

2024 Employee Benefits Open Enrollment

November 13-27, 2023



ARISTOCRAT™



Agenda

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Open Enrollment 2024

Open Enrollment is from November 13 – November 27, 2023.

During Open Enrollment, you can:

- Add, change, remove dependents from your coverage
- Enroll or waive coverage
- Make changes to existing benefits
- Re-enroll in the FSA plan
- Elect annual contributions to your HSA (those enrolled on Aetna HDHP)

Open Enrollment is **PASSIVE** this year. Current elections will roll over unless you actively change your plan(s) or waive. Re-enrollment in the HSA and FSA plans are **MANDATORY**. FSA and HSA elections will not rollover. All changes to benefits must occur by November 27, 2023 to have your desired benefits in 2024.

All benefit changes will be effective January 1, 2024. They will remain in effect through December 31, 2024, unless you experience a qualified life event during the year.

What's new for 2024

- Medical & Dental premium increases
- Increased HSA maximums
- Health Advocate has been replaced with 'My Benefits Champion'

Eligible Players

Who can enroll in benefits?

- Employees regularly working at least 30 hours / week
- Legal spouse or domestic partner (DP)
- Children under the age of 26

When can you enroll?

- **During annual Open Enrollment November 13 – 27, 2023**
- Within 30 days of an IRS Qualifying Life Event such as:
 - Change in marital status
 - Birth or adoption of child
 - Death of a dependent
 - You or your spouse's/domestic partner's loss or gain of coverage



Medical Coverage

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Choose which medical plan fits you and your family's needs best, starting with reviewing Aetna's different plans.

Aetna HMO (Aetna Select)

- In-network coverage only
- 100% preventative services covered
- Referrals required
- Primary Care Physician assignment required

Aetna HDHP

- In-network and out-of-network coverage
- 100% preventative services covered
- No referrals required
- High-Deductible Health Plan compatible with Health Savings Account

Aetna Low & High Deductible PPO

- In-network and out-of-network coverage
- 100% preventative services covered
- No referrals required
- Higher levels of coverage, Higher paycheck expense

Medical Plan Design



Key Medical Benefits	Aetna HMO (Aetna Select)	Aetna HDHP		Aetna PPO High Deductible		Aetna PPO Low Deductible	
	In-Network Only	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Deductible (per calendar year)							
Individual / Family	None / None	\$2,000/\$4,000	\$4,000/\$8,000	\$1,500/\$3,750	\$3,000 / \$6,000	\$500 / \$1,250	\$1,500 / \$2,500
Out-of-Pocket Maximum (per calendar year)							
Individual / Family	\$3,000/\$6,000	\$5,000/\$10,000	\$10,000/\$20,000	\$3,200 / \$6,400	\$8,000 / \$16,000	\$3,500 / \$7,000	\$7,000 / \$14,000
Aristocrat Technologies's Contribution to Your Health Savings Account (HSA) (per calendar year; prorated for new hires/newly eligible)							
Individual / w/ Dependent(s)	N/A	\$1,000/\$2,000		N/A		N/A	
Covered Services							
Office Visits (physician/specialist)	\$20/\$40 Copay	20% After Deductible	40% After Deductible	\$25/\$50 Copay	50% After Deductible	\$15/\$30 Copay	40% After Deductible
Virtual Visits	No Charge via Teledoc	No Charge After Deductible	40% After Deductible	No Charge via Teledoc	50% After Deductible	No Charge via Teledoc	40% After Deductible
Routine Preventive Care	No charge	No charge	40% After Deductible	No charge	50% After Deductible	No charge	40% After Deductible
Outpatient Diagnostic (lab/X-ray)	Labs No Charge, X-ray \$25	20% After Deductible	40% After Deductible	20% After Deductible	50% After Deductible	20% After Deductible	40% After Deductible
Complex Imaging	\$50 Copay	20% After Deductible	40% After Deductible	20% After Deductible	50% After Deductible	20% After Deductible	40% After Deductible
Chiropractic	\$50 Copay	20% After Deductible	40% After Deductible	20% After Deductible	50% After Deductible	20% After Deductible	40% After Deductible
Ambulance	\$50 Copay	20% After Deductible	40% after Deductible	\$250 Copay		\$150 Copay	
Emergency Room	\$200 Copay	20% After Deductible		\$250 Copay		\$150 Copay	
Urgent Care Facility	\$25	20% After Deductible	40% After Deductible	\$75	50% After Deductible	\$50	40% After Deductible
Inpatient Hospital Stay	\$300 per day, Max 3 Days	20% After Deductible	40% After Deductible	20% After Deductible	50% After Deductible	20% After Deductible	40% After Deductible
Outpatient Surgery	\$250	20% After Deductible	40% After Deductible	20% After Deductible	50% After Deductible	20% After Deductible	40% After Deductible

Pharmacy Plan Design



Pharmacy benefits are managed through Express Scripts, Inc. You will receive a separate ID card for prescription benefits that should be provided to your pharmacy. **Prescription benefits are not provided through the Aetna medical plan.** For additional information on your pharmacy benefits, please review the documents on the microsite.

Pharmacy Benefits Tiers 1, 2, and 3	Aetna HMO (Aetna Select)	Aetna HDHP		Aetna PPO High Deductible		Aetna PPO Low Deductible	
	In-Network Only	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Retail Pharmacy (30-day supply)	\$10/\$35/\$60	\$10/\$35/\$60	\$10/\$35/\$60 + 20%	\$15/\$35/\$60	\$15/\$35/\$60 + 20%	\$10/\$30/\$50	\$10/\$30/\$50 + 40%
Mail Order (90-day supply)	\$25/\$87.50/ \$150	\$25/\$87.50/ \$150	\$25/\$87.50/ \$150 + 20%	\$30/\$87.50/ \$150	\$30/\$87.50/ \$150 + 20%	\$25/\$75/\$125	\$25/\$75/ \$125 + 40%

Certain preventative medications on the HDHP plan such as asthma, cholesterol, and blood pressure prescriptions, are covered via copay without first meeting the medical deductible.

