



Employee Benefits Guide



The three pillars of your benefits

Brookfield Benefits | Live Well

Brookfield is committed to supporting your personal health and wellbeing. Our comprehensive benefits program is designed to meet both your individual and family needs.

LIVE WELL IN 2023

The information contained in this guide will help you select 2023 benefits for you and your family and serve as a useful reference throughout the year.



MIND

We have designed our program to empower you and increase your peace of mind, with benefits like insurance for the unexpected, mental health programs and advocacy services to support you and your family to reduce stress.



BODY

Physical health is central to your wellbeing. We're proud to offer affordable, high-quality health and wellness benefits for you and your family.



FINANCIAL

Our benefits help you control your financial destiny by shielding you from high medical expenses, saving you money and providing you with tools to build a nest egg for your future.

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Check out what's new for 2023!

Need help with enrollment? Try alyx in Workday!

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see **page 39** for more details.

Brookfield reserves the right at any time, with or without advance notice, to change, modify or eliminate plans or benefits within the benefits program. Plan participants will be notified in accordance with the terms of the plans and applicable law. In the event of a discrepancy between the benefits outlined in this guide and the plan documents or insurance contracts, the plan documents and insurance contracts will govern. Any questions regarding employee benefits can be directed to the HR Service Desk at **benefits@brookfield.com** or **833-980-1179**. Social Security, Workers' Compensation, statutory disability benefits and unemployment insurance cover employees in the manner prescribed by law. For additional information about these benefits, please contact the Benefits Department.



Eligibility

Employees

Unless otherwise indicated, the benefits program described in this booklet covers regular full-time employees. Full-time, as defined for purposes of benefits plan eligibility, is scheduled weekly hours of at least 30 (20 hours for medical/vision). Part-time, interns, contract and temporary employees are not eligible for benefits other than those mandated by federal, state or local statutes. Union employees have benefits as provided by their union's collective bargaining agreement.

Dependents

If you are an eligible employee, you may enroll the following dependents:

- Your spouse
- Same and opposite sex domestic partners
- Children under the age of 26: Coverage for adult children can be continued until the end of the month of the child's 26th birthday.
 - "Children" include your natural child, a legally adopted child, a stepchild and/or a child for whom you are the proposed adoptive parent and who is dependent upon you during the waiting period prior to the adoption period.
 - Children of domestic partners are eligible for benefits under the same conditions as children of an employee's legal spouse. (See "Domestic Partner Benefits" on page 32 for additional information and requirements.)

- Your children need not be financially dependent upon you for support or claimed as a dependent on your tax return, a resident of your household, enrolled as a student or unmarried.
- Incapacitated child: Coverage for your child who is incapable of self-sustaining employment by reason of mental illness, developmental disability or physical handicap may be continued after reaching age 26 upon approval by the insurance company. The child must have been incapacitated prior to attaining age 26 and remain in such condition after reaching that age. Proof of your child's incapacity must be submitted to the insurance company within 30 days of the child attaining age 26. The final decision for children under this provision rests with Aetna.

Dependents who lose eligibility may elect to continue their coverage under the federal Consolidated Omnibus Budget Reconciliation Act (COBRA). COBRA allows the insured and family to maintain coverage for up to 18 months (36 months for certain events, such as divorce or the death of the employee) after losing group coverage. For more information, see "Continuation Coverage Rights Under COBRA" on development.livewell.brookfield.com.

When Coverage Begins

If you are a new hire or newly benefits-eligible employee, coverage for you and your eligible, enrolled dependents begins on the first day of your employment, or benefits eligibility date, except where otherwise noted.

New Hire Enrollment

As a new employee, or newly benefits-eligible employee, you must enroll within 30 days of your eligibility date (i.e., date of hire or the effective date of a job change). If you fail to enroll within this period, you'll have to wait until the next Annual Benefits Open Enrollment Period to enroll in coverage.



NEW HIRES:

Take note of the Wellness Premium Incentive deadlines on page 14.

Qualifying Life Event Change

A Qualifying Life Event change is defined by the Internal Revenue Service as:

- Change in your legal marital status (i.e., marriage, legal separation, divorce or death of your spouse)
- Birth of a child, date you adopt a child or placement for adoption, legal guardianship
- Death or loss of eligibility of a dependent
- Change in employment status (for employee, spouse or employee's dependent) that affects eligibility for health insurance benefits
- Change in your domestic partner status

Any benefits changes resulting from a Qualifying Life Event must be requested by the employee **within 30 days** of the event (60 days for births, adoptions or placements for adoption) via Workday.

Annual Benefits Open Enrollment

Annual Benefits Open Enrollment is typically held in the fall of each year for coverage effective January 1 of the following year.

For detailed information on how to enroll and all required documentation, see "Enrolling or Changing Your Benefits" on page 27.

Full-Time, Part-Time and Temporary Eligibility

	FULL-TIME REGULAR	PART-TIME REGULAR	FULL-TIME TEMPORARY	NOTES
Medical	х		х	Must work at least 20 hours per week for a minimum of 4 weeks
Dental	х			
Vision	х		х	Full-Time Temporary: after 90 consecutive days
Flexible Spending Accounts (Health Care & Dependent Care)	х			
Accident, Critical Illness, Hospital Indemnity	х			
Company-paid Basic Life and Basic AD&D	х			
Voluntary Life and Voluntary AD&D	х			
Short-Term Disability	х			
Long-Term Disability	х			
Vitality Wellness Plan	х		х	Full-Time Temporary: after 90 consecutive days if enrolled in medical plan
401(k) Plan	х	х		Must be 21 years of age. Part-Time Regular: after 1,000 hours worked within the previous 12 months
Commuter Benefits	х	х	х	
Long Term Care	х			
Progyny	х			Must be enrolled in medical plan
MetLife Legal Plans	х			
NortonLifeLock Identity Theft Services	х			
Pet Insurance	х			
Health Advocate	х	x	х	
Employee Assistance Program	х			
Care.com	х			

Employees are required to submit appropriate documentation for all dependents upon their enrollment in the plans. This documentation must be provided within 30 days of enrollment. If it is not provided within 30 days of enrollment, the dependent will be removed from coverage. If there are any changes in relationship or status of dependents in the future, additional documentation will be required. See **page 27** for a list of required documentation.

Medical

We offer a choice of two PPO plans. While the plans differ in some respects, they have one important similarity — a focus on prevention. Both plans are administered by HMSA and offer preventive care at no cost (in-network only), help for plan participants managing chronic conditions and wellness-focused features. You can locate a doctor or facility through HMSA's "Find a Doctor" online directory: **www.hmsa.com/search/providers**. Please keep in mind that the availability of any particular provider cannot be guaranteed. Summary of plans are on the next page.

Medical Plan Enhancements

The following programs are additional services available to HMSA medical plan members.

Progyny Fertility Benefits

Progyny supports you on your path to parenthood. With a network of best-in-class fertility specialists and an integrated pharmacy solution, you have access to the most advanced, effective fertility treatment possible. Progyny benefits are available to all employees and covered spouses or domestic partners who are enrolled in a Brookfield medical plan.

Smart Cycle

Each Smart Cycle is a bundle of all services (appointments, tests, diagnostics, labs, anesthesia, etc.) used for comprehensive fertility treatments. Brookfield's benefit includes three Smart Cycles.

Each treatment or service is expressed as a portion of a Smart Cycle. For example:

- One IVF Freeze-all cycle is equal to ³/₄ of a Smart Cycle
- One Frozen Embryo Transfer (FET) is equal to 1/4 of a Smart Cycle
- If you choose to preserve your fertility by freezing eggs, you will utilize ¹/₂ of a Smart Cycle.

You can utilize your Smart Cycles for whichever treatments you and your doctor determine are right for you, until you exhaust your Smart Cycle balance. That puts you in control of your fertility journey!

Progyny's Smart Cycle benefit connects you to a dedicated Patient Care Advocate (PCA) who will guide you throughout the entire process. You can manage your Smart Cycle balance by contacting your dedicated Progyny PCA, who will provide access to the Progyny member portal. To get started, call **844-930-3356**.

Adoption and Surrogacy Benefits through Progyny

Progyny offers \$15,000 (lifetime maximum) in reimbursement assistance and consultative support to help you start building your family in the way that is right for you, now featuring adoption, surrogacy and donor reimbursement. Some of the eligible expenses include:

Adoption:

- Application fees
- Home studies
- Legal fees
- Transportation
- Counseling

Surrogacy:

- Agency fees
- Legal fees
- Gestational carrier or donor compensation
- Medical expenses
- Travel expenses

This benefit is available to all benefits-eligible employees. To learn more, call **844-930-3356**.



Medical Benefits Summary and Comparison

	HMSA BASIC		HMSA PREMIER	
	IN-NETWORK ONLY	OUT-OF- NETWORK	IN-NETWORK	OUT-OF- NETWORK
GENERAL ATTRIBUTES				
Deductible — Individual/Family	\$350/\$1,050	\$350/\$1,050	\$200/\$600	\$200/\$600
Out of Pocket Max — Individual/Family	\$3,000/\$9,000	\$3,000/\$9,000	\$2,200/\$6,600	\$2,200/\$6,600
PROFESSIONAL SERVICES				
Office Visit (Prim./Spec.)	\$17 copay*	30%*	\$12 copay	\$12 copay
Diagnostic Test/Lab	20%*	30%*	\$0 copay	\$0 copay
Diagnostic X-ray	20%*	30%*	20%*	20%*
Advanced Imaging — Inpatient	20%*	30%*	20%*	20%*
Advanced Imaging — Outpatient	20%*	30%*	20%*	20%*
Chiropractic	\$17 copay*	30%*	\$12 copay	\$12 copay
Chilopractic	Falls under Physical The	erapy: no maximum benefit	Falls under Physical The	erapy: no maximum benefit
Aquipuncture	\$20 copay	Not covered	\$20 copay	Not covered
Acupuncture	12 visits per year: comb	ined with Massage Therapy	12 visits per year: combined with Massage Therapy	
HOSPITAL				
Inpatient	20%*	30%*	20%*	20%*
Outpatient Surgery Specialist Visits	20%*	30%*	20%*	20%*
Urgent Care	\$17 copay*	\$17 copay*	\$12 copay	\$12 copay
Emergency Room (Copay Waived if Admitted)	20%*	30%*	20%*	20%*
PRESCRIPTION DRUGS				
Deductible — Individual/Family	Ν	lone	None	
Out of Pocket Max — Individual/Family	\$3,60	0/\$4,200	\$3,600/\$4,200	
Retail (up to 30 days)	All pre	scriptions	All pre	scriptions
Generic	\$7 copay	\$7 copay + excess charge	\$7 copay	\$7 copay + excess charge
Preferred Brand	\$30 copay	\$30 copay + excess charge	\$30 copay	\$30 copay + excess charge
Non-Preferred Brand	\$75 copay	\$75 copay + excess charge	\$75 copay	\$75 copay + excess charge
Specialty (Preferred/Non Preferred)	\$100/\$200	Not covered	\$100/\$200	Not covered
Mail Order	84- to 90-day supply		84- to 90	-day supply
Generic	\$11 copay	Not covered	\$11 copay	Not covered
Preferred Brand	\$65 copay	Not covered	\$65 copay	Not covered
Non-Preferred Brand	\$200 copay	Not covered	\$200 copay	Not covered

* After deductible.

