

FONTAINEBLEAU® MIAMI BEACH
TEAM MEMBER BENEFITS 2023-2024



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LIVE YOUR LIFE FAMOUSLY FONTAINEBLEAU'S VIEW

Dear Team Members,

We are pleased to announce the 2023 - 2024 benefit plans. Because you are our #1 investment, we believe it's important to take care of you and your loved ones. We continue to enhance our programs to meet the unique needs of our Team Members. We remain steadfast in our commitment to offering affordable and comprehensive benefits, which will support the overall well-being of Team Bleau and their families - from their financial security to their mental and physical health.

With this, we are excited to announce the following highlights for this benefit plan year:

▶ No Healthcare Contribution Increases: Even though healthcare costs are rising for 2023, we have worked diligently to keep your medical, dental, and vision premiums flat and consistent with the plan carriers. We are happy to announce that once again, for the sixth consecutive year, there will be no increase in the employee contribution and no plan changes.

▶ Benefit Enrollment Access via  paycom: By accessing the Employee Self-Service via , Non-Union Team Members may continue to enroll and manage all benefit selections by simply accessing the Benefits section in Paycom. Team Members may visit paycom.com or access the Paycom app from their mobile device.

▶ Cigna Select Health Savings Account (HSA) employer contribution: Team Members enrolled in this plan will continue to receive an annual employer contribution to their Health Savings Account (HSA). A HSA provides you the ability to save tax-free and take charge of how you spend your health plan dollars. To support your savings goals and provide funding for unplanned expenses, Fontainebleau will contribute to your HSA, up to the following amount annually, based on your coverage tier:

- ▶ Employee Only coverage will receive \$250
- ▶ Employee + Spouse coverage will receive \$300
- ▶ Employee + Child(ren) coverage will receive \$350
- ▶ Family coverage will receive \$400

▶ **FREE Mental Health Resource via the Calm App:** We have brought Calm to Team Bleau! We continue to invest in and prioritize the mental health and well-being of our Team Members by providing accessible resources. For the 2nd year in a row, Team Members and their loved ones will continue to have access to a **COMPLIMENTARY** subscription for Calm – the #1 app for mental fitness.

▶ **NEW** Virtual Telemedicine Provider | CIGNA MDLIVE: We are excited to announce a new partnership with MDLIVE through CIGNA for virtual telemedicine. Effective August 1st, MDLIVE will be available through the myCIGNA portal 24/7/365, including holidays. This is a convenient and affordable alternative to urgent care centers and the emergency room.

▶ **NEW** Enhancements to the MetLife Voluntary Plans: We have made enhancements to the existing MetLife Voluntary plans that will complement your existing benefits. These enhancements will assist with extra expenses and out-of-pocket costs associated with accidents, critical illness, and hospitalization.

▶ **Optavise:** Your **COMPLIMENTARY** benefit advocates provide core services to include answering benefit questions, resolving claim and billing issues, clarifying out-of-pocket costs for services, and assisting with referrals and prior authorizations.

Choosing the right health care and benefits package for you and your loved ones is important to your wellbeing and peace-of-mind. Please do not miss your opportunity to take advantage of these exclusive benefit programs during Non-Union Team Member Benefits Open Enrollment.

Sincerely,



Patrick Fisher
Senior Vice President and Managing Director

PLAY YOUR PART.... KNOW YOUR BENEFITS

The Fontainebleau benefits program is designed to recognize the diverse needs of our Team Members. Our plan strives to:

- Provide competitive and comprehensive benefit options that allow you to design your own plan based on your individual needs
- Maintain benefit options that best suit Fontainebleau Team Members
- Offer plans to provide long-term financial security for you and your family

The ability to make individual choices regarding your coverage is an important aspect of your Fontainebleau benefits program. However, it is not always easy to make decisions about your health and financial benefits. It is natural to review the cost of each benefit, but it is also important to think through other issues.

With choice comes responsibility. So, take the time to educate yourself on the specifics of Fontainebleau's benefits plan. We want you to understand all your options and make informed decisions. Only you can determine which benefits best fit you and your family.

You are eligible for the benefits program if you are a Non-Union Full-Time Team Member working at Fontainebleau at least 30 hours per week. Benefits are available to newly hired Team Members on the first of the month following 60 days of employment from the date of hire. Your eligible dependents include:

- Your legally married spouse or domestic partner
- Dependent child(ren) to age 26; to age 30* for medical only. Definition of child is birth child, adopted child, step child and foster child
- Adult child(ren) with a disability
- Domestic Partner – refer to page 31 for details (Certification form required)



Enrollment

You must enroll or waive/decline coverage. Log on to paycom.com for more information and to submit your enrollment or waiver form. If you do not plan to enroll in any benefits, you still must log on to complete the waiver of coverage and the beneficiary information for the Basic Life Employer-Paid benefit.

For Medical Coverage Only

*Unmarried; live in FL or a full-time/part-time student; have no dependents; have no coverage elsewhere; have no gap in coverage of more than 63 days.

Benefit Basics

Once you elect your benefit options for 2023, your elections remain in effect from August 1, 2023 through July 31, 2024. You may only change coverage during Open Enrollment for the next plan year or due to a qualified "life event." If a qualifying life event should occur, you must log on to Paycom and initiate the change within 30 days of the event date. You will be required to upload supporting documentation to finalize the change.

Life Events

- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse or dependent child
- Adoption of/placement for adoption of your child
- Termination or commencement of your spouse's employment
- Change of employment status by you or your spouse qualification by the Plan Administrator of a Medical Child Support Order
- A significant change in your or your spouse's health coverage due to your spouse's employment
- Entitlement to Medicare or Medicaid
- A participating Team Member's hours of service are reduced so that the Team Member is expected to average less than 30 hours of service per week but for whom the reduction does not affect the eligibility for coverage under Fontainebleau's group health plan
- A Team Member participating in Fontainebleau's group health plan who would like to cease coverage under the group health plan and purchase coverage through a marketplace without that resulting either in a period of duplicate coverage under Fontainebleau's group health plan and the coverage purchased through a Marketplace or in a period of no coverage

KEY DEFINITIONS

Deductible – The amount you pay towards medical and dental expenses each calendar year before the plan begins paying benefits.

Copayment – A flat dollar amount that you pay for medical or prescription drug services, regardless of the actual amount charged by your doctor or another provider.

Coinsurance – The percentage of the total bill that you pay after you pay the deductible.

In-Network – Use of a health care provider that participates in the plan's network. For access to the most savings visit an in-network provider.

Out-of-Network – Use of a health care provider that is not in the plan's provider network. The medical plans generally pay reduced benefits for out-of-network services, except in the event of an emergency.

Explanation of Benefits (EOB) – A statement sent to you by the health/dental carrier explaining what treatment and/or services were paid for by the carrier. An EOB typically describes:

- The service performed including date, description, name of provider and name of the patient.
- The doctor's fee, and what the insurer allows—the amount initially claimed by the doctor/provider minus any payments made by the insurer.
- The amount the patient is responsible for payment.

Guaranteed Issue (GI) – The maximum amount of coverage provided without completing a Statement of Health.

Statement of Health (SOH) – Additional medical information will be required for any amount above the Guarantee Issue amount, for late enrollees or increase in insurance.

TIPS FOR MEMBERS

Make sure you always review your CIGNA “Explanation of Benefits” (EOB)

What if I receive an invoice from a provider or a facility and I verified they were contracted with CIGNA?

- Retrieve your EOB from CIGNA for that specific claim/date of service.
- If the amount that you owe on the EOB is equal to the amount on the invoice, then the invoice should be paid.
- If the amount that you owe on the EOB is less than the amount on the invoice (the invoice is greater) and you are certain you went to a contracted CIGNA provider, send a copy of your EOB with the invoice and the amount that CIGNA states you owe to your CIGNA contracted provider/facility.
- Please contact Optavise, your dedicated benefits advocates at 1-800-640-1898.

Accelerated Death Benefit – This provides an option to withdraw a percentage of your life insurance coverage when diagnosed as terminally ill (as defined by policy). The death benefit will be reduced by the amount withdrawn. To qualify, you must have satisfied the Active Work rule and have been covered under this policy for the required amount of time as defined by the policy.

Portability – If Life coverage has been in force for at least 12 months, you may continue your coverage for a specified period of time after your employment ends by paying the required premium. Portability is available if your employment ends for a reason other than total disability.

Conversion – If you terminate or become ineligible for Life coverage, you have the option to convert all or part of the amount of coverage in force to an individual life policy on the date of termination.

HSA – A Health Savings Account (HSA) is a tax-exempt trust or custodial account you set up with a qualified HSA trustee to pay or reimburse certain medical expenses you incur. You must be an eligible individual to qualify for an HSA.

Contracted Rates – The amounts that health insurance companies will pay to healthcare providers in their networks for services. These rates are negotiated and established in the insurers' contracts with in-network providers. Team Members on the Select Plan will pay the contracted rate for In-Network Services.

Out of Pocket Maximum – The maximum amount you will pay in coinsurance during the calendar year.

When you visit your Contracted CIGNA provider for your Annual Physical/Exam make sure you're stating that this is your “Preventive Visit” so that you are not charged.

(Remember, if you are treated for an illness during this visit it will no longer be considered a preventive visit and you will be charged the applicable copay/coinsurance).

If you DO NOT have a life threatening emergency, you have the option to contact CIGNA MD Live or visit an Urgent Care Center or a Contracted Convenience Care Center for Medical services.

- CVS Minute Clinics
- Walgreens Take Care Clinics

Do not forget about the Generic Drug Discount programs that are available at most retail chains.

- Publix-free antibiotics
- Walmart
- Target

OUR COMMITMENT TO YOU



PLAY YOUR PART...GETTING STARTED

There are a few simple steps to enroll in your benefits:

ENGAGE

Utilize this guide to understand your benefits to build the best benefit package for you.

ADD-ON

Enroll eligible dependents in your benefit plans. Due to Healthcare Reform Provisions, you are able to enroll your child to age 26 regardless of tax-dependency status or to age 30*. Be prepared with all Social Security numbers and dates of birth for enrollments.

COMPARE

Compare each benefit plan design to determine details such as deductibles, copays and coinsurance. Please read carefully to determine which plan is best for you and your family.

