

# A AYRES HOTELS

ELEVATE YOUR STAY

## EMPLOYEE BENEFITS GUIDE



BENEFITS PERIOD  
7/1/18 to 6/30/19

## Welcome to Ayres Group!

This guide provides a summary of your benefit options and is designed to help you make choices and enroll in coverage. In the event that the information in this brochure should differ from the Plan Document, the Plan Document shall prevail.

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## ENROLLMENT INFORMATION

### Who May Enroll

If you are a classified full-time Team Member working at least 32 hours per week, you and your eligible dependents may participate in Ayres Group’s benefits program. A qualified dependent is defined below:

- **Qualified Spouse:** A lawful spouse of the Team Member who is not offered health coverage through his or her employer. If your Spouse is eligible for group health insurance through his or her employer, then he or she will not be eligible to obtain coverage under Ayres Group Medical Plan. Or if your Spouse is a business owner with 1 or more employees or contract workers your Spouse will be excluded from the Ayres Group Medical Plan.
- **Qualified Children:** The coverage for children will extend to age 26 (i.e. child is eligible through age 25). An eligible “child” is one who has a relationship with the Team Member (e.g. a son, daughter, stepson, or stepdaughter of the Team Member, a legally adopted child, a child who is placed with the Team Member for legal adoption, or a foster child).

The plan requires proof of dependence (i.e birth certificate, marriage license etc.) if you are enrolling a dependent for the very first time on plan. Please provide the appropriate documentation with your enrollment form to Human Resource Department for verification within 30 days of requested enrollment.

### When You Can Enroll

As an eligible Team Member, you may enroll at the following times:

- The eligible date for group benefits is the 1st of the month following or coinciding 60 days of employment or of a status change to full time classification
- As a new hire, you may participate in the company’s 401(k) plan after completing one year of service and 1,000 hours (as defined by the plan) and attaining the age of 21—You may enroll in the plan effective on January 1st or July 1st only
- During open enrollment
- Within 30 days of a qualifying event as defined by the IRS (see Changes To Enrollment below)

### Paying For Your Coverage

The Life/AD&D, Life Support Services, Employee Assistance Program, and Travel Assistance Program benefits are provided at no cost to you and are paid entirely by Ayres Group when enrolled in the medical plan. You and the company share in the cost of the Medical, Dental, and Vision benefits you elect. Your Medical, Dental, and Vision contributions are deducted before taxes are withheld which saves you tax dollars (Section 125). Paying for benefits before-tax means that your share of the costs are deducted before taxes are determined, resulting in more take-home pay for you. As a result, the IRS requires that your elections remain in effect for the entire year. You cannot drop or change coverage unless you experience a qualifying event. Team Members may opt out of the Section 125 plan and pay contributions with after tax dollars.

## Changes To Enrollment

Our benefit plans are effective July 1st through June 30th of each year. Currently, there is an annual open enrollment period each year, during which you can make new benefit elections for the following July 1st effective date. Once you make your benefit elections, you cannot change them during the year unless you experience a qualifying event as defined by the IRS. Examples include, but are not limited to the following:

- Marriage, divorce, legal separation or annulment
- Birth or adoption of a child
- A qualified medical child support order
- Death of a spouse or child
- A change in your dependent's eligibility status
- Change in your residence or workplace (if your benefit options change)
- Loss of coverage through Medicaid or Children's Health Insurance Program (CHIP)
- Becoming eligible for a state's premium assistance

Coverage for a new dependent is not automatic. If you experience a qualifying event, you have 30 days to update your coverage. Please contact the Human Resources Department immediately following a qualifying event to complete the appropriate election forms as needed. If you do not update your coverage within 30 days from the qualifying event, you must wait until the next annual open enrollment period to update your coverage.

## TEAM MEMBER CONTRIBUTIONS

This chart compares the monthly contributions for our Team Member Benefit plans. Your cost for coverage will vary depending on the option and level of coverage you choose.

