

2024 – 2025

Employee Benefits
Highlights

Lemek LLC



Panera
BREAD®

Welcome

Lemek LLC offers a comprehensive suite of benefits to eligible employees to promote health and financial wellness for you and your family. This booklet provides a brief overview of some of the benefits available to you.

Benefits are effective **August 1, 2024 – July 31, 2025**.



Eligibility

Lemek LLC offers benefits to employees who work an average of 30 or more hours per week to comply with federal health care reform requirements. All employees are assessed for benefit eligibility and may become eligible for benefits the first of the month upon completion of the new-hire or standard measurement waiting period.

For a comprehensive review of all benefits or for information on a Qualifying Life Event, refer to the Lemek Benefits site by scanning this QR code.



Employee Assistance Program (EAP)

Lemek LLC provides an Employee Assistance Program (EAP) through The Standard / Health Advocate, which is offered at no charge to our benefit eligible employees and their families. The EAP program includes up to six (6) sessions/consultations and is available **24 hours, 7 days a week!**

The EAP Services can help with:

- Depression, grief, loss and emotional well-being
- Addictions such as drugs and alcohol
- Financial and legal concerns
- Family, marital and other relationship issues



Contact 877-851-1631 or www.healthadvocate.com/standard6

Health Reimbursement Arrangement (HRA)

Lemek LLC will fund \$250 into a Health Reimbursement Arrangement (HRA) for all employees **enrolled in a UnitedHealthcare medical plan**.

HRA dollars can only be spent on qualified medical, pharmacy, dental, or vision expenses, as the debit card is tied to the IRS 213(d) expense listing. **Funds must be used by July 31st, 2025**, as they do not carryover into the next plan year. If you are currently enrolled in a medical plan and have the Health Care FSA, you will use the same WEX debit card.

Want to Earn an Additional \$250 HRA Benefit for the next plan year?

Employees have an opportunity to earn an **additional \$250** in a Health Reimbursement Arrangement (HRA) by completing an annual wellness exam. Visit wellworksforyou.com for more information.



Additional Tools & Resources



UnitedHealthcare

Once enrolled in UHC Medical, you may visit www.myuhc.com and click Register to create a personal account and access your plan details. Download the **UHC mobile app** to access the same information on the go!

- Access and save ID card
- Estimate costs of common procedures & conditions
- Schedule virtual visits for medical or behavioral health care
- Connect with helpful professionals 24/7
- Search pharmacies, claims, drug pricing, and mail orders
- Find nearby providers, hospitals, and urgent care facilities

Medical and Prescription Drug - UnitedHealthcare

UnitedHealthcare	Premier Plan	Standard Plan	Advantage Plan	MEC Value Plan
Your Bi-Monthly Deductions				
Employee Only	\$136.00	\$87.00	\$60.00	\$35.00
Employee + Spouse	\$306.00	\$195.00	\$166.00	\$136.00
Employee + Child(ren)	\$278.00	\$177.00	\$150.00	\$124.00
Employee + Family	\$435.00	\$277.00	\$235.00	\$193.00

Medical Coverage	Premier Plan	Standard Plan	Advantage Plan	MEC Value Plan
	In Network (You Pay)	In Network (You Pay)	In Network (You Pay)	In Network (You Pay)
Annual Deductible				
Individual / Family	\$400 / \$800	\$1,000 / \$2,000	\$2,500 / \$5,000	\$5,000 / \$10,000
Annual Out-of-Pocket Maximum				
Individual / Family	\$2,500 / \$5,000	\$4,000 / \$8,000	\$6,000 / \$12,000	\$7,150 ² / \$14,300 ²
Copays / Coinsurance				
Routine Preventive Care & Test E.g., Annual physical	No charge	No charge	No charge	No charge
Primary Care Physician (PCP) Office Visit, Diagnostic	\$20 copay	\$30 copay	\$40 copay	30% ¹
Specialist Office Visit	\$30 copay	\$50 copay	\$60 copay	30% ¹
Telemedicine Online visits through www.myuhc.com	\$10 copay	\$10 copay	\$10 copay	\$10 copay
Urgent Care	\$30 copay	\$50 copay	\$60 copay	30% ¹
Emergency Room Copay waived if admitted	Deductible, then \$150 copay	Deductible, then \$200 copay	20% ¹	30% ¹
Maternity Benefits – Includes prenatal care, postnatal care, ultrasounds, and any related complications. Refer to your plan documents for additional information.				
Initial Visit to Provider	\$20 copay	\$30 copay	\$40 copay	30% ¹
Childbirth / Delivery Inpatient Hospital	\$250 copay, then 20% ¹	\$250 copay, then 20% ¹	20% ¹	30% ¹

¹ After Deductible

² Due to Health Care Reform

Prescription Drug Coverage	Premier Plan	Standard Plan	Advantage Plan	MEC Value Plan
Prescription Drug – Retail (34-day supply)*				
Generic**	\$10	\$15	\$20	\$20
Preferred Brand Name**	\$25	\$30	\$40	\$40
Non-Preferred Brand Name**	\$45	\$50	\$60	\$60

*Retail Prescription Drugs include In Network and Out-of-Network coverage

**Prescription Drug Plan includes In Network only Mail Order 90-day supply. Refer to your plan documents for additional information

Dental Plans - The Standard

Lemek LLC offers you two dental options. Employees and dependents have access to an extensive nationwide network of dentists through the **Ameritas Dental Network under The Standard**. Once enrolled, your **Dental ID card** is provided electronically.

