



UNFI 2024 Benefits Guide

**Choose the benefits
that work for you**



This guide applies to certain associates participating in the UNFI-sponsored benefit programs and plans. This information may not apply to certain part-time associates or certain other associates. This information also may not apply to certain union-represented associates unless specifically provided in a collective bargaining agreement. Contact the Associate Contact Center at 1-800-969-9688 for information on eligibility. UNFI reserves the right to amend or terminate the programs and plans in whole or in part at any time.

This guide summarizes certain benefit programs. In the event of a conflict between this guide and the official plan or program documents, or if there is an issue this guide does not address, the official documents will govern.



ELIGIBLE FOR FULL BENEFITS (RESIDENTS OF CA, OR, WA OR HI)

UNFI 2024 Benefits Guide

Choose the benefits that work for you.

You want benefits that support your health and wellbeing, are competitive in our industry and offer comprehensive coverage to meet your needs. At UNFI, we strive to provide coverage options that meet these goals—it's part of our commitment to making UNFI a great place to work. Read on to learn all about your options for coverage in 2024. Contribution amounts are included on the enrollment website.

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Before You Enroll

Enrollment Overview

Enrollment for New Hires

New hires have 30 days from the date of hire to elect benefits. If you don't make elections within this 30-day period, you'll have to wait until Annual Enrollment unless you have a Qualifying Life Event permitting the enrollment. You'll receive details at your home address on file, approximately five days after your first day of work, about your enrollment deadline and how to enroll.

It's important to choose your benefit options carefully because the medical, dental, vision and flexible spending account (FSA) choices you make will remain for the entire plan year and cannot be changed unless you experience a Qualifying Life Event. Any new elections or increases in Long-Term Disability and certain Optional Life coverages may require Evidence of Insurability (EOI).

Enrollment for Newly Eligible Associates and/or Dependents

If you or your spouse or children become eligible for coverage during the plan year as a result of a Qualifying Life Event, you will have a limited period of time to enroll yourself and/or any eligible dependents in coverage. See the **Changing Coverage During The Year – Qualifying Life Events** section of this Guide for more information.

Enrollment For Current Associates—Annual Enrollment

Each year, the Annual Enrollment period is when you can choose the benefits you want for the upcoming benefit plan year. UNFI's benefit plan year runs from January 1 to December 31.

If You Don't Enroll

Default Benefits for Newly Eligible Associates

If you are a newly hired associate or are eligible for benefits for the first time and you do not enroll during your new hire/initial eligibility enrollment period, you will only be enrolled in the UNFI-paid Short-Term Disability, Basic Life, Basic Accidental Death & Dismemberment (AD&D), Employee Assistance Program (EAP), Virgin Pulse and Calm benefits. You will not be covered under any of the medical, dental or vision options.

NOTE: Non-union associates (excluding retail associates) will be automatically eligible to participate in the Bright Horizons Back-up Care program upon hire.

Default Benefits for Enrolled Associates

If you are a current associate and do not make any benefit plan changes in the benefits enrollment system during the Annual Enrollment period (November 6-17, 2023, for 2024 benefits), you will stay in the coverage options in which you are currently enrolled, **except as noted below**:

- The spousal surcharge will automatically apply if you cover your spouse under the medical program and do not complete the online spousal surcharge certification during Annual Enrollment.
- Health Care Reimbursement Account (HCRA) Flexible Spending Account (FSA), Day Care/Eldercare Reimbursement Account (DCRA) FSA and Health Savings Account (HSA) elections will not carry forward into the new plan year. You must enroll again to make elections for 2024.

Changing Coverage During The Year—Qualifying Life Events

You cannot change your elections for medical, dental, vision and HCRA/DCRA FSA coverage during the year unless you experience a Qualifying Life Event. The change requested must be consistent with the Qualifying Life Event. If you experience a Qualifying Life Event, you must notify and provide any required documentation to the UNFI Associate Contact Center (ACC) within 31* days of the event (including the date of the event). For events relating to the loss or gain of other coverage, the event date is the date the other coverage was terminated or the effective date of the other coverage, as applicable. Qualifying Life Event notifications can be submitted by signing into the HR Self-Service Portal, clicking on the *My Benefits* tile and selecting the *Life Events* tile.

Examples of a Qualifying Life Event include:

- Marriage
- Divorce/legal separation
- Birth/adoption of a child
- Death of spouse or dependent
- Spouse becomes eligible for other coverage (such as through his or her employer)

NOTE: There are other Qualifying Life Events that could permit a change in your benefit elections during the year. See the UNFI Health and Welfare Plan Wrap Summary Plan Description (Wrap SPD) for a list of the most common life events. To view the Wrap SPD and other program documents, log in into the HR Self-Service Portal, click on the *My Benefits* tile, and then click on the *Summary Plan Descriptions* tile.

* If you lose or gain coverage for a state premium assistance program under Medicaid or Children's Health Insurance Program (CHIP), you have 60 days from the date of the eligibility change to request enrollment or cancellation of your benefits.

How to Enroll

How and when you enroll in coverage depends on the benefit and program administrator. Review the table below to determine what you need to do so you don't miss out. If you have any questions about the enrollment process, call the Associate Contact Center (ACC) at **1-800-969-9688**.

If you want to:	You'll need to:
<p>Enroll in or make changes to:</p> <ul style="list-style-type: none"> • Medical • Dental • Vision <p>Complete spousal surcharge certification</p> <p>Complete tobacco certification</p> <p>Make pre-tax contributions (must be elected annually) to:</p> <ul style="list-style-type: none"> • Health Care Reimbursement Account (HCRA) FSA • Day Care/Eldercare Reimbursement Account (DCRA) FSA • Health Savings Account (HSA)* 	<p>During your initial eligibility enrollment window or Annual Enrollment*</p> <ol style="list-style-type: none"> 1 Sign into the HR Self-Service Portal 2 Select the <i>Benefits Enrollment</i> tile <hr/> <p><small>* Associate pre-tax HSA contribution elections are reset to zero at the beginning of a plan year. Prior plan year elections will not carry forward. You may change your HSA pre-tax contribution amount any time including outside the Annual Enrollment period.</small></p>
<p>Enroll in, cancel or make changes to:</p> <ul style="list-style-type: none"> • Accident Coverage • Critical Illness • Hospital Indemnity • Legal Coverage 	<p>During your initial eligibility enrollment period or Annual Enrollment:</p> <ol style="list-style-type: none"> 1 Call Mercer at 1-800-626-9065, or 2 Enroll at unfivoluntarybenefits.com

If you want to:**Enroll in or make changes to:**

- Long-Term Disability (LTD)
- Optional Life Insurance (associate, spouse or child(ren) coverage)

You'll need to:**Initial eligibility enrollment period:**

- 1 Sign into the HR Self-Service Portal
- 2 Select the *Benefits Enrollment* tile

Enrollments and increases outside of initial eligibility enrollment period:

- 1 Sign into the HR Self-Service Portal
- 2 Click on the *My Benefits* tile, then the *Benefits Info* tile.
- 3 Select *Life Insurance Information* or *Disability Information* as applicable along the left side of the screen

Please note: Amount of Optional Life above the guaranteed issue limits and increases in coverage requested outside an associate's initial eligibility enrollment period for Optional Associate or Spouse Life, are subject to Evidence of Insurability (EOI).

Please note: Enrollment in LTD coverage is subject to EOI if requested outside an associate's initial eligibility enrollment period.

Enroll in or make changes to:

Optional Accidental Death & Dismemberment (AD&D) (associate or family coverage)

Initial eligibility period:

- 1 Sign into the HR Self-Service Portal
- 2 Select the *Benefits Enrollment* link tile

Any other time:

Contact the ACC at **1-800-969-9688** or ACCInquiry@unfi.com

Enroll in, cancel or make changes to:

- Pet Insurance
- Home and Auto Insurance
- ID Theft Protection
- Disaster Insurance

At any time:

Call Mercer at **1-800-626-9065** or enroll at unfivoluntarybenefits.com

Enroll in:

401(k) Plan

At any time after 30 days of service with UNFI*:

- 1 Call Fidelity at **1-800-835-5095** or
- 2 Enroll at netbenefits.com or text START to 343898

* If you are then at least age 21; if not, you will become eligible when you turn age 21; newly hired associates will be automatically enrolled

Enrollment Tools and Resources

At UNFI, you don't have to be a benefits expert to feel confident in your decisions. Take advantage of these tools and resources designed to help you make the right decisions for yourself and your family.

Meet ALEX

Having options for your health coverage lets you pick the best fit, but it can also feel overwhelming. ALEX is an interactive benefits assistant who helps you make informed decisions based on your needs. From picking a medical option to learning more about how to save on health care, ALEX is here for you. Visit myalex.com/unfi to access the portal, where you'll find:

- **Benefits counselor tool**—A personalized resource for UNFI associates that asks you questions to provide the most valuable recommendation possible; any answers you provide to questions ALEX asks you are completely confidential and UNFI does not see the results
- **Videos** about how to use a Health Savings Account (HSA), learn plan basics and more
- **Support** links and documentation

Take A Look At Benefit Scout™

Use Securian Financial's online benefits decision tool, Benefit Scout™, to learn more about your life insurance benefits. By answering a few simple questions at lifebenefits.com/unfi, you can determine the coverage that meets your needs and budget.