For more information, visit www.hmsa.com/well-being or contact 808-948-6079.

Common Health Care Terms

- **Deductible:** The amount you pay for medical services before your insurance starts paying its share.
- **Coinsurance:** Your share of the costs of services after you meet the deductible; your plan pays the remaining share.
- Copay: The flat dollar amount you pay.
- **Out-of-pocket maximum:** The most you'll pay for medical services during the plan year. After you meet the outof-pocket maximum, your insurance pays 100% of the cost of services, though you'll still pay bi-weekly payroll contributions. If an individual in Family coverage reaches his/her individual OOP max, the plan begins paying 100% benefits for that individual.

Additional Plan Resources

HMSA Wellbeing

From healthy eating and physical activity, to managing a chronic condition or recovery from injury, HMSA WellBeing programs support members to help them achieve their healthiest possible lives, no matter their age or situation.

Lifestyle Resources

Complementary Care benefits for massage therapy, acupuncture and chiropractic care. (Chiropractic care is part of your medical benefits.)

HMSA365 member savings program for fitness, healthy living and wellbeing products and services.

Active&Fit Direct program with access to discounted fitness center memberships and fitness classes nationwide.

HMSA BlueCross BlueShield travel coverage when away from home.

Island Scene health and wellbeing magazine and blog.

Blue Zones Project community programs to promote wellbeing statewide.

Preventive Care

Find a Doctor on **www.hmsa.com** to help members find a health care provider.

Diabetes Prevention Program for a healthier lifestyle through CDC-recognized workshops and resources.

Annual Preventive Health Evaluation when seeing a primary care provider in the HMSA network.

Personal Screening Checklist with recommended screenings and tests.

Worksite Wellbeing Programs supporting the health and wellbeing of employees.

Health Education Workshops are fun, interactive ways to teach members about their wellbeing:

- Disease awareness
- Nutrition
- General health and fitness
- Injury prevention
- Stress management
- Weight awareness

Health Resources

HMSA Online Care to see a health care provider 24/7 using a computer, tablet or smartphone.

Urgent Care benefits to see a health care professional without an appointment.

CVS MinuteClinic benefits offer care for everyday health needs.

Hawai'i Tobacco Quitline provides support to quit tobacco for good.

HMSA Health Coaching by phone to help you and your family reach your health and wellbeing goals.

HMSA My Account to manage your family's health needs and records.

Caregiver Resources offers information to help caregivers manage their many responsibilities.

Medical Conditions

HMSA Health and Wellbeing Support and assistance for members with chronic health conditions.

Ornish Lifestyle Medicine nine-week program to help reverse heart disease.

HMSA Behavioral Health Program for emotional, mental and substance abuse support.

HMSA Pregnancy Support Program for personalized prenatal care support for a healthy pregnancy.

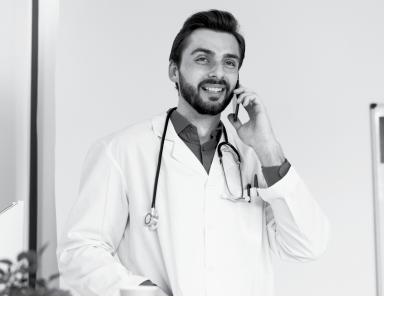
Diabetes Education and resources for members living with diabetes.

Advance Care Planning when you need to make sensitive health care decisions.

Care Access Assistance Program to access specialty care not available on the Neighbor Islands.

HMSA Supportive Care helps members manage symptoms and stresses of serious illness.

For more information, visit **www.hmsa.com/well-being** or contact **808-948-6079**.



Health Advocacy Services

Health Advocate — Making Health Care Easier for Your Whole Family

Managing your health can be complex and confusing. Health Advocate is here to help. Whether you need to find an in-network doctor, locate help for Mom or sort through a medical bill, they have the right experts to handle almost any kind of health care and insurancerelated issue. Brookfield offers this service to all employees at no cost to you. It's completely confidential, and you can use it as many times as needed.

Highly-trained Personal Health Advocates, typically registered nurses supported by benefits and claims specialists, will handle your issue. Their experts will do the legwork, make the calls, handle the paperwork and follow up with you every step of the way.

How It Works

Simply call their toll-free number, send an email or message them through their mobile app anytime you have a question or concern. Complete a HIPAA (Health Insurance Portability and Accountability Act) authorization form available at: **content. healthadvocate.com/Member/AuthorizationForms/ Authorization-Form.pdf**, so that they can request information on your behalf. Your assigned Personal Health Advocate will provide the support you need. Here are just a few examples: You've just received a diagnosis for a medical condition. Your Personal Health Advocate will help you:

- Understand your diagnosis, answer questions, research treatment options
- Find in-network providers including specialists, hospitals, labs and more
- Arrange for a second opinion with a center of excellence, transfer medical records
- Help you transition home after a hospital stay

You're overwhelmed with medical bills and don't know where to start. Your Personal Health Advocate will help you:

- Review your health insurance coverage
- Work on your behalf to sort through exactly what you owe
- Suggest ways to lower out-of-pocket costs
- Complete the HIPAA form to get started

Use the Health Advocate mobile app to get a personal Health Advocate in the palm of your hand:

- Instantly see, learn and interact with your Health Advocate programs no matter where you are
- 24/7 live support from your Personal Health Advocate
- Conveniently upload relevant documents
- Access trusted information on any health topic

Contact Health Advocate Anytime:

- Call: 866-695-8622
- Email: answers@HealthAdvocate.com
- Web: HealthAdvocate.com/Brookfield
- Download the mobile app from the app store

Who Is Eligible?

Health Advocate is available to all employees, their spouses/domestic partners, dependent children, parents and parents-in-law.



Dental

Brookfield's dental plans are offered through Delta Dental. Under these plans, you can access care in three ways: innetwork, premier network (providers who have agreed to Delta Dental pricing guidelines, though still out-of-network) and out-of-network. In-network dentists will typically have lower out-of-pocket expenses. You can find in-network dentists at **www.deltadentalins.com**.

Dental Comparison Chart1

	D	DELTA DENTAL PPO		DEL	TA DENTAL PPO	PLUS
	DELTA DENTAL PPO DENTISTS	DELTA DENTAL PREMIER DENTISTS	OUT-OF- NETWORK DENTISTS	DELTA DENTAL PPO DENTISTS	DELTA DENTAL PREMIER DENTISTS	OUT-OF- NETWORK DENTISTS
DEDUCTIBLE	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
ANNUAL MAXIMUM BENEFIT	\$1,500	\$1,500	\$1,500	\$2,500	\$2,500	\$2,500
ORTHODONTIA LIFETIME MAX	\$1,500	\$1,500	\$1,500	\$2,500	\$2,500	\$2,500
TYPE A PREVENTIVE (CLEANINGS, EXAMS, X-RAYS)	100%	80%	80%	100%	100%	100%
TYPE B BASIC RESTORATIVE (FILLINGS, EXTRACTIONS)	80%	70%	70%	100%	80%	80%
TYPE C MAJOR RESTORATIVE (BRIDGES, CROWNS)	50%	50%	50%	60%	50%	50%
TYPE D ORTHODONTIA	50%*	50%*	50%*	60%**	50%**	50%**

*Dependent children up to age 19

**Adults and dependent children up to age 19

¹If you were a member under another Delta Dental plan prior to joining Brookfield, any plan limitations that were previously met will be reflected in your Delta Dental coverage with Brookfield.

Comparing Dental Plan Out-of-Pocket Expenses: PPO Plus Plan

The following example illustrates three participants who receive the exact same treatment for major care. All participants have already met their deductible.

PARTICIPANT #1: IN-NETWORK	PARTICIPANT #2: PREMIER	PARTICIPANT #3: OUT-OF-NETWORK
 Dentist Charges: \$100 Delta's Maximum Allowable PPO Rate: \$70 Plan Pays 60% of Maximum Allowable PPO Rate: \$42 	 Dentist Charges: \$100 Delta's Maximum Allowable Premier Rate: \$85 Plan Pays 50% of Maximum Allowable Premier Rate: \$42.50 	 Dentist Charges: \$100 Prevailing Charge: \$75 Plan Pays 50% of Prevailing Charge: \$37.50 Participant #3 Pays: \$37.50
Participant #1 Pays: \$28	Participant #2 Pays: \$42.50	

Cost Estimator from Delta Dental

The Delta Dental Cost Estimator is a tool that allows you to estimate costs for typical dentist visits before arriving at the dentist's office. The Cost Estimator shows the projected cost of an entire dentist visit rather than just a single procedure. You can also select multiple dentists, both in- and out-of-network, to compare costs and savings.

The Cost Estimator lets you see your current benefits balance showing accruals toward any deductible, maximums and benefit limitation. It's easy to use. If you're a Delta Dental plan member, simply visit www.deltadentalins.com and log in.

Virtual Dentistry

Delta Dental offers two tools that make it easier to see a dentist. Plus, virtual dentistry does not apply to annual visit limitations.

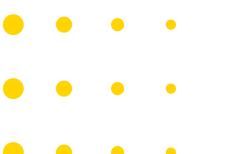
- Toothpic:
 - An easy-to-use, photo-based platform
 - Get answers from a Delta Dental dentist in less than 24 hours
 - Ideal for a quick exam or diagnostic report
 - deltadental.toothpic.com
- Virtual consult:
 - Schedule a live video consultation, anytime and anywhere, with a Delta Dental dentist
 - Ideal for urgent needs or appointments outside of normal office hours
 - deltadentalvirtualconsult.com

BrushSmart

If you enroll in a Delta Dental plan, you get access to a free, exclusive oral wellness program. It includes:

- Immediate access to special offers
- Unlimited discount redemption
- Wellness education and resources

Sign up at BrushSmart.org.