BUDGET

Review your benefit cost options and determine your budget for health and welfare benefits. Please notice the rates and budget accordingly.

FIND

It is important to find a doctor or dentist that participates in your plan for cost savings. It is necessary to identify a dentist facility number when electing SafeGuard SGX245.

ENROLL

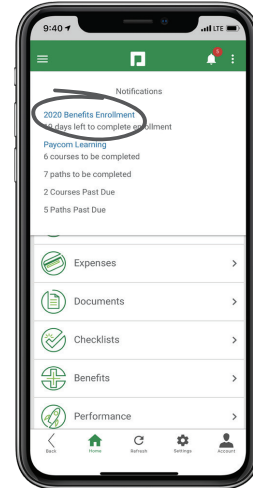
Once you have built your benefits package, complete the enrollment on Paycom.

* Unmarried; live in FL or a full-time/part-time student; have no dependents; have no coverage elsewhere; have no gap in coverage for more than 63 days.

ELECTING BENEFITS IN PAYCOM

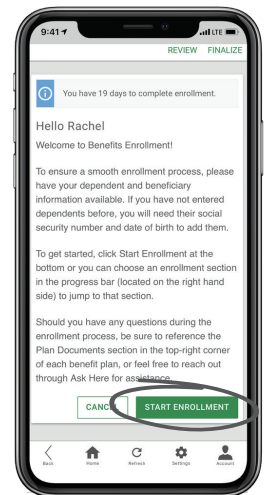
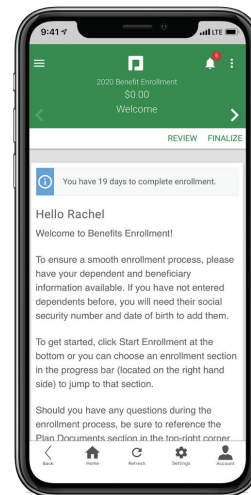
STEP 1

Log into the Paycom app. From the Notification Center or from the Benefits section, click the current year's Benefits Enrollment.



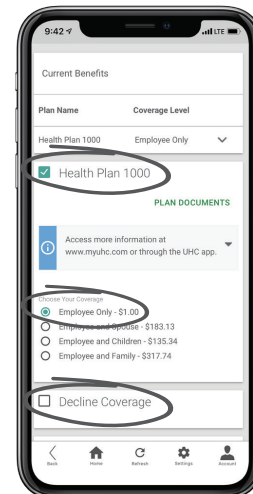
STEP 2

Review initial instructions and click "Start Enrollment." Then, enter your personal information and any dependents or beneficiaries.



STEP 3

After determining which plan will work for you, choose your coverage level, then select either to enroll or decline.



STEP 4

To complete enrollment, click "Finalize," then "Sign and Submit."

Visit the Help Menu for the most up-to-date version of this guide.



HELPFUL TIPS

Have your dependent/beneficiary information ready, such as Social Security numbers, before beginning the enrollment process.



FONTAINEBLEAU BENEFITS EFFECTIVE DATES



If you are a New Hire, please note your Insurance Effective dates below:

If you were hired this year in:	Your insurance effective date is:	Submit your enrollment or waiver online via Paycom no later than:
January	April 1	March 5
February	May 1	April 5
March	June 1	May 5
April	July 1	June 5
May	August 1	July 5
June	September 1	August 5
July	October 1	September 5
August	November 1	October 5
September	December 1	November 5
October	January 1	December 5
November	February 1	January 5
December	March 1	February 5

IMPORTANT INFORMATION

Enrollments and Waivers must be submitted on-line via Paycom.

If you choose not to enroll in Fontainebleau benefits, we still require a waiver of coverage to be submitted via Paycom before the enrollment effective date.

The Employer Health Coverage offered by Fontainebleau does meet the “minimum value” standard of coverage as defined by the Affordable Care Act; therefore, you would not be eligible for coverage through the Health Insurance Marketplace.

MEDICAL BENEFITS

Understanding your medical plan options with CIGNA

We need health care that protects our physical health as much as healthcare that protects our financial well-being. That is why Fontainebleau believes it is important to invest in quality plans that are cost effective, easy to use and valuable to you. Fontainebleau provides the following options:



Medical Standard (CIGNA OAPS)

The CIGNA Open Access Plus Standard (OAPS) Plan allows you to see doctors who are in the CIGNA Open Access Plus network. The OAPS Plan provides the ability to use the network without certain restrictions. Specifically, you do not have to elect a primary care physician and you do not need a referral to see an in-network specialist. This plan does not cover the cost of care you receive from a non-Open Access Plus provider.



Medical Deluxe (CIGNA OAPD)

The CIGNA Open Access Plus Deluxe (OAPD) Plan allows members to see any licensed provider they choose, though benefits are less costly when they receive care from a provider in the Open Access Plus network. You have the flexibility to go to any doctor or to any hospital you wish, and no referral is required.



Medical Select Plan (CIGNA HSA)

The CIGNA Select HSA Plan allows members to see any licensed provider they choose and pay the contracted rate for In-Network Services. Members on this plan will be able to contribute to the HSA, which provides a tax-advantaged way to save for future medical expenses and greater flexibility over how their healthcare dollars are used.

To support your savings goals and provide funding for unplanned expenses, Team Members who enroll and open the Health Savings Account will receive the following employer contribution annually, based on your coverage tier:

- Employee Only coverage will receive \$250
- Employee + Spouse coverage will receive \$300
- Employee + Child(ren) coverage will receive \$350
- Family coverage will receive \$400

Make Sure You Are Always Seeing Contracted Providers!

How do I locate a CIGNA Contracted provider?

Online:

Register on MyCigna.com

1. Go online to www.mycigna.com
2. Under the Welcome Tab, select "Find a Doctor"
3. Select Health Care Professional Type (Physician, Pharmacy, Hospital)
4. If you are selecting a facility, enter in the facility type (Urgent Care, MRI Center, etc.)
5. Enter your location criteria
6. Select your plan/network which is (Open Access Plus) then click "Search" and your provider/facility listing will populate.

Phone:

1. CIGNA 1-800-244-6224
2. Optavise 1-800-640-1898
3. SurgeryPlus 1-833-512-0082
4. MDLIVE 1-888-726-3171

YOU'RE NOT ALONE

The Cigna Total Behavioral Health Program can help you move forward.



Studies show that behavioral problems, such as depression, can contribute to heart disease.¹ Many physical conditions can worsen with stress, substance use and other behavioral health issues. Our Cigna Total Behavioral Health[®] program can help.

Our whole-person approach

If you or a loved one has been diagnosed with a behavioral health condition, we are here for you. Our comprehensive program provides help with life events, dedicated support, lifestyle coaching, and online tools. We help you take control of your health – mind and body.

You can call us anytime, any day. We're here 24/7 to assist you with your routine or urgent needs. After our first conversation we follow up to ensure you're getting the support you need.² We can also help you find a provider with confirmed appointment availability.

Services to help manage life events – At no additional charge to you, you can receive face-to-face sessions³ with a licensed mental health professional in our Employee Assistance Program network.⁴ You also get online, on-demand seminars, as well as community resources and referrals on a range of topics, including:

- Child care
- Adoption
- Senior care
- Pet care
- Legal and financial consultation services⁵
- Identity theft support
- Summer camps
- Parenting
- Convenience services

Virtual behavioral care – You can talk to a licensed psychiatrist or counselor by phone or video with MDLIVE^{6,7} or our Behavioral Health network. With MDLIVE you can schedule phone and video appointments online. With our Behavioral Health network, you can find a provider and start video counseling by going to MyCigna.com, Find Care & Costs.

You can also access online therapy through Talkspace,⁶ via private messaging or live video session. Refer to your plan documents for costs and details of coverage.

We also include Ginger behavioral health coaching via text-based chats, self-guided learning activities and content, and, if needed, video-based therapy and psychiatry.^{6,7}

myCigna.com guided navigation – Our digital portal includes guided navigation² that provides you with customized, convenient care options to help you along your journey. Care options include digital, coaching, virtual and in person options.²



On-demand coaching and personalized learning with iPrevail offered through Cigna⁶ – Learn how to boost your mood and improve mental health with on-demand coaching 24/7. After completing a brief assessment, you receive a program tailored to your needs that includes interactive lessons and tools. You get access to a peer coach who is matched based on your symptoms. You can also join support communities focused on stress, anxiety, depression and more. iPrevail also includes a caregiver support program designed to help you cope with stress, improve resilience and enhance your overall health and well-being.

Together, all the way.[®]





Science-based activities and games for stress and worries, with Happify offered through Cigna⁶ -

Everyday stressors can impact your relationships, work, health and emotional well-being. But you can change your outlook - and the way you see the world - with Happify. Happify's activities and games are designed to help you overcome life's challenges and can be accessed at any time.

Behavioral Specialty Coaching & Support

Services - Our coaches provide dedicated support for a broad range of conditions including:

- › Autism spectrum disorder
- › Eating disorders
- › Intensive behavioral case management
- › Opioid and pain management
- › Substance use

We also provide coaching and support for parents and families, which empowers individuals to be effective advocates for their family member or their own mental health needs. Our team can help for as long as needed. (You must stay covered under your plan to continue service.) They can help you:

- › Understand a behavioral diagnosis.
- › Learn about treatment choices and how your choices can affect what you'll pay out of pocket.
- › Identify and manage triggers that affect your condition.
- › Find a health care professional or facility in our network geared to your needs. Our network includes a Centers of Excellence (COE) program.⁸ COE facilities have earned a top ranking for quality and cost-effective care. With nationwide locations for adult mental health, child and adolescent mental health, eating disorder and substance use treatment, help is available and closer than you think.

- › Find community resources and programs near you.
- › Get referrals to other wellness and lifestyle programs available to you.

Our Coaching and Support services include a digital interface through Vela.⁶ Your Coach will help you acquire the app which features secure two-way messaging, ability to share resources, as well as appointment tracking on a shared calendar.

Take control of your health with extra support.

Lifestyle management programs - Get help to reach your goals like losing weight, quitting tobacco or lowering your stress level. Each program offers support with phone and online coaching.

Behavioral awareness webinars - We offer free monthly seminars on autism, eating disorders, substance use and behavioral health awareness for children and families. The seminars are taught by industry experts and offer tips, tools and helpful information.