Wellbeing Resources and My Benefits Tiles of the HR Self-Service Portal

This Benefits Guide is meant to provide a high-level overview of the benefits available to UNFI associates under the UNFI Health and Welfare Plan and other voluntary programs. You can access additional benefit documents, resources, and links through the *Wellbeing Resources* and *My Benefits* tiles of the HR Self-Service Portal or by visiting the applicable vendor website.

Contact Info On-The-Go

We make it easy to know who to contact for questions about our benefit partners. Visit unfibenefitscontacts.com from your smartphone or tablet for quick access to phone numbers and web addresses. You'll be prompted to save the icon on your home screen so it's always at your fingertips.

CALL THE ASSOCIATE CONTACT CENTER (ACC)

Still have questions or having problems enrolling? The ACC is here to help! Contact the ACC at **1-800-969-9688** or email ACCInquiry@unfi.com.

Who's Eligible

Non-union associates are eligible for benefits the first of the month following 30 days of employment. The benefits you are eligible for are based on your expected average hours of service per week when you're hired.

- **Average 30+ hours per week** offered the full benefits package
- **Average less than 30 hours per week** offered the *Healthy Pursuits* Wellness Program, EAP and Calm

Non-union associates (excluding retail associates) will also be eligible to participate in the Bright Horizons Back-up Care program upon hire.

Non-union associates who work less than 30 hours per week upon hire will have their hours measured over a 12-month period commencing on their date of hire. If the associate averaged at least 30 hours per week over the measurement period, he or she will be eligible for additional benefits the first of the 14th month of service based on their actual average hours per week.

Benefits eligibility for union-represented associates may differ across work groups based on the terms of a collective bargaining agreement. Refer to the eligibility rules for your work group to see if you're eligible for coverage.

Requalifying For Benefits Eligibility Once Per Year

Associates requalify for benefits eligibility once a year. This simplifies the enrollment process and, if you qualify for coverage, allows you to keep your coverage in place for an entire year at a time (provided that you remain eligible). Benefits eligibility for current associates will be determined by hours of service during a defined 12-month period. An associate must be employed during the entire 12-month period to be included in the requalification determination.

FOR 2025...

...benefits eligibility will be based on the hours worked from October 8, 2023 – October 5, 2024.

DEPENDENT VERIFICATION

When you enroll dependent(s) in the medical, dental and/or vision programs for the first time, you will need to provide documentation verifying your dependent(s)' eligibility to participate in the programs. After you enroll, **Alight's Dependent Verification Center** (UNFI's dependent verification vendor) will mail more information to your home address on what is required for verification (e.g., birth certificate, proof of marriage, adoption or legal guardianship records and joint ownership paperwork).

VERY IMPORTANT: Your dependent's coverage will be cancelled if you do not submit the proper documentation by the deadline noted in the communication.

Two Ways to Pay

For most of the benefits you elect, there are two primary ways you pay for them:

- **Associate contributions:** The amount deducted from your paycheck
- **Out-of-pocket costs:** What you pay the provider when you receive care or when you receive a bill after the plan has paid its share of the cost

Associate Contributions:

Associate contributions will be deducted from your paycheck on either a pre-tax or post-tax basis.

- **Pre-tax associate contributions** come out of your paycheck **before** taxes are taken out, which reduces your taxable income. Your medical, dental, vision, FSA, and HSA contributions are considered pre-tax contributions.
- **Post-tax associate contributions** come out of your paycheck **after** taxes are taken out. Your LTD, optional life, optional AD&D, and voluntary benefit contributions are considered post-tax deductions.

To see what your contributions would be for the various UNFI benefits, sign in to the HR Self-Service Portal, click the *My Benefits* tile, select the *Benefits Info* tile, and then select Associate Contribution Rates under the *Benefits Guide & Rates* section.

Out-of-Pocket Costs:

The amounts you pay towards your annual deductible and coinsurance count towards your **out-of-pocket maximum**, or the most you have to pay for eligible expenses before the plan pays 100%. The amounts you pay for copays count towards satisfaction of your out-of-pocket maximum but do not count towards satisfaction of your deductible.

Your Benefits and Resources

Overview

UNFI partners with outside vendors to provide some of the benefits and programs described throughout this guide and does share necessary information so these vendors can make the programs available. You may receive periodic communications from these vendors from time to time.

Medical and Prescription Drug Coverage

UNFI offers four comprehensive medical options as part of its full benefits package:

- **HDHP Basic:** A \$6,000 associate-only deductible option that is compatible with a Health Savings Account (HSA), must use providers in network (except in emergencies)
- **HDHP w/ HSA:** A \$1,800 associate-only deductible option that comes with an HSA
- **EPO:** A \$1,500 associate-only deductible option without an HSA, must use providers in network (except in emergencies), provider network is more limited, may not be available to associates in all areas
- **PPO:** A \$700 associate-only deductible option without an HSA

A fifth Kaiser Permanente (Kaiser) HMO option also may be available to associates residing in California, Oregon or Washington. The Kaiser HMO plan design may vary slightly based on your geographic location.

Special note for associates working in Hawaii: Due to state requirements, the only medical option available to associates working in Hawaii will be the Kaiser HMO-Hawaii option.

These medical options are administered by Anthem (BCBS), United Healthcare (UHC) or Health Alliance. The Kaiser HMO option is a fully-insured medical option insured by Kaiser Permanente. Who your administrator is and whether you are eligible for the EPO and/or Kaiser HMO medical options is determined by your primary home ZIP code that is on record with UNFI. To see who your medical claims administrator is and whether the EPO and/or the Kaiser HMO are offered where you live, go to the medical ZIP code lookup tool available at HR Self-Service Portal > *My Benefits* tile > *Benefits Info* tile > *Medical Zip Code Lookup*.

How these options work and which one may be right for you depends on a variety of factors. To assist you, this table outlines a few key factors to consider when making your decision.

	HDHP Basic	HDHP w/ HSA	EPO	PPO	Kaiser HMO
Available to all eligible associates? <i>(excluding associates working in Hawaii, See note on previous page.)</i>	Yes	Yes	No, available in most areas	Yes	No, available in most areas of CA, OR and WA
In-network benefits available?	Yes	Yes	Yes, but the provider network is a narrower/more limited high-performance network than the other options	Yes	Yes
Out-of-network benefits available?	No (except in an emergency)	Yes	No (except in an emergency)	Yes	No (except in an emergency)
Covers in-network preventive services at 100%	Yes	Yes	Yes	Yes	Yes
HSA compatible?	Yes	Yes	No	No	No
UNFI contributes to my HSA?	No	Yes	Not applicable	Not applicable	Not applicable
Associate can contribute to their HSA?	Yes	Yes	Not applicable	Not applicable	Not applicable

This table provides a general overview of the in-network benefits of the four self-insured medical options. A general overview of the Kaiser HMO medical options is provided in a separate table beginning after the following table. Be sure to review the design applicable to where you live. Benefit summaries are also available on the *My Benefits* tile of the HR Self-Service Portal through the *Benefits Info* tile.

	HDHP Basic		HDHP w/ HSA		EPO		PPO	
Health Savings Account Contributions —The HDHP w/ HSA and HDHP Basic options both include an HSA to which you can make pre-tax contributions. UNFI will also contribute to your HSA if you enroll in the HDHP w/ HSA option. The amounts in your HSA can be used to pay health care expenses, such as your deductible or coinsurance.								
	UNFI contributes	You may contribute	UNFI contributes	You may contribute	UNFI contributes	You may contribute	UNFI contributes	You may contribute
Associate-only	UNFI does not contribute.	\$4,150	\$350	\$3,800	N/A	N/A	N/A	N/A
Associate + Spouse or Associate + Child(ren)		\$8,300	\$525	\$7,775				
Family		\$8,300	\$700	\$7,600				
Associates 55 or older		Additional \$1,000 over annual IRS limit	N/A	Additional \$1,000 over annual IRS limit				
UNFI's contributions are spread throughout the year.								
Annual Deductible — Amount you pay before coinsurance begins. In-network and out-of-network deductibles do not cross-apply.								
Associate-only	\$6,000	\$1,800	\$1,500	\$700				
Associate + Spouse or Associate + Child(ren)	\$12,000	\$3,200	\$3,000	\$1,400				
Family	\$12,000	\$3,600	\$3,000	\$1,400				
How the Deductible Works	The HDHP Basic and HDHP w/ HSA options have a <i>true family deductible</i> , which means for all coverage levels the full deductible for that coverage level must be reached before you start paying coinsurance for services.				The EPO and PPO options have an <i>embedded deductible</i> , which means for all coverage levels except associate-only, any covered family member can meet the \$1,500 or \$700 associate-only deductible and start paying coinsurance for that person's services, even before reaching the full deductible.			