SmileWay[®] Wellness Benefits

The health of your teeth and gums is part of a bigger picture: your overall wellness. Gum disease is associated with several systemic conditions, and people with certain chronic diseases may benefit from additional periodontal (gum) cleanings. That's why our dental plan offers expanded coverage, at no cost to you, if you have been diagnosed with any of the following:

- Diabetes
- Heart disease
- HIV/AIDS
- Rheumatoid arthritis
- Stroke

Opting in to this expanded coverage will give you these added benefits per plan year:

- One periodontal scaling and root planning procedure per quadrant per plan year, covered at 100%
- Four of the following (any combination) per plan year, covered at 100%:
 - teeth cleaning
 - periodontal maintenance procedure
 - scaling in presence of moderate or severe gingival inflammation

To opt in, log in to your online account at **www.deltadentalins.com**, click on the Optional Benefits tab in the left column and then select Opt In.

For more information, contact Delta Dental at **www.deltadentalins.com** or **800-932-0783**.





Vision

Brookfield offers two vision plans through EyeMed: EyeMed Premier and EyeMed Basic. All medical plan participants have the option to enroll in the Premier vision plan at no additional cost. Vision plans cover lenses, frames, contact lenses and more. EyeMed's network includes experienced ophthalmologists, optometrists and opticians. In addition, convenient retail providers like LensCrafters, Target Optical and more offer a large number of locations as well as weekend and evening hours. Choosing a provider in the Insight Network provides the highest level of benefits.

Vision Benefits Summary

	EYEMED	PREMIER	EYEMED BASIC	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Exam	\$10	Up to \$45	\$20	Up to \$45
Frequency	Every 12	months	Every 12	months
		LEN	SES	
Single	\$10	Up to \$30	\$20	Up to \$30
Bifocal	\$10	Up to \$50	\$20	Up to \$50
Trifocal	\$10	Up to \$65	\$20	Up to \$65
Frequency	Every 12 months		Every 24 months	
		FRAI	MES*	
	\$250 allowance + 20% off balance over \$250	Up to \$135	\$150 allowance + 20% off balance over \$150	Up to \$80
Frequency	Every 12	months	Every 24	months
	CONTACTS*		ACTS*	
	\$250 allowance + 15% off balance over \$250	Up to \$200	\$150 allowance + 15% off balance over \$150	Up to \$105
Frequency	Every 12	months	Every 24	months

*You are able to receive the \$250 benefit for contacts and frames in the same plan year if you receive your contacts benefit first. You will then be able to receive the frame benefit and simply pay for the lenses for your frames at a 20% retail discount.

Freedom Pass from EyeMed

Freedom Pass entitles you to special offers at your favorite optical store. Visit a participating LensCrafters or Target Optical store and you'll get your choice of frames — no matter the price point — for a \$0 out-of-pocket cost! Plus, you can still use your vision benefits to help pay for your lenses and complete your look.

Huge Savings on Name Brand Frames*



Use Your Freedom Pass Today

Go to **freedompass.eyemed.com** and enter **EMFP21** to get your Lens Crafters in-store offer code. At Target Optical, use code **755288**.

SEE WHAT YOU COULD SAVE			
COACH	Coach Frame, Retail Cost	\$205	
R	Frame Cost Without Freedom Pass \$130 frame allowance + 20% standard additional discount	\$60	
Coach Model HC6065	Member Cost With Freedom Pass	\$0	

New frames at no cost from brands you love!

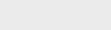
















YOUR FREEDOM PASS PERKS

- Name-brand frames you love
- Out-of-pocket cost goes way down
- \$65 in additional value, on average

*Certain restrictions apply.

Wellness Program

Your Road to Wellness

At Brookfield, we want each employee to realize the power of good health. In 2023, we will continue our partnership with Vitality to bring you a comprehensive wellness program that will help to achieve our goal of healthier, happier employees.

This unique program helps Brookfield employees achieve individual health and wellness objectives through a customized approach. Using the Vitality interactive website (**www.powerofvitality.com**), you receive your own Personal Pathway comprised of health goals and activities.

Wellness Premium Incentive — Cash Award

Gold Status

As a reward for participating in our wellness program, you will a cash award of \$500 if you achieve 6,000 points before December 1, 2023. This taxable cash award would be payable on or near the last payroll in December 2023.

To Achieve Gold Status by December 1, 2023:

Points	Rewards
6,000 Points for	\$500 Taxable
Employee Only	Cash Award

Special Consideration for 3rd and 4th Quarter New Hires or Newly Eligible Employees:

Since only 10% of any points earned will be rolled over to the following year, the best strategy is to wait and start accumulating points beginning on January 1, unless you believe you are able to achieve Gold Status by December 1 of the current year.

Questions?

Lockton, Brookfield's insurance broker, has a call center available to answer your questions or service issues on Vitality. Please contact the Lockton Wellness Call Center at 888-524-2604 or by email at Brookfield@Lockton.com, or the Vitality Call Center at 877-224-7117.

Please refer to the Vitality website to help answer any questions about the program in more detail, including the Vitality Points guide and Vitality biometric form.



Vitality Points Checklist

Review the chart below to learn how to earn points in Vitality.

	VITALITY	Y REVIEWS	
ACTIVITY	P	OINTS	FREQUENCY
Vitality Health Review (VHR)		500	Once per year
VHR Bonus: First 90 days	250		Once per year
Mental Well-being Review	75 p	per review	Four per year
Physical Activity Review		250	Once per year
PHYSICAL ACTIVITY			
Light Workout	5		Once per day
Standard Workout	10	Max one workout	Once per day
Advanced Workout	15	per day	Once per day
Sports League		350	Up to category max
Athletic Event: Level 1		250	Up to category max
Athletic Event: Level 2		350	Up to category max
Athletic Event: Level 3		500	Up to category max
Workout Milestone Bonus	N	Varies	Up to category max
	CATEGORY MAXI	MUM: 7,000 POINTS	
PREVENTION			
Health Screening*		400	Once per year per screening
Dental Check-up		200	Once per year
Flu Shot		200	Once per year
CERTIFICATIONS			
CPR Certification	125		Once per year
First Aid Certification		125	Once per year
VITALITY CHECK			
Body Mass Index (BMI)	125		Once per year
Blood Pressure	125	Max one workout	Once per year
Cholesterol**	125	per day	Once per year
Fasting Glucose/HbA1c	125		Once per year
BMI	1,000		Once per year
Blood Pressure	600	Vitality Check in-	Once per year
Cholesterol***	600	range results***	Once per year
Fasting Glucose/HbA1c	600		Once per year
Non-tobacco User		725	Once per year
ONLINE EDUCATION			
Calculators	75 pe	r calculator	Four per year
Nutrition Online Courses	300	per course	Three per year
Action Sets / Decision Points	5	0 each	Six per year
Health FYI Webcasts	50 pe	er webinar	Twelve per year
DTHER			
Maternity Management		300	Once per quarter (max 4)
Disease/Lifestyle Management		300	Once per quarter (max 4)
Vitality Squares	N	Varies	Once per month

*Health screenings include flu shots, colorectal screenings, dental exams, mammograms and pap smears, and are subject to certain requirements

Total cholesterol or low-density lipoprotein (LDL) *A reasonable alternative is available and presented as a Vitality Goal.



Flexible Spending Accounts

Flexible Spending Accounts (FSAs) offer a significant tax savings opportunity. As a participant, you may set aside a portion of your salary before Social Security, federal income tax, and in some cases, state and local taxes are deducted. You can then use the money to reimburse yourself for eligible health care and dependent care expenses incurred during the year. Please see **www.payflex.com** or **www.irs.gov/pub/irs-pdf/p502.pdf** for more information about eligible health and dependent care expenses. Your dependents do not have to be covered by any other Brookfield plan for expenses to be eligible for FSA reimbursement.

Health Care FSA: allows you to set aside pre-tax dollars to pay certain out-of-pocket health care expenses. You can contribute up to the maximum annual limit of \$2,850 as permitted by IRS regulations.

Dependent Care FSA: allows you to set aside pre-tax dollars to pay for day care services (for children up to age 13 and elder care) that allow you (and your spouse or domestic partner) to work, look for work or go to school. You can contribute up to \$5,000 per year (\$2,500 if you are married and file separate tax returns).

Note: maximum contributions are subject to audit and/ or non-discrimination testing, which can affect the amounts that you may be able to set aside. Brookfield is currently required to limit contribution amounts for highly compensated employees (HCEs) to 55% of the IRS limit to ensure the Plan passes government required testing. The IRS defines HCEs as anyone making \$135,000 or more in 2022; subject to change each year. Participation in an FSA is completely voluntary. It's important to remember that an FSA election is effective for only one calendar year. **You must enroll each year you wish to participate**. If you do not enroll during Benefits Open Enrollment or when you are first eligible, you will not be able to participate unless you experience a Qualifying Life Event change that allows you to make an election. Please refer to **page 27** for more information on Qualifying Life Event changes.

Important FSA Details

- The IRS requires that you use the full amount(s) you contribute to FSAs for eligible expenses during the plan year. Any funds remaining must be forfeited
- Brookfield provides a 75-day grace period. You have until March 15, 2024, to spend 2023 contributions (Note: Claims must be submitted before March 31, 2024)
- You cannot stop or change your FSA contributions during the plan year unless you have a Qualifying Life Event change
- Even if you use your FSA debit card for valid medical expenses, the IRS requires you to save your receipts. In addition, the program administrator may require that you supply receipts for certain eligible expenses throughout the year

\$

PayFlex is the FSA vendor. Visit **www.payflex.com** or call PayFlex at **888-678-8242** for more information.

Life and AD&D Insurance

Brookfield pays 100% of the cost for Basic Life and AD&D coverage. For additional protection, you have the option to purchase Voluntary Life and AD&D insurance for yourself and your eligible dependents. Voluntary Life and AD&D participants pay 100% of the cost for insurance. The Life and AD&D plans are fully insured by Unum.

Eligibility

All Brookfield benefits-eligible employees in the U.S. who work at least 30 hours per week are automatically enrolled in Basic Life and AD&D insurance, effective as of their date of hire. All Brookfield benefits-eligible employees have the opportunity to enroll in additional Voluntary Life and AD&D insurance within 30 days of their date of hire.

