



2023-2024 EMPLOYEE BENEFITS

A complete guide to understanding your Superlo Foods employee benefits program





CONTACTS

Program	Provider	Phone	Website/Email
Medical	BlueCross BlueShield of Tennessee	800-565-9140	www.bcbst.com
Telemedicine	Teladoc	800-835-2362	www.teladoc.com
Dental	BlueCross BlueShield of Tennessee	800-565-9140	www.bcbst.com
Basic Life and AD&D Insurance	Lincoln Financial Group	800-420-8453	www.lvc.lfg.com
401(k) Program	Principal	800-547-7754	www.principal.com
Benefits Assistance			
Human Resources	JR Stepherson	901-794-0058	jr@superlofoods.com

Need Health Plan Details?

We offer two health care options. Ask Human Resources for a Summary of Benefits and Coverage (SBC) to look at all of the plan details.

Notices

To view your required notices, go to www.superlofoods.com, scroll to the bottom of the page, and select the employee portal.

Log in using the username: **Superlo**

Enter the password: **shoplocal**

Once you've logged in, select **Insurance Related Documents and Notices**.



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Welcome

It is almost time for you to enroll in or make changes to your 2023-2024 benefits. Stepherson's Superlo Foods is proud to offer an ample benefits package that gives you peace of mind, coverage when you need it and the chance to live happy and well.

Read this guide to know what choices you have and decide what is best for you and your family. You can only enroll for or make changes to your benefits during Open Enrollment. After Open Enrollment, you may only make changes if you have a Qualifying Life Event. These benefits start **December 1, 2023** and end **November 30, 2024**.





ELIGIBILITY & EMPLOYEE PORTAL

You may enroll for benefits if you are a regular, full-time employee.

Your benefits will start on the first of the month following your date of hire. You may also enroll your family if they are eligible for coverage. Your cost for benefits is based on the coverage you pick and who you enroll. If you cover your spouse or child(ren), you must select and be on the same plans.

Eligible Dependents

- ◆ Your legal spouse
- ◆ Children under the age of 26, no matter if a student, dependent or married
- ◆ Children over the age of 26 who fully depend on you for support due to a mental or physical disability and who you report as such on your tax return

Qualifying Life Events

Once you pick your benefits, they will not change during the plan year. You may only change benefits if you have a Qualifying Life Event (e.g., you marry, divorce, have a baby, lose coverage, etc.). You must tell Human Resources right away if any of these events occur. If you miss the deadline, you will not be able to make changes. Ask Human Resources for a list of Qualifying Events and the date you must report a change.

Employee Navigator Instructions

To view your benefits, go to <https://www.employeenavigator.com>. First time users, follow steps 1-4.

1. If this is your first time to log in, click on the **New User Registration** link. Once you register, you will use your username and password to log in.
2. Enter your personal information and Company Identifier of **Stephersons** and click **Next**.
3. Create a username (work email address recommended) and password, then check the **I agree to terms and conditions** box before you click **Finish**.
4. If you used an email address as your username, you will receive a validation email to that address. You may now log in to the system.

Employee Portal

Superlo Foods is proud to announce our Employee Portal. Go to www.superlofoods.com, your user name is **superloportal** and your password is **shoplocal**. Once logged in you find the following information.

- ◆ Employee Handbook
- ◆ Insurance Related Documents and Notices

We've also provided easy access to the following websites:

- ◆ Blue Cross Blue Shield (BCBS) website to include the BCBS Machine readable file
- ◆ Church Health Center website
- ◆ Paycheck Website
- ◆ Principal 401(k)/ESOP
- ◆ Southern Security Federal Credit Union