Medical Plan Costs (Bi-weekly)

Coverage Level	Aetna			
	Aetna HDHP	Aetna HMO (Aetna Select)	Aetna High Deductible PPO	Aetna Low Deductible PPO
Employee Only	\$0.00	\$21.54	\$56.22	\$85.59
Employee and Spouse	\$71.73	\$106.19	\$130.42	\$248.20
Employee and Child(ren)	\$53.71	\$81.84	\$104.43	\$162.61
Family	\$94.30	\$137.94	\$190.51	\$261.04

Your HDHP plan contributions are lower than the other plans and will save you money! You can put those savings in your HSA, pay for healthcare expenses or just have extra money in your paycheck. Here are the yearly savings for HDHP vs. the other plans.

	Annual Savings when selecting the Aetna HDHP			
	Aetna HDHP	Aetna HMO (Aetna Select)	Aetna High Deductible PPO	Aetna Low Deductible PPO
Employee Only	\$0	-\$560.04	-\$1,461.72	-\$2,225.34
Family	\$2,451.80	-\$1,134.64	-\$2,501.46	-\$4,335.24

Opening your HSA Account

HSA Bank administers your HSA account should you choose to enroll in the HDHP.

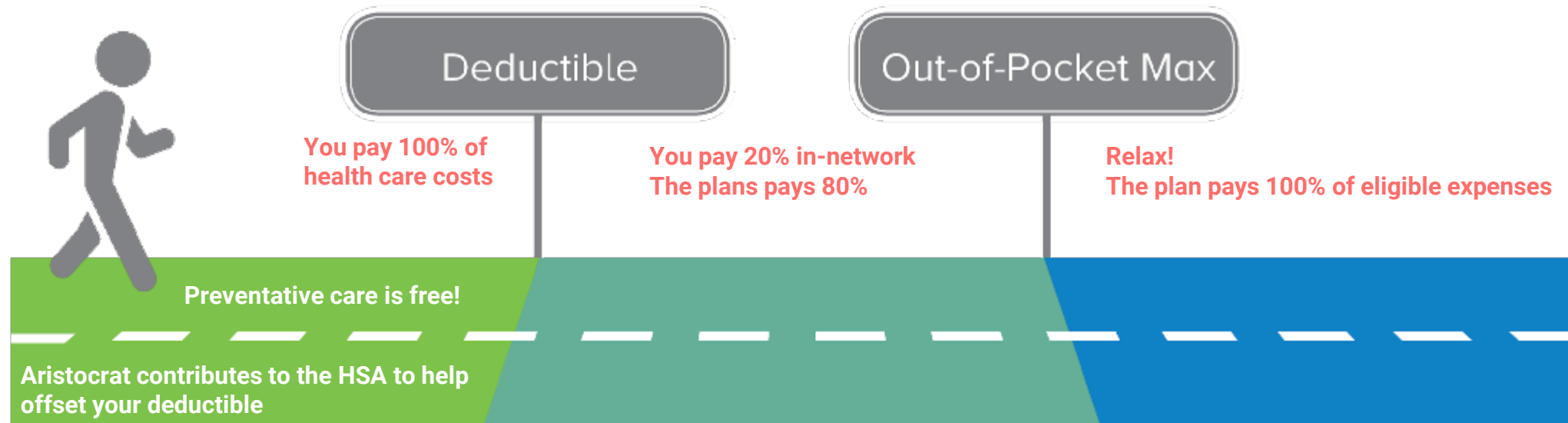
Information is provided to HSA Bank through Workday, who performs a quick identity verification.

If the verification fails, HSA Bank will reach out directly to obtain needed information.



How the HDHP plan with HSA Works

You can use the money in your HSA for your share of expenses at any time. Aristocrat Technologies contributes to your HSA: \$1,000 for employee and \$2,000 for employees + dependent(s)



Use Voya voluntary accident, hospital indemnity and critical illness benefits to supplement your HSA dollars and cover medical costs at a combined, lower paycheck cost than the PPO plans! These supplemental plans pay cash directly to you!

HSA Considerations

Eligibility

- Must be covered under a qualified high deductible health plan (HDHP) (Our Aetna HDHP plan qualifies as an HDHP)
- May not also be covered by any other health plan (example, spouse)
- Are not enrolled in Medicare
- May not be claimed as a dependent on another person's tax return
- Cannot be enrolled in a Healthcare FSA

HSA Administration

- Administrator of HSA Accounts is HSA Bank
- Medical, dental, and vision, COBRA Premiums, and private medical plans are allowable expenses for HSA submission
- Participants will receive a debit card
- You can participate in investment funds once there is a minimum balance of \$1,000

2024 IRS Contribution Limit

- IRS Contribution Limits: \$4,150 Individual /\$8,300 Family
- If you, and/or your spouse, are over the age of 55 and not enrolled in Medicare, you can make a catch-up contribution of \$1,000
- Employees may change elections during the year
- Unused funds roll over from year-to-year (participant owns the account)

Taxes

- Contributions can be done on a pre-tax basis through payroll (State taxes will apply where applicable)
- Individual contributions can be deducted from gross earnings
- Employer contributions not taxable to employees except in CA and NJ
- Contributions and interest grow tax free
- Distributions are tax free if used for qualified medical expenses
- Non-qualified expenses taxed as ordinary income + 20% penalty
- At age 65, distributions for non-qualified expenses are taxed as ordinary income only

HSA Advantages



HSA Fund Health Care Needs

The HSA fund can be used for future medical needs and toward the plan's annual deductible and out-of-pocket maximum.



HSA are Flexible

You can change contributions at any time throughout the year. You decide when to use your HSA funds to pay for qualified health related expenses. The HSA moves with you when you change medical plans, change employers or retire.