Basic Life and AD&D Plan Summary

- Basic Life benefit: 1x annual salary rounded to the next higher \$1,000 increment, to a maximum of \$1 million.
- Basic AD&D benefit: 3x annual salary up to \$1 million, if death is the result of an accident; reduced benefits for certain other qualifying losses
- Coverage amount(s) will be reduced to 65% of original amount(s) when employee reaches age 70

Voluntary Life and AD&D Plan Summary

- These benefits are in addition to the Basic Life and AD&D benefit provided by Brookfield.
- If you miss the new hire enrollment window and would like to enroll for the first time, or increase your level of Life coverage, you will need to enroll and complete an accompanying Evidence of Insurability (EOI) form directly with Unum. You may enroll or increase your coverage in the Plan only after the application has been approved by Unum.

- If you are already enrolled in the Voluntary Life Plan, and wish to add a spouse/domestic partner or child due to a Qualifying Life Event, the EOI form is not required
- You can cancel or reduce your coverage in these plans at any time by contacting the Benefits Department at Benefits@Brookfield.com
- Coverage amount(s) will be reduced to 65% of the original amount(s) when you reach age 70 for both you and your spouse/domestic partner, if eligible

DESCRIPTION	DETAILS
VOLUNTARY LIFE	BENEFIT
INDIVIDUAL	You may purchase guaranteed issue coverage in \$10,000 increments up to lesser of \$400,000 or 5x annual salary. Additional coverage may be purchased with EOI up to the lesser of \$1 million or 5x annual salary. In order to purchase coverage for your spouse/domestic partner and/ or child(ren), you must purchase voluntary coverage for yourself.
SPOUSE/ DOMESTIC PARTNER	You may purchase guaranteed issue coverage in \$5,000 increments up to the lesser of 50% of your voluntary coverage or \$50,000. Additional coverage may be purchased with EOI up to the lesser of 50% of your voluntary coverage, or \$250,000.
CHILD	You may purchase a flat \$10,000 in coverage (for children under six months of age the benefit is a flat \$1,000).
VOLUNTARY AD&	D BENEFIT
INDIVIDUAL	You may purchase coverage in \$10,000 increments up to the lesser of 5x annual salary or \$1 million.
SPOUSE/ DOMESTIC PARTNER	You may purchase coverage in \$5,000 increments up to the lesser of 50% of your voluntary coverage or \$250,000.
CHILD	You may purchase a flat \$10,000 in coverage (for children under six months of age the benefit is a flat \$1,000).

2023 EMPLOYEE BENEFITS GUIDE 17

Disability Insurance

Eligibility

Non-union employees in the U.S. who work at least 30 hours per week are automatically enrolled in Short-Term Disability and Long-Term Disability as of your first day of employment.

Unum is our leave of absence administrator. Contact Unum at **866-779-1054** or **www.Unum.com** if you need to take a disability leave.

Short-Term Disability

Short-Term Disability (STD) insurance provides benefitseligible team members with a benefit for each day they are absent due to non-work related illness or injury, up to a maximum of 180 days or approximately 26 weeks. All active full-time team members are eligible for this plan. Those employed in the states which provide statutory plans may receive a top-up from this plan. For more information, including specific eligibility requirements, contact **benefits@brookfield.com**.

Long-Term Disability

Long-Term Disability (LTD) insurance through Unum is designed to replace a portion of your income if you become totally disabled and cannot work for an extended period of time. LTD benefits begin at the end of the maximum STD period or after you have been totally disabled for at least 180 consecutive days; whichever comes later. The benefit is equal to 66 2/3% of your base salary up to a maximum of \$17,000 per month. A monthly maximum benefit will apply. Payment of the benefit is subject to approval by the insurance company.



Planning a Leave?

Visit **Brookfield.leavelogic.com** to help you make important decisions about your leave. It features:

Confidential Leave Planing

With powerful self-service tools, you can navigate your benefits easily and plan the leave you want before disclosure of a life event.

What Benefits Are Available to Me?

Benefits such as health care, employee assistance programs, as well as state and local regulations are all consolidated in one convenient location.

How Much Time Can I Take Off?

All policies and programs become transparent helping you decide how to incorporate family and work.





Long-Term Care Insurance

Long-Term Care insurance is an additional insurance program Brookfield offers so that employees have the convenience of payroll deduction and discounted group premiums for other coverage required to support their individual and family needs. Long-Term Care (LTC) provides services that help meet both the medical and non-medical needs of people with a chronic illness or disability who cannot care for themselves for long periods.

It is common for Long-Term Care to provide custodial and non-skilled care, such as assisting with normal daily tasks — like dressing, feeding, using the bathroom by providing a level of medical care that requires the expertise of skilled practitioners to address multiple chronic conditions.

- This policy is owned by the employee and the employee pays 100% of the cost of coverage
- To access the application forms, please direct the employee to the "Apply Now" section
- Employees may discontinue this policy at any time upon notification to the insurance company and to payroll. To enroll in Long-Term Care, use the step-by-step instructions provided in this link: https://www.myltcguide.com/ Technologyservicesgroup
- This policy is also portable, meaning that if employment is terminated for any reason, employees have the right to take the coverage as an individual policy and continue to pay premiums directly to Unum

Employee Assistance Program

Life Happens. Stress Less. Live More.

You've got a lot on your plate. Balancing work and family can be tough. And you probably have projects you want to spend time on, too. Sometimes it can feel like you have to do it all, all by yourself. The EAP is a power tool you've already got in your life toolbox. You don't have to wait until things break to call us. Getting help with issues you're facing can save you time and stress.

Meet face to face, online by video stream or get in-themoment support by phone or by visiting the website. You'll find video resources, articles, assessments, webinars and more to support you.

Here are just a few of the reasons people use the EAP:

- Managing stress
- Parenting
- Improving your finances
- Working through conflicts
- Dealing with illness
- Grieving a loss
- Caring for elderly family members
- Meeting your goals

Here for small issues, big problems and everything in between.

Save with LifeMart

LifeMart is an employee discount program through the EAP. You can get exclusive discounts on a wide range of products including gym memberships, travel services, electronics and more! Visit **www.resourcesforliving.com** to learn more.

THEY'RE HERE FOR YOU, 24/7/365

Your EAP with Aetna Resources for Living is free, confidential and available around-theclock. Call anytime, at **888-238-6232** or visit **www.resourcesforliving.com** Username: Brookfield Password: EAP

Commuter

All Brookfield employees are eligible for Parking and Transit benefits through PayFlex. You can participate in either or both of these benefits on a pre-tax and post-tax basis.

You can now use your prepaid commuter check card for both commuter accounts. This means, you have access to spend the funds in both your parking and transit accounts, regardless of expense type. Based on the merchant code where you use your card, the system will prevent you from using more than the monthly IRS limit for either expense type.

You can enroll in Commuter coverage and review options available through PayFlex at **www.payflex.com**. You will first need to register as a new user. You must enroll and make any changes by the 10th of the month to be effective for the next month. Your Commuter election is only taken from the second pay of each month.

Transit

This benefit can be used to pay for public transit including train, subway, bus, ferry or vanpool — as part of your daily commute to and from work. It's a great way to put extra money in your pocket each month and make your commute more convenient and affordable.

Parking

You can use this benefit to pay for your daily, weekly or monthly parking. Additional information about the PayFlex parking benefit can be found at **www.payflex.com**, or call **888-678-8242**.

The IRS maximum pre-tax contributions in 2023 are:

- Transit: \$280 per month
- Parking: \$280 per month

Caution: while your remaining funds will roll over each month, these accounts are meant to be used as you incur the cost. If you leave the company, IRS rules stipulate that your funds can't be refunded to you. See the "Leaving the Company" document at **development.livewell.brookfield.com** for more details.





Voluntary Benefits

If there's an emergency or you end up in the hospital, health insurance helps with the medical expenses. But what about extra expenses, like deductibles, copays and even daily things like your mortgage, child care costs or car payments? These voluntary insurance options, available through Aetna, can help supplement your medical plan with extra financial support if you are sick or injured. For complete details, visit **www.myaetnasupplemental.com**.

When you have a covered illness, injury or hospital stay, just submit a claim online at **www.myaetnasupplemental.com**, and Aetna will mail you a check. You can use the money however you need to. All of the Aetna plans are portable should you ever leave Brookfield. Premiums are paid through automatic payroll deductions and your coverage is guaranteed. You do not have to be on a Brookfield medical plan to elect these coverages.

Group Accident Insurance

This plan pays a cash benefit to help cover out-of-pocket expenses associated with an accidental off-the-job injury, like burns, concussions or fractures.

Group Critical Illness

Critical Illness coverage pays a lump-sum amount if you are diagnosed with a covered disease or condition, like a heart attack, cancer or stroke.

Critical Illness coverage also includes a wellness benefit, which pays you \$100 per year just for completing any one wellness screening like a skin cancer check, mammogram or colonoscopy, just to name a few. If you elect an Aetna supplemental health plan, you'll also get access to an exclusive CVS shopping site with savings opportunities to help live a healthier lifestyle. It includes a 20% discount on everyday CVS health items, plus additional discounts on glasses, teeth whitening, gym membership, acupuncture, massage therapy and more! Visit www.MyAetnaSupplemental.com to learn more.

Group Hospital Indemnity

Hospital Indemnity Coverage pays cash benefits directly to you if you have a covered stay in a hospital, critical care unit or rehabilitation facility. Payments can vary based on the number of days you spend there.

Note: Exclusions and limitations apply, see the plan certificates for each coverage listed above for more details.

Care.com

Care.com Membership

Care.com is the world's largest network for finding and managing care. With unlimited access to a subsidized Premium Care.com membership, you can find regular, part-time or ongoing care including:

- Nannies and babysitters
- Senior caregivers
- Pet sitters and groomers
- Tutors and distance learning facilitators
- Special needs caregivers
- Housekeepers and more

You can use Care.com to access resources in the Care. com Community, including articles, pay rate calculators, and step-by-step guides for child care, adult care, pet care and more. Care.com is accessible by visiting the website **www.care.com** or through the Care.com App on the Apple App Store or Google Play.

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Backup Care

When regular care isn't available, Backup Care is an affordable, subsidized benefit to help you fill gaps in care. Like when schools are closed, someone needs a ride to the doctor, or your dog needs some extra care. You can request backup care for children, adults and pets. You will be able to use a care provider that is innetwork and submit a receipt to be reimbursed, using the Personal Network Backup Care.

LifeMart

LifeMart is a members-only online discount program offering savings on major brands and everyday essentials. You can access hundreds of online discounts to save money on everyday needs, including:

- Child care and senior care discounts
- Pet care insurance and supplies
- Groceries and restaurants
- Gyms, fitness, wellness and more

You can access Lifemart online at

www.lifecare.com/lifemart or through the LifeMart app available on the Apple App Store or Google Play.