MEDICAL COVERAGE

You have two health plan choices by **BlueCross BlueShield of Tennessee.**

- ◆ **Base Plan** – This plan is a PPO
- ◆ **Buy-Up Plan** – This Plan is a PPO

Find a Network Provider

Visit www.bcbst.com or call **800-565-9140.**

Plan Name	Plan Type	How The Plan Works
Base Plan	Preferred provider organization (PPO) plan	<ul style="list-style-type: none"> • See any doctor or specialist when you need care • Get the most benefits and pay less for care when you see network doctors • Pay a copay for office visits, urgent care and prescriptions • Pay a higher Deductible
Buy-Up Plan	Preferred provider organization (PPO) plan	<ul style="list-style-type: none"> • See any doctor or specialist when you need care • Get the most benefits and pay less for care when you see network doctors • Pay a copay for office visits, urgent care and prescriptions



Note

When you elect Medical coverage you are automatically enrolled in Dental coverage. If you choose to decline Dental coverage this will not affect your rates.



MEDICAL COVERAGE

Medical Benefits Summary

	Base Plan		Buy-Up Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductible				
Individual	\$4,000	\$12,000	\$1,000	\$3,000
Family	\$8,000	\$24,000	\$2,000	\$6,000
Calendar Year Out-of-Pocket Maximum (includes deductible)				
Individual	\$6,600	\$19,800	\$3,000	\$9,000
Family	\$13,200	\$39,600	\$6,000	\$18,000
	You Pay		You Pay	
Preventive Care	\$0 copay	40% after deductible	\$0 copay	40% after deductible
Telemedicine	\$20 copay	40% after deductible	\$20 copay	40% after deductible
Primary Care Physician	\$20 copay	40% after deductible	\$20 copay	40% after deductible
Specialist	\$40 copay	40% after deductible	\$40 copay	40% after deductible
Urgent Care	\$50 copay	40% after deductible	\$50 copay	40% after deductible
Diagnostic X-ray and Lab	\$0 after deductible	40% after deductible	\$0 copay	40% after deductible
Complex Imaging (CT/PET scan, MRI)	\$0 after deductible	40% after deductible	20% after deductible	40% after deductible
Emergency Room <i>Copay waived if admitted</i>	\$300 copay		\$250 copay per visit	
Inpatient Hospital Services	\$0 after deductible	40% after deductible	20% after deductible	40% after deductible
Outpatient Services	\$0 after deductible	40% after deductible	20% after deductible	40% after deductible
Retail Pharmacy (up to a 30-day supply)				
Generic Drug	\$10 copay	40% after deductible	\$5 copay	40% after deductible
Preferred brand drug	\$35 copay	40% after deductible	\$35 copay	40% after deductible
Non-preferred brand drug	\$50 copay	40% after deductible	\$50 copay	40% after deductible
Specialty Drug	\$100 copay	Not Covered	\$100 copay	Not Covered
Mail Order Pharmacy (up to a 90-day supply)				
Generic Drug	\$20 copay	Not Covered	\$10 copay	Not Covered
Preferred brand drug	\$70 copay		\$70 copay	
Non-preferred brand drug	\$200 copay		\$100 copay	
Weekly Rates				
Employee	\$7.49		\$17.21	
Employee + Spouse	\$15.98		\$36.74	
Employee + Child(ren)	\$12.54		\$28.82	
Employee + Family	\$22.23		\$51.13	



Blue Access for Members (BAM)

BAM is your secure BlueCross BlueShield of Tennessee (BCBST) member website to:

- ◆ Check the status of your claims and your claim history
- ◆ Confirm which family members are covered under your plan
- ◆ View and print Explanation of Benefits (EOB) claims statements
- ◆ Locate in-network providers
- ◆ Request a new or replacement member ID card or print a temporary member ID card
- ◆ Go Digital and get access to claims, benefits and more

Consult the My Health tab for information on:

- ◆ Smoking Cessation
- ◆ Nutrition
- ◆ Fitness
- ◆ Obesity

To get started, log on to <https://www.bcbst.com>. Use the information on your BCBST ID card to complete the registration process.