Enhanced online tools - Visit **myCigna.com** or use the myCigna[®] app to access on-demand support, including:

- › Information about your benefits, in-network providers and treatment options
- › Health and well-being articles
- › Self-assessment, stress management and mindfulness podcasts and tools

Additional resources can be found on **Cigna.com**.

99% of program participants were very satisfied with the service their case manager provided.⁹



1. CDC. "Heart Disease and Mental Health Disorders." <https://www.cdc.gov/heartdisease/mentalhealth.htm>.

2. Available beginning Q3 2022. ⁴

3. Three face-to-face visits per issue per year. Some restrictions apply, please check with your employer to confirm services included in your plan.

Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Program availability may vary by plan type and location, and are not available where prohibited by law.

Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply.

Program services are provided by independent companies/entities and not by Cigna. Programs and services are subject to all applicable program terms and conditions. Program availability is subject to change. These programs do not provide medical advice and are not a substitute for proper medical care provided by a physician. Information provided should not be used for self-diagnosis. Always consult with your physician for appropriate medical advice. References to third-party organizations and/or their products, processes or services, doesn't mean Cigna endorses them.

Cigna provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs.

The Cigna Center of Excellence designation is a partial assessment of quality and cost-efficiency and should not be the only basis for decision-making (as such measures have a risk of error). Individuals are encouraged to consider all relevant factors and talk with their physician about selecting a health care facility. Quality designations and ratings found in Cigna's online provider directories are not a guarantee of the quality of care that will be provided to individual patients. Providers are solely responsible for any treatment provided and are not agents of Cigna.

9. Cigna satisfaction survey, 2020.

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MEDICAL BENEFITS



Benefit	Standard CIGNA OAPS (In-Network Only)		Deluxe CIGNA OAPD (In/Out of Network)		Select CIGNA HDHP	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Benefits Highlights						
EE Only	N/A		N/A		HSA FUNDING: \$250 per Team Member	
EE + Spouse	N/A		N/A		HSA FUNDING: \$300	
EE + Child(ren)	N/A		N/A		HSA FUNDING: \$350	
Family	N/A		N/A		HSA FUNDING: \$400	
Deductible						
Embedded or Non-Embedded	Embedded		Embedded		Non-Embedded	
Single	\$500		\$250	\$1,500	\$1,500	\$3,000
Family	\$1,000		\$750	\$3,000	\$3,000	\$6,000
Coinsurance	10%		0%	30%	10%	30%
Out-of-Pocket Limit						
Embedded or Non-Embedded	Embedded		Embedded		Embedded	
Single	\$6,350		\$6,350	\$8,000	\$4,000	\$8,000
Family	\$12,700		\$12,700	\$16,000	\$8,000	\$16,000
Out-of-Pocket Includes	Deductible, Copays, Coinsurance, Rx		Deductible, Copays, Coinsurance, Rx		Deductible, Copays, Coinsurance, Rx	
Lifetime Maximum	Unlimited		Unlimited		Unlimited	
Physician Services						
PCP Office Visits	\$25		\$40	30% after ded	10% after ded	30% after ded
Specialist Visits	\$50		\$50	30% after ded	10% after ded	30% after ded
Preventive Care						
Well Child Care	Covered in Full		Covered in Full	30% after ded	Covered in Full	30% after ded
Routine Adult Physical Exam	Covered in Full		Covered in Full	30% after ded	Covered in Full	30% after ded
Well Woman/GYN Exam	Covered in Full		Covered in Full	30% after ded	Covered in Full	30% after ded
Mammograms	Covered in Full		Covered in Full	30% after ded	Covered in Full	30% after ded
Hospital Services						
Inpatient	10% after ded		\$250 per day, max \$1,000 per admission	30% after ded	10% after ded	30% after ded
Outpatient	10% after ded		\$300 per visit, then 100% after ded	30% after ded	10% after ded	30% after ded
Emergency Services						
Emergency Room	\$200		\$200	\$200	10% after ded	10% after ded
Urgent Care Center	\$50		\$50	30% after ded	10% after ded	30% after ded
Diagnostic X-ray/Lab						
Diagnostic Lab Facility	No Charge		No Charge	30% after ded	10% after ded	30% after ded
Diagnostic X-Ray Facility	No Charge		No Charge	30% after ded	10% after ded	30% after ded
Major Services - PET Scans, MRI, CT Scans	10% after ded		\$250 after ded	30% after ded	10% after ded	30% after ded
Prescription Drugs						
Retail - 30 day supply						
Tier 1	\$10		\$15	30% Coinsurance	10% after ded	30% after ded
Tier 2	\$35		\$35	30% Coinsurance	10% after ded	30% after ded
Tier 3	\$60		\$55	30% Coinsurance	10% after ded	30% after ded
Tier 4	30% Coinsurance		25%	30% Coinsurance	10% after ded	30% after ded
Mail Order - 90 day supply	2x Retail		2x Retail	30% Coinsurance	10% after ded	30% after ded

Non-Embedded (or Collective) is reflected as follows, i.e. for the deductible: All eligible family members contribute towards the family plan deductible. Once the family deductible has been met, the plan will pay each eligible family member's covered expenses based on the coinsurance level specified by the plan.

Embedded (or Non-Collective) is reflected as follows, i.e. for the out-of-pocket: After each eligible family member meets his or her individual out-of-pocket maximum, the plan will pay 100% of their covered expenses. Or, after the family out-of-pocket maximum has been met, the plan will pay 100% of each eligible family member's covered expenses.

Important Note: While the plan you select may not require you to use a primary care physician; it remains your responsibility to make sure you are using In-Network providers in order to enjoy the benefits of the plan's In-Network benefit schedule.

HEALTH SAVINGS ACCOUNT (HSA)

For members enrolled in CIGNA Select Plan only

Lowering your taxes with reimbursement accounts

Using your HSA

- When you open an HSA, you may contribute to your account which is established through HSA Bank.
- You can choose to pay for your share of the costs (deductible and coinsurance) for eligible services up to your plan's out-of-pocket maximum by using your HSA, other personal funds or both.
- The amount used from your account for services covered under the health plan helps you meet your annual deductible.
- You can also use your HSA to pay for qualified expenses not covered through your medical plan, such as dental and vision expenses. Visit Cigna.com/expenses for more information.
- The money you don't use earns interest tax-free.* You can save for future medical costs and have the option to open an investment account when your balance reaches \$2,000.
- You may take the account with you when you leave the plan, change jobs or retire.

If you enroll in the CIGNA Select Plan (HSA), you can set aside money in a Health Savings Account (HSA) before taxes are deducted to pay for eligible medical, dental and vision expenses. The HSA will be administered by HSA Bank. Other significant key advantages:

- Your account balance in an HSA can be carried forward from one year to the next.
- If you have any money remaining in your HSA after your retirement, you may withdraw the money as cash.
- A debit card is available for convenient payment of your eligible expenses including doctor visits.

How Much Can I Contribute to an HSA?

The maximum amount you, your employer, and anyone else can contribute to your HSA in any calendar year is the amount established by the IRS.

- The IRS amounts for 2023 are \$3,850 for individual coverage and \$7,750 for family coverage.
- The IRS amounts for 2024 are \$4,150 for individual coverage and \$8,300 for family coverage.
- Team Members age 55 and older can contribute up to an extra \$1,000 each year to their health savings account as a catch-up contribution.

When can I make “catch-up” contributions to an HSA?

If you are 55 or older, or turning 55 during the calendar year, you can make additional “catch-up” contributions to your HSA. The “catch-up” contribution is \$1,000. If you have high deductible health plan (HDHP) coverage for the full year, you can make the full catch-up contribution regardless of when your 55th birthday falls during the year. If you do not have HDHP coverage for the full year, you must prorate your catch up contribution for the number of full months you were eligible, i.e., had HDHP coverage. However, if you are covered on December 1, you're treated as an eligible individual for that entire year and can make the full contribution, provided you also elect the HDHP for the following year.

Which services are covered by my plan, and which will I have to pay for out of my own pocket?

Covered services vary depending on your plan, so visit myCigna.com or check your plan materials for specific information. In addition, you'll pay:

- Any health care service or costs not covered by your plan.
- Costs for any services you receive until you meet your deductible.
- Your share of the cost for your covered health care expenses (coinsurance), after you meet the deductible and your medical plan coverage begins, and up to your plan's out-of-pocket maximum.

Important HSA Fees to keep in Mind!

HSA Monthly Fee= \$1.85

Monthly Paper Statements = \$1.25 (You have the option to choose paper or online statements)

Online Paper Statements = No charge

** There may be additional standard banking fees such as check and overdraft fees. This information will be included in your CIGNA packets**

If you have additional questions regarding the CIGNA Select HSA Plan, please contact Optavise at 1-800-640-1898 or CIGNA at 1-800-244-6224 and reference Group #2500907.

Coverage Upon Separation of Employment

The HSA is your personal savings account and you may continue to use the funds in this account for eligible healthcare expenses upon termination of employment. You may not deposit additional funds in this account unless you are actively covered under a qualified HDHP.

When your coverage under Fontainebleau's group medical coverage ends, your HSA account will be transitioned to free-standing (no longer connected to the employer policy). You will receive a letter from HSA Bank in advance of this transition. Following receipt of that letter your account will be charged the standard monthly maintenance fee.

- You will receive a new debit card
- To access your account online, you must call HSA Bank and be provided user credentials for their direct site

HEALTH CARE THAT'S THERE FOR YOU WHEN AND WHERE YOU NEED IT

Head-to-toe virtual care¹ from MDLIVE.®



It's not always easy to find time for the health care you need. After all, doctors' appointments traditionally involve time and travel. That can lead to putting off care until problems become more serious, and potentially more expensive.

That's why Cigna has partnered with MDLIVE to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you. MDLIVE board-certified doctors, dermatologists, psychiatrists and licensed therapists have an average of over 10 years of experience, and provide personalized care for hundreds of medical and behavioral health needs.

Now you don't have to wait — or travel — for the care you need.

Connect with video or phone, whenever it's convenient for you. Best of all, virtual care from MDLIVE board-certified doctors is available to you and your eligible dependents as part of your health benefits.

