, you are not eligible for weekly benefit payroll deductions. bswift will contact you to set up direct bill payments for your benefits. If you previously made elections for your benefits on a pre-tax basis, they will now be paid post-tax.

You will not be eligible for payroll deductions of your benefits until your debit balance has been paid in full. You can make a request to return to payroll deductions by sending an email to Payrollbenefits@combined.com. In order to return to payroll deductions, you must meet these three requirements:

- 1) Not be on Leave of Absence
- 2) No longer be in a debit balance
- 3) Current with direct bill payments to bswift

Leave of absence

If you are unable to work for any period during the year due to your own disability or illness, the illness or disability of a family member, or some other emergency reason that would qualify you for a leave of absence, you must notify the Chubb Leave Administration team in advance—or as soon as reasonably possible—for the period of time you are unable to work. For example, if you were out of work 10 weeks on an approved leave, that means you should have worked the other 42 weeks of the year (or 80.7% of the year). Your earning requirement would be 80.7% of \$20,000, or \$16,140.



Life event changes

The benefits you elect will be in effect until the end of 2024, unless you experience a qualifying life event, which includes (but is not limited to):

- Marriage
- Divorce, legal separation or end of partnership
- Birth or adoption of an eligible child
- Death of your spouse/partner or covered child
- Loss or addition of other group coverage
- Change in your spouse's/partner's work status
- Change in your work status that affects your benefits
- Change in residence that affects your eligibility for coverage
- You or your covered dependent becomes eligible for Medicare
- Your retirement

Changes must be made within 30 days of your qualifying life event and are effective as of the date of the event. To make the change, visit the [Chubb Benefits Portal](#) and follow the instructions. You may also call the Chubb Benefits Service Center toll-free at 1-844-58CHUBB.

Medical plans

- How to navigate your options
- How the medical plans work
- Compare the plans
- Are you or your spouse/partner turning 65?
Important Medicare information
- Costs
- Prescription drugs
- Supplemental medical plans



It's time to
enroll

Changes
for 2024

How to
enroll

**Medical
plans**

Dental and
vision plans

Health savings and
spending accounts

Wellness

Life and
disability

Retirement savings
and investment plans

Resources
and contacts

Medical plans

We've outlined a two-step process as well as details on how the plans work and option comparisons, so you can make an educated decision.

How to navigate your options



High Deductible Plans

Pay less from your paycheck, more when you need care

1 \$1,850 Deductible*

This plan has a high deductible, lower premiums and a tax-free Health Savings Account (HSA) that you own for life.

2 \$4,500 Deductible*

This plan has the lowest premiums, highest deductible and a tax-free Health Savings Account (HSA) that you own for life.

- Employee Only
- Employee + Spouse/Partner
- Employee + Child(ren)
- Employee + Family

**The deductibles reflect individual-only/in-network coverage. See Pages 15 and 18 for family in- and out-of-network deductibles.*





Need more help deciding which plan is right for you and your family?

Try *Ask Emma* on the **Chubb Benefits Portal**. There are also other handy resources, such as plan comparisons, out-of-pocket cost estimator, provider look-up tool and videos about HSAs and deductibles.



ask EMMA™

What will you pay?

You pay for your medical coverage through medical plan premiums deducted from your paycheck. The amount you pay depends on:

- **The plan you choose.** The lower deductible plan has higher premiums; the higher deductible plan has lower premiums.
- **The dependents you cover.** Premiums are lower for individual coverage and higher if you cover dependents.

- **Your tobacco-use status.** Chubb medical plans include a tobacco premium surcharge for employees and/or covered spouses/partners who use tobacco products: \$50 per month (one user) or \$100 per month (both users). The tobacco attestation you made last year will automatically continue unless you change your attestation.
- **Your spouse's/partner's access to coverage.** If you cover a spouse/partner who has access to medical coverage through his/her employer, a surcharge of \$100 per month will be applied to your medical plan premiums.

Compare with your spouse's/partner's employee coverage

If your spouse/partner is eligible for coverage through his/her employer, compare your Chubb benefits options against your spouse's/partner's. Consider your future needs and expenses, including the surcharge, to make the best decision for your family.

How the medical plans work

In-network preventive care is at no cost to you

Services such as annual physicals, recommended immunizations and routine cancer screenings are fully covered, so you pay nothing.

Coverage for non-preventive care with an annual deductible

For most non-preventive care, you pay 100% of costs until you meet the annual deductible.

Coinsurance reduces your costs

Once the deductible is met, you and the plan share any further health expenses until you meet the out-of-pocket maximum.

Out-of-pocket maximums limit your annual expenses

Each plan protects you by capping the total amount you'll pay each year for medical care. Once you meet the out-of-pocket maximum, the plan pays 100% of your eligible expenses for the rest of the year. Keep in mind that there are separate deductibles, coinsurance and out-of-pocket maximums for in-network vs. out-of-network coverage.

Take advantage of preventive care—at no cost to you

All our medical plans cover routine, preventive care services at 100% when you see an in-network provider. Preventive care services include, but are not limited to:

Children

- Well-baby care
- Annual physicals
- Immunizations
- Flu shot
- Medical/family history and physical exam
- Blood pressure checks
- Vision screening

Females

- Pap tests
- Mammograms
- Annual physicals
- Immunizations
- COVID-19 vaccine
- Flu shot
- FDA-approved contraception
- Colonoscopy
- Medical/family history and physical exam
- Blood pressure checks
- Cholesterol (total and HDL)
- Diabetes mellitus: baseline for high-risk individuals

Males

- Colonoscopy
- Prostate cancer screening
- Annual physicals
- Immunizations
- COVID-19 vaccine
- Flu shot
- Medical/family history and physical exam
- Blood pressure checks
- Cholesterol (total and HDL)
- Diabetes mellitus: baseline for high-risk individuals

**Can't get to a doctor?
Use telehealth!**

Stay home and connect with a doctor from your computer or mobile device. Telehealth coverage is included with all of Chubb's medical plans. For details and costs, visit your medical carrier's site for more information.