MetLife Legal Plans

You have access to top professionals and experienced attorneys through MetLife Legal Plans to help you with a variety of personal legal matters. Telephone and office consultations are available with an attorney of your choice within the network. You will have unlimited use of legal services covered by the Plan and no waiting periods, claim forms, deductibles or copays.

Among the services you can access is digital estate planning providing you with a simple, guided process to complete wills, living wills and/or power of attorney in as little as 15 minutes. This service also provides real-time video guidance with a notary and witnesses to finalize the documents.

The cost to cover this plan for you, your spouse/ domestic partner and dependents is just \$13.50 per month. For matters that aren't covered under the Plan, you can receive four hours of Network Attorney time and services per year.Learn more at **www.legalplans.com**.



MetLife Legal Plans can help when you are:

- Getting married
- Buying, selling or renting a home
- Starting a family
- · Dealing with identity theft
- Sending kids to college
- Caring for aging parents



NortonLifeLock Identity Theft Services

Everyday things like online shopping, banking and even browsing can expose personal information and make you vulnerable to cybercriminals and identity theft. You can live your digital life safely with these services from LifeLock:

Device Security: Anti-virus software and multi-layered, advanced security helps protect devices against existing and emerging threats, including malware and ransomware.

Online Privacy: Norton Secure VPN protects devices and helps keep online activity and browsing history private. Privacy Monitor scans common public websites to help you opt out. And SafeCam alerts you and blocks any attempts to access your webcam.

Identity: Fraudulent use of personal information is monitored, and alerts are sent when there is a potential threat.

Home and Family: Monitor your child's online activity with easy-to-use tools to set screen-time limits, block unsuitable sites and monitor search terms and activity history.

Summary of Services

Find the coverage that works best for you and your family. Select either NortonLifeLock Essential or Premier Plan during Open Enrollment. There are varying degrees of coverage depending on what is important for you to protect. The monthly rates are below:

COVERAGE LEVEL	EMPLOYEE ONLY	FAMILY
Essential Plan (One credit bureau monitoring)	\$5.99	\$12.98
Premier Plan (Three credit bureaus monitoring)	\$8.99	\$17.98

For more information visit my.norton.com.



Pet Insurance

Take care of your furry friends with pet insurance. The My Pet Protection suite of pet insurance plans from Nationwide is an exclusive benefit for Brookfield employees that gives you superior protection for your pets at an unbeatable price. It features:

- 70% and 50% reimbursement plans on vet bills
- One set price, regardless of the pet's age
- An average savings of 40% over similar plans from other pet insurers
- 24/7 access to veterinary experts by phone, chat or email for help for everything from general pet questions to urgent care needs
- PetRxExpress save time and money on pet prescriptions at participating retail pharmacies

Visit **benefits.petinsurance.com/brookfield** and provide your pet's species and ZIP code to get started. Call **877-738-7874** to access the vethelpline.

2023 EMPLOYEE BENEFITS GUIDE 23

401(k) Savings Plan

Eligibility

Full-time employees who are at least 21 years of age are immediately eligible to participate in the 401(k) plan.

Part-time employees who are at least 21 years of age and have worked 1,000 hours or more in the previous 12-month period are also eligible to participate in the Plan.

Employee Contributions

The maximum employee deferral amount for 2023 is \$20,500 with a catch-up contribution maximum of \$6,500.* If you are 50 or older, you may contribute a maximum of \$27,000 for 2023.

You can contribute up to 60% of your compensation through either pre-tax or Roth contributions, up to the IRS limits combined across your employee deferral contributions.

- Pre-tax contributions allow you to put money aside before federal and most state income taxes, which lowers your taxable income today. Your money grows tax-free and you don't pay taxes on it until you elect to start using it in retirement.
- Roth contributions allow you to put money aside after federal and state income taxes and you don't pay taxes on your contributions and earnings when you start using them in retirement.

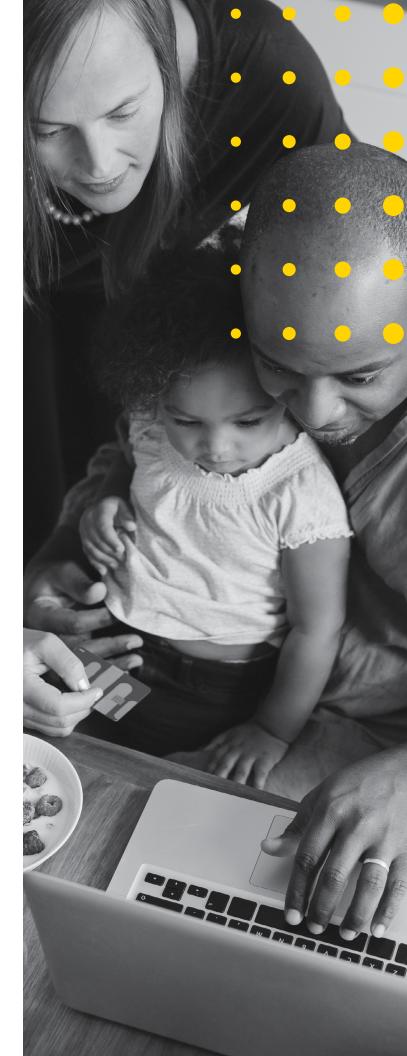
You may elect pre-tax, Roth, or a combination as long as your total contributions don't exceed the IRS annual limits. You may also designate different deferral amounts between regular pay vs. bonus/commission pay; regular pay elections will not be taken from bonus pay. All funds contributed by you and Brookfield are 100% vested.

You may change your contribution percentage at any time directly through Empower:

www.brookfieldretirement.com or 844-465-4455.

*If you contributed to another employer's 401(k) plan during the plan year, you are responsible for monitoring your IRS maximums across all plans.





Employer Contributions

Through the 401(k) company-matching contribution program, you have an opportunity to receive dollar for dollar of what you contribute to the 401(k) Plan up to 5% of your eligible pay.

- Contributions of up to 5% receive 100% of your contributions up to the maximum Employer Contribution (match)
- Maximum Employer Contribution is 5% of eligible compensation up to the IRS limit of \$290,000 in 2023

The Employer Contribution begins in the first payroll after the first of the month following three months of employment. Note: You can elect and begin your contributions as soon as your Empower account is created, however, contributions you make prior to this waiting period will not be matched.

Additional benefits to participating in your 401(k) Plan include: investment options, saving convenience and personal and home loan options.

Auto Enrollment

All new hires are immediately eligible to participate. If no elections are made within 30 days, you will be autoenrolled at 5%. You can decrease or increase these elections at any time.

You will be able to direct contributions to any of the investments available in the Plan. However, if you do not make an investment election, your money will be invested in the default fund for the Plan, the American Centuries target date fund (based on age and estimated retirement age of 65).

Within ten business days of your hire, you will receive an email from Empower that includes all the information you need to get started.

Auto Increase

The Plan also provides the opportunity to elect automatic rate increases to help you reach your goals. Also, if you have been auto-enrolled into the Plan, Brookfield will increase your contribution by 1% each year until you reached 10%. You may change this amount or opt out at any time. Auto increase will occur each April 1st until you achieve 10% unless you change it.

Opting Out of Auto Enrollment and Auto Increase

If you want to contribute a different amount or do not want to contribute to the Plan, you have 30 days from your hire date to opt out using one of the following methods:

- Online: Log on to www.brookfieldretirement.com using your username and password.
 - Click on the Brookfield 401(k) Savings Plan link.
 - Choose "Paycheck Contributions" under the Account Information menu.
 - Choose the amount that you would like to contribute (enter 0% if you do not wish to contribute).
- By phone: Contact Empower Retirement at 844-465-4455, then enter 0# to speak with an Empower representative. You cannot opt out using the automated telephone system. Representatives are available to take your call weekdays between 8:00 am and 10:00 pm Eastern Standard Time and Saturdays between 9:00 am and 5:30 pm Eastern Standard Time.

Loans

While your 401(k) is meant to be a savings vehicle for your retirement, there may be times when you need to access your funds prior to retirement. Our plan includes a loan feature:

- You can borrow up to 50% of your vested account balance (minimum \$1,000; maximum \$50,000).
- Pay back your account with interest.
- You may have two loans outstanding at a time.
- Take up to five years to pay back a general purpose loan; take up to 10 years to pay back a primary residence loan.
- There is a \$50 origination fee and a \$25 annual maintenance fee per loan.

Investment Assistance

You can invest your 401(k) account into a wide range of mutual funds, exchange-traded funds, stock and fixed-income securities. For help determining the right investments for you, call **844-465-4455** to speak with an experienced retirement consultant.

Maximize Your Retirement

Take advantage of the following tools and resources from Brookfield to help you save for the future:

- Empower as our 401(k) administrator, Empower is here to help:
 - www.brookfieldretirement.com has an impressive assortment of tools and calculators on their site you can use to model your elections and plan for your future.
 - **The Home page:** has simple tools to help plan your retirement income, project health care costs as well as see how prepared you are for your future.
 - **My Financial Path:** Receive a personalized action plan, access valuable financial education resources, plus help with evaluating student debt options.
 - Retirement savings consultants: Schedule a phone consult to make sure you're on track to reach your goals.
- Medicare assistance: Need help understanding Medicare and choosing the Plan that's right for you?

- Mylo: Visit choosemylo.com/health/ medicare-insurance or call 844-863-5950 to speak with an advisor and get a guote
- **Aetna:** Medicare Transition Services through Aetna offers Medicare specialists, decision guidance and tailored online resources
- Health Advocate: Call 866-695-8622 or visit
 HealthAdvocate.com/Brookfield to speak
 with a personal Health Advocate who can guide
 you through your options

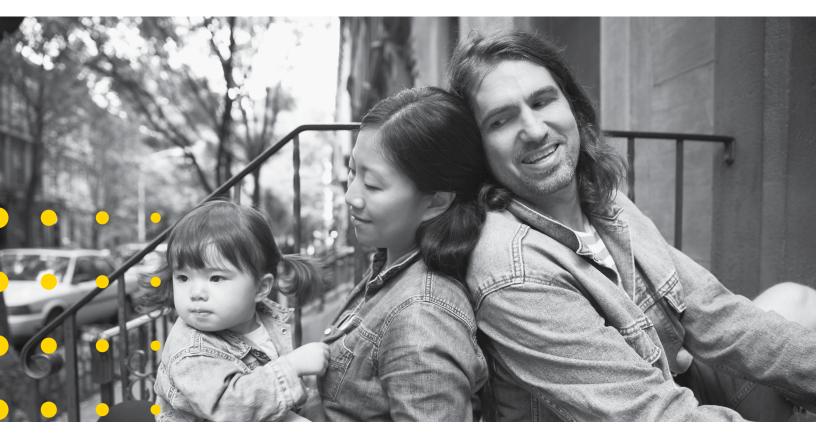
Have Questions About Your 401(k) Plan or Want to Initiate a Transaction?