Medical Options	Network PPO	Traditional PPO
Team Member Only	\$68.00	\$535.00
Team Member + Spouse	+\$250.00	\$1,000.00
Team Member + Each Child	+\$175.00	\$1,000.00*
Team Member + Family	N/A	\$1,674.00
		<i>*If more than 1 child is added, the family rate will apply.</i>
Dental Options	Guardian DHMO	Guardian PPO
Team Member Only	\$2.70	\$41.32
Team Member + 1 Dependent	\$14.14	\$94.24
Each Additional Dependent	\$27.46	\$189.98
Vision Option	Guardian (VSP) PPO	
Team Member & Dependents Enrolled in a Guardian Dental Plan	No Additional Cost for the Vision Discount Plan	
Basic Life and AD&D Options	Guardian Life Basic Life and AD&D	
Team Member Enrolled in an Ayres Medical Plan	No Charge	
Team Member Not Enrolled in an Ayres Medical Plan	\$0.50 per Month	
Employee Assistance Program	Guardian Life WorkLife Matters	
Team Member and Household	Included with Basic Life & AD&D Coverage	
Travel Assistance Program	Guardian Life TravelAid	
Team Member Only	Included with Basic Life & AD&D Coverage	

# BENEFITS

## Ayres Group Medical Plans

### Network PPO Medical Plan

With the Network Preferred Provider Organization (PPO) plan, you may self-refer to any physician within the Anthem Blue Cross Prudent Buyer PPO network. This plan requires that you only utilize doctors, clinics, and hospitals that belong to the network, except in the case of an emergency. If you choose to see a provider who is not part of the network, you will be required to pay the full cost for your care.

### Traditional PPO Medical Plan

The Preferred Provider Organization (PPO) plan allows you to direct your own care. You are not limited to the physicians within the Anthem Blue Cross Prudent Buyer PPO network and you may self-refer to specialists. If you receive care from a physician who is a member of the network, a greater percentage of the entire cost will be paid by the insurance plan. You may also obtain services using a non-network provider; however, you will be responsible for the difference between the covered amount and the actual charges and you may be responsible for filing claims.



### Finding a Medical Provider

Go to [www.anthem.com/ca](http://www.anthem.com/ca) or call (800) 274-7767. Network PPO and PPO participants should refer to the “Blue Cross PPO (Prudent Buyer) - Large Group” network when prompted.

### Summary of Benefits and Coverage (SBC)

Health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about your health plan’s benefits and coverage, referred to as a Summary of Benefits and Coverage (SBC) posted on Ayres Team Member Intranet website <http://lighthouse.ayreshotels.com>. This guide is designed to help you understand the medical plan options offered to you by Ayres Group. Please refer to the SBC and carrier contracts provided by Anthem Blue Cross for additional plan details.

This Team Member Benefits Guide provides an overview of some of your benefit plan choices. It is for informational purposes only. It is not intended to be an agreement for continued employment. Neither is it a legal plan document. If there is a disagreement between this guide and the plan documents, the plan documents will govern.