Compare the plans

In-network coverage

You save money by seeing in-network providers. Remember, your out-of-network expenses do not count toward your in-network deductible or out-of-pocket maximum.

Plan	Aetna plans	
	\$1,850 Deductible	\$4,500 Deductible
Annual deductible (Individual/Family)	\$1,850/\$3,700	\$4,500/\$9,000
HSA eligible	Yes	Yes
Out-of-pocket maximum (Individual/Family)	\$4,000/\$8,000	\$6,550/\$13,100
Coinsurance	You pay 20%, plan pays 80%	You pay 30%, plan pays 70%
Medical care: Your costs		
Preventive care	You pay \$0 when you get services in-network.	
Office visit	20% after deductible	30% after deductible
Urgent care visit	20% after deductible	30% after deductible
Emergency room visit	20% after deductible	30% after deductible




Covering dependents?

Learn how your family's expenses accumulate toward the **in-network** deductible and out-of-pocket maximum.

How do I...	If I'm covering dependents...	
	In the \$1,850 Deductible Plan	In the \$4,500 Deductible Plan
Meet the in-network deductible?	You must spend \$3,700 toward in-network expenses (your entire family deductible) before the plan begins to pay coinsurance for any family member. The individual deductible does not apply.	The plan begins to pay coinsurance for each family member when their individual deductible (\$4,500) is met, OR for everyone when the family deductible (\$9,000) is met.
Meet the in-network out-of-pocket maximum?	You must spend \$8,000 toward in-network expenses (your entire family out-of-pocket maximum) before the plan begins to pay 100% of covered expenses for any family member. The individual out-of-pocket maximum does not apply.	The plan begins to pay 100% of covered expenses for each family member when their individual out-of-pocket maximum (\$6,550) is met, OR for everyone when the family out-of-pocket maximum (\$13,100) is met.

Get more plan details

For more information about the plans, visit the **Chubb Benefits Portal**.



Be sure to make changes during Annual Enrollment:
October 20 to November 10, 2023



Find in-network providers

<p>Aetna www.aetna.com/docfind</p>	<p>Kaiser (Hawaii only) www.kp.org</p>
<p>Search as a member by logging into your Aetna account or search as a guest. When prompted to select a plan, you can select "Aetna Choice® POS II (Open Access)."</p>	<p>Click "Find doctors and locations," choose your region and enter your search criteria.</p>




Did you know...
 All plans include prescription drug coverage and in-network preventive care at no cost to you.



Out-of-network coverage

You have the flexibility to see any provider you wish, but you'll pay more when you go **out-of-network**. Your in-network expenses do not count toward your out-of-network deductible or out-of-pocket maximum.

Plan	Aetna plans	
	\$1,850 Deductible	\$4,500 Deductible
Annual deductible (Individual/Family)	\$3,700/\$7,400	\$9,000/\$18,000
HSA eligible	Yes	Yes
Out-of-pocket maximum (Individual/Family)	\$8,000/\$16,000	\$13,100/\$26,200
Coinsurance	You pay 40%, plan pays 60%	You pay 50%, plan pays 50%
Medical care: Your costs		
Preventive care	40% after deductible	50% after deductible
Office visit	40% after deductible	50% after deductible
Telehealth visit	Varies; visit your medical carrier site for details.	
Urgent care visit	40% after deductible	50% after deductible
Emergency room visit	20% after deductible	30% after deductible



Covering dependents?

Learn how your family’s expenses accumulate toward the **out-of-network** deductible and out-of-pocket maximum.

How do I...	If I’m covering dependents...	
	In the \$1,850 Deductible Plan	In the \$4,500 Deductible Plan
Meet the out-of-network deductible?	You must spend \$7,400 toward out-of-network expenses (your entire family deductible) before the plan begins to pay coinsurance for any family member. The individual deductible does not apply.	The plan begins to pay coinsurance for each family member when their individual deductible (\$9,000) is met, OR for everyone when the family deductible (\$18,000) is met.
Meet the out-of-network out-of-pocket maximum?	You must spend \$16,000 toward out-of-network expenses (your entire family out-of-pocket maximum) before the plan begins to pay 100% of covered expenses for any family member. The individual out-of-pocket maximum does not apply.	The plan begins to pay 100% of covered expenses for each family member when their individual out-of-pocket maximum (\$13,100) is met, OR for everyone when the family out-of-pocket maximum (\$26,200) is met.



Your share of medical costs

Deductible: The amount you pay before the plan begins to pay benefits. The deductible applies to expenses, such as office visits, X-rays, lab work, hospital and emergency room charges, mental health and substance abuse expenses, as well as surgical expenses. There is no deductible required for preventive care for in-network services.

Co-pay: A fixed amount you pay for covered medical services until your out-of-pocket maximum is reached.

Coinsurance: After you meet your deductible, you and Chubb each pay a share of covered expenses. The percent of your share depends on the medical plan in which you’re enrolled and is always lower than Chubb’s share.