HSA Can Cover You in Retirement

Your HSA funds can be used in retirement for eligible health related expenses, including Medicare expenses.



No "use it or lose it!"

That's right, unused funds roll over each year. Unused funds can also grow through interest and investment earnings and can be "banked" for future health related expenses.



Triple Tax-Advantaged (federal & most state taxes)

No tax on contributions, accrued interest, or money you withdraw.

HSA dollars can be used to help pay deductible and any qualified medical expenses, including those not covered by health insurance, like dental and vision care. *Any funds you withdraw for non-qualified medical expenses **will** be taxed at your income tax rate, plus 20% tax penalty.*

To see list of eligible expenses, visit <https://hsastore.com/HSA-Eligibility-List.aspx>.

HSA Contributions

- Aristocrat will fund the Employer contribution biweekly and is pro-rated for employees who start later in the year.
- You may contribute pre-tax dollars into your HSA, up to the IRS limits, through payroll deductions.
- HSA contributions may be changed by employees throughout the year directly in Workday.
- Between yourself and Aristocrat, the maximum annual contribution for calendar year **2024** is:

Aetna HDHP Plan Annual Contribution Limits	Aristocrat	You	2024 IRS Maximum
Employee Only	\$1,000	\$3,150	\$4,150
Employee + Dependents	\$2,000	\$6,300	\$8,300

- *Participants aged 55 and older may also make a “catch-up” contribution of **up to \$1,000 additionally** each year.*

Medical Plan Cost Comparison – Low Healthcare Needs

Mary (Employee Only Enrollment)

- Mary is healthy and has low healthcare needs. She gets her annual physical and sometimes needs an antibiotic.
- Mary would save the most money by enrolling in the **Aetna HDHP** plan. She would save money on taxes by also contributing to her HSA.

Annual Costs	Aetna HMO (Aetna Select)	Aetna HDHP	Aetna High Deductible PPO	Aetna Low Deductible PPO
Medical plan payroll deductions	\$560.04	\$0	\$1,461.72	\$2,225.34
Routine preventive care exam (\$220)	Mary pays: \$0 Plan pays: \$220	Mary pays: \$0 Plan pays: \$220	Mary pays: \$0 Plan pays: \$220	Mary pays: \$0 Plan pays: \$220
Generic antibiotic Rx (\$10 for 30-day supply)	Mary pays: \$10	Mary pays \$10	Mary pays: \$15	Mary pays: \$10
Aristocrat Technologies HSA Contribution	N/A	-\$1000	N/A	N/A
Mary's total annual costs	\$570.04	\$0 (+990 in HSA)	\$1,450.20	\$2,235.34

Mary can also enroll in one of the **Voya Voluntary Plans** to protect herself against unforeseen medical expenses.

Medical Plan Cost Comparison – Dislocated Shoulder

Jane (Employee Only Enrollment)

- Jane is young and healthy but has an accident and dislocates her shoulder. She uses in-network providers for her MRI and emergency room visit.
- Jane would save the most money by enrolling in the Aetna HMO (Aetna Select) plan if she didn't have **Accident Plan** coverage.