# BENEFITS

## Ayres Group Medical Plans

Plan Name	Network PPO	Traditional PPO	
Network Name	Anthem Blue Cross (Prudent Buyer) - Large Group	Anthem Blue Cross (Prudent Buyer) - Large Group	Non-Network
Deductible (Annual) - Individual - Family	\$150 \$450	\$300 \$900	
Co-Insurance (Plan Pays)	85%	85%	70%
Office Visit Copay - Primary Care Physician - Specialist Office Visit	\$20 Copay \$40 Copay	\$20 Copay \$40 Copay	Deductible, 30% Deductible, 30%
Out-of-Pocket Maximum - Individual - Family	\$7,350 \$14,700	\$7,350 \$14,700	
Hospitalization - Inpatient - Outpatient	Deductible, 15% Deductible, 15%	Deductible, 15% Deductible, 15%	Deductible, 30% Deductible, 30%
Lab and X-Ray - Diagnostic - Complex	\$10 Copay Deductible, 15%	Deductible, 15% Deductible, 15%	Deductible, 30% Deductible, 30%
Emergency Services	\$100 Copay + 15%, Deductible	\$100 Copay + 15%, Deductible	
Mental Health/Substance Abuse - Inpatient - Outpatient (Group Therapy)	Deductible, 15% \$20 Copay	Deductible, 15% \$20 Copay	Deductible, 30% Deductible, 30%
Ambulance	\$100 Copay, per trip	\$100 Copay, per trip	\$100 Copay + 30%, per trip
Urgent Care	\$20 Copay	\$20 Copay	Deductible, 30%
Preventive Care	No Charge	No Charge	No Charge
Annual Vision Care	\$20 Copay (max benefit of \$100)	\$20 Copay (max benefit of \$100)	
Durable Medical Equipment	Deductible, 15%	Deductible, 15%	Deductible, 30%
Physical, Occupational, Speech Therapy	\$20 Copay Max 25 Visits/Year	\$20 Copay Max 25 Visits/Year	Deductible, 30%
<b>Pharmacy Benefits</b>			
Retail & Mail Order - Generic Formulary - Brand Name Formulary - Non-Formulary - Supply Limit	30% (\$5 Min / \$20 Max) 30% 30% + \$15 Copay 30 Days Retail 90 Days Mail Order	30% (\$5 Min / \$20 Max) 30% 30% + \$15 Copay 30 Days Retail 90 Days Mail Order	Not Covered Not Covered Not Covered Not Covered N/A
Specialty Rx - Generic - Brand Name - Non-Formulary	30% 30% + \$25 Copay 30% + \$50 Copay	30% 30% + \$25 Copay 30% + \$50 Copay	Not Covered

# BENEFITS

## Ayres Group Medical Plans

### Tips for Using Your Medical Benefits

**1 Understand the Explanation of Benefits (EOB) Statement if you are enrolled in a PPO option.**

If you enroll in one of the Ayres Group medical plan options, you will receive an Explanation of Benefits (EOB) document after you or a covered family member receives healthcare services. EOBs provide necessary details about claim payment information including your responsibility amount. An EOB is NOT a bill. It is to help you understand how your claim was processed. The EOB is a statement detailing your medical benefits account activity.

To view your current or past EOBs online, visit [www.healthcomp.com](http://www.healthcomp.com). Click on “Members” and “HOnline”. Enter your SSN (no dashes) in the Username field. Then enter your birthdate as (YYYYMMDD) in the Password field. For example, if your birthdate is January 5, 1962 you would enter 19620105.

**2 Use urgent care centers versus hospital emergency rooms whenever possible.**

Frequently, patients seek the services of the hospital emergency department for ailments or injuries that could be treated more economically, and just as effectively, at an urgent care center. It is not always easy to determine when you should choose urgent care over the hospital emergency department. The following lists offer some guidance, but are not necessarily all-inclusive.

 <b>Examples of URGENT CARE situations</b>	 <b>Examples of EMERGENCY situations</b>
<p>Any illness or injury that would prompt you to see your primary care physician including but not limited to:</p> <ul style="list-style-type: none"><li>• Accidents and falls</li><li>• Sprains</li><li>• Back problems</li><li>• Breathing difficulties</li><li>• Abdominal pain</li><li>• Minor bleeding/cuts</li><li>• High fever</li><li>• Vomiting, diarrhea or dehydration</li><li>• Severe sore throat or cough</li><li>• Mild to moderate asthma</li></ul>	<p>Any accident or illness that may lead to loss of life or limb, serious medical complication or permanent disability including but not limited to:</p> <ul style="list-style-type: none"><li>• Chest pain*</li><li>• Seizures</li><li>• Shock</li><li>• No pulse</li><li>• Unconscious or catatonic state</li><li>• Sudden dizziness, loss of coordination or balance</li><li>• Severe abdominal pain</li><li>• Severe or uncontrollable bleeding</li><li>• Broken bones or compound fractures</li><li>• Severe difficulty breathing or shortness of breath</li><li>• Spinal cord or back injury</li><li>• Severe burns</li><li>• Major head injuries</li><li>• Ingestion of poisons or obstructive objects</li><li>• Animal, snake or human bites</li></ul>

\*If you believe you may be experiencing a heart attack, call 911 immediately! Do not drive yourself to the emergency room!