Out-of-pocket maximum: This will be the most you have to spend for covered services in a plan year. After you spend this amount on deductibles, co-payments and coinsurance for in-network care and services, your health plan pays 100% of the costs of covered benefits for the rest of the plan year. There is a maximum for in-network services and a maximum for out-of-network services. Visit **Pages 15** and **18** for details.

**Are you or your spouse/partner turning 65?
Important Medicare information**

Medicare Part A coverage

You or a covered family member should enroll in Medicare Part A when you first become eligible. While you are an active employee, your Chubb medical plan will be the primary insurance and Medicare will be secondary.

Medicare Part B coverage

If you have Chubb medical coverage, you do not have to sign up for Medicare Part B when you are first eligible. As long as you have employer-sponsored health insurance, you may delay enrolling in Medicare Part B until that coverage ends or you stop working (whichever happens first) without paying a late Medicare enrollment penalty.

Medicare Part D prescription coverage

If you are enrolled in a Chubb medical plan and are also eligible for Medicare, you do not need to purchase Medicare Part D. Actuaries have confirmed that Chubb's prescription coverage is at least as good as the standard Medicare Part D coverage.

For more information about your Medicare eligibility or to sign up, call Social Security at 1-800-772-1213 or visit www.medicare.gov and click the "Get started with Medicare" button.



Have questions about your Medicare coverage?

Speak with a customer service representative who can assist you with Medicare and other retirement-related questions. Please call the Chubb Benefits Service Center at 1-844-58CHUBB (1-844-582-4822).

Costs

Aetna

Plans & coverage tiers	Weekly rates*
\$1,850 Deductible Plan (High Deductible)	
EE Only	\$100.27
EE + Spouse/Partner**	\$279.38
EE + Child(ren)**	\$176.25
EE + Family**	\$299.10

Plans & coverage tiers	Weekly rates*	
	< 10 Years of service	> 10 Years of service
\$4,500 Deductible Plan (High Deductible)		
EE Only	\$75.37	\$61.18
EE + Spouse/Partner**	\$189.33	\$151.47
EE + Child(ren)**	\$119.33	\$95.46
EE + Family**	\$224.82	\$182.31

Kaiser (for employees in Hawaii)

Plans & coverage tiers	Weekly rates*
EE Only	\$12.27
EE + Spouse/Partner**	\$136.77
EE + Child(ren)**	\$105.82
EE + Family**	\$196.38

*Rates do not include relevant surcharges.
 **Includes partner and/or partner's child(ren).



Prescription drugs

When you are enrolled in Chubb’s Aetna medical plan, you will automatically receive prescription drug coverage through Aetna. Please note that Kaiser has its own prescription drug coverage (coverage in Hawaii only).

The amount you pay for prescription drugs depends on the type of drug and how you fill your prescriptions.

Drug types

- **Generic drugs:** Same active ingredients as brand-name equivalents and meet the same standards for quality and effectiveness, but cost much less.
- **Preferred drugs:** Brand-name medications included on the formulary based on effectiveness and cost.
- **Non-preferred drugs:** Brand-name medications not preferred by your carrier. They may still be covered but may require prior authorization and cost more.




Filling prescriptions

If you are filling a prescription for a medication that you will be taking for the short term, take your Aetna Medical Plan ID with you to any participating pharmacy (such as your local grocery store or drug store) and fill your prescription.

If you take any maintenance medications, you may get a 90-day supply through the mail-order program or pick up your medication at a participating local CVS retail pharmacy. Not filling a 90-day supply at CVS after exhausting your two *grace retail fills* may require that

you pay the full price of the medication. Please note that this program is not available to Kaiser members; more information about Kaiser prescription benefits is available on the [Chubb Benefits Portal](#).



Did you know...
Generics are safe and effective, and they’re an easy way to save money.

In-network prescription costs by medical plan

The full cost of the drug is applied to the deductible before any benefits are considered for payment under the pharmacy plan.

Plan	High Deductible Plans	
Deductible	\$1,850 Deductible	\$4,500 Deductible
Retail: 30-day supply		
Generic	20% after deductible	30% after deductible
Preferred	20% after deductible	30% after deductible
Non-preferred	20% after deductible	30% after deductible
Mail order Program: 90-day supply		
Generic	20% after deductible	30% after deductible
Preferred	20% after deductible	30% after deductible
Non-preferred	20% after deductible	30% after deductible

Specialty

- Up to a 30 day supply
- All prescription fills must be through Aetna’s preferred specialty pharmacy network.



Want to pay less for prescription drugs?

Maintenance Choice® program:
 Receive 90-day supplies of your long-term medication through mail order or at a participating CVS Maintenance Choice retail pharmacy for added convenience and lower costs.

Not available to Kaiser members.



Supplemental medical plans

Costs can add up if you or a family member has a serious accident, illness or hospital stay. Supplemental medical plans work with your primary medical plan to provide cash payments when you need it most. How you spend the money is up to you.