To Find a Dentist, visit <https://www.standard.com/services> and click “Find a Dentist”. On the Ameritas dental network page, add your zip code and select the “**Classic PPO**” network to locate an In Network dentist near you.

The Standard Dental	PPO Low	PPO High
Your Bi-Monthly Deductions		
Employee Only	\$6.00	\$9.50
Employee + Spouse	\$14.00	\$20.50
Employee + Child(ren)	\$16.25	\$29.00
Employee + Family	\$22.00	\$37.75



The Standard	PPO Low	PPO High
	In Network*	In Network*
Annual Deductible		
Individual / Family	\$25 / \$75	\$50 / \$150
Annual Maximum Benefit		
Per Person	\$1,500	\$2,000
Services		
Preventive and Diagnostic Care	You pay nothing	You pay nothing
Basic Treatment	Plan pays 80% ¹	Plan pays 80% ¹
Major Treatment	Plan pays 50% ¹	Plan pays 50% ¹
Orthodontia Benefit		
Orthodontia Child Only	No coverage	Plan pays 50%
Ortho Lifetime Maximum	No coverage	Up to \$2,000 per child

- Out-of-Network coverage included. Balance billing may apply to OON coverage
- ¹ After Deductible

Vision Plans - VSP

The vision plan is administered by Vision Service Plan (VSP) and provides exams, frames, lenses, and contact lenses annually. **VSP's provider network includes thousands of private practice doctors and over 700 Visionworks retail locations nationwide. Employees will not receive ID cards for vision.**

Visit www.vsp.com or call 800-877-7195 and reference **Group Number: 12305389**.

VSP	Signature	Enhanced
Your Bi-Monthly Deductions		
Employee Only	\$5.08	\$13.12
Employee + Family	\$14.06	\$36.41

Vision Service Plan (VSP)	Signature	Enhanced
	In Network	In Network
Copays		
Routine Eye (WellVision) Exam	\$10 copay	\$10 copay
Covered Services		
Frames (every 12 months, in lieu of contacts)	\$180 allowance; 20% off balance; Additional \$50 to spend on featured frame brands	\$220 allowance; 20% off balance
Single / Bifocal / Trifocal Lenses (every 12 months)	\$10 copay, then 100% is covered	\$10 copay, then 100% is covered
Elective Contacts (every 12 months, in lieu of frames)	\$180 allowance	\$180 allowance
Medically Necessary Contacts (every 12 months)	\$10 copay, then 100% is covered	\$10 copay, then 100% is covered
Additional pair of frames or contacts (every 12 months)	Not included	Included Provides \$180 allowance to purchase additional pair of frames or contacts every 12 months

Income Protection – The Standard

Basic Life and AD&D

The company provides employer-paid Basic Life and AD&D insurance to all eligible employees at no cost to you.

Coverage Amount

- Associates & Shift Supervisors: \$10,000
- Bakers & Assistant Managers: \$25,000
- General Managers & Support Staff: \$50,000

Voluntary Life and AD&D*

Employees and their dependents may enroll in Voluntary Life and AD&D insurance with The Standard. **Employees are eligible to enroll in up to \$500,000 of benefit; Spouse up to \$300,000 with a Guarantee Issue of \$50,000; and Child(ren) up to \$10,000.**

Voluntary Disability

Disability insurance through The Standard provides income replacement should you become disabled and unable to work due to a non-work-related accident or illness. This benefit is 100% paid by you through payroll deductions.

Short Term Disability

- STD pays up to 60% of your weekly earnings, to a maximum of \$1,000 per week.
- Benefit begins on the 8th day after an injury or illness occurred and are available for up to 13 weeks.
- If you do not enroll when first eligible, an extended elimination period of sixty (60) days applies to illness and child-birth for the first 12 months of coverage.

Long Term Disability*

- LTD pays up to 60% of your monthly earnings, to a maximum of \$7,500 per month.
- Benefit begins on the 90th day after injury or illness occurred and are available until age 65.

* In certain cases, Voluntary Life/AD&D and Long Term Disability may require Evidence of Insurability (EOI).