	HDHP Basic	HDHP w/ HSA	EPO	PPO
Coinsurance —How you and the plan share covered expenses, after the deductible.				
You pay	0%		20%	
Plan pays	100%		80%	
Out-of-Pocket Maximum —Annual limit on your share of covered medical and prescription drug expenses, including deductibles, coinsurance and copays. In-network and out-of-network out-of-pocket maximums do not cross-apply.				
Associate-only	\$6,000	\$6,000	\$6,000	\$6,000
Associate + Spouse or Associate + Child(ren)	\$12,000	\$9,000	\$12,000	\$12,000
Family	\$12,000	\$12,000	\$12,000	\$12,000
Each medical option has an <i>embedded individual out-of-pocket maximum (OOPM)</i> , which means once a covered family member meets the associate-only OOPM amount, the plan will begin to pay 100% for that family member’s covered expenses even if the full OOPM has not been reached.				
Preventive Care —All four options cover preventive care at 100% when you see an in-network provider. Not subject to deductible.				
Non-Preventive Care				
Office Visit <i>primary care physician or specialist</i>	You pay \$0, after deductible	You pay 20%, after deductible	You pay \$40 copay	You pay \$40 copay
Urgent Care			You pay 20%, after deductible	You pay \$60 copay
Emergency Room				You pay \$150 copay

	HDHP Basic	HDHP w/ HSA	EPO	PPO
Prescription Drugs —All four options provide varying levels of coverage for prescription drugs. Visit express-scripts.com/UNFI for a full list of network pharmacies.				
Deductible	No separate deductible; subject to a combined medical/prescription drug deductible and coinsurance		N/A	N/A
Retail Pharmacy (Up to 30-day supply)				
Generic	You pay \$0, after deductible	You pay 20%, after deductible	You pay \$10 copay	You pay \$5 copay
Brand Formulary			You pay 20%	You pay \$30 copay
Brand Non-Formulary				You pay \$45 copay
Specialty*				You pay \$75 copay
Limitations apply to long-term medications which are subject to Express Scripts' Smart90 - Anywhere program. See the Prescription Drug Support section on page 16 for more information on this program.				
Mail Order or Smart90-Anywhere Retail Pharmacies (Up to 90-day supply)				
Generic	You pay \$0, after deductible	You pay 20%, after deductible	You pay \$20 copay	You pay \$10 copay
Brand Formulary			You pay 20%	You pay \$60 copay
Brand Non-Formulary				You pay \$90 copay
Specialty*				You pay \$150 copay

* **EPO and PPO Medical Options:** Specialty drugs (up to 30- or 90-day supply) are covered as listed above unless included on the SaveOnSP Specialty Drug list, which are subject to a set 30% coinsurance and the coinsurance will not count towards your deductible or out-of-pocket maximum. See below for more information of the SaveOnSP Program and how enrollment in the program can reduce the amount you pay. For a list of current drugs included in the SaveonSP program, see saveonsp.com/unfi or call 1-800-683-1074.

	HMO California	HMO Oregon	HMO Washington	HMO Hawaii
Annual Deductible				
Associate-only	\$250	\$250	\$250	None
Family	\$500	\$500	\$500	None
Out-of-Pocket Maximum				
Associate-only	\$3,000	\$3,000	\$3,000	\$2,500
Family	\$6,000	\$6,000	\$6,000	\$7,500
Preventive Care				
Preventive Care	Plan pays 100%			
Medical Services by Type of Care				
Office Visits	\$10 copay	\$10 copay	\$10 copay	\$15 copay and \$0 for children age 0-17 years for routine and primary care
Urgent Care	\$10 copay	\$10 copay	\$10 copay	\$15 copay; 20% coinsurance (out of area)
Emergency Care	Plan pays 90% after deductible	Plan pays 90% after deductible	Plan pays 90% after deductible	\$100/visit; copay is waived if admitted as an inpatient
Inpatient Hospital Care	Plan pays 90% after deductible	Plan pays 90% after deductible	Plan pays 90% after deductible	Plan pays 90%
Outpatient Diagnostics & X-Ray	\$10 copay	\$10 copay	\$10 copay	Basic: \$15/day Specialty: Plan pays 80%

	HMO California	HMO Oregon	HMO Washington	HMO Hawaii
Prescription Drugs				
Retail Pharmacy—30-day supply				
Generic	\$10 copay	\$10 copay	\$10 copay	\$10 copay; \$3 for maintenance drugs copay
Preferred Brand	\$30 copay ¹	\$30 copay ¹	\$30 copay	\$45 copay
Non-Preferred Brand	\$30 copay ^{1,2}	\$30 copay ^{1,2}	Applicable generic or preferred brand cost shares apply ^{1,2}	\$45 copay
Specialty Drugs	\$30 copay ^{1,2}	Applicable generic, preferred, non-preferred brand drug cost shares apply ^{1,2}	Applicable preferred generic, preferred brand, or non-preferred generic/brand cost shares apply ^{1,2}	\$200 copay
Mail Order—90-day supply (100-day supply for Kaiser CA)				
Generic	\$20 copay	\$20 copay	\$20 copay	\$20 copay; \$6 for maintenance drugs copay
Preferred Brand	\$60 copay ¹	\$60 copay ¹	\$60 copay ¹	\$90 copay
Non-Preferred Brand	\$60 copay ^{1,2}	\$60 copay ^{1,2}	Applicable generic or preferred brand cost shares apply ^{1,2}	\$90 copay
Specialty Drugs	N/A	N/A	N/A	N/A

1 For drugs approved in accordance with the Kaiser Permanente formulary process and when filled at a Kaiser Permanente pharmacy.

2 When prescribed by a Kaiser Permanente physician as medically necessary. See the Kaiser Permanente HMO benefit summary for your area for additional information on coverage. Benefit summaries are available online on the HR Self-Service portal via My Benefits > Benefits Info > Medical/Rx, Dental & Vision.

Summary of Benefits and Coverage (SBC)

Choosing a medical option is an important decision. To help you make an informed choice, a Summary of Benefits and Coverage (SBC) gives you important information about each medical option in a standard format to help you compare across the options available. The SBCs are available on the HR Self-Service Portal > My Benefits tile > Benefits Info tile. A paper copy is also available, free of charge, by contacting the ACC at 1-800-969-9688 or ACCInquiry@unfi.com.

Prescription Drug Support

Express Scripts' Smart90-Anywhere Program (Smart90-Anywhere)

The Smart90-Anywhere program requires you to fill your long-term medication (drugs you take regularly for ongoing conditions) prescriptions in a 90-day supply either through home delivery from the Express Scripts PharmacySM or from any Smart90-Anywhere pharmacy. You're allowed two courtesy fills of a 30-day supply of a long-term medication at a non-Smart90-Anywhere network pharmacy. If you choose to continue to fill your prescription at a non-Smart90-Anywhere pharmacy or in 30-day supplies, you'll pay more for your medication. Contact Express Scripts for more information on Smart90-Anywhere.

Keenan Pharmacy Clinical Management and US-Rx Care

Part of your prescription drug coverage at UNFI includes the Keenan Pharmacy Clinical Management program. This program provides pharmacy clinical management services, such as prior authorization or step therapy reviews, for specialty medications through US-Rx Care. In addition, Keenan conducts medication reviews designed to assist associates in more effectively managing their pharmacy drug costs by engaging physicians and members directly to ensure the best possible drug therapies are chosen. Those enrolled in the medical options discussed in this guide may receive periodic communications from Keenan/US-Rx Care.

Copay Assistance Benefit Administered by SaveOnSP (PPO and EPO Medical Options Only)

The copay assistance benefit administered by SaveOnSP works in conjunction with UNFI's pharmacy program through Express Scripts and its specialty mail order provider, Accredo. The benefit applies to associates and their dependents enrolled in the PPO or EPO medical options only.

As part of the copay assistance benefit, certain non-essential health benefit specialty medications will be subject to a 30% prescription coinsurance amount, which is different from the Plan's base specialty copay/coinsurance for specialty medications not on the copay assistance benefit drug list. Participants filling a prescription for one of the indicated specialty medications will be offered the opportunity to enroll in the manufacturer's copay assistance program and have SaveOnSP monitor their account to achieve a reduced cost on their medication. Upon consent, SaveOnSP will provide the applicable manufacturer's copay assistance program information to the pharmacy which will support both participants and plan savings. PPO and EPO copay assistance benefit participants will then be able to obtain select specialty medications at a reduced cost.

This benefit includes 300+ medications covering conditions such as hepatitis C, multiple sclerosis, psoriasis, inflammatory bowel disease, rheumatoid arthritis, cancer and others. For a current list of the medications in our copay assistance benefit administered by SaveOnSP, visit saveonsp.com/unfi or call SaveOnSP at **1-800-683-1074**. The drug list is reviewed and updated each January 1 and July 1, and it may also be updated off-cycle as necessary.

Enrollment in the copay assistance benefit is voluntary. However, if a participant chooses not to enroll in the manufacturer's copay assistance program and consents to SaveOnSP monitoring their account, the participant will pay the 30% prescription drug coinsurance for medications on the drug list (saveonsp.com/unfi). Regardless of participation, the coinsurance will not count toward their deductible or out-of-pocket maximum.