There are three different types of supplemental medical insurance available, all underwritten by Chubb:

	Accident	Critical illness	Hospital indemnity
What it does	Helps protect you from unexpected financial stress if you or a covered family member has an accident. It supplements your primary medical plan by providing cash benefits in cases of covered accidental injuries. NEW! Wellness Benefit: pays you \$50 per family member per year after you go for one of more than 30 covered health screenings!	Protects you from the financial impact of covered illnesses, including heart attack, cancer and stroke. You receive a lump-sum cash payment to cover out-of-pocket expenses for anything you need.	Pays cash from day one if you are admitted to a hospital for a covered illness or injury. It will continue to pay a daily lump-sum benefit for each day you remain in the hospital. NEW! Rehabilitation Confinement Benefit: pays you the same Standard or Enhanced confinement benefit when you are admitted to a rehabilitation facility.
Enrollment	Enroll during Annual Enrollment.		
Payment	You pay the full cost of coverage through after-tax premiums.		
Coverage	<ul style="list-style-type: none"> • Accidental death • Emergency room treatment • Dislocation or fracture • Initial hospital confinement • Intensive care • Ambulance • Medical expenses • Outpatient physician’s treatment <p>The actual benefit amounts depend on the type of injuries you have and the medical services you need.</p>	<p>Two options:</p> <ul style="list-style-type: none"> • \$15,000 lump sum • \$30,000 lump sum <p>If you choose to cover your dependents, the covered spouse/partner and covered children benefit amount is 50% of your benefit amount.</p> <p>Illnesses must be diagnosed after your coverage takes effect for benefits to be paid.</p>	<p>Two options:</p> <p>Standard</p> <ul style="list-style-type: none"> • \$500 hospital admission benefit • \$100 daily hospital confinement benefit (up to a maximum of nine days per plan year) • \$100 daily ICU benefit (up to a maximum of 10 days per plan year) <p>Enhanced:</p> <ul style="list-style-type: none"> • \$1,000 hospital admission benefit • \$250 daily hospital confinement benefit (up to a maximum of nine days per plan year) • \$250 daily ICU benefit (up to a maximum of 10 days per plan year)
Evidence of Insurability (EOI)	You can enroll without EOI.		
Payment	Benefits are paid directly to you, unless assigned to someone else.		
If you leave...	You can take your coverage with you.		

Dental and vision plans

- Dental
- Vision



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Dental

Chubb offers two plans covered by Aetna to help you maintain a healthy smile.

	PPO Plan	DHMO Plan
In-network		
Individual/Family deductible	\$25/\$75	\$0/\$0
Annual maximum benefit	\$2,500	None
Services:		
Preventive	You pay \$0	You pay \$0
Basic	You pay 20%, plan pays 80%	Co-pays vary by service
Major	You pay 50%, plan pays 50%	Co-pays vary by service
Orthodontia coverage	50%	\$2,400
Orthodontia lifetime maximum	\$2,500	None, limited to one treatment per member
Orthodontia eligibility	Adult and child	Adult and child
Out-of-network*		
Individual/Family deductible	\$25/\$75	Not covered
Annual maximum benefit	\$2,500	Not covered
Services:		
Preventive	You pay \$0	Not covered
Basic	You pay 20%, plan pays 80%	
Major	You pay 50%, plan pays 50%	
Orthodontia coverage	50%	Not covered
Orthodontia lifetime maximum	\$2,500	Not covered
Orthodontia eligibility	Adult and child	Adult and child

*Under the PPO Plan, out-of-network benefits are paid at the Usual and Customary (U&C) reimbursement rate, so you may be balance-billed if charges exceed the U&C reimbursement rate.

Find a network dentist

If you are enrolled in the Aetna PPO dental plan, you will pay less when you use a dentist in Aetna’s network.

If you are enrolled in the Aetna DHMO Plan, you must use a dentist in the DHMO network. There is no out-of-network coverage under the DHMO.

To find a participating dentist near you, visit www.aetna.com/docfind. As you begin your search, you’ll be asked to “Select a Plan” from the drop-down list. Choose “DMO®/DNO” to search the DHMO Plan network, or “Dental PPO/ PDN with PPO II” to search the PPO Plan network.



Did you know...
Good dental care reduces your risk for heart attacks, diabetes and even cancer.

Considering the DHMO Plan?

You'll need to choose a primary care dentist to coordinate your care. You'll also need to stay in-network, since this plan has no out-of-network benefits. It's a good idea to confirm your dental provider is in this network before you enroll or receive services. The DHMO network is called the "DMO®/DNO" network. If your provider decides not to participate in the DHMO network midyear, you will not be able to change your plan until the next Annual Enrollment window unless you experience a qualifying life event.


Costs

Aetna

Plans & coverage tiers	Weekly rates
Aetna DHMO Dental Plan	
EE Only	\$1.41
EE + Spouse/Partner*	\$3.11
EE + Child(ren)*	\$3.01
EE + Family*	\$5.27
Aetna Premier Dental Plan	
EE Only	\$4.40
EE + Spouse/Partner*	\$10.18
EE + Child(ren)*	\$9.70
EE + Family*	\$16.12

*Includes partner and/or partner's child(ren).





The DHMO Plan does not provide out-of-network coverage. Check that your dentist is part of the DHMO network before making the switch.



Vision

The EyeMed vision plan helps make your eye care, glasses and contact lenses more affordable. The plan offers coverage for regular eye exams and supplies for you and your eligible dependents.