Voluntary Benefits – The Standard

You have the option to purchase additional voluntary benefits through post-tax payroll deductions through The Standard and Nationwide. These benefits help you and your family cover unexpected expenses in the event of an accident or illness.

Accident Insurance

Accident Insurance provides benefits for covered injuries and specified accident-related expenses for an individual or family. Since health insurance only goes so far, this group policy is designed to help cover the out-of-pocket expenses that can result from a sudden accident.

Critical Illness

Critical Illness Insurance can pay a lump sum benefit at the diagnosis of a covered illness. You choose the level of coverage, with **benefit amounts ranging from \$5,000 to \$30,000**. You can use the money to pay for copays, deductibles, lodging or any other expenses that you may have.

Hospital Indemnity

Hospital Indemnity Insurance provides direct benefit in the event of a hospitalization. This plan covers \$1,500 per calendar year for Hospital Admissions; \$100 per day for up to 30 days of hospital confinement; and much more.

Pet Insurance

Pet Insurance through Nationwide is a reimbursement indemnity plan for your household animals. It reimburses you for a portion of eligible veterinary expenses such as emergency boarding, therapeutic supplements, dental disease, hospitalization and other treatments. Coverage includes a maximum annual benefit of \$7,500 per pet and access to a vet helpline 24 hours a day, 7 days a week. Visit <https://benefits.petinsurance.com/lemekllc>.

Flexible Spending Account (FSA) – WEX

Flexible Spending Account (FSA) allows you to pay for eligible expenses with pre-tax dollars. Lemek LLC offers both a Health Care and Dependent Care FSA.

- **Health Care FSA:** Contribute up to \$3,200 of pre-tax dollars to pay for qualified medical, dental or vision expenses.
- **Dependent Care FSA:** Contribute up to \$5,000 each year to pay for qualified dependent care expenses for licensed nursery schools, day care centers, before and after-school care, and much more!

401(k) Retirement Plan

Lemek LLC offers the opportunity for you to begin saving money for retirement. Contact Human Resources for eligibility requirements and enrollment.



UKG Pro Login Instructions

You will enroll in benefits through your UKG Pro benefits portal or UKG Mobile App.

Visit <https://e13.ultipro.com> or download the **UKG Pro mobile app**. **Company Access Code: Panera**

Open Enrollment Elections / Qualifying Life Events

- **From the UKG Website Homepage or Mobile App:**
 - **Myself > Benefits > Manage My Benefits > Get Started / Update My Benefits / Open Enrollment**
 - **UKG Mobile App requires second sign on using the same login info.**

Benefit Resource Center (BRC)

To assist employees with ongoing questions or claims support for your covered benefits, Lemek LLC offers the Benefit Resource Center (BRC)! You and your dependents may contact the BRC at BRCEast@usi.com or **855-874-6699 Monday – Friday, 8:00 AM – 6:00 PM EST** for support in:

- Eligibility questions
- Explanation of coverage
- Medical appeals support
- Issues obtaining Prescription Drugs at the pharmacy or to identify lower cost sources
- Claims support to resolve denials and processing errors

Important Contacts

Benefit	Vendor/ Group #	Phone Number	Website/Email
Benefit Resource Center	USI Group Name: Lemek LLC	855-874-6699	BRCEast@usi.com
The Lemek Benefits Team	UKG (UKG Pro)	888-874-3914	lemekbenefits@ukg.com
Medical, Prescription Drug and Optum Virtual Care	UnitedHealthcare Group #: 911538	866-633-2446	www.myuhc.com
Wellness Benefit	Wellworks For You	800-425-4657	www.wellworksforyou.com
Dental	The Standard Group #: 159795	800-547-9515	www.standard.com
Vision	Vision Service Plan (VSP) Group #: 12305389	800-877-7195	www.vsp.com
Basic Life and AD&D Insurance; Voluntary Life and AD&D Insurance	The Standard Group #: 159795	800-628-8600	www.standard.com/individual
Short Term Disability	The Standard Group #: 159795	800-368-2859	www.standard.com/individual
Long Term Disability	The Standard Group #: 159795	800-368-1135	www.standard.com/individual
Voluntary Accident, Critical Illness and Hospital	The Standard Group #: 159795	866-851-5505	www.standard.com
Flexible Spending Account & Health Reimbursement Arrangement (HRA)	WEX	866-451-3399	www.wexinc.com
Employee Assistance Program	The Standard/ Health Advocate	877-851-1631 (TTY Services: 711)	http://www.healthadvocate.com/standard6
Pet Insurance	Nationwide	877-738-7874	www.PetsNationwide.com Company Name: Lemek LLC
401(k) Profit Sharing	NWPS	888-700-0808	www.nwpsbenefits.com

Visit UKG Pro to access electronic copies of the complete Summaries of Benefits and Coverage or email hr@lemekllc.com to request paper copies.