



2016 Quick Reference Guide

Hy-Vee and Affiliates Benefit Plan and Trust

Open Enrollment changes resulting in a potential error, including but not limited to: incorrect spousal surcharge, missing Healthy Lifestyles participating discount, missing or incorrect FSA elections, will be reviewed for the first two pay periods of January, not to exceed January 31st. Errors identified in that time frame may be eligible for a refund.

This booklet highlights the main features of the benefit plans sponsored by Hy-Vee, Inc. Full details of these benefits are contained in the legal documents governing the plans. If there is any discrepancy or conflict between the plan documents and the information presented here, the plan documents will govern. In all cases, the plan documents are the exclusive source for determining rights and benefits under the plans. Hy-Vee, Inc. reserves the right to change or discontinue the plans at any time with appropriate notification. Participation in the plans does not constitute an employment contract. Hy-Vee, Inc. reserves the right to modify, amend, or terminate any benefit plan or practice described in this booklet. Nothing in this booklet guarantees that any new plan provisions will continue in effect for any period. Plan documents are available on CONNECT or by calling the Benefit Plan Department at the corporate office, 515-267-2800.

BENEFITS OVERVIEW

The Hy-Vee and Affiliates Benefit Plan and Trust (the Plan) is available to all full-time and regular-time employees of Hy-Vee and all subsidiary companies. The Plan offers coverage for Medical, Dental, Short Term Disability, Life Insurance and Long Term Disability; all coverage offered by the Plan is optional. The Hy-Vee Benefit Plan is excited to offer a new, easier way to review your benefits for the upcoming year. Employees currently covered on our Plan can use this Quick Guide to note changes, review rates, and get advice on using the online benefits website www.hy-veebenefits.com.

This guide contains an overview of Plan Changes and important reminders for 2016. For more information please refer to the 2016 Benefit Reference Guide available on CONNECT or at <http://hy-veebenefits.com>.

OPEN ENROLLMENT

Open enrollment is the one time each year when you can make changes to your Plan options without a qualifying event; changes include: add/remove dependents, enroll/waive in medical, dental, STD, LTD, life, tax savings, etc. Open enrollment for 2016 elections will be November 1 to November 30, 2015. All enrollments/changes are done via our online enrollment system at <http://hy-veebenefits.com> and will go into effect on January 1, 2016.

*Please visit CONNECT (HR/Benefits Department Page) to view ***NEW*** OPEN ENROLLMENT TUTORIALS.* These tutorials are broken into small categories to assist you with questions about specific coverage options and are available to view at work, home or on the go!

WHAT'S NEW IN 2016?

Dependent Coverage

- Employees can CHOOSE which dependent has which coverage
 - Employees may now elect coverage for themselves and dependents by benefit
 - For example: an employee may carry employee-only medical coverage, and employee-family dental coverage
 - NO CHANGES ARE AUTOMATIC. Current elections will carryover to 2016 unless they are updated at <http://hy-veebenefits.com> by 11/30/15
 - *If adding a dependent for the first time – remember appropriate dependent verification documents! See page 8 for the complete list.*

Pharmacy

- Tier 4 Prescriptions will no longer be covered on the Pharmacy Benefit; Tier 4 prescriptions are generally classified as Lifestyle Drugs
- Specialty Prescriptions will see a Tiered Benefit for Preferred/Non-preferred prescriptions
 - Preferred \$100 copay; Non-preferred \$200 copay
 - For information on which prescriptions are preferred/non-preferred please refer to the Pharmacy Formulary or contact the Customer Service number on the back of your ID card

Bariatric Surgery

- Coverage for Bariatric Surgery will be added to the Medical Plan
 - Members will need to meet patient criteria standards determined by Wellmark or HealthPartners
 - Surgery will only be covered at a Blue Distinction Center (Wellmark) or Center of Excellence (HealthPartners) – these locations can be determined at Wellmark.com, HealthPartners.com or by calling the number on the back of your ID Card

High Value Network for Knee and Hip Replacements

- Incentive program for utilizing a facility that has high quality patient outcomes while providing a great value
 - Tier 1 – If you utilize a Blue Distinction Center (Wellmark) or a Center of Excellence (HealthPartners) you will:
 - Pay \$1,000 *less* toward your deductible
 - Be eligible for a travel benefit (\$0.56/mile, \$150/day for hotel and food up to a \$5,000 maximum) if you are traveling a distance greater than 30 miles one way
 - Tier 2 – All other facilities are still covered, and will follow current plan designs
 - Deductible does not decrease, no travel benefit

Why choose a Blue Distinction Center or Center of Excellence? These facilities are certified as providing care with fewer complications, lower readmission rates and faster recovery time!

WHAT'S NEW IN 2016?