	In-network	Out-of-network
Exam (routine, non-medical)	Once per calendar year: \$15 co-pay	Once per calendar year: Up to \$35 reimbursement
Frames	Once per calendar year: \$0 co-pay, \$175 allowance for any available frame, 20% off balance over \$175	Once per calendar year: Up to \$88 reimbursement
Contact lenses: Conventional Disposable Medically necessary	Once per calendar year: \$0 co-pay, 15% off balance over \$175 allowance \$0 co-pay, \$175 allowance \$0 co-pay, paid in full	Once per calendar year: Up to \$120 reimbursement Up to \$120 reimbursement Up to \$210 reimbursement
Standard plastic lenses: Single vision Bifocal Trifocal Lenticular Progressive – standard Progressive – Premium Tier 1 Progressive – Premium Tier 2 Progressive – Premium Tier 3 Progressive – Premium Tier 4	\$0 co-pay \$0 co-pay \$0 co-pay \$0 co-pay \$65 co-pay \$85 co-pay \$95 co-pay \$110 co-pay \$175 co-pay	Up to \$25 Up to \$40 Up to \$55 Up to \$55 Up to \$40 Up to \$40 Up to \$40 Up to \$40 Up to \$40

Visit www.eyemed.com or download the EyeMed members app from Google Play or the App Store to:

- View your benefits
- Verify your eligibility
- Locate a provider
- Schedule an appointment online

Get special offers, benefits reminders and wellness tips. Instant information is just a text and a tap away with EyeMed text alerts. Call 1-844-873-7853 to opt in. Be sure to have your nine-digit Member ID handy, which you'll find on the EyeMed member portal: www.eyemed.com.

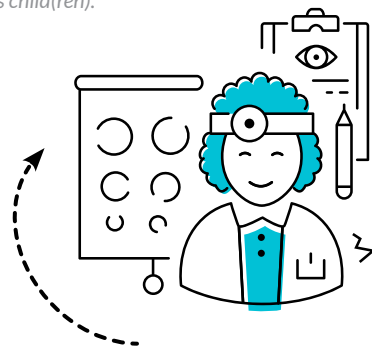
Find a network provider

You'll pay less when you stay in the EyeMed network. To search for providers, go to www.eyemed.com, click "Find an eye doctor" and search the "Insight" network.

Costs

Plans & coverage tiers	Weekly rates
EyeMed Vision Plan	
EE Only	\$1.78
EE + Spouse/Partner*	\$4.01
EE + Child(ren)*	\$3.12
EE + Family*	\$5.35

*Includes partner and/or partner's child(ren).



Health savings and spending accounts

- Health Savings Account (HSA)
- Flexible Spending Accounts (FSA)



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Health savings and spending accounts

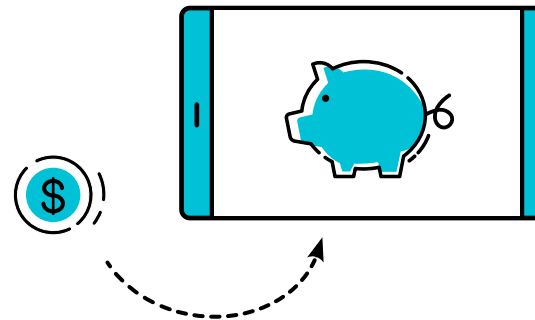
Save money by paying for eligible health care and dependent care expenses with tax-free money from savings and/or spending accounts. Chubb offers several types of accounts that lower your income taxes.


Here's what you need to know:

- Our savings and spending account administrator is WEX.
- Even though you're able to use single sign-on to access the WEX site from the [Chubb Benefits Portal](#), create a WEX account to ensure you have anytime, anywhere access.
- If this is the first time you're creating an account, you'll receive a new WEX benefits card.
- If you have unused amounts in your health care or limited purpose FSA, you can roll over up to \$610 into your 2024 account. You must elect a health care or limited purpose FSA for 2024 in order to receive the rollover that's scheduled for April 2024.

Choose from the following accounts:

- **Health Savings Account (HSA):**
Available to employees who enroll in the \$1,850 or \$4,500 Deductible Plan
- **Flexible Spending Accounts (FSAs):**
 - Health care:** Available to employees not enrolled in an HSA.
 - Limited purpose:** Available to employees who are enrolled in the HSA.
 - Dependent care:** Available to all employees.





Did you know...
WEX has an app! Download it today from the **Google Play** or **App Store**.

Combination FSA vs. Limited Purpose FSA

The terms *combination FSA* and *limited purpose FSA* are used interchangeably. They're the same thing! This type of FSA is paired with an HSA and is generally used to cover eligible dental and vision expenses.

Health Savings Account (HSA)

With the \$1,850 and \$4,500 Deductible Plans, you can contribute to an HSA. The HSA is a tax-free savings account that you own. You can use it to pay for eligible health expenses anytime, even in retirement.

**Get tax advantages with an HSA:
Put money in tax-free***

- 1 Contribute to your HSA through before-tax pay deductions, up to IRS annual limits: In 2024, the limit on total contributions to your HSA is \$4,150 for Employee Only medical coverage or \$8,300 if you cover dependents. Add \$1,000 to these limits if you will turn 55 or older in 2024.
- 2 You have the flexibility to change your contribution amount anytime.

Remember

You can build savings in your HSA (balances roll over every year) and your savings stay with you—even if you leave the company.

Pay for care tax-free*

Pay for eligible medical, prescription, dental and vision expenses for you and your family using your HSA debit card (provided sufficient funds are in your account). For a list of eligible expenses, see IRS Publication 502 at www.irs.gov/publications/p502.

Track your spending, check your balance, reimburse yourself and more by accessing your HSA account online through the [Chubb Benefits Portal](#).

Grow your money for the future tax-free*

All the money in your HSA is yours to keep; year-end balances roll over year after year.

Build up savings to pay for future health care expenses. You can even invest your money once it reaches a balance of \$1,000, which gives you the potential for tax-free earnings growth and a simple way to save for health care costs even in retirement.