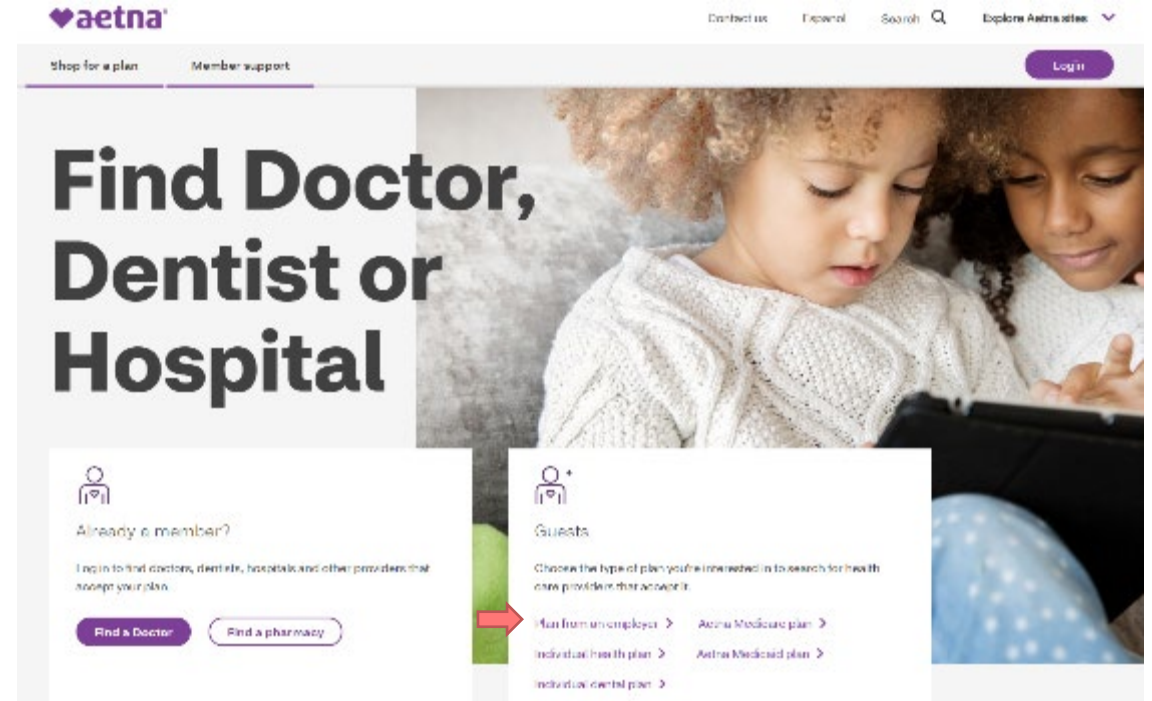
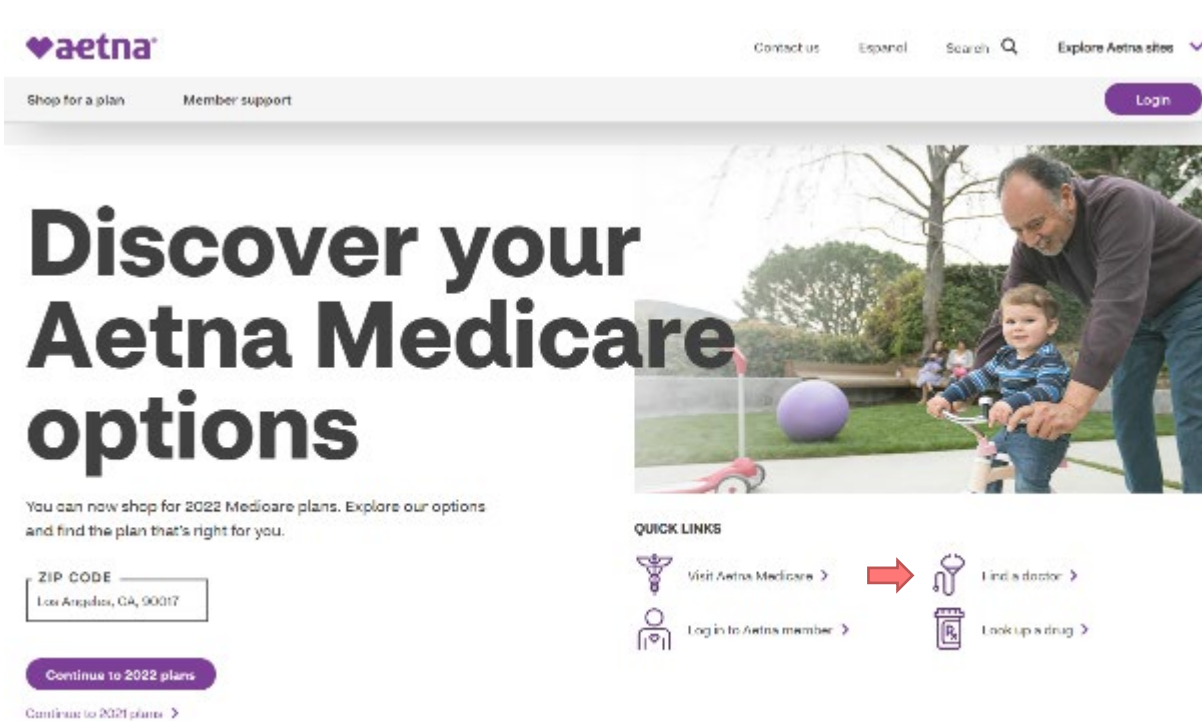
Annual Costs	Aetna HMO (Aetna Select)	Aetna HDHP	Aetna High Deductible PPO	Aetna Low Deductible PPO
Medical plan payroll deductions	\$560.04	\$0	\$1,461.72	\$2,225.34
Routine preventive care exam (\$220)	Jane pays: \$0 Plan pays: \$220	Jane pays: \$0 Plan pays: \$220	Jane pays: \$0 Plan pays: \$220	Jane pays: \$0 Plan pays: \$220
ER Visit with MRI (\$2,600 and \$500)	Jane pays: \$250 Plan pays \$2,850	Jane pays \$2,200 Plan pays \$900	Jane pays: \$750 Plan pays \$2,350	Jane pays: \$650 Plan pays \$2,450
Aristocrat Technologies HSA Contribution	N/A	-\$1000	N/A	N/A
Jane's total annual costs	\$810.04	\$1,200	\$2,211.72	\$2,875.34

Jane was interested in the HSA plan and enrolled in **Voya's Accident Plan** for a **low monthly premium of about \$6-\$12**. Jane used the lump sum (of up to \$4,000) that she receives from the **Voya Accident Plan** benefit to manage out-of-pocket costs and offset the HSA plan deductible. Now the HSA plan is her lowest-cost choice. If she contributes to her HSA, she'd save money on taxes which further reduces her HDHP PPO costs and provides savings for future medical expenses.

How to Find a Provider



1. Visit [aetna.com](https://www.aetna.com) to find a provider in the Aetna Network. 2. View as a **Guest** and choose the **Plan from an employer** link



How to Find a Provider



3. Enter your location (city, state, or zip code)
4. Select a plan by searching for the following networks:
 - HMO Plan
 - Aetna Select
 - PPO High/Low Deductible & HDHP
 - Open Choice POS II
5. Search by category
 - Medical Doctors and Specialists
 - Urgent Care and Walk-in Clinics
 - Hospitals
 - Pharmacy

You may also search for providers or facilities by common procedures and conditions.

Aetna HMO (Aetna Select) Plan Members: Make sure to find and save the NPI ID and provide this to Aetna. If a PCP is not chosen, a PCP will be automatically assigned to you.

Continue as a guest

Please enter your **home** location (zip, city, county or state) to access providers specific to your plan benefits.