BCBST Mobile App

You can go to your mobile device's App Store and download the BCBST mobile app. This app can help you stay organized and in control of your health — anytime, anywhere. Log in to:

- ◆ Track your account balances and deductibles
- ◆ View, fax or email ID card information
- ◆ Find doctors or pharmacies
- ◆ Refill your BCBST home delivery prescriptions and view order history
- ◆ View medication costs based on your plan and search for lower, cost-saving alternatives

Search BCBST in Google Play or the App store.

MEMPHIS Plan by Church Health

If you are part-time and do not qualify for medical benefits, the **MEMPHIS Plan** offers comprehensive health care for you at a price you can afford so you may stay healthy and live productive lives. Visit <https://churchhealth.org/memphis-plan> or call **901-272-7526**.





Your medical coverage offers telemedicine services through **Teladoc**. Connect anytime day or night with a board-certified doctor via your mobile device or computer for free or for the same or less cost than a visit to your regular physician.

When to Use Teladoc

While telemedicine does not replace your primary care physician, it is a convenient and cost-effective option when you need care and

- ◆ Have a non-emergency issue and are considering an after-hours health care clinic, urgent care clinic or emergency room for treatment
- ◆ Are on a business trip, vacation or away from home
- ◆ Are unable to see your primary care physician

Use telehealth services for minor conditions such as:

- ◆ Sore throat
- ◆ Headache
- ◆ Stomachache
- ◆ Cold
- ◆ Flu
- ◆ Allergies
- ◆ Fever
- ◆ Urinary tract infections

Do not use telemedicine for serious or life-threatening emergencies.

Registration is Easy

Register with Teladoc so you are ready to use this valuable service when and where you need it.

- ◆ **Online** – www.teladoc.com
- ◆ **Phone** – **800-835-2362**
- ◆ **Mobile** – Download the mobile app to your smartphone or mobile device.



DENTAL COVERAGE

Did you know that getting regular dental check-ups can detect other health issues, too? The **BlueCross BlueShield of TN** Dental PPO offers preventive, basic and major dental care to help keep you smiling and healthy.

You may see any dental provider for care, but you will pay less and get the highest level of benefits when you see network providers. You may pay more for care if you see non-network dentists.

Find a Network Dentist

Visit www.bcbst.com or call **800-565-9140**.

BCBST Dental Plan		
	In-Network	Out-of-Network*
Calendar Year Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Calendar Year Benefit Maximum		
Per Individual	\$1,000	\$1,000
	<i>You Pay</i>	<i>You Pay</i>
Preventive Care <i>Exams, X-rays, Cleanings, Fluoride, Sealants, Space Maintainers</i>	\$0	\$0
Basic Care <i>Restorative Services, Endodontics, Periodontics, oral surgery</i>	20%	20%
Major Care <i>Major restorative and prosthodontics 12 month waiting period</i>	50%	50%

* Network Dentists paid at PPO fee schedule; non-network dentists are paid at the 90th percentile of usual and customary rate meaning you will be responsible for any billed charges that exceed our Maximum Allowable Charge

Weekly Dental rates are included with your Medical rates.





LIFE AND AD&D INSURANCE

Life and Accidental Death and Dismemberment (AD&D) insurance is vital to have if others depend on you for support.

Life insurance through **Lincoln Financial Group** can help pay off debts (e.g., car, home, bills, etc.) and protect savings. AD&D insurance offers more coverage if an accident causes bodily harm or loss (e.g., hand, foot or eye). You or your beneficiary(ies) get 100% of the AD&D benefit if death occurs by accident. **You must be a full-time employee to receive this benefit.**

Basic Life and AD&D

Basic Life and AD&D insurance are provided at no cost to you. You are automatically covered at \$10,000 for each benefit.