Visit Empower at: **www.brookfieldretirement.com** or **844-465-4455**.

You may also access the 401(k) Summary Plan Description (SPD) and other important plan disclosures via Empower.

¹ Maximum contributions are subject to required audits and/or non-discrimination testing, which can affect the amounts that you may be able to set aside.

² If you reach the IRS maximum employee contribution during the plan year and your match stops posting with each pay, after the final payroll for the year you will receive a "true-up" match contribution for the difference between your full match verses what actually posted during the first half of the following year.





Enrolling or Changing Your Benefits

When You Can Enroll or Change Your Benefits

For some of our benefit plans, you will have designated times of the year when you can enroll. These are not Brookfield's rules; these rules are dictated by the IRS and/or the insurance providers.

- **1. Open Enrollment** October 3, 2022–October 14, 2022, for coverage effective January 1, 2023
- New Hire/Newly Eligible within 30 days of hire/eligibility
- **3. Qualifying Life Events** you must initiate a life event in Workday within 30 days of the event. Qualifying life events include:
 - a. Marriage, divorce or legal separation
 - b. Birth or adoption of a child
 - c. Death of a spouse/domestic partner or dependent
 - d. You or one of your covered dependents gaining or losing other benefits (for example, beginning or ending a job) or material change in current benefits
 - e. Your children meeting (or failing to meet) the Plan's eligibility rules (for example, student status changes)
 - f. Court order requiring coverage of a dependent child
 - g. Start or termination of a Domestic Partner relationship (see the Domestic Partner Policy for more details)

Note: You will be required to provide proof of your life event to the HR Service Desk within 30 days of the event date. Also, the IRS limits changes that can be made based on the type of life event. The change must be "consistent" with the event type.

Here's a summary of when you can enroll in each plan:

- Benefit plans subject to enrollment deadline restrictions above are: Medical, Dental, Vision, Voluntary Life & AD&D Insurance, LTD, Health Care FSA, Dependent Care FSA, Long-Term Care, Critical Illness, Accident, Hospital, Legal and Identity Theft protection.
- You may enroll in the following at any time: 401(k), Pet Insurance and Commuter Benefits.
- If you are eligible for the Plan, you are automatically enrolled in the following: STD, LTD, Basic Life Insurance, Basic AD&D, Wellness, Health Advocate and EAP.

Starting the Process to Enroll in Benefits

- You will receive a task notification in your
 Workday inbox when it is time to complete your benefits enrollment.
- You can review information about the plans by clicking **development.livewell.brookfield.com**.
- When you are ready, go back to Workday and click on the Inbox Worklet on the home screen, or if during Open Enrollment, click on the Open Enrollment announcement.
- In your inbox, the task will appear on the lefthand side — titled Benefit Change — Hire or Open Enrollment Change. Select this task.
- Your Benefits will be broken down into three sections:

- Health care and Accounts (i.e., Medical, Dental, Vision and FSAs)
- Insurances (i.e. Basic Life and Voluntary Life)
- Additional Benefits (i.e., MetLife Legal, etc.)
- Important enrollment instructions will be provided on each page.

You get to select any benefit you would like to enroll in or change by clicking on **Manage** or **Enroll**.

• The **Update Your Information** Screen will appear if you did not enter your dependents' Social Security Number (SSN) when you added them to Workday. You will be asked to either update your dependent SSN or provide a reason and then click **Save**.

Health Care and Accounts

- The first screen displays the health care plans and Spending or Saving Accounts for which you are eligible.
- Select the plan in which you wish to enroll.
- Select the applicable level of coverage that you would like to be applied to the plan selected (e.g., Employee Only, Employee + Spouse/ Domestic Partner, Employee + Child(ren), or Family then Confirm and Continue.
- Add any eligible dependents that you wish to enroll in the Plan by checking the box next to the dependent. If you do not have existing dependents already listed in Workday, you will need to select Add New Dependent and enter the required information for each dependent (marked with a red asterisk). You will be required to submit documentation within 30-days of your coverage effective date to verify that anyone being added to the Plan(s) is your legal dependent(s). See "Required Documentation for Dependents" on page 30 for more details. NOTE: If you wish to name your dependent as a beneficiary of your life insurance, select Yes when asked this question.
- Workday will display the cost of each plan as you select your preferences.
- NOTE: If you will be enrolling a spouse or domestic partner, you must visit the Spousal/ Domestic Partner Surcharge tile and attest to whether or not your spouse/domestic partner can

get coverage through their employer.

- If you are enrolling in the medical plan you must also elect the following two benefits:
 - Wellness U.S. plan
 - The Vision plan named Vision U.S.-EyeMed Premier with Medical
- Once you have completed each of your Health Care and Account elections, click **Save** and you may move on to any benefit in either in the Insurance or Additional Benefits groups.
- For Flexible Spending Account and Dependent Care Flexible Accounts, you will need to enroll to ensure you have coverage in the following year during Open Enrollment. Select the amount you want to contribute per paycheck or per year up to the IRS contribution limit, and then click **Save**.

Insurance Elections

Brookfield offers additional insurance and programs for the benefit of our employees:

- You may elect additional Voluntary Life insurance or Accidental Death and Dismemberment (AD&D) coverage (companypaid benefits, such as Basic Life, Basic AD&D and disability coverage will default to Elect).
- To enroll in a voluntary insurance plan, select the **Manage** or **Enroll** button and choose your coverage level from the dropdown menu.
- Choose Plan Available then **Confirm** and **Continue**.
- Choose Coverage and then Select Your Beneficiaries. You can choose Primary, Secondary or a combination of both. Each section must total 100%. Then click Save. Note: Some plans may be subject to Evidence of Insurability and/or prerequisites (e.g., Voluntary Spouse/Domestic Partner Life — U.S. — Unum (Dependent) is limited to 50% of total coverage in Voluntary Life — U.S. — Unum (Employee) and Employee coverage must first be selected).

Beneficiaries

- You are required to enter beneficiary information for all Life insurance and AD&D plans.
- Click the plus symbol next to the Plan, then select a beneficiary from the dropdown menu. If the beneficiary or Trust is not already listed in Workday, you will need to select Add New Beneficiary or Trust and enter the required information before assigning them to a plan (if applicable).
- Specify whether the beneficiary is **Primary or Contingent** and the percentage that you wish to assign to them. Note: You may nominate multiple Primary and Contingent beneficiaries for one plan, but the minimum requirement is one Primary beneficiary at 100%.
- Once you have enrolled in your preferred Voluntary Insurance plans and entered your beneficiaries, click Confirm and Continue.

Additional Benefit Elections

Brookfield offers additional insurance and programs for the benefit of our employees:

- MetLife Legal benefits provide tax, insurance and financial advice with access to attorneys and online tools.
- NortonLifeLock provides identity theft protection.
- The remaining benefit plans are automatically included in your benefits package.
- Once you have enrolled in all of your benefits click **Review** and **Sign**.

The following benefits require you to enroll outside of Workday. Other than LTC, any of the below allow enrollment throughout the year:

- To enroll in Long-Term Care, use the step-by-step instructions provided in this link: https://technologyservicesgroup.myltcguide. com. Note, you may be required to submit additional information if this is not your first opportunity to enroll.
- Pet Insurance: enroll directly at benefits.petinsurance.com/brookfield.
- 401(k): www.brookfieldretirement.com or 844-465-4455
- Commuter: PayFlex.com or 888-678-8242

View Summary

- On this page, you will be provided with a summary of the benefits you have elected as well as any Evidence of Insurability requirements, if applicable.
- Once comfortable with all of your benefit selections click **Review and Sign**.
- Read and agree to the Electronic Signature.
- If you would like to make changes prior to submitting, you can click on the Previous button.
- Click Submit to finalize your enrollment.

Note: Brookfield provides basic demographic information to the following vendors to ensure seamless response and enrollment. If you would not like to have your basic information shared with the below vendors, please send an email to **benefits@brookfield.com** with the name of the vendors you would like to be excluded from.

List of vendors:

- 1. Health Advocate Benefits concierge
- 2. Payflex Commuter
- 3. Nationwide Pet Insurance
- 4. Benefits Mobile App





by clicking on the link on the next page.

- Click **Done** to complete the process.
- You can view or change your elections as many times as you like during the Open Enrollment period by either clicking on the Open Enrollment Announcement or Change Open Enrollment elections under Benefits on the Home Screen.

Evidence of Insurability and Spousal/Domestic Partner Surcharge Forms — Action Required

- If you applied for an amount of Life insurance that requires Evidence of Insurability, you will receive a task in your Workday inbox. Once you have completed the required steps, click Submit on the task.
- If you have enrolled your spouse or domestic partner in a medical plan for the first time, attest in the Spousal/Domestic Partner Surchage tile to verify your spouse's/domestic partner's employment status and access to medical coverage through their own employer. If their access to coverage changes during the year; contact **Benefits@brookfield.com** to obtain a Spousal/Domestic Partner Surcharge Attestation form.
- If your have enrolled any new dependents, you will be asked to provide documentation to verify those dependents within 30 days of your coverage effective date. You will receive a task in your Workday inbox relating to this. Once you have completed and submitted the required documentation to the HR Service Desk, click Submit on the task.

Required Documentation for Dependents

Please note that employees are required to submit

the following documentation within 30 days of the dependent's coverage effective date to verify dependents being added.