Short Term Disability and Policy 605

- Beginning January 1, 2016 Short Term Disability (STD) will be the primary disability coverage for all employees, except those in the positions listed below:
 - Manager of General Merchandise, Store Operations or Perishables
 - Regular or Full Time Pharmacists and Pharmacy Department Managers
 - Staff Members
 - Store Directors
- **STD provides 70% of basic weekly earnings, up to a maximum of \$1,000/week**
 - *Please note: maximum is increasing from \$600/week*
- STD will provide you with paid time off for medical leave of absences including maternity, illnesses and accidents
 - *If you haven't already, you will need to elect STD to receive paid disability leave if you are no longer covered by Policy 605 – enroll by November 30, 2015*

Are you enrolled in STD? Logon to <http://hy-veebenefits.com> to review your Benefit Summary!

***NEW* ELECTIVE BENEFITS – enroll this year without answering medical questions!**

Cancer

Receiving a cancer diagnosis is difficult physically and emotionally, not to mention financially. A Cancer Policy can provide added financial support when it is needed most. The benefits received can be used to help cover the costs of specific treatments and expenses as they happen.

Cancer Policy coverage includes:

- Payment for initial diagnosis.
- Payments for chemotherapy, radiation, immunotherapy, blood, plasma, platelets, surgery and more.
- Coverage for transportation and lodging when you cannot be treated locally.
- Guaranteed issue, no health questions, during the current open enrollment even if you have previously been diagnosed with cancer.

Voluntary Life

Provide peace of mind for your family with life insurance. If you enroll now you are guaranteed approval on a Voluntary Life Policy up to the following amounts:

- Employee: up to \$250,000
- Spouse: up to \$50,000
- Child(ren): up to \$10,000 (per child)

Beginning with Open Enrollment you will be able to enroll in, or waive, elective benefit offerings at <http://hy-veebenefits.com>! The elective benefits available are: Vision, Critical Illness, Accident, Cancer and Voluntary Life coverage for yourself, your spouse and/or your children. All will be available without medical questions!

CORE BENEFITS

Medical

- Coverage is administered by Wellmark Blue Cross Blue Shield (IA, WI, IL, MO, KS, NE, SD) or HealthPartners (MN)
- Three deductible levels:
 - 1500, 3000 or 3000 High Deductible Health Plan
 - Deductibles, Copays/Coinsurance and Out of Pocket Maximums remain the same
- Network is based on where you work, for a complete listing of stores and corresponding Network please visit CONNECT or <http://hy-veebenefits.com>

Dental

- Coverage is administered by Delta Dental of IA
- \$50 Deductible/\$1,000 annual maximum benefit; 2 Free cleanings each year

Life

- Coverage is administered by Hartford
- FT Employees: \$50,000; RT Employees: \$30,000
- Spouses: \$5,000 (until age 65) and Children: \$1,000
- Be sure to check your beneficiaries!

To review all Medical Plan offerings, and see a list of copays, coinsurance and Out of Pocket Maximums; as well as detail on Dental, STD, LTD and/or Life Insurance please view the 2016 Benefit Reference Guide. Available on CONNECT, <http://hy-veebenefits.com> or by request from your store Insurance Coordinator.

2016 WEEKLY RATES FOR CORE BENEFITS

Coverage	Employee Only	Employee + Spouse*	Employee + Child(ren)	Employee + Family*
**Medical - PPO 1500	\$38.75	\$73.22	\$61.90	\$95.84
**Medical - Blue Access 1500	\$36.43	\$67.42	\$57.27	\$87.73
**Medical - PPO 3000	\$28.44	\$62.21	\$53.09	\$80.43
**Medical - PPO 3000 HDHP	\$21.50	\$64.61	\$55.02	\$83.78
Dental	\$1.45	\$3.27	\$3.38	\$5.08
Short Term Disability FT/RT	\$1.03/\$.75	NA	NA	NA
Life Insurance FT/RT	\$.36/\$.22	\$.42/\$.28	\$.42/\$.28	\$.42/\$.28

*Rates do not include potential Spousal Surcharge of \$25/week

**Rates do not include potential Healthy Lifestyles discount of \$5/\$10 or \$15/week

TIPS FOR USING <http://hy-veebenefits.com>

First Time Registration

1. Navigate to hy-veebenefits.com
2. Click on the "Register" button
3. Enter SSN or Employee ID (same as Connect), and Date of Birth
4. Create a user name, password and choose a security phrase

Resetting your Password

1. Access hy-veebenefits.com
2. Click on "Forgot your Password" hyperlink under login
3. Enter SSN, Date of Birth and answer security phrase
4. Create a new password

Adding a Life Event during Enrollment

1. Go to hy-veebenefits.com
2. Hover over "Benefits" on the red navigation bar to access a dropdown menu
3. Click on "Change my Benefits" and follow the instructions. Make sure to not only add the event, but also make appropriate benefits elections for yourself and any new dependents

Once you access the site, proceed through ALL screens until you reach your Benefit Summary. Once you've reviewed your elections click on I APPROVE. You will receive a confirmation number – this means your transaction is complete. If you do not receive a confirmation number your elections will NOT be saved. Write down or Print all confirmation numbers for your records.