	Basic Life	AD&D
Benefit	\$10,000	\$10,000
Paid for you by the company	Yes	Yes
Can convert to a life policy	Yes	No
Proof of good health needed	No	No
Can keep coverage	Yes	Yes
Benefit reduces	Yes, starting at age 65; Benefit ends at retirement	Yes, starting at age 65; Benefit ends at retirement

Name a Beneficiary

A beneficiary is a person or entity you choose to get the funds of your Life and AD&D policies. You can have more than one beneficiary and you can change beneficiaries at any time. If you name more than one beneficiary, you must state how much each beneficiary will get (e.g., 50% or 25%).

Voluntary Life

You may buy more Life insurance for you and your family from **Colonial Life**. You may need to show proof of good health if:

- ◆ You do not buy Voluntary Life insurance when it is first offered to you
- ◆ You want to add to your coverage at a later date

You must have coverage before you may cover your spouse or children.

Life and AD&D Available Coverage

Employee	<ul style="list-style-type: none"> • Increments of \$1,000 with a minimum purchase of \$10,000 • Maximum of 5X Salary up to \$500,000 • Guaranteed Issue \$125,000
Spouse	<ul style="list-style-type: none"> • Increments of \$1,000 with a minimum purchase of \$5,000 • Maximum of 100% of Employee amount • Guaranteed Issue \$25,000
Child(ren)	<ul style="list-style-type: none"> • Birth to six months - \$1,000 • Six months to age 26 - \$10,000

Monthly Voluntary Life and AD&D Rates per \$1,000

Age Band	Employee/Spouse Rates	Age Band	Employee/Spouse Rates
<24	\$0.103	50-54	\$0.640
25-29	\$0.122	55-59	\$1.138
30-34	\$0.148	60-64	\$1.468
35-39	\$0.181	65-69	\$2.355
40-44	\$0.230	70-74	\$3.894
45-49	\$0.385	75+	\$3.893
Child(ren)			
\$0.230			

Life and AD&D coverage amounts reduce by 35% at age 70 and 50% at age 75.



ADDITIONAL RESOURCES

401(k) Plan

All employees who are 21 years old, work a minimum of 1000 hours a year, and have been with the Company for a year is eligible for this program. An employee may contribute a percentage of income or dollar amount weekly to the plan. If the participant leaves then, they may withdraw their amount according to Federal Laws governing the plan.

ESOP

To be eligible for Stepherson's Stock Ownership Plan (ESOP), an employee must be 21 years old, work a minimum of 1000 hours a year, have worked for the Company for a year, and have worked on the first and last day of Stepherson's fiscal year. Stepherson's makes a contribution on the employee's behalf and the employee receives shares in the Company. Vesting in the ESOP takes place over a 6 year period, becoming fully vested after this time. If an employee leaves the company, there are different rules for distributions from the ESOP. For further information, please see the Corporate Office.

Superlo Support Fund

Stepherson's Superlo Foods maintains a Support Fund designed to assist participating employees in times of unexpected financial hardship.

Eligibility

Any full or part-time employee who has contributed \$0.50 per pay period for at least six prior pay periods, excluding any employee with ownership interest in the company, is eligible for assistance should a qualifying event occur. The \$0.50 contribution is after-taxes and is paid via automatic deposit upon written election to make the payroll deduction.

Qualifying Event

A qualifying event is a temporary hardship of limited duration that has occurred due to an emergency which was beyond the employee's control. A qualifying event would include a natural disaster (i.e., house flood or fire, damage to a vehicle not caused in whole or in part by the employee's negligence, etc.), funeral expenses related to the death of a spouse, employee, or child. A qualifying event does not include medical expenses which would be covered in part or in whole by medical insurance; payment on the life of a family member which could occasion a payment due to the passing of a family member; prescription medicine; utility, credit card, or phone bills; car maintenance; rent; or the like. Certain expenses such as medical expenses and life insurance cannot be covered under this Emergency Fund because payments of those expenses are subject to Federal Law. In the event of an eligible employee's death, the designated beneficiary will receive the Emergency Fund assistance.