Out of Pocket Protection Program Administered by Express Scripts/Accredo (HDHP Medical Options Only)

The Out of Pocket Protection Program incorporates available pharmaceutical manufacturer copayment assistance dollars for specialty medications towards your out-of-pocket cost obligations under the plan design (e.g., deductible and co-insurance). Thus, reducing what you personally pay for your specialty medications. Under this Program, your deductible and maximum out-of-pocket maximum accumulators will only reflect what you personally pay towards the cost of your specialty medication. The copayment assistance dollars applied towards the cost of your specialty medications will not accumulate towards your deductible or maximum out-of-pocket amounts.

The Program applies to associates and their dependents enrolled in the HDHP w/HSA (including the HDHP only) and HDHP Basic medical options.

Transcarent Surgery Care Benefit

Your UNFI medical coverage includes a supplemental planned surgery care program with Transcarent. Covered associates and family members who are enrolled in a medical option administered by Anthem/BCBS, UHC or Health Alliance can participate. The surgery care program is paid by UNFI, and there is no additional cost to you to enroll.

Transcarent saves you money and expands your options beyond the medical program network to top-rated hospitals, surgery centers and surgeons nationwide for planned, non-emergent procedures. Using third-party sources, Transcarent partners with providers that achieve high-quality ratings for low complications, infection and readmission.

Most Common Transcarent Covered Procedures

<p>Cardiac</p> <p>Coronary artery bypass graft, valve repair and replacement</p>	<p>General</p> <p>Gall bladder removal, hernia repair</p>	<p>Orthopedic</p> <p>ACL repair, hip and knee replacement, shoulder repair and replacement</p>	<p>Spine</p> <p>Spinal fusion, artificial disc replacement</p>	<p>Women's Health</p> <p>Hysterectomy</p>
<p>Transcarent now also covers certain cancer, vascular, bariatric and neurological procedures. Contact a Transcarent Coordinator for more information.</p>				
<p>Emergency, pediatric (under age 13), cosmetic, dental, diagnostic, vision and transplant procedures are not available through Transcarent Surgery Care.</p>				

How Transcarent Works

If your doctor recommends surgery, call Transcarent before you schedule the procedure. A dedicated care coordinator will help you select a top-rated provider for your specific procedure and handle all the administrative work, approvals, billing and scheduling. If travel is required, your care coordinator will arrange transportation and lodging for the patient and a companion. See the Transcarent Surgery Care summary below.

	PPO and EPO Options	HDHP w/ HSA and HDHP Basic Options
Coverage	Surgery is covered at 100%.	<p>Surgery is covered at 100% after you meet your annual deductible.</p> <p>Transcarent coordinates with your health plan to verify your remaining deductible amount prior to surgery. A credit card is required to pay the deductible balance.</p>
Surgery Expenses	<p>Surgery costs covered include:</p> <ul style="list-style-type: none"> • Pre-operative surgeon appointment • Surgery (all facility, anesthesia, surgical staff and surgeon charges) • In-patient services, if hospital stay is required • Post-operative surgeon appointment <p>Medical expenses that occur before the preoperative appointment and after the postoperative appointment are covered under the UNFI medical program and subject to plan coverage guidelines, deductible and coinsurance.</p>	
Travel Expenses	<p>If a local surgeon isn't available and travel over 100 miles (one way) is required, Transcarent pays patient and companion expenses for:</p> <ul style="list-style-type: none"> • Airfare (coach unless first class is medically necessary) • Lodging (one double occupancy room) • Meals and incidentals allowance <ul style="list-style-type: none"> - \$50 per day for the patient when not admitted (days 1-14) - \$50 per day for a companion (days 1-14) - \$125 per week per person (days 15+) <p>Airfare and lodging must be arranged by your Transcarent Care Coordinator for coverage. A travel companion is required and must be at least 18 years of age. You'll receive a pre-paid debit card for meals and incidentals a few days before your surgery.</p>	

Contact Transcarent at **1-877-820-7992** to learn about the surgery program and your provider options. Register with the company code **UNFI2** for full access to the Transcarent website, experience.transcarent.com/surgery.

Medical Coverage Spousal Surcharge

Your Action Needed If You Cover Your Spouse

A **\$20 per week (\$40 per biweekly)** spousal surcharge will apply if you choose to cover a spouse who is eligible for medical benefits through their own employer and does not enroll in the other employer's plan. The spousal surcharge will automatically apply as a new hire and each January 1 thereafter.

If your spouse does not have access to other employer medical coverage, or has enrolled in their employer's plan, be sure to complete the spousal surcharge certification when you initially enroll your spouse and during each Annual Enrollment to avoid the default surcharge.

To certify your spouse, sign into the HR Self-Service Portal and:

- 1 Select the *Benefits Enrollment* tile
- 2 Select the *Spousal Surcharge Review* button or tile from the Benefits Enrollment section
- 3 Complete the spousal surcharge certification
- 4 Follow the prompts to *Confirm and Submit* your elections once your certification is complete

While UNFI is pleased to extend benefits to spouses, this coverage is intended primarily for spouses who do not have their own access to employer-provided medical benefits. The surcharge helps us manage the cost of covering spouses who could elect coverage through their own employers.

Medical Coverage Tobacco Surcharge

You will pay a **\$10 per week (\$20 per biweekly)** per individual tobacco surcharge if you and/or your covered spouse are a tobacco user. The tobacco surcharge only applies to those enrolled in medical coverage through UNFI. The tobacco surcharge will automatically apply upon your initial enrollment in medical coverage unless you certify that you and/or your covered spouse are not a tobacco user.

“Tobacco user” is defined as having used tobacco or a tobacco product more than one time in the last three months. For purposes of the tobacco surcharge, “tobacco” or “tobacco product” includes the following items:

- Cigarettes, eCigarettes, cigars, hookahs, vaping and any other smoked tobacco or nicotine product
- Marijuana
- Smokeless or chewing tobacco

Tobacco use does **NOT** include any nicotine gum or patches you may be using in an effort to stop tobacco use.

Special note for associates working in Hawaii: Due to state requirements regarding contribution limits, the tobacco surcharge will not apply to associates working in Hawaii and their covered spouses.

Your Action Needed for Non-Tobacco Users

If you and/or your covered spouse are not a tobacco user, you must complete the tobacco surcharge certification during your initial benefits enrollment period certifying you and/or your covered spouse are not a tobacco user. You may also be required to complete the tobacco surcharge certification if you make changes to your medical coverage during Annual Enrollment or access the *Benefits Enrollment* link.

To complete the tobacco certification, sign into the HR Self-Service Portal and:

- 1 Select the *Benefits Enrollment* tile
- 2 Select the *Tobacco Surcharge Review* button or tile from the Benefits Election section
- 3 Complete the tobacco surcharge certification
- 4 Follow the prompts to *Confirm and Submit* your elections once your certification is complete

Tobacco Cessation Support available through *Healthy Pursuits* and *Virgin Pulse* (Medical Enrolled Associates and Spouses)

If you and/or your spouse become newly enrolled in medical coverage and are tobacco users, you each will have four months from your benefit effective date to complete two tobacco-related Journeys[®] through the *Healthy Pursuits* wellness program administered by *Virgin Pulse* to have the tobacco surcharge removed and receive reimbursement of the surcharge back to your benefits effective date. Journeys are digital coaching, self-guided courses focused on behavior change, available at no cost to you.

If you and/or your covered spouse are a tobacco user and do not complete two Journeys within four months of your benefit effective date, the surcharge will continue to apply through the remainder of the calendar year. Your and/or your covered spouse's next opportunity to have the surcharge removed will be January 1 through April 30 of the next calendar year. If you and/or your covered spouse complete the required actions to have the surcharge removed during this period, it will be removed and reimbursed back to January 1 of that year.

Each Journey can take several weeks to complete so please plan your participation accordingly.

Access the *Virgin Pulse* tobacco cessation resources through *Healthy Pursuits* via join.virginpulse.com/unfihealthypursuits or the *Virgin Pulse* mobile app. Telephonic coaching and nicotine replacement therapy resources are also available through *Virgin Pulse*.

Savings and Spending Accounts

Here are details on accounts that help you save on your health care, day care and eldercare expenses.

IMPORTANT: HOW YOUR FSA AND HSA WORK TOGETHER

If you enroll in the HDHP w/ HSA option or HDHP Basic option **and** a health care flexible spending account (FSA), your FSA becomes a **limited purpose FSA**. That means you can **only** use the FSA to pay for eligible dental and vision expenses. The HDHP w/ HSA and HDHP Basic options come with a different account, called a Health Savings Account (or HSA), to help you cover eligible medical expenses.