Spouse

To verify your spouse, the below items will be required:

- Government-issued marriage certificate, spousal surcharge waiver form (if applicable) and one of the following:
 - Joint lease, mortgage or deed
 - Joint tax return showing spouse (Social Security and other numbers should be blacked out)
 - Joint utility bill
 - Joint banking account or credit account (account numbers should be blacked out)

Domestic Partner

Registered domestic partners are eligible for coverage under Brookfield's benefits plans. To register a domestic partner, the following proof of domestic partnership will be required:

- A Domestic Partner Registration Statement, if you reside in a state or locality that provides for such registration, a state civil union license/ certificate, or other similar government-issued evidence recognizing the relationship, and one of the following forms of proof of financial interdependence of the domestic partners:
 - Joint lease, mortgage or deed;
 - Joint tax return showing the domestic partner as the Brookfield employee's dependent (Social Security and other numbers should be blacked out);
 - Joint utility bill; or
 - Joint banking account or credit account (account numbers should be blacked out); or
- If not registered by the state or locality, and to register with Brookfield, please provide the spousal waiver form (if applicable), the Brookfield Affidavit of Domestic Partnership and three forms of proof of financial interdependence of the domestic partners from the list below:
 - Joint banking account or credit account (account numbers should be blacked out)
 - Joint obligation of a loan

- Joint tax return showing the domestic partner as the Brookfield employee's dependent (Social Security and other numbers should be blacked out)
- Joint lease, mortgage or deed
- Joint utility bill
- Evidence of shared household expenses (e.g., grocery bills, homeowner's/renter's insurance bills, gasoline expenses)
- Joint ownership of a vehicle
- Wills having each other as executor and/or beneficiary
- Designation of the domestic partner as beneficiary under the Brookfield employee's company life insurance benefit
- Designation of the domestic partner as beneficiary under the Brookfield employee's company retirement benefits plan
- Mutual grant of authority as health care proxy
- Mutual grant of durable power of attorney
- Status as an authorized signatory on the other's credit card, charge card or bank account
- Joint ownership of holding of investments
- Shared household budget for purposes of government benefits
- Joint responsibility or shared expense of child care
- Affidavit of creditor or other individual able to testify to the domestic partner's financial interdependence

Child

To verify dependent children, one of the below items will be required:

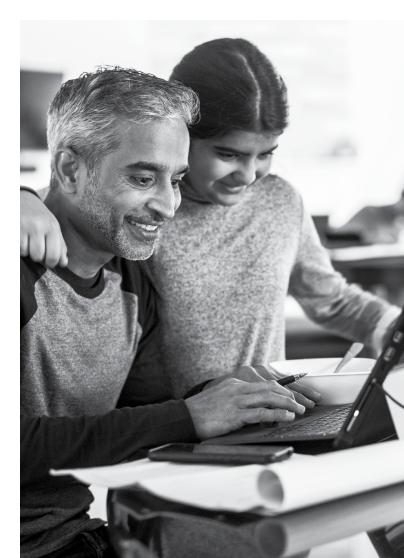
- Birth:
 - Birth Certificate with parents' names listed (within 90 days of birth)
 - Hospital Birth Record (within 90 days of birth)
- Adoption: Adoption Certificate or Adoption
 Placement Agreement
- Legal guardian: Court documentation of Legal Custody/Guardianship
- Support order: Qualified Medical Child Support Order

- Legal Authorization: Court Order ordering child to be covered on insurance
- Disabled dependent: Physician's certificate or Medicare card or Proof of Dependent (above) and, if age 26 or older, tax return showing that child is claimed as a dependent

How to Upload the Documents to Workday

Within 30-days of your dependent(s) coverage effective date, you must upload the documentation directly to WorkDay:

- Under your profile picture (or Cloud) in the upper right corner, click "View Profile"
- On the left navigation bar, click "Personal"
- Click "Documents" on the upper navigation bar
- Click "Add" to upload your documentation



Removing Dependents from Coverage

In certain situations such as Qualifying Life Event changes, you may be eligible to remove a dependent from coverage under the Plan. The following document will be required, as applicable:

- Divorce: Divorce decree
- Legal separation: Court document specifying date of legal separation
- Termination of domestic partnership: If registered with a state/local entity, a formal dissolution, otherwise, a completed Domestic Partnership Termination affidavit
- Dependent change of status of coverage from another employer: Proof or letter from other employer or insurance provider validating change (for example, spouse's new hire eligibility to allow for employee to drop benefits, spouse lost employment to allow for employee to add benefits, etc.)

Domestic Partner Benefits

Medical, dental and vision benefits are offered to domestic partners. In general, domestic partners:

• Have registered as Domestic Partners under state law (where applicable)

OR

To register with Brookfield you must meet the below criteria and provide three of the requested information:

- Are at least 18 years of age, are not related in a way that would prohibit marriage in any state of operation, and are not married to or legally separated from anyone else;
- Are competent to enter into contract at the time the domestic partnership statement is completed;
- Have an exclusive mutual commitment to share responsibility for each other's welfare and financial obligations which has existed for at least six months prior to the enrollment;
- Are each other's sole domestic partner and have not had another domestic partner in the past six months;

• Have shared a permanent residence for at least the past six months.

Children of domestic partners are eligible for benefits under the same conditions as children of an employee's legal spouse.

An employee may terminate a domestic partnership by notifying the Benefits Department in writing of the termination of the domestic partnership within 30 days of its termination. (The same guideline exists for married couples who divorce.) The employee must then wait six months from the date of the notice before registering another domestic partnership, except in any of the following cases:

- Where the employee has registered a domestic partnership under state or local law, where applicable;
- Where the employee is registering the same domestic partnership within 30 days' notification of the termination of that domestic partnership;
- Where the employee's former domestic partnership was dissolved through the death of the employee's domestic partner.

Under federal tax law, if your (non-spouse) domestic partner does not qualify as your tax dependent for health coverage purposes, then you will be unable to pay for your domestic partner's coverage on a pre-tax basis under the cafeteria plan.

Although coverage is also available for children of an eligible employee's domestic partner under Brookfield's group health plan, a domestic partner's child is unlikely to qualify as an employee's tax dependent for health coverage purposes. Thus, the value of such coverage generally must be included in gross income. You should contact the Benefits Department if you believe your domestic partner's child may qualify as your tax dependent for health coverage purposes. You will also be unable to claim expenses for your domestic partner under the Health Care FSA.

Certain taxing authorities may consider company payments for domestic partner benefits to be taxable income, so employees should determine whether the taxes they would pay for the domestic partner benefits, if any, are more costly than buying health insurance independently. The company will treat the value of the benefits provided to the employee's domestic partner as required under federal, state and local law.

Disabled Dependent: Physician's certificate or Medicare card or Proof of Dependent (above) and, if age 26 or older, tax return showing that child is claimed as a dependent.

Contact the Benefits Department for Information and Registration

An employee who wishes to receive domestic partner benefits must contact the Benefits Department for information and registration (**Benefits@Brookfield.com**).

After successful registration, the Benefits Department will acknowledge the partnership as of the qualifying event date. Enrollment of domestic partners and eligible dependent children is subject to the same rules as enrollment of other dependents.

Imputed Income

Under current IRS rules, the value of the contribution Brookfield makes toward the cost of medical coverage provided to certain family members who are not your tax dependents may be considered imputed income that is subject to federal income taxes, FICA (Social Security and Medicare) and any other required payroll taxes. In some cases, you may also have imputed income for California state income tax purposes.

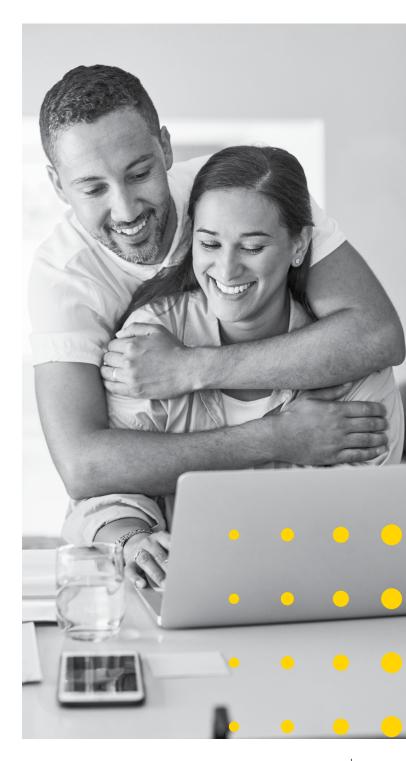
Final approval of coverage for a domestic partner will rest with the insurer underwriting the benefits at the time of application. Brookfield voluntarily extends continuation of COBRA coverage to domestic partners.

Change in Work Status

If you are a full-time employee moving to part-time status, you will only be eligible for medical, 401(k), EAP, Health Advocate, Vitality and Commuter Accounts. You will be eligible for medical coverage until the end of the calendar year, and will only remain eligible for medical benefits the following year if you work an average 30 or more hours per week during the ACA lookback calculations for Open Enrollment. The following year's eligibility will not be confirmed until October of the current year when the lookback calculation is complete. You will remain eligible for 401(k) benefits as long as you were eligible before

your change in work status. Any 401(k) election changes will continue to go through Empower for submission. Eligible employees also will have the opportunity to enroll in COBRA benefits for dental, vision and Health Care FSA, if previously enrolled.

If you are leaving the company, information about your benefits termination can be found on **development.livewell.brookfield.com** under Resources/Documents.



Your Bi-Weekly Paycheck Contributions

Medical

HMSA BASIC		
	BROOKFIELD CONTRIBUTION	YOUR CONTRIBUTION
EMPLOYEE (EE) ONLY	\$237.27	\$2.41
EE + CHILD(REN)	\$366.51	\$88.34
EE + SPOUSE	\$442.29	\$106.20
EE + FAMILY	\$588.98	\$175.22

HMSA PREMIER		
	BROOKFIELD CONTRIBUTION	YOUR CONTRIBUTION
EMPLOYEE (EE) ONLY	\$237.69	\$19.33
EE + CHILD(REN)	\$366.96	\$120.83
EE + SPOUSE	\$443.20	\$144.98
EE + FAMILY	\$589.95	\$229.56

Working Spouse/Domestic Partner Surcharge Policy

Brookfield assesses a \$1,200 per year, or \$46.15 per pay period, surcharge fee on medical plan premiums for employees whose spouse/domestic partner are enrolled in Brookfield's medical plan. The surcharge will apply if the covered spouse (or domestic partner) is currently employed elsewhere and is offered medical and prescription drug coverage through his or her employer.

Dental

PPO PLUS PLAN			
	BROOKFIELD CONTRIBUTION	YOUR CONTRIBUTION	
EMPLOYEE (EE) ONLY	\$23.00	\$3.65	
EE + SPOUSE / DOMESTIC PARTNER	\$33.25	\$7.31	
EE + CHILD(REN)	\$36.94	\$8.12	
EE + FAMILY	\$56.90	\$15.80	

If your covered spouse/domestic partner is unemployed, self-employed or employed but not offered medical/ prescription coverage, you may indicate during enrollment via Workday that the surcharge should not apply.

You are required to contact the Benefits Department in the event your spouse/domestic partner becomes eligible for medical/prescription benefits through his or her employer during the year.