**3 Use generic and over the counter drugs when available.**

The best way to save on prescriptions is to use generic or over the counter medications as opposed to brand name drugs. When you use generic medications, you will pay the lowest copay. Generic drugs must use the same active ingredients as the brand name version of the drug. A generic drug must also meet the same quality and safety standards.

**4 Use the mail-order prescription drug benefit for maintenance medications.**

The mail order pharmacy is a fast, easy and convenient way to save time and money on your maintenance medications. You can order additional supplies of medication at a discount. See carrier provisions for details.

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## Tips for Using Your Medical and Pharmacy Benefits

### 5 Utilize your preventive care benefits to stay healthy at no cost to the participant.

In order to receive the full value of your plan, schedule your preventive care exams! Our plans cover these exams 100% when you use in-network providers. Preventive exams can help identify any potential health problems early on. Not all preventive care is recommended for everyone, so talk with your doctor to decide which services are right for you and your family. Preventive care services include, but are not limited to the services listed below.



#### Females

- Pap tests
- Mammograms
- Annual physicals
- Flu shots
- FDA-approved contraception
- Immunizations
- Colonoscopy
- Blood pressure checks
- Cholesterol (total and HDL)
- Diabetes mellitus: baseline for high-risk individuals



#### Males

- Colonoscopy
- Prostate cancer screening
- Annual physicals
- Flu shots
- Immunizations
- Blood pressure checks
- Cholesterol (total and HDL)
- Diabetes mellitus: baseline for high-risk individuals



#### Children

- Well-baby care
- Annual physicals
- Flu shots
- Immunizations
- Medical/family history and physical exam
- Blood pressure checks
- Vision screening

## Glossary of Terms

- **Deductible:** The amount of out-of-pocket expenses that you must pay for before any expenses are payable by the plan.
- **Copay:** The flat dollar amount a covered individual is required to pay for certain services (could be before or after meeting any applicable deductible).
- **Coinsurance:** A cost sharing agreement between the insurance company and the insured where payment responsibility is shared for all claims covered by the policy, usually expressed as a percentage. Coinsurance applies after deductible.
- **Out-of-Pocket Maximum:** The annual maximum amount of money you will pay inclusive of copays and deductibles.
- **Network PPO:** Providers or facilities who have agreed to discounted fees with insurance carriers to participate within their provider networks.
- **Non-Network:** A provider with whom an insurance carrier does not have a contract to provide healthcare services. A member may pay higher copays, coinsurance and/or deductibles to see a non-network provider or have no coverage at all. Ayres Group Network PPO medical plan does not offer non-network benefits with the exception of emergency services.
- **Emergency Services or Medical Emergency:** Healthcare services that are provided in a hospital emergency facility after the sudden onset of a medical condition that manifests itself by symptoms of sufficient severity. Please note—Going to the emergency room for non-emergency issue may result in a claim being denied by the plan.
- **Prior Authorization:** A requirement that your physician or the Team Member obtain approval from the health plan to prescribe a course of care such as hospital admission, complex diagnostic test, or a specific medication. Without this prior approval, your health plan may not provide coverage.



### Educational Video

Benefits terminology can get confusing. Click here to watch a quick video to learn the basics of how our medical plans work.