**HSA contributions are not subject to federal tax. However, they are currently subject to state tax in Alabama, California and New Jersey. Consult with your tax advisor to understand the potential tax consequences of enrolling in an HSA. Money in an HSA can be withdrawn tax-free as long as it is used to pay for qualified health-related expenses. If money is used for ineligible expenses, you will pay ordinary income tax on the amount withdrawn, plus a 20% penalty tax if you withdraw the money before age 65.*

How the \$1,850 and \$4,500 Deductible Plans work with the HSA

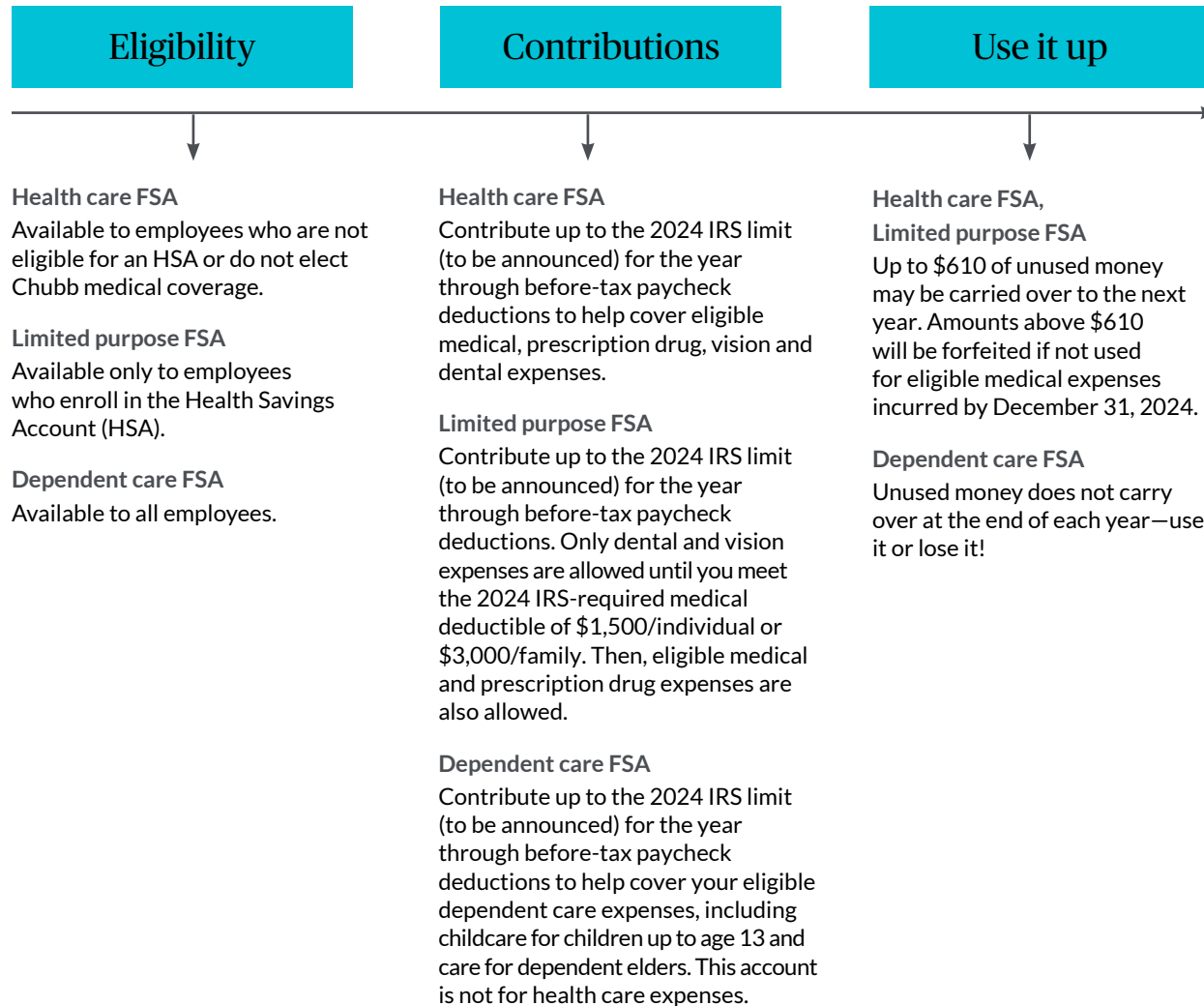
By contributing pre-tax dollars directly to an HSA, you can cover deductibles and coinsurance as they come up—saving the amount you would have paid in taxes. After you reach your out-of-pocket maximum, both plans pay 100% of in-network costs.

For a list of eligible expenses, see IRS Publication 502 at www.irs.gov/publications/p502.



Flexible Spending Accounts (FSAs)

Using an FSA is like getting a discount because you're paying with tax-free money.



Step 1
CHOOSE

Health care FSA, Limited purpose FSA, Dependent care FSA
Pick a contribution amount when you enroll. You may only change it during the year if you experience a qualifying life event, so estimate carefully.

Step 2
CONTRIBUTE

Health care FSA, Limited purpose FSA
Your annual contribution will be divided into equal paycheck deductions, but the entire amount is available to you from the beginning of the plan year.

Dependent care FSA
Your annual contribution will be divided into equal deductions from each paycheck. You only have access to money that has actually been deposited into your account.

Step 3
SPEND

Health care FSA, Limited purpose FSA, Dependent care FSA
Spend your money by using your WEX benefits card or log into your account to request reimbursement for payments you've made.