	Health Savings Account (HSA)*	Healthcare Reimbursement Account (HCRA) FSA	Day Care/Eldercare Reimbursement Account (DCRA) FSA
Who can participate?	Associates enrolled in the HDHP w/ HSA or HDHP Basic options	Associates eligible for the Standard/Full Benefit package	Associates eligible for the Standard/Full Benefit package
How much can I contribute? <i>excluding UNFI contributions</i>	<p><u>HDHP w/ HSA Option</u></p> <ul style="list-style-type: none"> • Associate-only: up to \$3,800 • Associate + spouse or associate + child(ren): up to \$7,775 • Family: up to \$7,600 <p>Age 55+: \$1,000 additional catch-up contribution permitted</p> <p><u>HDHP Basic Option</u></p> <ul style="list-style-type: none"> • Associate-only: up to \$4,150 • Associate + spouse or associate + child(ren): up to \$8,300 • Family: up to \$8,300 <p>Age 55+: \$1,000 additional catch-up contribution permitted</p>	Up to \$3,050	Up to: <ul style="list-style-type: none"> • \$5,000 for individuals or married couples filing jointly • \$2,500 for a married person filing separately

* Reimbursements from and all other matters relating to your individual HSA are between you and your account trustee/custodian. Consult your tax advisor regarding your eligibility to contribute to an HSA or whether reimbursements can be made from your HSA on a tax-free basis.

	Health Savings Account (HSA)*	Healthcare Reimbursement Account (HCRA) FSA	Day Care/Eldercare Reimbursement Account (DCRA) FSA
How much will UNFI contribute?	<p><u>HDHP w/ HSA Option</u></p> <ul style="list-style-type: none"> Associate-only: up to \$350 Associate + spouse or associate + child(ren): up to \$525 Family: up to \$700 <p>UNFI's contributions are spread throughout the year</p> <p><u>HDHP Basic Option</u></p> <p>UNFI does not contribute</p>	UNFI does not contribute	
How do I use the account?	Use your HSA debit card to pay for eligible expenses, as long as you have funds available; pay out of your own pocket and request reimbursement later; use Optum Bank's mobile app or secure portal to send payments directly to your provider	Use your HCRA FSA debit card to pay for eligible expenses, as long as you have funds available; pay out of your own pocket and request reimbursement later	Manual claim filing via online, fax or mail is available
What are "eligible expenses"?	<p>Most medical, prescription drug, dental and vision expenses, including but not limited to deductibles and prescriptions</p> <p>See IRS pub. 502 for a full list of eligible expenses</p>	<p>If enrolling in the PPO, EPO or Kaiser HMO option: Medical, dental and vision expenses, including but not limited to over-the-counter medications and menstrual products</p> <p>See IRS pub. 502 for a full list of eligible expenses</p> <p>If enrolling in the HDHP w/ HSA or HDHP Basic option: Dental and vision expenses only</p>	<p>Day care or eldercare expenses for dependents who have not attained age 13 or dependents who are physically/mentally unable to care for themselves</p> <p>You must have paid the expenses to permit you to work</p> <p>See IRS pub. 503 for a complete list of requirements</p>
What are the tax advantages?	<ol style="list-style-type: none"> Contributions you make are tax free (federal) No taxes on investment gains or interest earnings No taxes when you use funds to pay for eligible expenses 	Uses pre-tax deductions; no taxes when you use funds to pay for eligible expenses	<p>Uses pre-tax deductions; no taxes when you use funds to pay for eligible expenses</p> <p>If you use back-up care through Bright Horizons and the value of that care plus your DCRA FSA contributions exceed \$5,000 (\$2,500 if you are married filing single), the excess will be included in your taxable income</p>

* Reimbursements from and all other matters relating to your individual HSA are between you and your account trustee/custodian. Consult your tax advisor regarding your eligibility to contribute to an HSA or whether reimbursements can be made from your HSA on a tax-free basis.

	Health Savings Account (HSA)*	Healthcare Reimbursement Account (HCRA) FSA	Day Care/Eldercare Reimbursement Account (DCRA) FSA
What happens to my balance at the end of the year?	Any unused contributions – from you or UNFI – roll over and stay in your account for future health care expenses	You must submit your expenses and any required documentation by the claim deadline of March 31 of the following year. You may carry forward any remaining dollars for use in the following plan year up to a maximum of \$610. Any additional dollars remaining in your account at the end of the plan year are forfeited.	You must submit your expenses and any required documentation by the claim deadline of March 31 of the following year. Any money remaining in your account at the end of the plan year is forfeited. The DCRA FSA does not permit carry over of dollars.
What is the deadline for reimbursement of claims?	None; you decide if and when you want to use your HSA funds or continue to save and invest the funds	2023 Plan Year Claims: March 31, 2024 2024 Plan Year Claims: March 31, 2025	
Can I change my contribution amount during the year?	Yes, prospectively up to IRS limits by calling the ACC	No, only during Annual Enrollment unless you have a Qualifying Life Event	
Can I invest the funds if I don't use them?	Yes	No	
What happens if I retire or leave UNFI?	The funds are always yours; you can use your account to pay for current and future health care expenses, even in retirement	Your unused balance is forfeit; To submit claims incurred after your date of termination you will have the option to elect COBRA continuation coverage through the end of the plan year	Your unused balance will be forfeit and COBRA continuation coverage is not available; However, you may submit 2024 claims for reimbursement through the end of the plan year but only up to the balance in your account as of your date of termination

* Reimbursements from and all other matters relating to your individual HSA are between you and your account trustee/custodian. Consult your tax advisor regarding your eligibility to contribute to an HSA or whether reimbursements can be made from your HSA on a tax-free basis.

Dental

UNFI offers you two dental options through Delta Dental of Minnesota to help you maintain good dental health. Both options cover basic and preventive care but at different levels. The Enhanced option also offers major and orthodontic care.

With both options, you have the opportunity to use an in-network provider and take advantage of the in-network discounted rates. The chart below shows the in-network coverage details. Find a list of in-network providers by visiting deltadentalmn.org.

	Basic Option		Enhanced Option	
	Per individual	Per family	Per individual	Per family
Deductible <i>Does not apply to preventive care</i>	\$100	\$300	\$50	\$150
Preventive Care <i>Exams, cleanings, X-rays</i>	You pay nothing, plan pays 100%		You pay nothing, plan pays 100%	
Basic Care <i>Fillings, extractions, root canals, oral surgery</i>	You pay 30%, plan pays 70%		You pay 20%, plan pays 80%	
Major Care <i>Inlays, crowns, bridges, dentures</i>	Not covered; you pay 100%		You pay 50%, plan pays 50%	
Annual Maximum	\$1,000		\$1,500	
Orthodontic Care <i>Children (up to age 19)</i>	Not covered; you pay 100%		You pay 50%, plan pays 50%	
Separate Orthodontic Lifetime Maximum	N/A		\$1,750	

Vision

To assist you and your family with your vision needs, UNFI offers a choice of two vision options through Vision Service Plan (VSP). Compare the in-network coverage details of the two options below. If you use an out-of-network provider, you pay at the point of service and submit an out-of-network claim. Visit vsp.com to search for in-network providers near you.

DID YOU KNOW?

If you want routine vision coverage, you must elect a vision option. Coverage for routine eye exams is not available through the medical program.

	Basic Option	Enhanced Option
Exam <i>Every calendar year</i>	You pay \$20 copay	You pay \$10 copay
Prescription Glasses	You pay \$15 copay	You pay \$20 copay
Frames	Every other calendar year:	Every calendar year:
General Frame Allowance	Plan pays up to \$145	Plan pays up to \$165
Walmart/Costco Frame Allowance	Plan pays up to \$80	Plan pays up to \$95
Featured Frame Brand Allowance	Plan pays up to \$165	Plan pays up to \$185
Lenses <i>Every calendar year</i>	Plan covers single vision, lined bifocal and lined trifocal lenses; impact-resistant lenses covered for dependent children	
Lens Enhancements	Every calendar year:	
Standard Progressive	You pay \$0	
Premium Progressive	You pay \$95 – \$105	
Custom Progressive	You pay \$150 – \$175	
Contacts <i>Every calendar year, in place of glasses</i>	Plan pays up to \$145 allowance	Plan pays up to \$165 allowance
Contact Lens Exam <i>Fitting and evaluation</i>	You pay up to \$60	You pay up to \$60

	Basic Option	Enhanced Option
Additional Pairs of Eyewear	Every calendar year:	
Frame and Lenses	Not covered	You pay \$20 for frame and lenses Same allowances as for the first pair of frames and lenses
Contacts (instead of glasses)		You pay \$60 for up to \$165 contact allowance
Additional Benefits	20% discount on frames over plan allowance Savings on other lens enhancements not mentioned above Retinal screening for members with diabetes Discounts on laser vision correction	

SPECIAL VSP DISCOUNTS

Even if you do not elect vision coverage, you may still be able to save through the VSP Savings Pass Program with in-network providers. Just mention to the provider that you are eligible for vision coverage through VSP.

Life and Accidental Death & Dismemberment

UNFI provides Basic Life insurance and Basic Accidental Death & Dismemberment (AD&D) coverage at no cost to you. Eligible associates will automatically be enrolled in Basic Life and Basic AD&D coverage.

You can also enroll in additional optional coverage for yourself or certain family members. Life and AD&D elections are separate elections. Find full cost and coverage details on the HR Self-Service Portal. Securian Financial is the plan administrator/insurer.

Compare your options below as you decide what’s best for yourself and your family. You can also visit Securian Financial’s online benefits decision tool, Benefit Scout™, to learn more about your life insurance benefits. By answering a few simple questions at lifebenefits.com/unfi, you can determine the coverage that meets your needs and budget.

Special Enrollment Opportunity November 6-17, 2023: You have a special one-time opportunity to enhance your optional associate life insurance coverage without answering health questions!