Enter location here

Traveling? You can change your location after you select your plan

Look within

25 Miles

0 Miles 100 Miles

Search

Select a Plan

Enter plan name to narrow list below, e.g. Managed Choice

Find what you need by category

- Medical Doctors & Specialists**
Primary care physicians (PCPs), pediatricians, cardiologists, OB/GYNs, others
- Hospitals & Facilities**
Hospitals, physical therapy centers, nursing facilities, dialysis centers, others
- Urgent Care**
A type of facility focused on the delivery of urgent care outside of an emergency room
- Walk-in Clinics**
A facility that accepts patients on a walk-in basis and with no appointment required
- Pharmacy**
Search for pharmacies by name or location

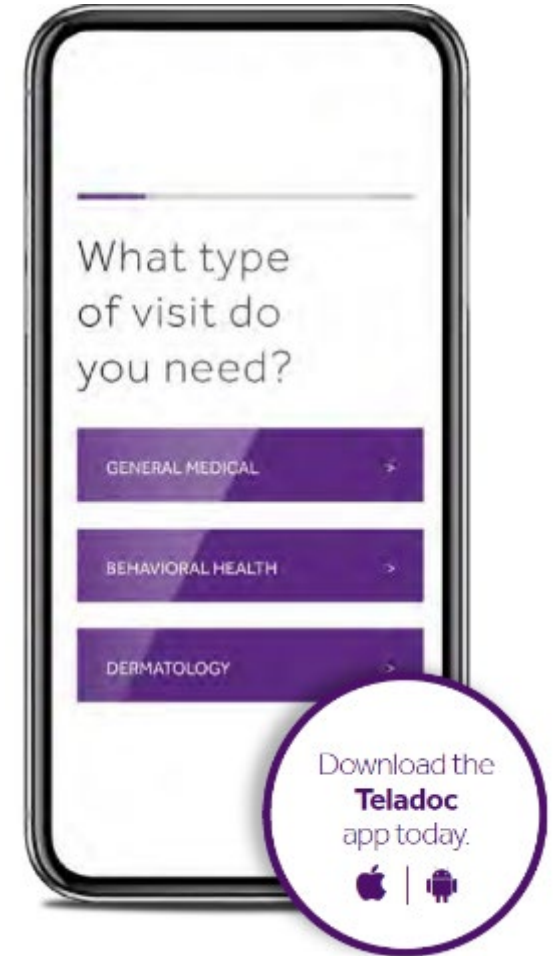
Private video visits with doctors and mental health professionals

- See **board-certified doctors 24/7** for conditions like a cold, flu, fever, allergies, sinus infection, or other common health issues
- Visit **licensed therapists** or psychiatrists 7 days a week to get help with anxiety, depression, grief, panic attacks, and more for members aged 13 and over
- Consult **dermatologists** and upload photos to get a treatment plan for skin conditions like acne, eczema, psoriasis and more within two business days
- Have a leading **specialist** evaluate an existing condition, give guidance on your medical concerns, or help find local providers for in-person care

To open an account and log in today, call **(855) TELADOC (835-2362)** or visit teladoc.com/Aetna

Costs for doctor visits are for each plan are:

- Aetna HMO (Aetna Select) and PPO Plans have a \$0 Copay
- Aetna HDHP – Full cost of visit until deductible is met, then 100%



24-Hour Nurseline



The 24-Hour Nurseline can provide helpful information and possibly prevent an unneeded trip to the doctor's office.

Talk to registered nurses any time day or night who can:

- Provide information on a wide range of health and wellness topics and help you make better health care decisions
- Help answer questions about a medical test or procedure
- Help prepare you for a visit to your doctor
- Provide emails with links to videos that relate to your question or topic

Call **(800) 556-1555** to speak with a nurse 24 hours, 7 days a week.

Do you have questions about your plan? Aetna Concierge can help!

Your personal health care assistant can help you with:

- Answering questions about your coverage
- Finding health care solutions and network providers that fit your medical needs
- Selecting a doctor
- Assisting you in scheduling appointments
- Planning for upcoming treatments
- Getting answers about a diagnosis
- Showing you how to use our online tools to make the decisions that are right for you

Aetna's Concierge program is available Monday through Friday from **8 a.m. to 6 p.m. (PST)** at **(866) 831-0016**.

Dental & Vision Coverage



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Dental Plan Comparison



Key Dental Benefits	Delta Dental				
	Dental HMO	Dental PPO 1000		Dental PPO 2000	
	In Network Only	In Network	Out of Network	In Network	Out of Network
	Deductible				
Individual / Family	None	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150
	Annual Benefit Maximum				
Per Individual	None	\$1,000	\$1,000	\$2,000	\$2,000
	Covered Services				
Preventative Services	No charge	No charge	No charge	No charge	No charge
Restorative (Fillings)	See Schedule	20% after Deductible	20% after Deductible	10% after Deductible	10% after Deductible
Periodontics (Scaling & Root Planing)	See Schedule	20% after Deductible	20% after Deductible	10% after Deductible	10% after Deductible
Endodontics (Root Canal)	See Schedule	20% after Deductible	20% after Deductible	10% after Deductible	10% after Deductible
Oral Surgery (Simple Extraction)	See Schedule	20% after Deductible	20% after Deductible	10% after Deductible	10% after Deductible
Major Services (Crowns, Bridges and Dentures)	See Schedule	50% after Deductible	50% after Deductible	40% after Deductible	40% after Deductible
	Orthodontia Maximum				
Orthodontia Coverage	See Schedule	Not Covered	Not Covered	50%	50%
Orthodontia Lifetime Maximum Adults & Child(ren) up to age 19	\$1,900 Maximum Adult, \$1,700 Maximum Child	N/A	N/A	\$2,000	\$2,000

How to Find a Provider – Delta Dental



Visit <https://www.deltadental.com/us/en/member/find-a-dentist.html> to find a provider via location or Zip Code.

Looking for a dentist?

Find in-network dentists in your area by using your current location or entering a ZIP code manually.

Delta Dental Patient Direct coverage are not available in all 50 states.

Specialty:
 ✓

Plan Type:
 ✓

Dentist last name:

Search by current location:
 Yes No

DHMO members
will select
DeltaCare USA

DPPO members
will select Delta
Dental PPO

Looking for a dentist?

Find in-network dentists in your area by using your current location or entering a ZIP code manually.

Delta Dental Patient Direct coverage are not available in all 50 states.