**Deductibles, Copays, Coinsurance, and Out-of-Pocket Maximums**

<http://video.burnhambenefits.com/terms/>

# BENEFITS

## Dental Insurance

### Guardian | DHMO Dental Plan

With the Dental Health Maintenance Organization (DHMO) plan through Guardian, you are required to select a general dentist to provide your dental care. You will contact your general dentist for all of your dental needs, such as routine check-ups and emergency situations. If specialty care is needed, your general dentist will provide the necessary referral. For covered procedures, you'll pay the pre-set copay or coinsurance fee described in your DHMO Plan Schedule. Please keep a copy of the Guardian 55G plan schedule when utilizing this plan. This will show the applicable copays that apply to all of the dental services that are covered under this plan. The schedule can be downloaded from the company electronic site.

### Guardian | PPO Dental Plan

With the Guardian Preferred Provider Organization (PPO) dental plan, you may visit a DentalGuard Alliance network dentist, a DentalGuard Preferred network dentist, or a non-network dentist. The Alliance network includes a smaller more selective group of dental care providers who have agreed to provide a greater savings to you. If you cannot locate a dentist of your liking under the Alliance network, you may choose a dentist under Preferred network, which will still provide an average savings of 30%. If you obtain services using a non-network dentist, you will incur much higher out-of-pocket expenses and you may be responsible for filing claims.

Plan Name	Guardian DHMO Plan		Guardian PPO Plan		
	DHMO/MDG/Pre-Paid		DentalGuard Alliance	DentalGuard Preferred	Non-Network
<b>Dental Benefits</b>					
Calendar Year Maximum	Unlimited		\$1,500		
Deductible (Annual)					
- Individual	\$0		\$50	\$50	\$50
- Family	\$0		3 Per Family	3 Per Family	3 Per Family
Preventive (Plan Pays) Exams, X-Rays, Cleanings	100% for Most Services		No Charge	No Charge	Deductible, 10%
Basic Services (Plan Pays) Fillings, Oral Surgery, Endodontics, Periodontics	See Plan Schedule		Deductible, 10%	Deductible, 10%	Deductible, 30%
Major Services (Plan Pays) Crowns, Prosthetics	See Plan Schedule		Deductible, 40%	Deductible, 40%	Deductible, 60%
Orthodontia - Covered Members - Copay - Coinsurance - Lifetime Benefit Maximum	Children & Adults \$1,975 Child / \$2,175 Adult N/A N/A		Children & Adults N/A Deductible, 50% \$1,000		



### Finding a Dental Provider

Go to [www.guardiananytime.com](http://www.guardiananytime.com) or call (800) 273-3330 for DHMO or (888) 600-1600 for PPO. DHMO participants should refer to the "Managed Dental Care" network and PPO participants should refer to the "DentalGuard Alliance" or the "DentalGuard Preferred" network when prompted.

## Tips for Using Your Dental Benefits

### 1 Understand your plan.

Understanding your dental plan's benefits, including how copays, deductibles, and calendar year maximum benefits work, is key to getting the most value from your plan and avoiding surprises. By registering at [www.guardiananytime.com](http://www.guardiananytime.com) you are able to review the plan benefits along with the option of printing your ID card.

### 2 Take advantage of preventive services offered by the plan.

The least expensive way to maintain good oral health is to go to your dentist at least twice each year for an exam and cleaning. Regular dentist visits can help prevent serious health problems such as oral diseases and cancers, and going to the dentist is more affordable in the long run for those who are insured and take advantage of every service.

Both the DHMO and the PPO plans cover most preventive services at no charge to you. As an added bonus, the annual deductible is waived for preventive services on the PPO dental plan.

### 3 Use contracted dental providers.

With the DHMO plan, you must visit your selected network dentist for treatment. If you visit another dentist, even if that dentist participates in the network, your visit won't be covered. Under the PPO plan, you have the flexibility to visit any licensed dentist in the network, however, contracted network providers have a rate agreement with the insurance company for services rendered. If you use a non-network provider, your out-of-pocket expenses will be higher and you may be subject to balance billing.