Accessing Your Benefit Summary

If you wish to **REVIEW** your current or Open Enrollment Elections, hover over "Benefits" on the red navigation bar to access a dropdown menu, click on "Benefits Summary".

DO NOT START A NEW TRANSACTION UNLESS YOU WISH TO MAKE OTHER CHANGES

IMPORTANT REMINDERS FOR 2016:

- If you wish to make changes to your Benefit Plan elections, complete them at <http://hy-veebenefits.com> by November 30, 2015.
 - Remember – new in 2016 – your dependent coverage does not need to match the coverage you have!
- Do you cover your spouse on Medical Insurance? Login to <http://hy-veebenefits.com> and answer the Spousal Surcharge question.
 - Answering YES denotes that your spouse has access to their own *Employer Sponsored medical coverage* – surcharge will begin/continue on 1/1/16
 - Answering NO certifies that your spouse does NOT have access to their own Employer Sponsored medical coverage – no surcharge will be paid
 - Hy-Vee employees that cover a spouse also employed by Hy-Vee, answer No
- If you wish to participate in the Medical or Dependent Care Flexible Spending Account (FSA) in 2016 – elections must be made via <http://hy-veebenefits.com> by November 30, 2015.

DEPENDENT VERIFICATION DOCUMENT LIST

If the proper documentation is not provided, dependent(s) cannot be added to the benefit plan. If proper documentation is obtained at a later date, dependent(s) may be added at the next open enrollment. Necessary verification documents for adding each type of dependent are as follows:

Legal Spouse

The covered employee's husband or wife under federal law

Document Options for Verifying Eligibility:

- Government Issued Marriage Certificate and Federal Tax Return Issued Within Last 2 Years OR
- Government Issued Marriage Certificate and Proof of Joint Ownership Issued Within Last 6 Months OR
- Government Issued Marriage Certificate Only (if married in the past 12 months)

Common Law Spouse

Document Options for Verifying Eligibility:

- Notarized Affidavit of Common Law Marriage and Proof of Joint Ownership Issued Within Last 6 Months

Biological Child

Age Requirement: Under 26

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate

Disabled Biological Child

Age Requirement: Under 26

Must be medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate

Disabled Biological Child 26 and Over

Age Requirement: 26 and over

Must be unmarried and medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate

Adopted Child

Age Requirement: Under 26

Document Options for Verifying Eligibility:

- Adoption Placement Agreement and Petition for Adoption; OR
- Adoption Certificate

Disabled Adopted Child

Age Requirement: Under 26

Must be medically certified as disabled

Document Options for Verifying Eligibility:

- Adoption Placement Agreement and Petition for Adoption; OR
- Adoption Certificate

Disabled Biological Child 26 and Over

Age Requirement: 26 and over

Must be unmarried and medically certified as disabled

Document Options for Verifying Eligibility:

- Adoption Placement Agreement and Petition for Adoption; OR
- Adoption Certificate

Foster Child

Age Requirement: Under 26

Document Options for Verifying Eligibility:

- Foster Care Letter of Placement

Legal Ward

Age Requirement: Under 26

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate and Court Ordered Document of Legal Custody

Disabled Legal Ward

Age Requirement: Under 26

Must be medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate and Court Ordered Document of Legal Custody

Disabled Legal Ward 26 and Over

Age Requirement: 26 and over

Must be unmarried and medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate and Court Ordered Document of Legal Custody

Step Child

Age Requirement: Under 26

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate, Government Issued Marriage Certificate, and Federal Tax Return Issued Within Last 2 Years OR
- Government Issued Birth Certificate, Notarized Affidavit of Common Law Marriage, Proof of Joint Ownership Issued Within Last 6 Months, and Federal Tax Return Issued Within Last 2 Years

Disabled Step Child

Age Requirement: Under 26

Must be medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate, Government Issued Marriage Certificate, and Federal Tax Return Issued Within Last 2 Years OR
- Government Issued Birth Certificate, Notarized Affidavit of Common Law Marriage, Proof of Joint Ownership Issued Within Last 6 Months, and Federal Tax Return Issued Within Last 2 Years

Disabled Step Child 26 and Over

Age Requirement: 26 and over

Must be unmarried and medically certified as disabled

Document Options for Verifying Eligibility:

- Government Issued Birth Certificate, Government Issued Marriage Certificate, and Federal Tax Return Issued Within Last 2 Years OR
- Government Issued Birth Certificate, Notarized Affidavit of Common Law Marriage, Proof of Joint Ownership Issued Within Last 6 Months, and Federal Tax Return Issued Within Last 2 Years

Qualified Medical Support Order

Age Requirement: Under 26

Qualified Medical Child Support Order (ordered for the employee)

Document Options for Verifying Eligibility:

- Qualified Medical Child Support Order