MDLIVE®

Primary Care

Preventive care, routine care, and specialist referrals

- Preventive care checkups/wellness screenings available at no additional cost² to identify conditions early
- Routine care visits allow you to build a relationship with the same primary care provider (PCP) to help manage conditions
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities⁵

Urgent Care

On-demand care for minor medical conditions

- On-demand 24/7/365, including holidays
- Care for hundreds of minor medical conditions
- A convenient and affordable alternative to urgent care centers and the emergency room
- Prescriptions available, if appropriate

Behavioral Care

Talk therapy and psychiatry from the privacy of home

- Access to psychiatrists and therapists
- Schedule an appointment that works for you
- Option to select the same provider for every session
- Care for issues such as anxiety, stress, life changes, grief and depression

Dermatology⁴

Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms; prescriptions available, if appropriate
- Care for common skin, hair and nail conditions including acne, eczema, psoriasis, rosacea, suspicious spots and more
- Diagnosis and customized treatment plan, usually within 24 hours



3 easy steps to connect to care

Virtual care visits are convenient and easy.
To schedule an appointment:



Access MDLIVE by logging into myCigna.com and clicking on “Talk to a doctor.” You can also call MDLIVE at 888.726.3171. (No phone calls for virtual dermatology.)

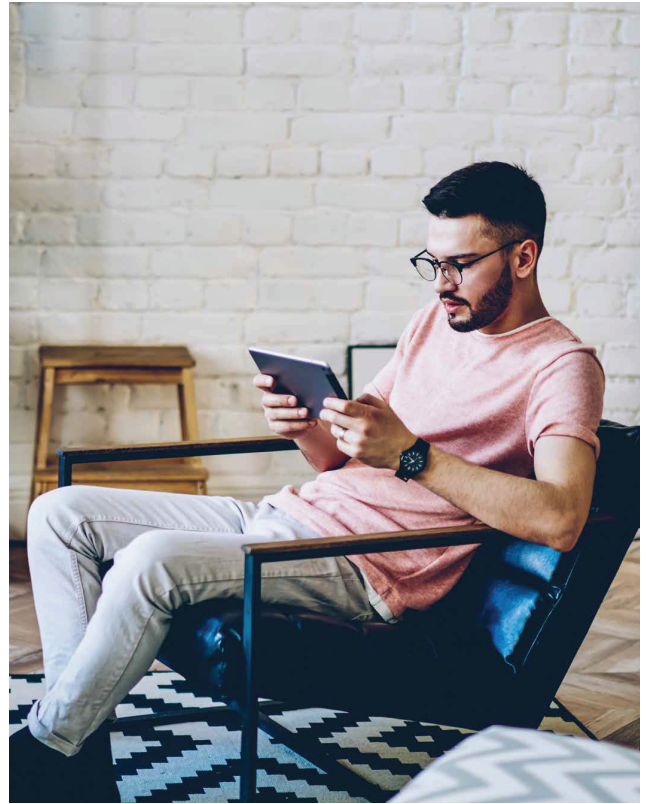


Select the type of care you need: medical care or counseling; cost will be displayed on both myCigna.com and MDLIVE



Follow the prompts for an on-demand urgent care visit, to make an appointment for primary or behavioral care, or to upload photos for dermatology care

Appointments are available via video or phone, whenever it's most convenient for you. Virtual dermatology does not require an appointment.



Visit myCigna.com to make an appointment for virtual care today.

Together, all the way.®



1. Cigna provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna medical members aged 18 and older.
2. For customers who have a non-zero preventive care benefit, MDLIVE virtual wellness screenings will not cost \$0 and will follow their preventive benefit.
3. Limited to labs contracted with MDLIVE for virtual wellness screenings.
4. Virtual dermatological visits through MDLIVE are completed via asynchronous messaging. Diagnoses requiring testing cannot be confirmed. Customers will be referred to seek in-person care. Treatment plans will be completed within a maximum of 3 business days, but usually within 24 hours.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, or its affiliates. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

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Upon termination of employment, access to this benefit ends with your coverage on one of our group medical plans.

FONTAINEBLEAU

Need Surgery? Call your SurgeryPlus® Care Advocate

SurgeryPlus® is a supplemental health care benefit made available to employees and their dependents enrolled in eligible medical plans at no additional cost. The benefit offers lower costs and a high-quality member experience with a focus on positive outcomes for non-emergent surgical procedures.

A dedicated Care Advocate will help answer any questions and manage the entire procedure process:



Recommends best fitting surgeons for your individualized needs



Books appointments & coordinates logistics



Listens & anticipates all member needs



Ensures complete member satisfaction

Commonly covered procedure categories include:

Cardiac



General Surgery



GYN



Orthopedic



Pain Management



Spine



Gastroenterology



ENT



Joint Replacement



Give us a call at 833.512.0082

Email us at Fontainebleau@SurgeryPlus.com

Visit Fontainebleau.SurgeryPlus.com (access code: surgeryplus)

Upon termination of employment, access to this benefit ends with your coverage on one of our group medical plans.

DENTAL BENEFITS



Taking care of your teeth is as important as taking care of the rest of your body. That's why Fontainebleau offers dental plans that cover routine check-ups and additional services needed for your health through MetLife.

Dental Health Maintenance Organization Plan (DHMO)

The DHMO gives you access to the MetLife DHMO through the SafeGuard network of providers. The DHMO covers costs for services rendered by providers within the network. The costs of any services performed by an out-of-network provider will not be covered by the DHMO plan. You must choose your dentist and list the facility number on the enrollment form. A Safeguard Dental card will be mailed to your address. Your dentist can be changed by contacting SafeGuard Dental directly.

Dental Preferred Provider Organization Plan (DPPO) Low | High

The DPPO plan gives you the freedom to access both in-network and out-of-network providers. In a DPPO plan, costs are typically reduced when you receive covered care from network providers. Also, dental specialists can be chosen from the network without a referral for covered services. You will NOT receive a Dental Card if you choose this plan. Please advise your Dentist that your coverage is through MetLife.

Compare the following Fontainebleau Dental options through MetLife:

Dental Benefit	DHMO		DPPO HIGH		DPPO LOW	
	In-Network		In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible Single Family	\$0 \$0		\$50 \$150	\$50 \$150	\$50 \$150	\$100 \$300
Preventive and Diagnostic	100%/ Copays		100%	80%	100%	100%
Basic Treatment	100%/ Copays		Ded & 80%	Ded & 50%	Ded & 80%	Ded & 50%
Major Treatment	Copays		Ded & 50%	Ded & 50%	Ded & 50%	Ded & 25%
Orthodontia	Copays		50% Lifetime Max \$1500	50% Lifetime Max \$1500	50% Lifetime Max \$1000	50% Lifetime Max \$1000
Annual Maximum Benefit	N/A		\$5000	\$5000	\$2000	\$2000

VISION BENEFITS



It is proven that routine vision check-ups and care are not only beneficial to your eyes but are crucial to your long-term health. That is why Fontainebleau offers vision coverage.

EyeMed Vision Care Plan

Your vision benefit is a voluntary plan offered by Fontainebleau through EyeMed Vision Care. This program allows you to access care from participating providers for a greater level of benefit and no claim forms. You may also access care from non-participating providers and receive reimbursement for your exam and/or supplies by filing a claim form.

Extra Vision Benefits

You receive 20% savings on numerous lens options and 15% savings on retail price of Laser Vision Correction or 5% savings on promotional pricing.

Visit www.enrollwitheyemed.com for more information.

Fontainebleau offers the following Vision options through EyeMed Vision Care:

	Vision Plan		Enhanced Vision Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Eye Examination	Once every 12-months		Once every 12-months	
	\$10	Up to \$15	\$0	Up to \$20
Materials Copay	Frame \$0 / Lens \$10	Up to allowance	Frame \$0 / Lens \$10	Up to allowance
Lenses	Once every 12-months		Once every 12-months	
Single	\$10	Up to \$13	\$10	Up to \$13
Bifocal	\$10	Up to \$23	\$10	Up to \$23
Trifocal	\$10	Up to \$40	\$10	Up to \$40
Contact Lenses	Once every 12-months		Once every 12-months	
Elective & Conventional	\$120 allowance; 15% off balance over \$120	Up to \$96	\$200 allowance; 15% off balance over \$200	Up to \$160
Medically Necessary	Covered at 100%	Up to \$200	Covered at 100%	Up to \$210
Frames	Once every 12-months		Once every 12-months	
	\$130 allowance; 20% off balance over \$130	Up to \$65	\$200 allowance; 20% off balance over \$200	Up to \$100



A FRIENDLY REMINDER



Your Advocate is here all year!

Your Advocate can:

- ▷ Answer questions about your benefits
- ▷ Resolve claims and billing issues
- ▷ Assist with referrals and prior authorization
- ▷ Compare pricing for an upcoming procedure or prescription drugs
- ▷ Find providers for second opinions
- ▷ Provide you access to registered nurses for diagnosis, procedures and medication options

Call for any benefits or health care question throughout the year.

FREE & CONFIDENTIAL



**Your
Advocacy
Support**

Your Advocate can save you time, money & frustration by:

- ▷ Answering your questions
- ▷ Maximizing your benefits
- ▷ Navigating the system

(866) 253-2273

advocate@optavise.com

Mon - Fri: 8 am – 9 pm (EST)

Saturday: 9 am – 2 pm (EST)

LIFE AND AD&D BENEFITS

Understanding Your Life and Accident Coverage With MetLife



Life and AD&D

Life insurance can provide valuable financial protection. Fontainebleau offers you a choice of different levels of coverage to meet your needs. The Life Insurance Plans are insured and administered by MetLife. In addition to the Basic Life and AD&D insurance that is provided to you at no cost by Fontainebleau, you can purchase Supplemental Life Insurance for yourself and Dependent Life for your spouse or domestic partner and dependent children.

We require a beneficiary for this 100% free benefit to be assigned via Paycom.

How Coverage Works

The Life Insurance Plans pay a lump sum benefit to your beneficiary in the event of your death while actively employed by Fontainebleau. The Plan can also pay a living benefit (Accelerated Death Benefit). If you become terminally ill, the Plan will pay out a benefit while you are still living. Any amount you receive will reduce the benefit paid to your beneficiary. The Dependent Life Insurance Plan pays a lump sum benefit to you in the event of your spouse or child's death while you are actively employed by Fontainebleau.