Specialty:
 ✓

Plan Type:
 ✓

Dentist last name:

Search by current location:
 Yes No

Vision Plan

Key Vision Benefits	VSP			
	VSP 130		VSP 150 & EasyChoice	
	In Network	Out of Network	In Network	Out of Network
Exams				
Exam	\$25 Copay	Up to \$45	\$10 Copay	Up to \$45
Materials	\$25 Copay	N/A	\$10 Copay	N/A
Materials				
Single Lens	Covered After Materials Copay	Up to \$30	Covered After Materials Copay	Up to \$30
Bifocal Lens	Covered After Materials Copay	Up to \$50	Covered After Materials Copay	Up to \$50
Trifocal Lens	Covered After Materials Copay	Up to \$65	Covered After Materials Copay	Up to \$65
Frames Allowance	\$130	Up to \$70	\$150	Up to \$70
Contact Lens Allowance	\$130	Up to \$105	\$150	Up to \$105
Schedule in Months Exam/Lens/Frames	12/12/24		12/12/12	

The VSP EasyChoice Plan offers the same coverage as the VSP 150, but also allows employees to upgrade one vision benefit per year to customize their plan. Upgrade options include:

- \$250 frame allowance,
- Anti-reflective lenses,
- Progressive lenses,
- Photochromatic lenses, or
- Contacts in lieu of glasses with an allowance of up to \$200.

Important Note: Going out of network requires you to pay the provider up-front and file a claim form up to the reimbursable amounts shown

How to Find a Provider – VSP

Visit <https://www.vsp.com/eye-doctor> to find a provider via location, office, or name.



FIND A DOCTOR

BENEFITS

OFFERS

EYEWEAR AND WELLNESS

PLAN OPTIONS

SHOP

Find an Eye Doctor

To ensure you see an in-network eye doctor for your plan,

[Create an Account](#) or [Log In](#) before you search.

You'll get more and save more in-network!

LOCATION

OFFICE

DOCTOR

1 ADVANCED SEARCH +

Zip

OR

Street Address (optional)

City

State



Dental & Vision Plan Costs (Bi-weekly)

Coverage Level	Delta Dental		
	Dental HMO	Dental PPO 1000	Dental PPO 2000
Employee Only	\$0.00	\$5.13	\$13.73
Employee and Spouse/DP	\$0.00	\$10.94	\$24.42
Employee and Child(ren)	\$0.00	\$17.68	\$29.39
Family	\$0.00	\$26.20	\$44.12

Coverage Level	VSP Vision		
	VSP 130	VSP 150	VSP EasyChoice
Employee Only	\$0.00	\$1.72	\$2.82
Employee and Spouse/DP	\$0.00	\$3.48	\$5.73
Employee and Child(ren)	\$0.00	\$3.72	\$6.13
Family	\$0.00	\$5.98	\$9.84



Voluntary Supplemental Health Benefits



Accident Insurance

Accident insurance provided by Voya.

Accident insurance provides coverage for specific injuries and treatments resulting from a covered accident. Benefits are paid directly to you in a lump sum cash payment, you choose how to use them, such as paying medical bills, subsidizing lost income, or covering everyday expenses.

Common covered benefits:

- Emergency room visit
- Lacerations
- Fractures/Dislocations
- Ambulance
- Doctor follow-up visits
- Hospital admission
- Surgery
- Physical therapy
- Diagnostic imaging

Example Benefits	Low Plan	High Plan
Transportation	\$650	\$840
Emergency Room Care	\$200	\$300
Laceration – Suture up to 2”	\$50	\$120



Critical Illness Insurance



Critical Illness insurance provided by Voya.

Critical Illness insurance pays you a lump sum benefit if you or a covered family member are diagnosed with a covered illness or condition. The benefit provides you peace of mind so you can focus on getting better.

What can Critical Illness insurance pay for?

- Medical expenses, such as copays, deductibles or coinsurance
- Lost income
- Everyday expenses such as groceries and utilities
- Alternative treatments
- Lodging and travel to a specialist

What are examples of covered illnesses or conditions?

- Cancer
- Heart attack
- Stroke
- Alzheimer's
- Kidney failure

Coverage Amounts	
Employee	\$10,000 or \$20,000
Spouse	\$5,000 or \$10,000
Child(ren)	50% of your coverage amount

Health Screening Benefit
\$50 per year per covered person

Benefits are not payable for any critical illness resulting from a pre-existing condition if the date of diagnosis for the critical illness occurs during the first 6 months following the insured person's coverage effective date (including increases). Pre - existing condition means a sickness, injury or physical condition which, within the 3 month period prior to the insured person's coverage effective date, resulted in the insured person receiving medical treatment, consultation, care or services (including diagnostic measures).

Hospital Indemnity Insurance



Hospital Indemnity insurance provided by Voya.

Hospital Indemnity insurance pays out cash to you or your family to offset both medical and non-medical bills resulting from a hospital stay. The benefit provides extra coverage if you or covered family members are admitted to the hospital.

The cash benefits can be used to pay for services or expenses your traditional medical plan might not cover. You file the claims and since benefits are paid directly to you, you choose how to use them. Here are a few examples:

- Copayments
- Deductibles
- Transportation expenses
- Childcare
- Lodging expenses for a companion
- Lost income

Voluntary Supplemental Health Costs (Monthly)

Accident Coverage Level	Low Plan	High Plan
Employee Only	\$6.02	\$11.82
Employee and Spouse/DP	\$10.20	\$19.97
Employee and Child(ren)	\$12.04	\$23.68
Family	\$16.22	\$31.73

Coverage Level	Hospital Indemnity	
	Low Plan	High Plan
Employee Only	\$9.14	\$18.27
Employee and Spouse/DP	\$23.88	\$47.75
Employee and Child(ren)	\$17.25	\$34.49
Family	\$31.99	\$63.97

Critical Illness coverage is based on age and coverage level. For more information on pricing for Critical Illness coverage, please see amounts in Workday



Flexible Spending Accounts

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Healthcare FSA



Healthcare Flexible Spending Account through HSA Bank.