- **Optional Associate Life:** Enroll for one times your annual salary, or increase your existing coverage by one times your annual salary; not to exceed a new total of three times your annual salary of \$1,000,000.

	Coverage Details	Who Pays
Life Insurance <i>Financial protection in case of death</i>	Basic Life: One times annual salary (maximum coverage: \$1.5 million)	Basic: UNFI
	Optional Life: <ul style="list-style-type: none"> • Associate: Up to eight times annual salary (maximum coverage: \$3.5 million) • Spouse: Up to \$450,000 not to exceed four times associate salary • Child: Up to \$20,000 per dependent child 	Optional: Associate
Accidental Death & Dismemberment (AD&D) <i>Financial protection in case of accidental death or dismemberment</i>	Basic AD&D: One times annual salary (maximum coverage: \$1.5 million)	Basic: UNFI
	Optional AD&D: <ul style="list-style-type: none"> • Associate: Up to eight times annual salary (maximum coverage: \$3.5 million) • Spouse only: 50% of associate’s amount • Child(ren) only: 15% of associate’s amount each • Spouse + child(ren): Spouse 40% and each child 10% of associate’s amount 	Optional: Associate

Evidence of Insurability (EOI) is required during your initial eligibility enrollment period for Optional Life elections in excess of three times annual salary for associates (up to a maximum of \$1MM), and in excess of \$40,000 for spouses. EOI also may be required if, after your initial eligibility enrollment period ends, you are first enrolling in or at any time increasing Optional Life insurance (associate or spouse). Optional Life Child(ren) is always guaranteed and not subject to EOI. Enrollments and increases subject to EOI will not be effective until approved by the insurer, Securian Financial.

You may decrease or cancel your Optional Life coverage at any time during the year.

To submit an EOI request for enrollment in or an increase to your Optional Life coverage:

- 1 Sign-in to the HR Self-Service Portal
- 2 Click on *My Benefits*
- 3 Click on *Benefits Info*
- 4 Select *Life Insurance Information* from the left-hand side menu
- 5 Provide the information requested for the applicable individual(s)
- 6 Securian will outreach directly to you if additional information is required.

To decrease or cancel your Optional Life coverage:

- 1 Complete steps 1-4 above
- 2 Select *Cancel/Reduce Your Optional Life Insurance*
- 3 Complete and return form

SPECIAL NOTE ABOUT BENEFICIARY ELECTIONS

Beneficiary elections for life coverage are managed by Securian Financial. You are strongly encouraged to designate beneficiaries for your life coverage. To designate beneficiaries, sign into your account at lifebenefits.com:

- **Login ID:** UNFI + 7-digit employee ID
- **Password:** Your DOB (MMDDYYYY) + last four digits of your Social Security number

Disability (STD and LTD)

UNFI provides Short-Term Disability (STD) coverage at no cost to you. Eligible associates will be automatically enrolled in STD coverage.

Sometimes life happens and you're unable to work due to an injury or illness. Give yourself additional peace of mind with financial protection through Long-Term Disability (LTD) coverage. Take a look at these plan highlights and find more information and cost details under the *My Benefits* tile on the HR Self-Service Portal.

STD and LTD are administered/insured by Lincoln Financial.

	Coverage Details	Who Pays
Short-Term Disability (STD) <i>Income replacement during a temporary disability</i>	<ul style="list-style-type: none"> • Benefit Percentage (all eligible associates): <ul style="list-style-type: none"> - 0% week 1, - 100% pay weeks 2 - 8, - 60% pay weeks 9 - 26 • Benefit Waiting Period: 7 days • Maximum Benefit Period: 26 weeks including Benefit Waiting Period 	UNFI pays the full cost
Long-Term Disability (LTD) <i>Income replacement due to an extended disability or illness</i>	<ul style="list-style-type: none"> • Benefit Percentage: 60% • Max. Monthly Benefit: <ul style="list-style-type: none"> - Exempt/Salaried - \$15,000 - Non-Exempt/Hourly - \$3,000 • Benefit Waiting Period: 180 days • Maximum Benefit Period: Varies 	Associate pays the full cost

Evidence of Insurability (EOI) is required if, after your initial eligibility enrollment period, you are first enrolling in LTD. Coverage subject to EOI will not be effective until approved by the insurer, Lincoln Financial.

You may cancel your LTD coverage at any time.

To submit an EOI request to enroll in LTD coverage:

- 1 Log in to **MyLincolnPortal.com** First time user? Register using company code **UNFI2**.
- 2 Click on *Complete Evidence of Insurability*.
- 3 Answer the questions.
- 4 Electronically sign and submit.
- 5 Save your confirmation report.
- 6 Lincoln will outreach if additional information is required.

To cancel your LTD coverage:

- 1 Sign-in to the HR Self-Service Portal
- 2 Click on *My Benefits*
- 3 Click on *Benefits Info*
- 4 Select *Disability Information* from along the left-hand side menu
- 5 Select *Waive Long Term Disability*
- 6 Complete and return form

Adoption Assistance

If you're adopting a child, UNFI wants to help welcome your family member by reimbursing you for the costs of adoption. With the Adoption Assistance Program, UNFI will reimburse 100% of your incurred eligible expenses up to:

- \$5,000 for a single adoption
- \$10,000 for a sibling group adoption
- Lifetime benefit of \$15,000

Covered expenses include:

- Adoption agency fees
- Child's required medical examination costs
- Court fees and legal costs such as attorney fees and placement fees
- Travel and lodging expenses to pick up your adopted child

Eligibility

In general, you are eligible for this benefit if:

- You're a full-time, non-union associate averaging 30+ hours per week
- You've completed 12 months of consecutive service at a participating location
- You're adopting a child under 18 years old
- The adoption has been finalized
- Neither you nor your spouse is biologically related to the adopted child

For more information, go to the GuidanceResources website at [guidanceresources.com](https://www.guidanceresources.com) or contact the Associate Contact Center at 1-800-969-9688.

PerkSpot: Associate Discount Program

PerkSpot is a one-stop online shop with exclusive discounts that help you save money on many of your favorite brands. It's completely free and optimized for use on any device: desktops, tablets and phones. Start saving by signing up at unfi.perkspot.com.

Enjoy access to thousands of discounts in over 25 different categories, updated daily. Take advantage of online offers from popular national retailers and discover discounts in your neighborhood with PerkSpot's Local Map. Filter your map results by categories like restaurants, health and fitness, retail and more!

Paid Time Off (PTO), Vacation, Sick Days

Taking care of yourself includes having time to rest, recharge and recuperate. Our paid time off policies let you take time off for vacations, personal days or when you're sick. Talk to your local Human Resources representative to learn about the PTO, vacation or sick day policies available to your work group.

Paid Parental Leave and Paid Maternity Disability Leave

Welcoming a new child into your family through birth or adoption is often one of the most exciting times of your life. UNFI understands the importance of not missing those special moments, which is why we offer four weeks of Paid Parental Leave (PPL) for non-union associates who are eligible for Short-Term Disability (STD) coverage. PPL must be taken in consecutive days and within six months of the birth or adoption (or if earlier, placement for adoption) of the child for new parents. PPL will be taken after STD benefits exhaust for new mothers.

UNFI also offers paid Maternity Disability Leave (MDL) for those who are medically unable to work due to pregnancy or who are recovering after giving birth. Full-time non-union associates are eligible for one week of paid MDL, and part-time non-union associates are eligible for three weeks of paid MDL.

You may be eligible for other leaves of absence in addition to the leaves described above, such as Family Medical Leave. For details, check the *myPolicies* site accessible via the myUNFI Portal, or talk to your local Human Resources representative.

Wellbeing Resources

Healthy Pursuits Wellness Program

UNFI offers the opportunity to save on medical coverage, earn Pulse Cash and live a healthier life—through *Healthy Pursuits*. You can participate in *Healthy Pursuits* whether or not you are enrolled in a UNFI medical option or plan to enroll for 2024—you can even participate if you're a non-union associate (excluding retail associates) who is not eligible for medical benefits. *Healthy Pursuits* participants who are enrolled in a UNFI medical option can save up to \$900 toward medical premium costs (\$1,800 if your covered spouse also participates) and also earn \$30 in Pulse Cash. *Healthy Pursuits* participants not enrolled in a UNFI medical option can earn up to \$180 in Pulse Cash.

The *Healthy Pursuits* wellness program year runs from September 1, 2023, through August 31, 2024.

How Does It Work?

First, create an account with Virgin Pulse. Virgin Pulse is our wellbeing vendor and a trusted partner in helping associates live healthier lives. To create an account:

- 1 Visit join.virginpulse.com/unfihealthypursuits
- 2 Enter your name, DOB, state and country
- 3 Agree to the account terms and conditions
- 4 Follow the prompts to create login credentials

Make it even easier to track points and earn your Wellness Incentive and/or Pulse Cash by downloading the mobile app. You'll earn 100 points just for completing your registration.

Then, complete activities to earn points. Here's a snapshot of the most common healthy activities to track, but you can find a full list in your Virgin Pulse account.