Statement of Health (SOH)

You must provide a Statement of Health, which is a statement of your medical history, to determine if you are approved for coverage when the amount of requested life insurance is in excess of the Guaranteed Issue Amount. You will be asked to complete a SOH if:

- You are a late enrollee,
- You are increasing your original life coverage amount; or
- You are age 60 or above

The SOH must be completed entirely and approved by MetLife before the coverage will take effect. All SOHs must be submitted to the Benefits Office within Human Resources.

Coverage Upon Separation of Employment

Conversion & Portability

You have two options for continuing your Basic and Voluntary Life coverage with MetLife. Accidental Death & Dismemberment (AD&D) is not portable or convertible.

Portability (Basic Life is not portable)

- Coverage remains term life policy (like employer plan); age reductions apply.
- Coverage may be continued at a group discounted rate.
- Coverage amount cannot be increased but can be decreased as needed.
- Rates are based on your current age and differ from the rates you paid while employed.
- Complete and submit the Election of Portable Coverage form within 31-days of loss of coverage.
- Coverage will take effect 32 days after your group coverage ends.
- MetLife will bill you monthly for your coverage. The option to make monthly payments via Electronic Funds Transfer is available by contacting MetLife at 1-888-252-3607.
- There is a \$1 administrative fee added to each monthly premium. The monthly administrative fee is waived for insureds who use Electronic Funds Transfer.

Conversion

- Converts to individual "whole life" policy.
- Coverage cannot be increased or decreased.
- Rates for Conversion are based on your age at the time you convert your coverage and remain level throughout the life of the policy.
- Complete and submit the Notice of Conversion form within 31-days of loss of coverage.

Rates, payment and effective date details will be provided by the MetLife service team member at the time of request.

LIFE AND AD&D BENEFITS



Fontainebleau covers 100% of the cost for following Basic Life and AD&D benefit through MetLife:

Provisions	Benefit Amount
Benefit Amount	\$25,000
Maximum Issue	\$25,000
Guaranteed Issue Amount	\$25,000 (No SOH required)
Waiver of Premium	Included if disabled before age 60
Airbag Benefit	5% up to \$10,000
Seat Belt Benefit	10% up to \$25,000
Common Carrier Benefit	100% or full amount

GRIEF COUNSELING:

Your MetLife Basic Life plan offers you, your dependents, and your beneficiaries access to grief counselling sessions and related concierge services to help cope with a loss. This benefit is 100% paid by Fontainebleau. You may contact Member Services at 883-319-7819 or visit: <https://metlifegc.lifeworks.com/>
Username: metlifeassist and Password: support

BENEFIT REDUCTION:

If you are age 65 or older on your effective date of insurance, the appropriate reduction percentage from the following table will be applied to the amount of your Basic Life and AD&D insurance:

Age of Employee	Percentage
65	50%
70	15%

For supplemental Life and AD&D coverage, Fontainebleau offers the following options for Team Member, spouse, domestic partner and/or child(ren) through MetLife:

SUPPLEMENTAL LIFE:

Provisions	Detail
Optional Life Insurance for you	Up to 5 x base annual salary in \$10,000 increments (GI- \$100,000) Above GI requires SOH
Dependent Life Insurance for your spouse/ domestic partner	Up to 50% of Team Member election in \$5,000 increments (GI- \$25,000) Above GI requires SOH
Dependent Life Insurance for your child(ren)	\$10,000; if 14 days to 6 months old- \$250 (GI- \$10,000)

SUPPLEMENTAL AD&D:

Provisions	Detail	Rate
Optional AD&D Insurance for you	Amount equal to Supplemental Life	\$0.02 per \$1,000 of elected coverage
Dependent AD&D Insurance for your spouse	Amount equal to Supplemental Life	\$0.02 per \$1,000 of elected coverage
Dependent AD&D Insurance for your child(ren)	Amount equal to Supplemental Life	\$0.05 per \$1,000 of elected coverage

***TEAM MEMBERS MUST ASSIGN A PRIMARY BENEFICIARY FOR THIS BENEFIT VIA PAYCOM.**

WILL PREPARATION SERVICE:

By enrolling in Supplemental Term Life coverage, you will have access to Hyatt Legal Plans' network of 11,500+ participating attorneys. Whether it's creating a binding will or updating an existing will, you can take advantage of unlimited consultations with a plan attorney so you can feel confident you're making the right decisions.

When you use a participating plan attorney there will be no charge for the services.

Call Hyatt Legal at 800-821-6400 and reference the company name and customer number 153594

LIFE INSURANCE BENEFIT RATES

Monthly Costs for Supplemental Term Life Insurance With MetLife

You have the option to purchase Supplemental Term Life Insurance. Listed below are your monthly rates as well as those for your spouse (based on your age and the amount of coverage). Rates to cover your child(ren) are also shown. The premiums are paid 100% by you and deducted from your paycheck after taxes. Please refer to the table below to estimate your monthly premiums.

Employee Age	Your Monthly Cost per \$1,000 of Term Life Coverage	Spouse/Domestic Partner Monthly Cost Per \$1,000 of Term Life Coverage
Under 30	\$0.06	\$0.06
30 - 34	\$0.08	\$0.08
35 - 39	\$0.09	\$0.09
40 - 44	\$0.10	\$0.10
45 - 49	\$0.16	\$0.16
50 - 54	\$0.26	\$0.26
55 - 59	\$0.44	\$0.44
60 - 64	\$0.66	\$0.66
65 - 69	\$1.27	\$1.27
70 +	\$2.14	\$2.14
Cost for your Child(ren)*	\$0.11	

* Covers all eligible children

Use the above table to calculate your premium based on the amount of life insurance you choose:

Example: \$100,000 Supplemental Coverage		Your Estimated Coverage Cost
Enter the rate from the table above (example: age 36)	\$0.09	
Enter the amount of insurance in thousands of dollars (example: for \$100,000 of coverage, enter 100)	100	
Monthly premium = Line 1 x Line 2	\$9.00	
Bi-Weekly Payroll Deduction = Line 3 x 12 divided by 26	\$4.15	

Repeat the four easy steps above to determine the cost for the coverage selected.

RESTRICTIONS:

1. YOU must be enrolled in Supplemental Life Insurance in order to enroll your spouse or domestic partner.
2. If you or your spouse/domestic partner were previously eligible to enroll and declined, you must now complete the MetLife Statement of Health (SOH) form and submit it to HR Benefits Office. The application must be approved by MetLife before the Supplemental benefits become effective or before payroll deductions begin.
3. If you or your spouse/domestic partner are newly eligible to enroll and are applying for an amount that is greater than the GTD issue amount, you must complete the MetLife Statement of Health (SOH) form. The application must be approved by MetLife before your Supplemental benefits become effective or before payroll deductions begin.
4. If employee is age 60 or above, there is no guarantee issue for spouse coverage. A Statement of Health must be submitted for any coverage requested for spouse. See benefit administrator for additional restrictions due to age.

AD&D SUPPLEMENTAL RATES



Monthly Costs for Accidental Death & Dismemberment (AD&D) Insurance With MetLife

To purchase Supplemental AD&D coverage, you and your dependents must also be enrolled in Supplemental Life coverage.

Supplemental AD&D Coverage	Monthly Cost Per \$1,000 of AD&D Coverage
Employee	\$0.020
Dependent Spouse/Domestic Partner	\$0.020
Dependent Child	\$0.050

Example: \$100,000 AD&D Insurance		Your Estimated Coverage Cost
Enter the rate from the table above (example "Employee")	\$0.020	
Enter the amount of insurance in thousands of dollars (Example: for \$100,000 of coverage enter 100)	100	
Monthly premium = Line 1 x Line 2	\$2.00	
Bi-Weekly Payroll Deduction = Line 3 x 12 divided by 26	\$0.92	

Repeat the four easy steps above to determine the cost for the coverage selected.

Travel Assistance — You're protected, 24/7

To complement your MetLife life insurance coverage, you have access to Travel Assistance¹ services, a useful program giving you and covered family members² access to travel assistance professionals at AXA Assistance USA, Inc. when traveling within the U.S. or abroad. They have the expertise to help when you need emergency medical, travel and personal assistance.

Professional help, just a phone call away

Everyone wants a stress-free trip, but unforeseen events can happen. The good news is that AXA representatives are there by your side. If there's an emergency while traveling internationally or domestically,³ with one simple phone call you can access:

- Over 600,000 pre-qualified providers worldwide
- Air and ground ambulance service
- Trained multilingual professionals who can advise and help you quickly in a travel emergency

Emergency benefits

Emergency medical evacuation services and return of remains

If medical facilities aren't available locally, the program will provide resources needed to get you and your covered family members² to the nearest medical facility for treatment or back home, if medically necessary. If you or a covered family member pass away while traveling, AXA will transport the remains back home and cover the associated costs.

Political and Natural Disaster Evacuation

AXA can provide transportation services when the country where eligible participants are located needs to be evacuated based on a determination of the US government. In addition, in the event of a natural disaster, AXA can coordinate and arrange for the evacuation of eligible participants from a safe departure point to a safe destination.

Dispatch of Physician

If the local attending, legally qualified physician and AXA cannot adequately assess the member's need for medical evacuation and transportation, AXA will coordinate, provide, and dispatch a physician to assist in the assessment. AXA will provide for a benefit up to \$2,500.

Pet Repatriation

If a pet traveling with you is left unattended due to your hospitalization, AXA will coordinate and provide boarding for the pet. If the injury or illness results in an evacuation or repatriation service, AXA will coordinate and provide transportation for the pet to be returned to either home, or to a boarding facility near home. AXA will provide for a benefit up to \$2,500.

Upon termination of employment, access to this benefit ends with your coverage on one of our group medical plan.

Worldwide Medical Teleconsultation⁴

If you're traveling and need medical advice for common and minor illnesses, you and covered family members can have virtual consultations with licensed medical professionals, 24/7 — via mobile device or phone. The DOCTOR PLEASE! App is available at iTunes or Google Play. Call AXA at (800) 454-3679 to receive the code needed for user registration.