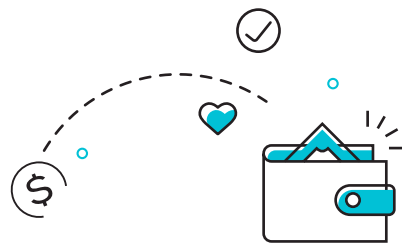
Note for LP FSA: If you reached the required deductible for dental and vision expenses and you want to use your LP FSA for medical expenses, you must complete a Deductible Verification form before submitting eligible expenses.

Submit your 2023 FSA claims for reimbursement

Submit your eligible 2023 FSA claims and supporting documentation by March 31, 2024. Log into your WEX account through the [Chubb Benefits Portal](#). Supporting documentation is important.

Keep your receipts

You may be asked to provide substantiation for your expenditures, so keep your receipts. If you do not provide the necessary documentation to substantiate your claims under your spending accounts, the IRS has the right to tax those amounts as income.



Make your FSA election if you want a rollover of your unused 2023 FSA amounts

You must elect to contribute to a health care or limited purpose FSA in order to roll over your unused 2023 FSA amounts (up to \$610).

Learn more about your options

For more information about the HSA and FSAs go to the [Chubb Benefits Portal](#).

One debit card

Use your WEX benefits debit card to spend the tax-free money in your HSA and FSA.

Wellness

- Employee Assistance Program (EAP)



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Wellness

Being part of Chubb goes far beyond medical, dental and vision plans! We offer additional programs that are available all year to support your health, finances and personal well-being. They are provided to you and your family at no cost.

Employee Assistance Program (EAP)

We could all use a little extra support—especially now. Whether you need help coping with stress, finding an online tutor for your child or managing your finances, the EAP can connect you with the right resources. Provided by Aetna Resources for Living, the EAP is a free, confidential benefit to help you and your family members with everyday challenges.

Counseling and referrals are available by phone 24/7/365

Get confidential support for a variety of issues, including stress, anxiety, work/life balance, family and relationships, depression and stress management, conflict management, alcohol/substance abuse and more. You and your household members are provided up to eight counseling sessions per issue, per year with licensed professionals at no cost to you. Sessions are available face-to-face, by phone or by digital text therapy (through TalkSpace).

Learn more about what the EAP offers:

- Counseling sessions
- Homework Connection
- myStrength
- TalkSpace



MSK Direct

Through Chubb's partnership with the Memorial Sloan Kettering (MSK) Cancer Center, you and your family members have access to MSK Direct, a program that provides guided access to exceptional cancer treatment, emotional support and more.

To learn more, call 1-833-825-4561 or visit www.mskcc.org/chubb.



Work/life services

Use personalized searches to find resources and services for you and your family. It includes online homework tutoring through Homework Connection for dependents in grades K–12, dependent and elder care, programs for children, college application help, home repairs and more.

Legal and financial consultations

Get a free 30-minute consultation with:

- An attorney for each new topic, referrals to attorneys in your area and discounted in-person legal services
- Financial professionals for virtually any personal financial issue

EAP website

The website provides health and wellness articles, family resources, links to other helpful sites, a Discount Center and the myStrength online wellness tool—an online “health club” for your mind.

To learn more:

- Log into www.resourcesforliving.com (username: CHUBB; password: EAP)
- Call 1-888-802-5698



Life and disability

- Life insurance
- Disability insurance



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Life insurance

Basic life and AD&D insurance

Chubb provides basic life and accidental death & dismemberment (AD&D) insurance to assist you and your family in the event of a death or dismemberment. These benefits are fully paid by Chubb and coverage is automatic—no need to enroll.

Your benefits are equal to:

- Basic life insurance: 1x your eligible compensation up to \$1,000,000. If you were hired before 2009 by ACE, you are eligible for coverage up to 2x your eligible compensation up to \$1,000,000.
- Basic AD&D insurance: 2x your eligible compensation up to \$500,000 up to age 70 and ½ times your annual eligible earnings to a maximum of \$500,000 from age 70

Supplemental life and AD&D insurance

If you want additional financial protection beyond the basic coverage that Chubb provides, you can buy supplemental life and AD&D insurance. You pay the full cost of this coverage. To learn more, see your costs and enroll in supplemental coverage, visit the [Chubb Benefits Portal](#).


- You can elect up to 8X your eligible compensation up to a maximum of \$3,000,000.

Life insurance reduction after age 65

If you work past age 65, benefits for basic life and AD&D insurance and supplemental employee life and AD&D insurance, will be reduced* as follows:

- Your beneficiary receives 65% of the benefit once you reach age 65.
- Your beneficiary receives 40% of the benefit once you reach age 70.
- Your beneficiary receives 25% of the benefit once you reach age 75.

*This reduction happens on the first of the month after you reach the ages listed.

Did you know...

In the event of your passing, life insurance pays money directly to your beneficiaries.

In addition to covering your family's daily expenses, life insurance can help your beneficiaries:

- Maintain their standard of living
- Pay off household debt
- Secure your child(ren)'s education
- Supplement retirement savings

Check your beneficiaries

It's important to name a beneficiary to receive your life insurance benefit. As your life changes, be sure to keep that information up to date. Log into the **Chubb Benefits Portal** to add or change your beneficiary(ies).

Disability insurance

The loss of income due to illness or injury can cause serious financial hardship for your family. Disability insurance replaces a portion of your income to help you continue paying your bills and meeting your financial obligations during this difficult time.

LTD: employee paid not employer provided

Chubb offers the option to purchase LTD coverage. No Evidence of Insurability (EOI) is required during your initial enrollment period, which means there's no health assessment before being approved for coverage.