Program or Activity	Points per Program Year
Complete the Health Assessment	3,500
Tobacco Free Agreement	3,500
Preventive dental exam	2,000
Routine vision exam	2,000
Annual physical	2,000
Age- and gender-appropriate screening	500 per screening (up to six)
Complete a Biometric Screening*	3,500
Blood pressure less than 120/80 (both values)*	1,000
BMI between 18.50 – 24.99*	1,000
Waist circumference less than 35 inches (female) or 40 inches (male)*	1,000
Cholesterol (LDL) less than 100*	1,000
Glucose less than 140 non-fasting, or less than 100 fasting*	1,000

* Medical-enrolled only

If you think that you may be unable to participate in or achieve the requirements of the *Healthy Pursuits* program, please call Virgin Pulse at 1-888-671-9395. A representative will work with you (and, if you wish, with your doctor) to identify a reasonable alternative to earn the Wellness Incentive that meets your medical needs.

Build Your Balance and Get Rewarded

For Associates in UNFI Medical Coverage, and Covered Spouses:

The program year is divided into four quarters with specified earning and payout timeframes. You'll receive your (and your spouse's) Wellness Incentive payout in your paycheck in equal per pay-period installments during the dates listed in the chart below. You can save up to \$900 toward medical premium costs per year (up to \$1,800 if your spouse also participates).

Earn 15,000 new points by each of these deadlines...	and you'll get...	paid in 2023...
November 30, 2023	\$225 in Wellness Incentive	January 1 – March 31
February 29, 2024	\$225 in Wellness Incentive	April 1 – June 30
May 31, 2024	\$225 in Wellness Incentive	July 1 – September 30
August 31, 2024	\$225 in Wellness Incentive	October 1 – December 31

You'll also receive \$30 in Pulse Cash when you earn your first 15,000 points.

Do My Points Roll Over?

Yes! If you earn more than 15,000 points by one of the deadlines above, any excess earned points at the end of each earning period automatically carry forward until the program's year end. At the beginning of each program year your points will reset back to zero.

What is Pulse Cash?

Earn Pulse Cash to buy items in the Virgin Pulse store, like fitness tracking devices (which sync your steps and activity and help you earn even more points), gift cards and more. Check out the Virgin Pulse app or website for more information.

NOTE: If earned, Pulse Cash will be imputed as taxable income.

For Associates Not in UNFI Medical Coverage:

If you waived enrollment in UNFI medical coverage, or if you are non-union and not eligible for UNFI medical benefits, you can also participate in *Healthy Pursuits*, as early as the first of the month following your first 30 days of employment.

Earn these points...	and you'll get...	Up to \$180 in total Pulse Cash once you earn 60,000 points!
15,000	\$30 Pulse Cash	
30,000	\$40 Pulse Cash	
45,000	\$50 Pulse Cash	
60,000	\$60 Pulse Cash	

QUESTIONS?

For questions about your Virgin Pulse account or *Healthy Pursuits*, contact Virgin Pulse member services via email to support@virginpulse.com; by calling 1-888-671-9395 from 8 a.m. to 5 p.m. ET, Monday through Friday; or through live chat via join.virginpulse.com/unfihealthypursuits.

YOUR SECURITY IS IMPORTANT

Using a third-party company like Virgin Pulse plays an important role in protecting your personal information. UNFI will not see any identifiable participant data, so you can feel confident that your private information remains private.

Employee Assistance Program (EAP)–ComPsych GuidanceResources

Free, confidential solutions to life's challenges

Life has its moments, and sometimes we could use a little help. ComPsych GuidanceResources is a UNFI-paid benefit that offers confidential and professional resources for a wide range of concerns—including legal, financial, child/eldercare, wellness and more. It even includes up to five counseling sessions for you and members of your household. To begin, visit ComPsych for 24/7 support, resources and information at guidanceresources.com or download the GuidanceResources Now app (web ID: UNFI), or call **1-844-729-5167** (TTY: **1-800-697-0353**).

Calm

If you are eligible for UNFI's Employee Assistance Program, you also have exclusive access to Calm, the nation's top sleep and relaxation app. Calm features, including premium content with UNFI's special membership, are designed to help you relax and focus. Check out:

- Daily Calm meditation sessions
- Soundscapes, soothing music and nature scenes
- Calm Body (for warm-ups and stretches)
- Calm Master Classes, a series of lessons exclusive to Calm, taught by world-renowned mindfulness experts
- Sleep stories—narrated by celebrities and others
- Calm Kids
- Curated information on Calm's blog

To gain full access to all that Calm offers you as a UNFI associate, go to calm.com/b2b/unfi/subscribe on your smartphone, computer or tablet and follow the prompts, including providing your UNFI employee ID (EEID) to verify your eligibility. Then download the Calm app and log into your account to access our premium content. You can even access Calm on up to five devices!

Bright Horizons Child Care Resources

Need help finding child care, elder care, support for children with special needs, learning resources or pet care? Bright Horizons can help. UNFI non-union associates (excluding retail associates) are eligible for Bright Horizons upon hire.

Back-up Care

Whether school's closed or a regular caregiver is unavailable, you can rely on Bright Horizons Back-up Care™ and get high-quality child care in a center and child or adult/elder care at home whenever you need an extra hand. Eligible UNFI associates have access to five care days per year. Center-based care is \$15/child per day or \$25/family per day. In-home care is \$6/hour.

Be sure to register in advance so you're ready whenever you need care. To register for Bright Horizons back-up care:

- Go to backup.brighthouse.com or download the app (search "back-up care" in the App Store or Google Play),
- Enter employer username (UNFI) and password (Benefits4You), and
- Complete your care profile.

Check out everything Bright Horizons has to offer at clients.brighthouse.com/unfi.

Early Access—ONE@WORK

Set yourself up for financial success with our Early Access program, powered by ONE@WORK. Don't forget to use ONE@WORK to take care of your financial wellbeing. Go to get.oneatwork.app and download the ONE@WORK app for free today.

- **Get paid early.** Request up to 50% of your next paycheck early and receive funds in seconds.
- **Track your earnings.** ONE@WORK tracks your work schedule and makes automatic updates after each shift. You'll see how much money you made per shift and per paycheck.
- **Save automatically.** Choose a percentage of each paycheck you want to save and we'll put it into your savings. Pause, adjust or withdraw at any time.
- **Budget easily.** ONE@WORK detects your monthly expenses and gives you a daily, personalized snapshot of what's okay to spend

ONE@WORK is available to associates Senior Manager and below, excluding retail associates and contractors.

Voluntary Coverage

via Mercer Choice Platform

In addition to the benefits already described in this guide, UNFI makes the following benefits and programs available to you for added support.

	Details	Eligibility	Contact Information
Enroll or Participate Any Time			
Auto and Home Insurance*	Purchase auto, home and renters' insurance at discounted rates from some of the nation's top-rated insurance companies	Full-time associates (30+ hours/week) except in some states where not available	Multiple Insurers unfivoluntarybenefits.com
Disaster Recovery*	Purchase disaster insurance to protect you from damage due to hurricane (with storm surge), wildfire, tornado, earthquake, gas explosion, winter storm or dust storm		Recoop unfivoluntarybenefits.com
Pet Insurance*	Purchase coverage to protect your pets just like you do for your own medical expenses	Full-time associates (30+ hours/week)	Nationwide unfivoluntarybenefits.com
ID Theft Protection*	From identity and credit monitoring to coverage for minors, purchase an extra layer of security for yourself and family		Allstate Identity Protection unfivoluntarybenefits.com
Enroll During Annual Enrollment or Initial Eligibility Enrollment Period			
Accident Insurance*	Purchase coverage to supplement your medical option with additional benefits when accidents occur	Full-time associates (30+ hours/week)	MetLife unfivoluntarybenefits.com
Critical Illness*	Purchase coverage to supplement your medical option with additional benefits when diagnosed with a significant illness		
Hospital Indemnity*	Purchase extra financial protection that helps you cover the cost of hospital stays, depending on the reason for your hospitalization		
Legal Coverage	Purchase access to affordable legal representation for a variety of legal matters, including wills, divorce and more		ARAG unfivoluntarybenefits.com

* UNFI is not a sponsor of these programs and is in no way responsible for the insurance provided under these programs. While the insurance carriers are provided access to sell insurance, this should not be considered as an endorsement of any insurance carrier or its products.

UNFI 401 (k) Plan

The UNFI 401 (k) Plan is your company-sponsored retirement benefit that offers you a great opportunity to save for your future through pre-tax savings with tax-deferred investing, and after-tax Roth savings with tax-free investing. The 401 (k) Plan is administered by Fidelity, a trusted partner in the retirement industry. Here's how the plan works...

Automatic Enrollment for New Hires

All eligible new hires will be automatically enrolled into the 401 (k) Plan at a 3% pre-tax contribution rate. You can change your contribution rate, elect to contribute on an after-tax Roth basis or opt-out of automatic enrollment at any time before contributions begin, usually shortly after you complete 30 days of service.