Medical assistance services when traveling

- Medical referrals, appointments and hospital admissions
- Critical care monitoring
- Replacement of prescription medication
- Replacement of medical devices

For information or to access services:



Call:

Within the USA: (800) 454-3679


Outside the USA call collect: (312) 935-3783



Visit:

www.metlife.com/travelassist

For your convenience, detach and save this informational wallet card. Be sure to carry the card with you at all times while traveling domestically or abroad.

 Cut along dotted line

TRAVEL ASSISTANCE

This is not a medical insurance card.

The participant is entitled to medical and travel services administered by AXA Assistance USA, Inc.

Within the United States: (800) 454-3679

Outside the United States Call Collect: (312) 935-3783

Or log on to:

www.metlife.com/travelassist

All services must be administered by AXA Assistance USA, Inc.
No claims for reimbursement will be accepted.

Personal assistance services

Advice before you travel

Make sure you visit AXA's Travel Assistance website for advice about your visa, passport, inoculations and local customs, as well as 24-hour pre-departure information on weather, currency and plenty more.

Concierge Assistance

Save time and hassle with our concierge service. Seasoned concierges will take care of all your travel and entertainment arrangements including flights, hotel and dining reservations, general destination and transportation information, city guides and much more. A source of local knowledge on call, whenever you need them, wherever you are.

Pet concierge services

Get help with locating pet-friendly hotel accommodations, local boarding facilities and assistance with travel arrangements back home for your pets in case of an emergency.

Other Assistance Services Include:

- Local professional referrals
- Help with locating lost documents or luggage
- Emergency cash/bail assistance
- Identity theft solutions

1. Travel Assistance services are offered and administered by AXA Assistance USA, Inc. Certain benefits provided under the Travel Assistance program are underwritten by Certain Underwriters at Lloyd's London (not incorporated) through Lloyd's Illinois, Inc. Neither AXA Assistance USA Inc. nor the Lloyd's entities are affiliated with MetLife, and the services and benefits they provide are separate and apart from the insurance provided by MetLife.
2. You and covered family members means an enrolled employee and their eligible dependents as defined under the group insurance contract issued by MetLife.
3. Traveling more than 100 miles from home.
4. Available globally to members in a traveling status. Teleconsultation is not an emergency medical response program. In the event of a medical emergency, you should contact your local emergency medical service. You can receive Teleconsultation services for limited, non-urgent, non-life threatening medical conditions; this service is not appropriate for all conditions. Services, including assistance with prescriptions, will be provided if permitted under applicable law. Teleconsultation services are arranged through AXA Assistance USA and Teladoc International.

metlife.com

EXCLUSIONS: The AXA Travel Assistance Program is available for participants in traveling status. Whenever a trip exceeds 120 days, the participant is no longer considered to be in traveling status and is therefore no longer eligible for the services. Also, AXA Assistance USA will not evacuate or repatriate participants without medical authorization; with mild lesions, simple injuries such as sprains, simple fractures or mild sickness which can be treated by local doctors and do not prevent the member from continuing his/her trip or returning home; or with infections under treatment and not yet healed. Benefits will not be paid for any loss or injury that is caused by or is the result from: pregnancy and childbirth except for complications of pregnancy, and mental and nervous disorders unless hospitalized.

Reimbursements for non-medical services such as hotel, restaurant, taxi expenses or baggage loss while traveling are not covered. The maximum benefit per person for costs associated with evacuations, repatriations or the return of mortal remains is US\$500,000. Treatment must be authorized and arranged by AXA Assistance's designated personnel to be eligible for benefits under this program. All services must be provided and arranged by AXA Assistance USA, Inc. No claims for reimbursement will be accepted.



Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166

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When you call the **Travel Assistance dedicated telephone numbers** listed on the reverse, please have the following information available:

1. Your name, telephone number and your relationship to the plan participant.
2. Plan participant's name, age, sex and company name.
3. A description of the plan participant's condition or service needed.
4. Name, location and telephone number of hospital, if applicable



Upon termination of employment, access to this benefit ends with your coverage on one of our group medical plan.

DISABILITY BENEFITS

Understanding VoluntarySTD & VoluntaryLTD Insurance through MetLife

Fontainebleau offers a Voluntary Short Term Disability and Long Term Disability plan. These benefits replace a portion of your pre-disability earnings*, less the income that was actually paid to you for the same disability from other sources.

Voluntary Short-Term Disability (VSTD)

There is a 14 day waiting period for illness. Pre-existing condition restrictions may affect the benefits paid to you.

The benefit amount is 60% of your pre-disability weekly earnings up to a maximum weekly benefit of \$1,000.

Voluntary Long-Term Disability (VLTD)

If you are disabled due to a qualified non work-related accident or sickness lasting more than 90 days, your long-term disability coverage provides for tax-advantaged payments.

This benefit pays you 60% of your defined monthly earnings* up to \$6,000 per month.

*Definition of Earnings: means gross salary or wages you were earning from the Policyholder as of your last day of Active Work before your Disability began, subject to any increase or decrease in insurance as described in the Benefit Certificate.

RESTRICTIONS:

1. If you were previously eligible to enroll and declined, you must now complete the MetLife SOH form. The application must be approved by MetLife before your Voluntary STD and/or LTD benefits become effective or payroll deductions begin.

For VoluntarySTD Premium Rates

Rate / \$10 of weekly benefit coverage
0.417

Example	Calculation	
A. Annual Earnings		\$30,000
B. Weekly Earnings	A. Divided by 52 weeks	\$576.92
C. Weekly Benefit Coverage	B. Times 60%	\$346.15
D. Value per \$10	C. Divided by \$10	\$34.62
E. Estimated Monthly Contribution	D. Multiplied by rate	\$14.43
F. Estimated Bi-Weekly Deduction	(E. x 12 months) divided by 26 pay periods	\$6.66

For VoluntaryLTD Premium Rates

Rate / \$100 of monthly covered payroll
0.460

Example	Calculation	
A. Annual Earnings		\$30,000
B. Monthly Earnings	A. Divided by 12 months	\$2,500
C. Value per \$100	B. Divided by \$100	\$25.00
D. Estimated Monthly Contribution	C. Multiplied by rate	\$11.50
E. Estimated Bi-Weekly Deduction	(D. x 12 months) divided by 26 pay periods	\$5.31

Upon termination of employment, access to this benefit ends on the last day of that month. It is not possible to continue this coverage.

VOLUNTARY PLANS

MetLife®

Fontainebleau Florida Hotel Employees, your medical and disability insurance may not be enough to cover all your extra expenses and out-of-pocket costs associated with an **accident, critical illness, and hospitalization**. Learn more about why these great benefits available to you through MetLife are an **easy and cost effective** way to protect your income and savings while complementing your existing benefits.

Accident Insurance

Be better prepared when the unexpected happens.



Accidents happen frequently and can be very costly. Accident insurance payments **are made directly to you**, and can be used in any way you see fit. There are over 150 covered events⁵ and **coverage is guaranteed** for you and other eligible family members⁴.

Critical Illness Insurance

Help protect your family finances



If you experience a covered critical illness, this coverage **provides you with a lump-sum payment**. The payment is made directly to you and can be used in any way you see fit. Covered Conditions include heart attack, cancer⁶ or stroke⁷ and more and **coverage is guaranteed** for you and other eligible family members⁴.

Hospital Indemnity

Hospital stays are expensive, but this benefit can help.



Group hospital indemnity Insurance provides a **lump-sum payment directly to you**, if you or a family member should become hospitalized⁸. Payments are made directly to you, not your healthcare provider and can be used in any way you see fit. Coverage is guaranteed for you and other eligible family members⁴.

To Enroll

Learn more or enroll today for these benefits

1 800 GET-MET 8 (1-800-438-6388)

Monday through Friday, 8 am - 8 pm EST.

Did you know?



The average cost of an emergency room visit due to an accident is \$1,354.¹

Studies show that some families spend as much as \$14,444 or more during a time of critical illness and recovery.²

The average cost of a hospital stay in the U.S. is \$9,700.³

Even with medical coverage, additional expenses can add up quickly.

After your employment ends, MetLife will contact you via mail with information on how to continue benefits via direct pay



Identity protection that keeps up with your digital life

Your identity is made up of more than your Social Security number and credit score. That's why we do more than monitor your credit reports. We help you look after your online activity, from financial transactions to what you share on social media — so you can protect the trail of data you leave behind.

Introducing our next evolution in identity protection. For over 85 years, we've been protecting what matters most. Now we're providing protection from a wide range of identity threats, so you can keep loving what technology adds to your life.



Sign up during open enrollment

Questions? 1.800.789.2720

Plans and pricing

Allstate Identity Protection Pro Plus

\$9.95 per person / month

\$17.95 per family / month

- ✔ See your personal data
- ✔ Manage it with real time alerts
- ✔ Protect your identity and finances from fraud[†]

With Allstate Identity Protection Pro Plus you'll be able to



See and control your personal data with our unique tool, Allstate Digital Footprint™



Monitor social media accounts for questionable content and signs of account takeover



Check your identity health score



View and manage alerts in real time



Catch fraud at its earliest sign with tri-bureau monitoring and an annual tri-bureau credit report and score



Lock your TransUnion credit report in a click and get credit freeze assistance



Get help disputing errors on your credit report



See if your IP addresses have been compromised



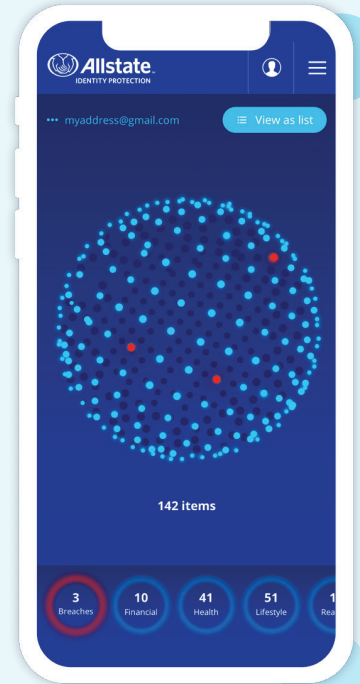
Receive alerts for cash withdrawals, balance transfers, and large purchases



Get reimbursed for fraud-related losses like stolen 401(k) & HSA funds or fraudulent tax returns with our \$1 million identity theft insurance policy†



Protect yourself and your family (everyone that's "under your roof and wallet")*



Protect yourself and your family

Kids' online identities can grow up faster than they do. Our Family Plan provides coverage for kids and teens of all ages, so you can help protect their personal data and give them a safe head start. If they are dependent on you financially or live under your roof, they're covered.*

*For family plans only

†Identity theft insurance underwritten by insurance company subsidiaries or affiliates of Assurant. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

After your employment ends, AllState will contact you via mail with information on how to continue these benefits via direct pay.