You cannot participate in the Healthcare FSA if you plan on participating in the HDHP plan. Anyone enrolling in the HDHP plan in 2024 must spend down their entire 2023 Healthcare FSA balance by December 31, 2023.

For 2024, you may contribute up to \$3,050 to your Healthcare FSA to cover qualified healthcare expenses incurred by you, your spouse, and your dependent children.

Qualified expenses include:

- Copays, including prescription drug copays
- Deductibles and Coinsurance
- Dental care
- Vision care
- Menstrual care products
- Over-The-Counter (OTC) medications
- Personal Protective Equipment (PPE)

You may carryover up to \$610 from your 2024 Healthcare FSA to the next plan year.

IMPORTANT DEADLINE: You have until March 30, 2024 to seek reimbursement for healthcare expenses incurred during the plan year (from January 1, 2023 to December 31, 2023).

Dependent Care FSA



Dependent Care Flexible Spending Account through HSA Bank.

For 2024, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns).

Qualified expenses include:

- Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

IMPORTANT DEADLINE: You have until March 30, 2024 to seek reimbursement for dependent care expenses incurred during the plan year (from January 1, 2023 to December 31, 2023).

Both of our FSA plans allow pre-tax contributions as long as the plan stays in compliance with IRS regulations. We test the plan each year to stay in compliance.

Life and Disability Coverage



ARISTOCRAT

Basic Life and AD&D



Basic Life and AD&D provided by Mutual of Omaha. **This benefit is 100% paid for by Aristocrat Technologies.**

Basic Life insurance provides your named beneficiary(ies) with a benefit in the event of your death.

Basic Accidental Death & Dismemberment (AD&D) provides specified benefits to you in the event a covered accident causes dismemberment, such as the loss of a hand, foot, or eye. In the event your death occurs due to a covered accident, both the Basic Life and AD&D benefits are payable.

Benefit amount:

- 1x Annual Salary up to \$500,000

Important Note: Be sure to designate your beneficiary(ies) in Workday.

Optional Life and AD&D



Optional Life and AD&D provided by Mutual of Omaha. You may purchase additional Life and AD&D coverage for yourself, your spouse/DP, and your child(ren).

Guaranteed Issue is only available upon initial eligibility for benefits. Amounts over Guaranteed Issue (GI) require Evidence of Insurability (EOI) which must be completed and submitted directly to Mutual of Omaha within 60 days of election of this benefit.

Benefit Options

Employee	You may purchase coverage in an amount from \$10,000 to \$1,000,000 or five (5) times your base salary whichever is less; Guaranteed Issue Amount: \$500,000
Spouse/DP	You may purchase coverage for your spouse in increments of \$5,000 up to 100% of employee's benefit amount not to exceed \$250,000; Guaranteed Issue Amount: \$50,000
Child(ren)	You may purchase coverage for your child(ren) for \$5,000 or \$10,000; All Child(ren) amounts are Guaranteed Issue

Coverage will be available for dependents who are not disabled or hospitalized at time of enrollment

Short-Term Disability

- Offered through Mutual of Omaha. **This benefit is 100% paid for by Aristocrat Technologies.**
- Provides income protection **in addition** to what you receive through state disability programs if you are sick or hurt outside of employment. You must still apply for state disability separately. New Jersey employees do not qualify.
- Benefits will begin upon the 8th day of disability and run for 25 weeks or until you are no longer disabled, whichever is less.
 - This waiting period is waived, and benefits begin day 0, if admitted to a hospital for injury or sickness that requires 24+ hours of hospital confinement.
 - This waiver also encompasses childbirth under the 24+ hours of hospital confinement provision

Benefits	
Benefit Percentage	66.67%
Maximum Weekly Benefit	\$2,500

Long-Term Disability



Long-Term Disability provided by Mutual of Omaha. **This benefit is 100% paid for by Aristocrat Technologies.**

Long-Term Disability coverage acts as income replacement to protect you and your family in case of a disability that keeps you from work and helps you continue with some level of earnings.

- The benefit is 60% of your monthly earnings up to a monthly maximum.
- Monthly Benefit maximums is \$10,000
- The benefit starts after 180 days of disability and can last as long as you remain legally disabled or up to Social Security Net Retirement Age (SSNRA) or as permitted on this chart.

Permitted Length of Claim	
61 or less	SSNRA or 3 years and 6 months, whichever is longest
62	SSNRA or 3 years and 6 months, whichever is longer
63	SSNRA or 3 years, whichever is longer
64	SSNRA or 2 years and 6 months, whichever is longer
65	2 years
66	1 year and 9 months
67	1 year and 6 months
68	1 year and 3 months
69 or older	1 year

Other Valuable Benefits

ARISTOCRAT



Caregiving Support



Wellthy Plan Benefits:

- Wellthy matches you to a dedicated Care Coordinator who can help you with the administrative tasks of caring for loved ones (including yourself), for things like:
 - Aging/Childcare
 - Health Conditions
 - Mental Health
 - Veterans Support
 - Financial Hardships
 - Special Needs

Visit join.wellthy.com/aristocrat
(access code: aristocrat23)

Employee Assistance Program (EAP) - Lyra



Aristocrat Technologies understands that you and your family members might experience a variety of personal or work-related challenges.

The EAP is a FREE and completely confidential employer sponsored program available to you and your family to help with any of the following issues and many more:

Family	Health	Life
Marital Concerns Family Concerns Relationships Grief	General health resources Addiction information Mental health support Depression	Financial information Stress resource center Debt Management

Other EAP Benefits:

- Up to twelve in-person sessions with a counselor per issue, per year, per individual
- Unlimited toll-free phone access and online resources 24 hours a day 7 days a week

To learn more about the services and resources available through the Lyra EAP, call 877-248-1047 or visit <http://aristocrat.lyrahealth.com>.