You Contribute

You can contribute up to 75% of your eligible pay, up to the annual IRS limit (\$22,500 in 2023), plus an additional catch-up contribution if you are age 50 or older (\$7,500 in 2023). If you receive quarterly or annual bonus payments, you can elect a separate contribution up to 75% of your bonus payment. Your contributions from bonus payments and from regular eligible pay will be added together to determine if the annual limits on your contributions have been reached. IRS limits for 2024 may be higher after updates for cost-of-living adjustments. Your contributions are deducted from each paycheck. Whether you contribute on a pre-tax basis or an after-tax Roth basis depends on your personal retirement strategy, so consult your tax advisor before making your decision.

UNFI Contributes

To help you achieve your retirement goals, UNFI will match \$0.50 for every dollar you contribute to the 401 (k) Plan, up to the first 8% of your eligible pay each pay period. That means:

- **When you contribute at least 8%** of your eligible pay each pay period,
- **UNFI will contribute 4%,**
- **For a total combined contribution of 12%.**

Any contributions you make, as well as related earnings, are always 100% vested, even if you leave UNFI. UNFI's matching contributions and related earnings will vest when you complete three years of service or if while employed by UNFI you:

- Die
- Become disabled
- Reach age 59

Note that catch-up contributions are not eligible for company-matching contributions. Also, if at year-end, you have not received the maximum company-matching contribution that you are eligible for based on your total pre-tax and Roth contributions for the year, UNFI will contribute an additional amount so you receive the maximum company-matching contribution.

You Invest

The 401 (k) Plan is designed to make it easy and convenient for you to save on your own. You direct the investment of your account, which means you decide how to invest any contributions you or UNFI makes. Choose from easy-to-invest, pre-mixed portfolios or create your own portfolio with a wide range of investment funds, including a self-directed brokerage option which offers you the opportunity to invest in thousands of mutual fund investment options beyond the investment options offered directly through the 401 (k) Plan.

For pre-tax investing, you do not pay taxes on any investment earnings until you take a withdrawal from the 401 (k) Plan, which allows your balance to grow even faster over time. For after-tax Roth investing, you pay taxes now on your contributions, which allows you to receive a distribution of your contributions and investment earnings tax-free upon a qualified withdrawal from the 401 (k) Plan.

Already Have A 401 (k)?

If you have a 401 (k) account or other qualified retirement plan through a previous employer, you can roll over your vested balance into the UNFI 401 (k) Plan. For more information about rollovers and any applicable fees, call the Fidelity Retirement Benefits Line at **1-800-835-5095** or log on to netbenefits.com. You may incur fees from your current 401 (k) provider, so consider your rollover options carefully.

Eligibility Details

- **To participate in the 401 (k) Plan and make contributions:** You must be at least 21 years of age and have been with UNFI for 30 days, beginning with your date of hire.
- **To be eligible for company-matching contributions:** You must be at least 21 years of age and have been with UNFI for six months, beginning with your date of hire.

If you are eligible and haven't joined the 401 (k) Plan, you can enroll at netbenefits.com or by calling the Fidelity Retirement Benefits Line at **1-800-835-5095** Monday through Friday, 8:30 a.m. to 8:30 p.m. ET.

To use the **EasyEnroll** feature and enroll in the 401 (k) Plan in just 60 seconds or less, go to netbenefits.com/easy or text **START** to 343898 (message and data rates may apply).

IT'S NEVER TOO EARLY OR TOO LATE

You may think retirement is a ways off or so close that you've run out of time. Not the case! It's never too early or too late to start saving for retirement, but the sooner you start, the better. Even if you can't commit to contributing 8% today, start small and increase over time.

DON'T MISS OUT ON FREE MONEY!

Contribute at least 8% of your pay each pay period to receive the full 4% company-matching contribution. Contributing less than 8% means you're leaving "free" money on the table!

Contacts

General Benefits Information		
Associate Contact Center	ACCInquiry@unfi.com	1-800-969-9688
Medical		
Anthem <i>Includes BlueCross</i>	Pre-member website: welcometoanthem.com/unfi Member website: anthem.com	1-844-951-0623
UnitedHealthcare	Pre-member website: whyuhc.com/unfi Member website: myuhc.com	1-888-470-8022
Kaiser Permanente	Pre-member site: select.kaiserpermanente.org/unfi Member website: kp.org	Southern California 1-800-464-4000
		Northern California 1-800-464-4000
		Oregon (Northwest) 1-800-813-2000
		Washington 1-888-901-4636
		Hawaii 1-800-966-5955
Transcient <i>Surgery Care Program Benefit</i>	experience.transcient.com/surgery Company Code: UNFI2	1-877-820-7992
Virgin Pulse <i>Healthy Pursuits wellness information</i>	join.virginpulse.com/unfihealthypursuits registered members: app.member.virginpulse.com	1-888-671-9395
LabCorp Employer Services <i>Health Screening Questions</i>	LES-support@labcorp.com	1-877-469-5411
Pharmacy		
Express Scripts	express-scripts.com	1-800-455-6892
Keenan Pharmacy Clinical Management/US-Rx Care	N/A	1-800-241-8440
SaveonSP	saveonsp.com/unfi	1-800-683-1074
Kaiser Permanente	kp.org	See contact information under medical.

Dental		
Delta Dental of Minnesota	deltadentalmn.org	1-800-448-3815
Vision		
Vision Service Plan (VSP)	vsp.com	1-800-877-7195
FSA Reimbursement Accounts		
Optum Bank	optumbank.com	1-800-243-5543
Health Savings Account		
Optum Bank	optumbank.com	1-866-234-8913
Employee Assistance Program		
ComPsych GuidanceResources	guidanceresources.com <i>Web ID: UNFI</i>	1-844-729-5167
Life and AD&D Insurance		
Securian Financial	lifebenefits.com <i>Login ID: UNFI + 7-digit employee ID Password: DOB (MMDDYYYY) + last 4 digits of your SSN</i>	1-866-293-6047
Short- and Long-Term Disability		
Lincoln Financial	mylincolnportal.com <i>Company Code: UNFI2</i>	1-855-286-1547
UNFI 401(k) Plan		
Fidelity	netbenefits.com	1-800-835-5095
Auto/Home Insurance		
Mercer	unfivoluntarybenefits.com	1-800-626-9065
Critical Illness, Hospital Indemnity and Accident Insurance		
MetLife	unfivoluntarybenefits.com	1-800-626-9065
Disaster Insurance		
Recoop	unfivoluntarybenefits.com	1-800-626-9065
Legal Coverage		
ARAG	unfivoluntarybenefits.com	1-800-626-9065
ID Theft Protection		
Allstate Identity Protection	unfivoluntarybenefits.com	1-800-626-9065

Pet Insurance		
Nationwide	unfivoluntarybenefits.com	1-800-626-9065
Associate Discount Program		
PerkSpot	unfi.perkspot.com	1-866-606-6057
Child and Family Care Resources		
Bright Horizons	clients.bright Horizons.com/unfi <i>If prompted, enter the following employer username: UNFI Password: Benefits4You</i>	1-877-242-2737



NEED HELP WHILE ON THE GO?

For quick access to vendor phone numbers and web addresses while on the go, install the benefits contact app to your smartphone or tablet. To install, visit unfibenefitscontacts.com from your smartphone and add it to your home screen.

Required Notices

Health Insurance Marketplace Options

Frequently Asked Questions

Are individuals required to have health coverage?

Prior to January 2019, most individuals were required to obtain acceptable health insurance coverage for themselves and their family members or pay a penalty. This provision of the health care reform law was called the “individual mandate” because it had the effect of requiring individuals to have health coverage. This portion of the law has been removed effective January 2019. However, it should not prevent you from obtaining acceptable health insurance coverage for you and your family.

Do UNFI’s health plans meet the government standard for minimum value?

Yes, UNFI’s current health plans meet the government standards for minimum value.

Are UNFI’s health plans intended to be affordable?

Yes, UNFI’s current health plans meet the standards for affordable coverage.

Does this mean I have to join the UNFI health plan?

No, you will have the option to obtain coverage through the exchange in the state that you reside in.

What if I want to join the UNFI health plan?

Only associates eligible for benefits coverage are able to join the UNFI health plan.

Will I qualify for a subsidy if I obtain coverage through the exchange?

It is extremely rare to qualify for a subsidy. UNFI’s current health plans meet the government standards for minimum value as well as affordable care and no subsidy would apply.

Are all exchanges the same?

No, each state has its own individual plan benefits and costs that meet federal guidelines.

Are insurance premiums for the exchange pre-tax or after-tax?

Premiums are made on an after-tax basis.

Can I drop my UNFI health coverage to obtain coverage through the exchange?

In general, no, unless you are eligible to enroll in exchange coverage through either a special enrollment period or the exchange’s annual open enrollment period.

When is the annual open enrollment for the exchange?

The annual open enrollment period is the same for all exchanges: November 1 – January 31.

Who do I contact if I want to learn more about the exchange and the health marketplace options?

You can contact your state exchange. Log on to www.healthcare.gov for information regarding exchanges and for assistance with evaluating your options, including eligibility for coverage through the marketplace and the costs.

Can UNFI advise me on my options?

No, the information needed to make this decision includes a review of all your personal financial information which is not available to UNFI.

What if I lose my UNFI health coverage?

You may apply for coverage through the Exchange. You may be eligible for COBRA.