It's easy to get started

1. Enroll in Allstate Identity Protection Pro Plus

You're protected from your effective date. Our auto-on credit monitoring alerts require no additional setup.

2. Activate key features

Explore additional features in our easy-to-use portal. The more we monitor, the safer you can be.

3. Live your best life online

In the event of identity theft or fraud, you'll receive an alert as soon as it's detected.



AllstateSM

IDENTITY PROTECTION

LIVE YOUR LIFE FAMOUSLY



Fontainebleau Miami Beach is offering pet benefits to employees at exclusive group rates!

You can enroll in Pet Assure, PetPlus, or both. Choose the plans that work best for you and your pets.



Veterinary Discount Plan
\$8.00/month for one pet or
\$11.00/month for an unlimited
number of pets.



Prescription Discount Plan
\$3.75/month for one dog or cat
or \$7.50/month for all of the
dogs and cats in your home.

Visit petbenefits.com/land/fontainebleaumiamibeach to learn more about the plans and how to enroll.



Plans are brought to you by Pet Benefit Solutions

About Your Plan Options



Pet Assure Veterinary Discount Plan



Established in 1995, Pet Assure is America's Veterinary Discount Plan. As an alternative or addition to pet insurance, Pet Assure helps pet owners like you save on veterinary care.

Pet Assure members save 25% at participating veterinarians on all in-house medical services, including:

- Office Visits
- Vaccinations
- X-Rays
- Dental Work
- Spay & Neuter
- Emergency Visits
- Surgeries
- Hospitalization

It's as simple as that: since Pet Assure is not insurance, there are no forms to fill out, no waiting for reimbursements and no denials of coverage – even pets with pre-existing conditions are accepted.

Pet Assure has participating veterinarians in all 50 states and Puerto Rico. Search for a veterinarian at www.petbenefits.com/search.

Pet Assure also includes a 24/7 Lost Pet Recovery Service.

PetPlus Prescription Discount Plan



With PetPlus, you receive members-only pricing on prescriptions and everything else your pet needs. View available products and pricing at www.petplusbenefit.com

PetPlus members save up to 50% on:

- Prescription Medications
- Flea & Tick Products
- Vitamins & Supplements
- Heartworm Preventatives
- Food (Rx & Non-Rx)
- Treats & Supplies

It's easy to shop at your members-only pricing at www.petcarerx.com. Get free shipping on all online orders and same-day pickup is available for most prescriptions at any Caremark pharmacy nationwide, including Walgreens, Target, CVS and other local pharmacies.

PetPlus also includes a 24/7 Pet Help Line powered by whiskerDocs.

After your employment ends, Pet Assure will contact you via mail with information on how to continue these benefits via direct pay.

BENEFIT RATES 2023-2024

All Full-Time Team Members are eligible to enroll on the first of the month following 60 days of employment from the date of hire. Employee deductions are contributed on a bi-weekly basis and are a pre-tax deduction.

Medical Insurance Plan | CIGNA

	Medical Standard HMO Bi-weekly Deduction	Medical Deluxe PPO Bi-weekly Deduction	Medical Select HDHP (HSA) Bi-weekly Deduction
Employee Only	\$65.00	\$97.50	\$27.69
Employee + Spouse	\$220.00	\$333.08	\$115.00
Employee + Child(ren)	\$170.00	\$260.96	\$90.00
Family	\$285.00	\$429.23	\$150.00

Team Members who enroll in the CIGNA Select HSA plan and open the Health Savings Account will receive the following employer contribution:

- Employee Only Coverage: \$250 towards the Health Savings Account
- Employee + Spouse Coverage: \$300 towards the Health Savings Account
- Employee + Child(ren) Coverage: \$350 towards the Health Savings Account
- Family Coverage: \$400 towards the Health Savings Account

Dental Insurance Plan | METLIFE

	DHMO (MetLife through Safeguard) Bi-weekly Deduction	DPPO - Low Bi-weekly Deduction (\$2,000 Annual Maximum)	DPPO - High Bi-weekly Deduction (\$5,000 Annual Maximum)
Employee Only	\$2.94	\$8.21	\$14.36
Employee + Spouse	\$5.09	\$18.35	\$32.16
Employee + Child(ren)	\$6.10	\$21.82	\$29.86
Family	\$8.67	\$33.22	\$48.24

Vision Insurance Plan | EYEMED

	Vision Bi-weekly Deduction	Vision - Enhanced Bi-weekly Deduction
Employee Only	\$2.92	\$4.49
Employee + Spouse	\$5.54	\$8.52
Employee + Child(ren)	\$5.83	\$8.97
Family	\$8.57	\$13.19

The following employee deductions are contributed on a bi-weekly basis and are a post-tax deduction.

Pet Insurance Plan | PET BENEFIT SOLUTION

PET Benefit Solutions	Bi-weekly Deduction
PetAssure Veterinary Discount Plan	
1 Pet	\$3.69
Unlimited Pets	\$5.08
PetPlus Prescription Savings Plan	
1 Dog or Cat	\$1.73
All dogs and/or cats in your home	\$3.46
Veterinary Discount & Prescription Savings Plan Combined	
PetAssure Single + PetPlus Single	\$5.43
PetAssure Single + PetPlus Unlimited	\$7.17
PetAssure Unlimited + PetPlus Single	\$6.81
PetAssure Unlimited + PetPlus Unlimited	\$8.31

Identity Protection Plan | AllState

Identity Protection Pro Plus	Bi-weekly Deduction
Per Person	\$4.59
Family Plan	\$8.28

401 (k) RETIREMENT



Fontainebleau understands that retirement is probably your most important financial goal.

Welcome to Fidelity Investments

As you probably already know, saving for retirement takes you down one of two paths...saving on your own, or participating in a pension or retirement savings plan through Fontainebleau. The 401(k) Plan is an important benefit available to Team Members to save for retirement on a pre-tax or post-tax basis with the added feature of employer matching! Team Members can contribute towards the Traditional 401(k) and/or Roth 401(k).

Traditional 401(k) and Roth 401(k) Options

Fontainebleau gives you the option to enroll in the Traditional 401(k) and/or Roth 401(k) Plans through Fidelity to make saving for retirement easy and painless. There are many different investments available within the 401(k) Plan for you to choose from. With the Traditional 401(k) you do not pay any taxes today on your deferrals. You will receive an enrollment information packet from Fidelity at your home address prior to meeting your eligibility requirements. All enrollments are done directly with Fidelity online or via telephone. Please choose a deferral percentage, do not choose a flat dollar amount for your biweekly payroll contributions.

Amount to Save

Save up to 75% of your gross earnings per pay period up to the IRS limit of \$22,500 in the tax year of 2023. Participants over 50 years of age may contribute an additional \$7,500 for the 2023 tax year.

Eligibility

To qualify for the 401(k) benefit, you must be employed with Fontainebleau for 6 months. To enroll, eligible Team Members may log onto netbenefits.com and click Register Now when logging in for the first time or call Fidelity at 1-800-835-5097

Employer Match & Vesting

Fontainebleau matches your contributions dollars for up to 3% and .50 cents on the dollar for 4% and 5%. The employer match is immediately 100% vested.

You can always make changes to the amount you wish to invest and update your beneficiary by visiting the Fidelity website at www.netbenefits.com.

Investment Percentage	Your Investment Matched by Fontainebleau
1%	\$1 For \$1 Match
2%	\$1 For \$1 Match
3%	\$1 For \$1 Match
4%	For \$1 a .50 Cent Match
5%	For \$1 a .50 Cent match

→ \$1 For \$1 Up To 3%

→ \$.50 cent on the dollar for 4% and 5%

Catch-up Contributions

If you are 50 or older, you may qualify to make additional before-tax “Catch-up” contributions as a flat dollar amount. (Do not select a catch-up %). The Federal limit for the 2023 tax year is \$7,500.

EMPLOYEE ASSISTANCE PROGRAM (EAP)



Benefits that help you and your family

Employee Assistance Program (EAP)

Many of life's problems can grow into major issues that can disrupt an employee's life and their ability to function at work, at home and in their personal relationships. Fontainebleau now provides an Employee Assistance Program (EAP) through MetLife free of charge to all employees and their dependents for confidential support and direction.

We All Need Help Every Now and Then

Problems are just a part of everyday life. In addition to the benefits provided under your MetLife Group Insurance coverage, you and your household members now have access to MHN's Employee Assistance Program (EAP) to help with the everyday challenges of life that may affect your health, family life and desire to excel at work. (EAP services provided through an agreement with MHN, Inc. MHN is not a subsidiary or affiliate of MetLife and the services provided are separate and apart from the insurance and services provided by MetLife.)

Consultation and Support

You and the members of your household are entitled to up to five (5) consultations with a licensed clinician per incident, per individual, per calendar year. You choose between telephone consultations, for maximum convenience and anonymity, or web-video consultations, for convenience with the warmth of a face-to-face conversation. Please call 1-888-319-7819 anytime to speak with a clinician or schedule an appointment.

Work and Life Services

Telephone consultations are available in the following areas:

Financial Services: Budgeting, credit and financial guidance (investment advice, loans and bill payments not included), retirement planning and assistance with tax issues.

Childcare and Eldercare Assistance: Needs assessment plus referrals to childcare and eldercare providers.

Identity Theft Recovery Services: Information on ID theft prevention, plus an ID theft emergency response kit and help from a fraud resolution specialist if you are victimized.

Legal Services: Consultations for issues relating to civil, consumer, personal and family law, financial matters, business law, real estate, estate planning and more (excluding disputes or actions between you and MetLife or MHN).

Daily Living Services: Referrals to consultants and businesses that can help with event planning, transportation services, pet services and more (does not cover the cost nor guarantee delivery of vendors' services).

Online Member Services: MHN's EAP member website features a wide range of tools and information to help you take charge of your well-being and simplify your life. Log on to metlifeeap.lifeworks.com and enter the following user name **metlifeeap** and password **eap**

FIT FOR BLEAU

WELLNESS • HEALTH • BALANCE



FREE CALM SUBSCRIPTION

For Non-Union Team Members

The world's #1 app for mental fitness.