ADDITIONAL RESOURCES

Amount

An eligible employee may receive up to a maximum of \$1,000 each calendar year for a qualifying event upon application and after review and award by the Ownership Council Executive Committee. Proof of the expense(s) will be required and only the actual amount expended or documented to be expended will be paid from the Emergency Fund. In the event that the Emergency Fund experiences limited reserves, then payments for qualifying events will be on a first come, first served basis.

Procedure

An eligible employee who has experienced a qualifying event may submit to the Ownership Council Executive Committee a written application (available from the corporate office) for a fund claim along with supporting documentation regarding the qualifying event and the financial hardship amount. The applying employee must certify the accuracy of the application and supporting documentation and authorize the Ownership Council Executive Committee to obtain information needed to verify the application. Any employee who knowingly provides false information in connection with his or her application for an Emergency Fund claim may be subject to corrective action, up to and including discharge. The Ownership Council Executive Committee will review the application and make the determination, in its sole discretion, as to whether the hardship is a qualifying event and in what amount.

Account

The Emergency Fund will be maintained in a separate account, and any interest earned will cover any account expenses or be added to the principal.

Tax Status

Payroll deduction payments into the Fund are after-tax. Certain payments from the Fund may have a tax consequence and the employer is responsible for determining what those consequences may be upon receipt of a payment from the Fund.

Holiday Pay

Full time employees will be paid for eight hours on the following holidays:

- ◆ New Year's Day
- ◆ Fourth of July
- ◆ Labor Day
- ◆ Thanksgiving Day
- ◆ Christmas Day

Any work performed on these holidays or on Easter will be paid at time and a half rate. In a week that a holiday falls, overtime will be paid after 40 hours of work as holiday pay is not considered time worked for overtime purposes. The holiday pay is always at straight time. The employee must work the full scheduled day before and the full scheduled day after, and the full holiday itself, if required, in order to qualify for holiday pay. In addition to the above holidays, each full time employee may have two personal days off with pay after having been employed for a full year. These may be taken after the completion of 1 year of service. The personal days may not be taken in a week in which a holiday is scheduled and should be pre-arranged with your supervisor. On July 4th, Thanksgiving and Christmas, part time employees will be paid 4 hours of holiday pay.



ADDITIONAL RESOURCES

Vacation Policy

The following vacation schedule applies to all full time employees:

- ◆ After 1 year of service: 1 week of vacation
- ◆ After 3 years of service: 2 weeks of vacation
- ◆ After 7 years of service: 3 weeks of vacation
- ◆ After 15 years of service: 4 weeks of vacation
- ◆ After 1 full year of service, all part time employees will receive vacations equal to the past year's hours divided by 52
- ◆ In the event that a part-time employee becomes a full-time employee, the employee will receive the vacation on his or her original anniversary date associated with their total years of service.

Vacations are earned on an employee's anniversary date. Vacations will not be automatically paid out at the end of the vacation year; however, an employee may request to have up to two weeks of their unused vacation paid out per year or carry forward up to two weeks of unused vacation into the next vacation year. If an employee has more than two weeks of unused vacation remaining at the end of the vacation year, the employee will be paid out any unused vacation time over two weeks. Beginning July 1, 2023 any vacation time in excess of 80 hours at the end of an employee's vacation year will be lost. Additional vacation for the new year will not be earned until the employee's anniversary date.

- ◆ Vacations must be scheduled with the approval of store/departmental manager.
- ◆ If a holiday falls on the employee's vacation then that person's holiday will be added to the vacation time.
- ◆ Vacation preferences will be considered on the basis of seniority.
- ◆ Remaining unused vacation hours will not be paid out upon termination

Sick Pay

Sick pay is a benefit provided to all full time employees who have been employed by Stepherson's for at least one year. Sick pay is paid in an amount equal to 60% of an employee's base rate. An employee must be absent for one full week before the employee is eligible for sick pay. An employee may use any available vacation time to cover the first week. Stepherson's will provide two weeks of sick pay for every year of employment, up to a maximum of 26 weeks a year. An employee must return to work full time for 12 months to be eligible for additional sick pay benefits. To be eligible for sick pay, an employee must be under a doctor's care and present written documentation that they are unable to work for health reasons.