PPO PLAN				
	BROOKFIELD CONTRIBUTION	YOUR CONTRIBUTION		
EMPLOYEE (EE) ONLY	\$19.77	\$3.03		
EE + SPOUSE / DOMESTIC PARTNER	\$28.65	\$6.05		
EE + CHILD(REN)	\$31.82	\$6.73		
EE + FAMILY	\$49.10	\$13.12		

Vision

EYEMED BASIC				
	BROOKFIELD CONTRIBUTION*	YOUR CONTRIBUTION		
EMPLOYEE (EE) ONLY	\$0.00	\$2.32		
EE + SPOUSE /DOMESTIC PARTNER	\$0.00	\$4.61		
EE + CHILD(REN)	\$0.00	\$4.92		
EE + FAMILY	\$0.00	\$7.86		

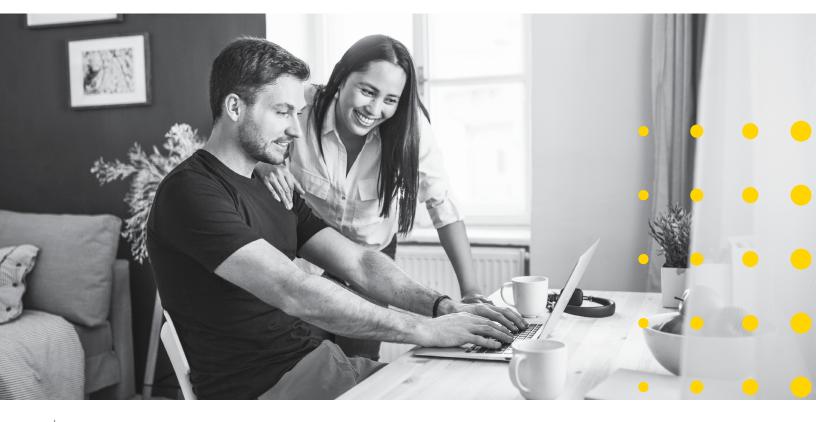
EYEMED PREMIER			
	BROOKFIELD CONTRIBUTION IF ENROLLED IN AN AETNA MEDICAL PLAN*	YOUR CONTRIBUTION IF ENROLLED IN AN AETNA MEDICAL PLAN	YOUR CONTRIBUTION IF NOT ENROLLED IN AN AETNA MEDICAL PLAN
EMPLOYEE (EE) ONLY	\$4.34	\$0.00	\$4.34
EE + SPOUSE / DOMESTIC PARTNER	\$8.68	\$0.00	\$8.68
EE + CHILD(REN)	\$9.28	\$0.00	\$9.28
EE + FAMILY	\$14.82	\$0.00	\$14.82

*For employees enrolled in one of the Aetna Medical Plans, Brookfield will pay 100% of the cost for the EyeMed Premier Plan

Supplemental Life and AD&D

SUPPLEMENTAL LIFE				
AGE EMPLOYEE RATE PA		SPOUSE /DOMESTIC PARTNER RATE PER \$5,000	CHILD RATE FOR FLAT \$10,000	
< 25	\$0.23	\$0.12	\$0.92	
25-29	\$0.28	\$0.14		
30-34	\$0.37	\$0.18		
35-39	\$0.42	\$0.21		
40-44	\$0.46	\$0.23	NOTE:	
45-49	\$0.69	\$0.35	The premium paid for child	
50-54	\$1.06	\$0.53	coverage is based on the cost of coverage for one child,	
55-59	\$1.98	\$0.99	regardless of how many children	
60-64	\$3.05	\$1.52	you have.	
65-69	\$5.86	\$2.93		
70 +	\$9.51	\$4.75		

SUPPLEMENTAL AD&D				
	AD&D COST PER	BI-WEEKLY RATE		
EMPLOYEE	\$10,000	\$0.09		
SPOUSE/DOMESTIC PARTNER	\$5,000	\$0.05		
CHILD	\$10,000	\$0.09		



MetLife Legal Plan

	YOUR CONTRIBUTION
EMPLOYEE (EE) ONLY	\$6.23

Accident

	YOUR CONTRIBUTION
EMPLOYEE (EE) ONLY	\$4.48
EE + SPOUSE/ DOMESTIC PARTNER	\$8.01
EE + CHILD(REN)	\$8.47
EE + FAMILY	\$11.40

NortonLifeLock

	BENEFIT ESSENTIAL	BENEFIT PREMIER
EMPLOYEE (EE) ONLY	\$2.76	\$4.15
EE + SPOUSE/ DOMESTIC PARTNER	\$5.99	\$8.30

Hospital Indemnity

	YOUR CONTRIBUTION
EMPLOYEE (EE) ONLY	\$5.52
EE + SPOUSE/ DOMESTIC PARTNER	\$12.33
EE + CHILD(REN)	\$9.21
EE + FAMILY	\$15.36

Critical Illness

		\$10,000		
AGE BAND	EMPLOYEE (EE)	EE & SPOUSE/ DOMESTIC PARTNER	EE & CHILDREN	EE & FAMILY
<20	\$1.51	\$2.69	\$1.51	\$2.69
20-24	\$1.65	\$2.97	\$1.65	\$2.97
25-29	\$1.91	\$3.50	\$1.91	\$3.50
30-34	\$2.27	\$4.22	\$2.27	\$4.22
35-39	\$2.82	\$5.31	\$2.82	\$5.31
40-44	\$3.76	\$7.20	\$3.76	\$7.20
45-49	\$5.27	\$10.22	\$5.27	\$10.22
50-54	\$7.59	\$14.87	\$7.59	\$14.87
55-59	\$11.00	\$21.69	\$11.00	\$21.69
60-64	\$15.36	\$30.40	\$15.36	\$30.40
65-69	\$20.47	\$40.64	\$20.47	\$40.64
70+	\$25.31	\$50.32	\$25.31	\$50.32

Visit **development.livewell.brookfield.com** for more information about your plans. If you need assistance with any of these vendors or you have questions on your plans, please contact the HR Service Desk (HRSD) at **833-980-1179** or **Benefits@brookfield.com**.

Key Contacts

CARRIER	PLANS	PHONE NUMBER	WEBSITE, EMAIL & APP	
	Voluntary Benefits Group Number: 487628	800-607-3366	www.myaetnasupplemental.com My Aetna Supplemental mobile app	
Aetna	Employee Assistance Program	888-238-6232	www.resourcesforliving.com User ID: Brookfield Password: EAP Resources for Living mobile app	
Care.com	Care Management		brookfield.care.com	
Delta Dental	Dental Group Number: 20099	800-932-0783	www.deltadentalins.com Delta Dental mobile app	
Empower Retirement	401(k) Savings Plan Plan # 150167-01	844-465-4455	www.brookfieldretirement.com Empower Retirement mobile app	
EyeMed	Vision Group ID: 1024932	866-939-3633	www.eyemed.com EyeMed mobile app	
Health Advocate	Advocacy Service	866-695-8622	www.HealthAdvocate.com/Brookfield answers@HealthAdvocate.com Health Advocate mobile app	
HMSA Blue Cross Blue Shield of Hawaii	Medical	800-790-4672	www.HMSA.com	
LTC Solutions Long-Term Care Insura		877-286-2852	www.myltcguide.com/ technologyservicesgroup	
MetLife	Legal Services	800-821-6400	www.legalplans.com	
Мую	Cobra and Medicare Alternatives	844-863-5950	www.choosemylo.com/health/medicare- insurance	
Nationwide	Pet Insurance Group Number: 9577	877-738-7874	benefits.petinsurance.com/brookfield	
NortonLifeLock	Identity Theft Protection	866-456-9316	my.norton.com	
PayFlex Flexible Spending Accounts		888-678-8242	www.payflex.com	
Fayriex	Commuter Accounts	000-070-0242	PayFlex mobile app	
Progyny	Fertility Services	844-930-3356	www.progyny.com	
Teladoc	Telemedicine	855-835-2362	www.teladoc.com/Aetna Teladoc mobile app	
Unum	Basic Life and AD&D Group Number: 99201	800-858-6843		
	Voluntary Life and AD&D Group Number: 99203	800-858-6843	<u>www.Unum.com</u> Brookfield.LeaveLogic.com	
	Long-Term Disability Group Number: 221611	800-858-6843	Unum Customer mobile app	
	Leave Management Center	866-779-1054		
Vitality	Wellness Program	877-224-7117	<u>www.powerofvitality.com</u> wellness@powerofvitality.com Vitality mobile app	

If you need assistance or have questions, please contact the HR Service Desk (HRSD) at **833-980-1179** or **Benefits@brookfield.com**

Important Notices

Technology Services Group LLC

Effective Date January 1, 2023

Technology Services Group LLC Employee Benefits Plan

Plan Administrator Technology Services Group LLC Benefits Department 250 Vesey Street, 15th floor New York, NY 10281-1021

HIPAA Privacy Official Director, Benefits Benefits@brookfield.com 833-980-1179

HIPAA Special Enrollment Deadline 30 days

COBRA Plan Administrator PayFlex 151 Farmington Avenue Hartford, CT 06156 888-678-8242

COBRA Qualifying Event Period 60 days

Compliance Notices

The following Compliance Notices are available at development.livewell.brookfield.com under Resources:

Medicare Part D: This is a notice of "creditable" or "non-creditable" prescription drug coverage, basically a comparison of cost of expected claims under the employer's Rx benefit, compared to the standard Medicare Part D benefit.

HIPAA Reports and Disclosures: Notice of the Plan's privacy practices with respect to "protected health information" (PHI). Covered entities, such as health plans and insurers, are required to supply a privacy notice to enrollees.

Special enrollment notice: This is a notice apprising eligible employees and their dependents of their right to enroll immediately if they lose other coverage due to a special enrollment event.

COBRA Disclosures: This is a general explanation of COBRA rights. The Plan's summary plan description should reflect COBRA contact points and procedures for notices to the Plan.

Women's Cancer Rights Act notice: This is a general explanation of the Plan's coverage of breast reconstruction and prostheses following mastectomy

Michelle's Law notice: This is a notice summarizing the availability of continued pre-COBRA coverage for ill college students

Notice of premium assistance under Medicaid or the Children's Health Insurance Program (CHIP): This is a notice informing employees of potential opportunities currently available, in the state in which the employee resides, for group health plan premiums assistance under Medicaid and CHIP.

EEOC notice under ADA for employees participating in wellness programs: This is a notice required under the Americans with Disabilities Act for employees participating in wellness programs involving medical examinations or disability-related inquiries.