Proven impact on stress, sleep, and mental health

Based on a study (N=12,151) using survey data from Calm subscribers who used the app more than five times per week.

84%

improved mental health

81%

decrease in stress

73%

higher sleep quality

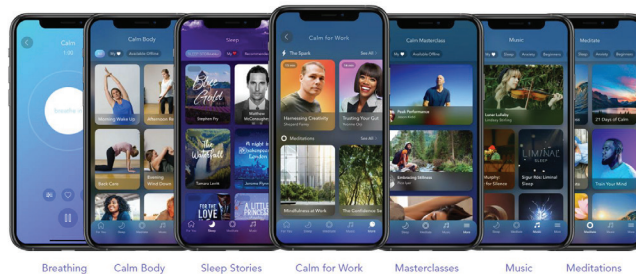
We are excited to announce our partnership with Calm, providing Non-Union Team Members with a **FREE** subscription while employed at Fontainebleau. This **FREE** subscription provides unlimited 24/7 access to the full library of content in the Calm app and calm.com including:

- Guided meditations and specialized music playlists to help with stress and focus
- Mindful movement video and audio
- Relaxing Sleep Stories narrated by celebrity guests
- Tailored content for children
- Wisdom-filled masterclasses led by experts, and much more.
- Subscription can be shared with up to 5 household members

Because subscriptions are limited, registration for this benefit will be on a first come, first serve basis. Mental health is health, and we're all on our own journey. We hope you're able to take some time to reflect on how you can care for yourself today, tomorrow, and beyond.

To register for this amazing benefit, please contact the Benefits Team at ext. 3224 or 4719 or by email at miahrbenefits@fontainebleau.com.

Let's  together.



FONTAINEBLEAU

Upon termination of employment, access to this benefit will end immediately.

LIVE YOUR LIFE FAMOUSLY

DOMESTIC PARTNER COVERAGE



Domestic Partner benefits coverage is available to Fontainebleau Team Members. This includes both same-sex and opposite-sex domestic partners.

ELIGIBILITY

To be eligible for Domestic Partner benefits, you and your Domestic Partner must meet the following eligibility requirements:

1. Are each 18 years of age or older;
2. Live together in a serious, committed relationship and are responsible for each other's common welfare;
3. Are each other's sole domestic partner;
4. Are not legally married to anyone and/or have not had another domestic partner within the prior 12 months;
5. Have shared the same regular and permanent residence for at least 6 months, with the intent to continue doing so indefinitely;
6. Share "basic living expenses," defined as the basic cost of food, shelter and medical expenses; and
7. Are not related by blood to a degree of closeness, which would prohibit legal marriage in the state in which we reside.

A Declaration of Domestic Partnership form is required before enrollment is approved and processed. See the Human Resources Benefits Office for forms.

Additional taxation may be imposed as a result of Domestic Partner Coverage. Please review enrollment details in Paycom.

COBRA CONTINUATION OF COVERAGE

Under the federal law, known as COBRA, you and your dependents generally may continue medical, dental, and vision if coverage ends due to either:

- A reduction in the number of hours you work or
- Termination of your employment , including layoff

Your dependent may continue their medical, dental and vision coverage under this plan if their coverage ends for any of the following reasons:

- Your death
- You become entitled to Medicare
- Your divorce, annulment, or legal separation, provided the Company is notified within 60 days, your dependent loses dependent status, provided the Company is notified within 60 days.

***This is not a complete description of all COBRA-related provisions. You should consult your SPD, located on Paycom, for more details.

The following chart shows how long you can continue your COBRA coverage:

If you lose coverage because:	Then you can continue coverage for:	If your dependent loses coverage because:	Then your dependent can continue coverage for:
You are no longer eligible	18 months	Of your death	36 months
You are no longer eligible and either you or your dependent is disabled (according to the Social Security Administration) within 60 days of your loss of eligibility	19 months	You become eligible for Medicare after your COBRA election begins	36 months
		You and your spouse divorce	36 months
		He or she is no longer a dependent (because of age or divorce)	36 months

For more information about COBRA or if you need assistance completing your election, please contact the Paycom COBRA Service department at 1-800-580-4505.

CONTINUATION OF COVERAGE UPON SEPARATION OF EMPLOYMENT

When your employment ends, coverage under all Health & Welfare Benefits will end on the last day of that month.

PLAN	HOW DO I CONTINUE THIS COVERAGE?
Medical, Dental & Vision	Within 14-days after your coverage ends you will receive a COBRA notice from Paycom. Please review carefully! You have a specific time period to notify and remit payment to the COBRA administrator if you wish to continue your coverage.
Health Savings Account (HSA)	<p>Only applies to employees who participated in the High Deductible Health Plan (HDHP) option. The HSA is your personal savings account and you may continue to use the funds in this account for eligible healthcare expenses. You may not deposit additional funds in this account unless you are covered under a qualified HDHP.</p> <p>When your coverage under Fontainebleau's group medical coverage ends, your HSA account will be transitioned to free-standing (no longer connected to the employer policy). You will receive a letter from HSA Bank in advance of this transition. Following receipt of that letter your account will be charged the standard monthly maintenance fee.</p> <ul style="list-style-type: none"> • You will receive a new debit card • To access your account online, you must call HSA Bank and be provided user credentials for their direct site.
MDLIVE Telemedicine	Access to this benefit ends with your coverage on one of our group medical plans.
Optavise (Advocacy Services)	When your employment ends, access to Optavise will end on the last day of that month.
SurgeryPlus	Access to the benefit ends with your coverage on one of our group medical plans.
Basic and Voluntary Life AD&D	<p>You have two options for continuing your Basic and Voluntary Life coverage with MetLife. Accidental Death & Dismemberment (AD&D) is not portable or convertible.</p> <p>Portability (Basic Life is not Portable)</p> <ul style="list-style-type: none"> • Coverage remains term life policy (like employer plan); age reductions apply. • Coverage may be continued at a group discounted rate. • Coverage amount cannot be increased but can be decreased as needed. • Rates are based on your current age and differ from the rates you paid while employed. • Complete and submit the Election of Portable Coverage form within 31-days of loss of coverage • Coverage will take effect 32 days after your group coverage ends. • MetLife will bill you monthly for your coverage. The option to make monthly payments via Electronic Funds Transfer is available by contacting MetLife at 1-888-252-3607. • There is a \$1 administrative fee added to each monthly premium. The monthly administrative fee is waived for insureds who use Electronic Funds Transfer. <p>Conversion</p> <ul style="list-style-type: none"> • Converts to individual "whole life" policy. • Coverage cannot be increased or decreased. • Rates for Conversion are based on your age at the time you convert your coverage and remain level throughout the life of the policy. • Complete and submit the Notice of Conversion form within 31-days of loss of coverage. • Rates, payment and effective date details will be provided by the MetLife service team member at the time of request.
Short- & Long-Term Disability	When your employment ends, Disability benefits end on the last day of that month. It is not possible to continue this coverage.
Accident, Critical Illness & Hospital Indemnity	After your employment ends, MetLife will contact you via mail with information on how to continue benefits via direct pay.
Identify Theft	After your employment ends, AllState will contact you via mail with information on how to continue these benefits via direct pay.
Pet Insurance	After your employment ends, PetAssure will contact you via mail with information on how to continue these benefits via direct pay.

VENDOR CONTACTS

Plan	Administrator	Website	Phone Numbers
401(k) Fidelity	Fidelity Investments	www.netbenefits.com	800-835-5097
Behavioral Health	CIGNA	mycigna.com	800-274-7603
COBRA Benefits	Paycom	paycom.com	800-580-4505
Dental Benefit DHMO	Safeguard by MetLife	www.safeguard.net	800-880-1800
Dental Benefit PPO Low High	MetLife	www.metlife.com/mybenefits	800-438-6388
Employee Assistance Program Available 24 hours 7 days a week	MetLife	metlifeeap.lifeworks.com User: metlifeeap1 Password: eap	Monday – Friday 8AM – 9PM
Grief Counseling	MetLife	Metlifegc.lifeworks.com Username: metlifeassist Password: support	888-319-7819
Identity Protection Plan	AllState	aip.com	800-789-2720
Life and AD&D Insurance	MetLife	For filing claims see Human Resources	For existing claims 800-638-6420
MDLIVE Telemedicine	MDLIVE	access online via myCigna.com or the mycigna APP	888-726-3171
Medical Benefits	CIGNA	www.mycigna.com	800-244-6224
Optavise Medical Benefits Advocate	Optavise	Email: advocate@optavise.com	866-253-2273 Monday –Friday 8AM – 9PM Saturday 9AM – 2PM
Pet Benefits	PetAssure	www.petassure.com/land/fontainebleaumiamibeach	800-891-2565
Short/Long Term Disability	MetLife	For filing claims see Human Resources	For existing claims 800-300-4296
SurgeryPlus Surgery Benefits Advocate	SurgeryPlus	fontainebleau.surgeryplus.com	833-512-0082
Travel Assistance	MetLife	axawebcorp.axa-assistance.com https://www.travel- eremergencyservices.com/metlifeaxa/ Login: axa Password: travelassist www.metlife.com/travelassist	855-327-1442 Within the United States: 800-454-3679 Outside the United States: 312-935-3783
Vision Benefits	EyeMed	www.eyemedvisioncare.com	866-939-3633
Voluntary Benefits	MetLife	www.mybenefits.com	800-Get-Met8 (438-6388)
Will Preparation through Hyatt Legal	MetLife	Must be enrolled in Supplemental Term Life Insurance. Preparation of Living Will and Power of Attorney are free when using a plan attorney	800-821-6400 Reference the company name and customer number 153594

This guide describes the benefit plans available to you as a Team Member of Fontainebleau. The details of these plans are contained in the official Plan documents, including some insurance contracts. This guide is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary Plan Description (SPD) (as described by the Employee Retirement Income Security Act).

If there is ever a question about one of these plans, or if there is a conflict between the information in this guide and the formal language of the Plan documents, the formal wording in the Plan documents will govern.

Note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of Fontainebleau.

F O N T A I N E B L E A U[®]

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CLASS 2