On the job injuries will be covered by workers' compensation and do not qualify for sick pay benefits until workers' compensation benefits cease. If an employee receiving sick pay is able to work part-time, the employee must do so, except for those situations covered by the Family and Medical Leave Act. The employee will be paid for his or her part-time work and sick pay benefits will be paid in an amount so that both the pay for work and sick pay benefits will equal the employee's average number of hours worked per week, not to exceed forty hours. Stepherson's will pay for the health insurance of qualifying employees for a period of up to 12 weeks or the duration of the employee's sick pay (not to exceed 26 weeks per year), whichever is longer. To be eligible, an employee must have worked for the company for at least one year and must be under a doctor's care. Because of the substantial cost of this benefit, the company can offer this benefit only once in a 12 month period. To be eligible for the health insurance payment benefit again, the employee must work for 12 months, after the last date that insurance was provided. This policy is concurrent with insurance benefits provided under the Family and Medical Leave Act.



ADDITIONAL RESOURCES

Maternity and Paternity Leave

Maternity and Paternity Leave pay is a benefit provided to all full time employees who have been employed by Stepherson's for at least one year. Maternity and Paternity Leave pay is paid in an amount equal to 60% of an employee's base rate. An employee must return to work full time for 12 months after the birth date of the child to be eligible for additional maternity and paternity leave benefits associated with the birth of a child and for 24 months after the date of adoption to be eligible for additional leave benefits associated with the adoption of a child. Maternity leave pay, under this policy, commences when the mother takes leave for the birth of a child or for the adoption of a child up to and including the age of three, and continues for the duration of the leave up to six weeks. Paternity leave pay, under this policy, commences upon the birth of the child or upon the adoption of a child up to and including the age of three and continues for the duration of the leave up to one week. In the event of same sex parents, the birth parent will be entitled to maternity leave pay, and the non-birth parent to paternity leave pay. In the event of same sex parents, both of whom are employees, but neither is the birth parent, the parents will be entitled to divide the available maternity and paternity leave pay between themselves, and will inform Stepherson's as to the division. In the event of same sex parents, neither of whom is the birth parent, but one of whom is employed, the employed parent will be entitled to no more than the maternity leave pay. Both maternity leave and paternity leave pay benefits may be taken concurrently, in conjunction with, or in addition to the employee's available sick pay and vacation time. Both maternity and paternity leave pay benefits run concurrently with the Family and Medical Leave Act leave. Maternity leave and paternity leave pay benefits are not available in the event of a miscarriage prior to child birth. To be eligible for maternity leave pay,

an employee must be under a doctor's care and present written documentation regarding the needed duration of the leave or must present written documentation regarding the adoption and the adopted child's age. To be eligible for paternity leave pay, an employee must present written documentation regarding the birth or the adoption and the adopted child's age. All requests for maternity or paternity leave must be made to Human Resources.

Southern Security

As an employee with Superlo Foods, you are eligible to open an account with Southern Security and enjoy the following benefits:

- ◆ Free Banking Account
- ◆ Loan Products Below Market Rates
- ◆ Credit Education and Counseling
- ◆ Other Financial Services
- ◆ Rewards and Discount Programs

Contact Southern Security

Apply at southernsecurity.org or call **901-452-7900** for assistance. Scan the QR code to find out more



This brochure highlights the main features of the Superlo Foods employee benefits program. It does not include all plan rules, details, limitations and exclusions. The terms of your benefit plans are governed by legal documents, including insurance contracts. Should there be an inconsistency between this brochure and the legal plan documents, the plan documents are the final authority. Superlo Foods reserves the right to change or discontinue its employee benefits plans at any time.