Voluntary Legal Services



ARAG Plan Benefits:

- Unlimited Legal consultation and advice
- Legal document review
- Letter/phone calls made on your behalf
- Traffic Tickets
- Will preparation, Living Will & Healthcare Directive included
- 24/7 emergency legal access
- Divorce, Name Change, & Adoption after 90 days
- And more.....



Work with a network attorney and attorney fees are **100% paid-in-full** for most covered matters.



Save an average of **\$2,065** per legal matter.*



Access more than **14,000 attorneys** within ARAG's network with an average of 20 years of experience.



Address your covered legal situations with a network attorney who is only a **phone call away for legal help and representation.**



Use DIY Docs® to create any of **350+ legally valid documents**, including state-specific templates.

For more information, please call an ARAG Representative at 800-247-4184, or visit www.ARAGlegalcenter.com
Access Code: 18209ARI

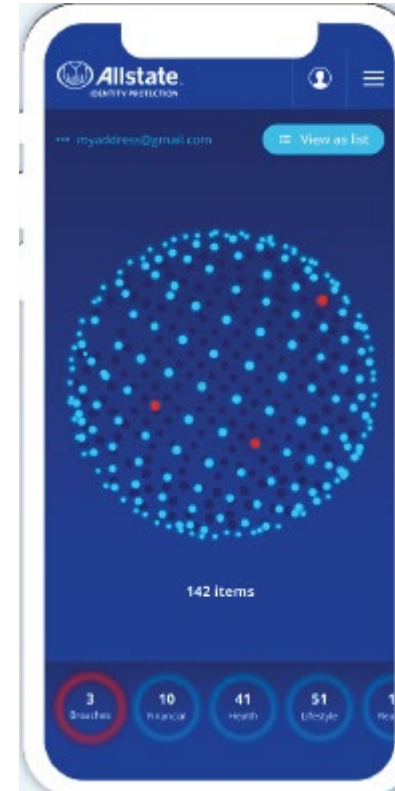
Monthly Rate	ID Theft
Family	\$21.78

Voluntary Identity Theft Protection



Allstate Plan Benefits:

- 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")



Monthly Rate	ID Theft
Individual	\$8.95
Family	\$16.95

For more information, please call an Allstate Representative at 800-789-2720

Pet Insurance – Nationwide



Pet Insurance benefit, offered by Nationwide, covers dogs, cats, birds and some other exotic animals!

Some of the covered benefits for your pet may include:

- Allergies
- Diabetes
- Cut or bite wounds
- Infections
- Heart failure
- Skin cancer and more

You may enroll your pet at any time during the year.

Find plans online and enroll at www.petinsurance.com/aristocrat or by phone at (877) 738-7874. You will be billed directly by Nationwide and not through payroll deduction.



Veterinary Discount Program

Pet Benefit Solutions



What is Pet Assure?

Pet Assure is a veterinary discount plan.

Get savings on your pet's veterinary care, including:

- Wellness Visits Dental Cleanings
- Dental Exams and X-Rays Allergy Treatments
- Sick Visits Cancer Care
- Emergency Care Hospitalization
- And all other in-house medical services

Compare to Insurance

Pet Assure can be used as an alternative or addition to pet insurance.

- Covers all pets, even those with pre-existing conditions
- One plan can cover all of the pets in your household
- No exclusions
- No claim forms or waiting for reimbursements
- No waiting periods; can be used instantly
- No usage limitations



For more information, please call
a Pet Benefit Solutions Representative at 800-
891-2565, or visit
www.petbenefits.com/aristocrat

Retirement Plan

The 401(k) plan is administered by Charles Schwab.

You're automatically enrolled in the Aristocrat 401(k) plan on the first day of the month following 30 days of employment if you are at least 18 years of age. Once eligible, the company matches 100% up to the first 4% of your contributions. If you're age 50 or older, you're allowed to make catch-up contributions up to annual limits. Contact Charles Schwab directly to elect a catch-up contribution deferral percentage as this is separate from your standard 401(k) deferral.

You may choose to have your personal contributions tax-deferred, taken after tax by enrolling in a Roth 401(k), or you can elect to contribute to both. Personal contributions are tax-deferred by default and are added to your account through payroll deductions. You can contribute up to 100% of your eligible earnings up to IRS limits. Select from a wide range of investment options to help you grow your account balance. You are always 100% vested in your contributions. Employer match contributions are 100% vested after 2 years.



For more information, please call
a Charles Schwab Representative at 800-724-
7526, or visit www.workplace.schwab.com

Open Enrollment Reminders

Open Enrollment is **PASSIVE** this year. Current elections will roll over unless you actively change your plan(s) or waive. Re-enrollment in the HSA and FSA plans are MANDATORY. FSA and HSA elections will not rollover. All changes to benefits must occur by November 27 to have your desired benefits in 2024.

All benefit changes will be effective January 1, 2024. They will remain in effect through December 31, 2024, unless you experience a qualified life event during the year.

To complete Open Enrollment:

- Log into Workday
- Select “Open Enrollment” or “New Hire” task in your Workday Inbox.
- Select “Elect” or “Waive” for each election choice and modify coverage levels and enrolled dependents, as needed.
- Review and submit your elections
- Print or save a copy of your confirmation page for your records.



Questions?



MY BENEFITS CHAMPION FOR ARISTOCRAT TECHNOLOGIES

- Understanding your benefits
- Resolving claims issues
- Finding a provider
- Getting a new ID card
- Determining eligibility
- Defining QLEs
- Obtaining pre-authorizations
- Researching wellness options
- Demystifying Medicare
- **Free for you and your household!**

PHONE:

855-OUR-CHAMP
(855-687-2426)

EMAIL:

champion@hubinternational.com

FAX:

(866) 667-2529

HOURS:

Monday - Friday 7 a.m. to 5:30 p.m.
PST