### 4 Ask for a predetermination of benefits.

We strongly recommend you ask your dentist for a predetermination if total charges are expected to exceed \$300. Predetermination enables you and your dentist to know in advance what the payment will be for any service that may be in question.

### 5 Know your plan's limits.

The PPO dental plan includes an \$1,500 calendar year maximum for dental benefits and a \$1,000 lifetime maximum for orthodontia services for each member of your family. A calendar year maximum benefit is the total maximum amount the plan will pay per year for dental benefits. This amount renews at the beginning of each calendar year. If you do not use this amount, it doesn't roll-over.

In addition to the calendar year maximum, the DHMO and PPO plans limit the number of cleanings to twice per year. Other limitations may apply. If you are unsure, ask your dentist to verify for you.

### 6 Schedule your procedures to make the most of your dental coverage.

As part of dental planning, you should consult with your dentist and, if possible, delay non-urgent procedures that would push your out-of-pocket costs over your plan's calendar year maximum benefit. If possible, plan your procedures in such a way that your annual maximum renews itself in between stages.

### 7 Discuss alternative procedures when necessary.

By letting your dentist know that cost is an issue, he or she may be able to suggest alternative treatments that are less expensive but just as effective.

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## Vision Discount Plan

### Guardian (VSP) | Vision Discount Plan

If you are enrolled in a Dental plan through the Guardian, you will automatically be enrolled in the Vision Discount Plan. The Guardian (VSP) Vision Discount Plan provides professional vision care and high quality lenses and frames through a broad network of optical specialists. This plan requires that you pay the entire discounted fee directly to the VSP network eye doctor. Discounts are not available from providers who are not members of VSP's network. No ID cards are required! Simply notify your VSP network eye doctor that you are enrolled in the Guardian VSP Access Program at the time of your appointment to receive discounted services. Please also note that discounts are only available from the VSP network eye doctor that provided you with your eye exam within the last 12 months.

Plan Name	Guardian (VSP) Vision Discount Plan
Network Name	VSP
<b>Vision Benefits</b>	
Examination	20% discount off your eye doctor's usual charge
Frames, Standard Lenses and Lens Options	20% discount off your eye doctor's usual charge when a complete pair of prescription glasses are purchased
Contact Lens Professional Services	15% discount off your eye doctor's usual charge for professional services. Please note that contact lenses are not discounted
Laser Vision Correction	Average 15% discount off surgeon's usual charge

VSP has the largest network of private-practice eye care doctors in the industry. VSP's network includes 37,000 access points nationwide. Most of the U.S. population lives within four miles of a VSP provider.



### Finding a Vision Provider

Go to [www.guardiananytime.com](http://www.guardiananytime.com) or call (877) 814-8970. Refer to the "VSP Signature Plan" network when prompted.

## Tips for Using Your Vision Benefits

- 1 Know the difference between vision insurance and vision "discount" plans.**  
Our Vision plan is considered a Vision "discount" plan, and is not vision insurance. The discounts offered are only available to you if you are also enrolled in a Guardian dental plan.
- 2 Get your eyes checked each year.**  
Because eye exams can detect hidden medical problems, even those with perfect vision shouldn't skip them. As you age, you'll need more frequent vision exams.
- 3 Make sure your optometrist accepts your discount plan and is in-network.**  
Our plan does not offer a discount if you visit a non-network provider, so it's important to only seek services from a VSP network provider.

# BENEFITS

## Flexible Spending Accounts

You can set aside money in Flexible Spending Accounts (FSA) before taxes are deducted to pay for certain health and dependent care expenses, lowering your taxable income and increasing your take home pay. Only expenses for services incurred during the plan year are eligible for reimbursement from your accounts. HealthComp's claims paying system and their flexible benefit system are integrated. When a medical claim is fully or partially unpaid, HealthComp's claims system will automatically check the your FSA account and if the claim is eligible to be reimbursed, it will pay out of that account. You will need to designate this option on the FSA enrollment form. Since HealthComp does not administer the dental or vision plan for Ayres, you will be responsible for submitting a physical claim to HealthComp. When submitting physical claims, you must complete a form and attached the appropriate receipts. In addition, there is a \$20 required minimum dollar. Any claim submitted that is less than \$20 will be processed and pended until the minimum is met.