LTD insurance

- Provided through New York Life (formerly Cigna), you must enroll on the [Chubb Benefits Portal](#) during Annual Enrollment.
- You may choose to purchase LTD insurance to receive 50% of your lost pre-disability income, up to a maximum of \$3,125 per month and minimum of \$50 per month.

Do you have enough emergency savings to last for six months?

If not, you may want to consider enrolling in LTD coverage to make sure you have the financial safety net you need if you are injured or become seriously ill.



Retirement savings and investment plans

- Chubb Retirement Savings Plan
- Chubb Employee Stock Purchase Plan (ESPP)
- 529 College Savings Plan
- Cyber Insurance from BlinkSM



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Retirement savings and investment plans

Chubb offers a variety of plans that provide tax advantages and other incentives to help you save and invest for your personal goals. Use the links below to learn more, enroll or access your account.

Chubb Retirement Savings Plan

You and Chubb both contribute to your 401(k) account, administered by Fidelity, to help you build savings for a secure future.

Chubb Employee Stock Purchase Plan (ESPP)

Through the ESPP, administered by Fidelity, you have the opportunity to share in our company's financial future through the ownership of company stock.

To learn more:

- Log into www.netbenefits.com
- Call 1-800-939-2227

529 College Savings Plan

Fidelity, Chubb's 401(k) and equity plan administrator, can help you save for college tuition and education-related expenses through a 529 plan. Several tax-advantaged options are available. Please visit Fidelity at www.netbenefits.com to find out more.

Personal Cyber Insurance from BlinkSM by Chubb[®]

This insurance can be purchased on a stand-alone basis or in conjunction with identity theft protection to cover your entire cyber life.

- Covers identity theft, cyber extortion, cyber financial fraud, deceptive transfer fraud, cyber bullying*, cyber breach of privacy, cyber disruption, electronic data restoration and electronic device replacement.
- You, your spouse/partner, any family members that live with you and your dependent children (up to 24 years old) are automatically covered.
- In addition, if you share electronic devices, software or digital accounts with anyone else (whether or not they are in your household), you can add up to five of those individuals on the policy. When doing so, coverage extends to their spouse/partner, household family and dependent children too.
- Claim services are provided by Chubb. You'll have a dedicated cyber response specialist to walk you through every step of the recovery process.
- Available in all states except: New Hampshire, and Vermont.

You can choose between three coverage options:

- ① \$10,000
- ② \$50,000
- ③ \$100,000

No deductible for identity theft claims. Other coverage deductibles apply.

BlinkSM by Chubb[®] is a voluntary benefit. You can enroll anytime by calling 1-833-550-9664.

*Blink Cyber policies issued to residents of New York do not include coverage for Cyber Bullying events.

Ensure your financial stability

It's never too late, or too early, to start saving for the future. Whether you're just starting or need to catch up, the 401(k) plan and financial resources from Fidelity can help you make the most of your savings. Contribute before- or after-tax dollars through payroll deductions. Plus, Chubb provides matching dollars based on your line of business, legacy company and date of hire.

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Resources and contacts

Getting help

Call the Chubb Benefits Service Center

Call toll-free 1-844-58CHUBB (1-844-582-4822); available Monday through Friday, 8 am to 8 pm ET.

Chubb Benefits Portal

















chubb.bswift.com

- Get personalized guidance with the **Chubb Benefits Portal** resource, *Ask Emma*.
- Use the cost and comparison tools and other resources to help you make informed decisions.
- Visit the Your Resources section of the **Chubb Benefits Portal** to access plan documents, benefit summaries and detailed information on all of Chubb's benefits.
- Chat online on the **Chubb Benefits Portal**. Click the chat bubble to get live assistance from a customer service representative.



Contact information

You can contact our providers directly if you have specific questions about our plans or your personal situation:

Benefits providers				
Benefit	Administrator	Website	Phone number	App download
Medical and Pharmacy	Aetna	www.aetna.com	1-866-562-1880	 
	Kaiser (for Hawaii employees)	www.kp.org	HI Member Services: 1-800-966-5955	 
Supplemental medical: Accident and critical illness insurance Hospital indemnity insurance	Chubb	www.combinedinsurance.com/us-en/ https://info.visit-aci.com/chubb	1-800-544-9382 1-800-964-7096	 
Health Savings and Flexible Spending Accounts (HSAs and FSAs)	WEX	https://benefitslogin.wexhealth.com	1-866-451-3399	 
Dental	Aetna	www.aetna.com	1-877-238-6200	 
Vision	EyeMed	www.eyemed.com	1-866-800-5457	 
Life insurance	Prudential	N/A	1-844-58CHUBB (1-844-582-4822)	 
Disability insurance	New York Life	N/A	1-844-58CHUBB (1-844-582-4822)	
Employee Assistance Program (EAP)	Aetna Resources for Living	www.resourcesforliving.com (username: CHUBB; password: EAP)	1-888-802-5698	 

Benefits providers (continued)				
Benefit	Administrator	Website	Phone number	App download
Retirement savings and investment plans	Retirement Savings Plan: Fidelity ESPP: Fidelity	www.netbenefits.com	1-800-939-2227 1-800-544-9354	 
Cyber security insurance	Blink SM	https://chubb-employees.sites.blinkinsured.com	1-833-550-9664	 
Cancer Advocate Plus Policy/claim questions Specific questions regarding the genetic testing kit, test kit results, how to access the CAP portal, etc., will be transferred to healthOme (844-646-6427)	Chubb		1-833-542-2013	