### Health Care Spending Account (HCSA)

This plan is used to pay for expenses not covered under your health plans, such as deductibles, coinsurance, copays and expenses that exceed plan limits. Team Members may defer up to \$2,650 pre-tax per year.

### Dependent Care Assistance Plan (DCAP)

This plan is used to pay for eligible expenses you incur for child care, or for the care of a disabled dependent, while you work. Team Members may defer up to \$5,000 pre-tax per year.

FSAs offer sizable tax advantages. The trade-off is that these accounts are subject to strict IRS regulations, including the use-it-or-lose-it rule. According to this rule, you must forfeit any money left in your account(s) after your expenses for the year have been reimbursed. The IRS permits an FSA grace-period of two months and 15 days following the end of the plan year to help you if your expenses fall a little short of expectations. During the grace period, you may incur expenses and use the funds remaining in your account to cover these expenses. We recommend that you carefully estimate your planned expenses based on our 12 month FSA plan year. If you are unable to estimate your health care and dependent care expenses accurately, it is better to be conservative and underestimate rather than overestimate your expenses.

Example	Without the Health Care FSA	With the Health Care FSA
Gross Annual Pay	\$25,000	\$25,000
Pre-Tax Health Care FSA	Not Elected	\$1,200
<b>Taxable Gross Income</b>	<b>\$25,000</b>	<b>\$23,800</b>
Payroll Taxes (at 30%)	\$7,500	\$7,140
Health Care Cost	\$1,200	\$0
Net Pay	\$16,300	\$16,660
<b>Annual Net Pay Increase</b>	<b>\$0</b>	<b>\$360</b>

### Important Note About the FSA

It is important to note that your FSA elections will expire each year on June 30th. If you plan to participate in the FSA for the upcoming plan year, you are required to re-enroll. Additional resources such as the Health Care or Dependent Care planning worksheet can be found at Ayres internal website, listed on page 15 of this guide, or request from your supervisor.



#### Educational Video

Click here to watch a quick video to learn the basics of how Flexible Spending Accounts work.

Flexible Spending Accounts  
<http://video.burnhambenefits.com/fsa/>

# BENEFITS

## Travel Assistance Program

### Guardian Life Insurance Company | TravelAid

When you chose life insurance, TravelAid is a service arranged by UHC Global Plus to provide a resource for all your traveling needs. It provides a comprehensive range of information, referral, coordination and arrangement services designed to respond to most medical care situations and many other emergencies you may have when you travel. It also offers pre-trip assistance and information from passport/visa requirements, foreign currency, and weather. TravelAid is available 24 hours, 7 days a week, 365 days of the year. When you need help, UHC Global and a trained professional can assist and serve your needs.

Available Services include destination information, emergency travel arrangements, lost/stolen travel documents, legal referrals, emergency messages, emergency pet services, medical evacuation, family member transportation, child transportation, transportation after stabilization, repatriation, medical and dental referrals, treatment monitoring, hospital payment, insurance information transfer, medication, vaccine or blood delivery, recovery arrangements, missing baggage assistance.



### Accessing Travel Assistance Services

Go to [www.ibhtravelaid.com](http://www.ibhtravelaid.com), access your downloadable benefit card on-line, select "TravelAid Brochure" or call UHC Global at (800) 537-2029 or (410) 453-6330 and provide them with ID number 329111

## Retirement Savings

### Ayres Group | 401(k) Savings and Investment Plan

You are encouraged to participate in Ayres Group's 401(k) plan. This plan allows you to fund for your retirement with pre-tax or after tax dollars.

#### Eligibility:

Eligible team members may join the plan when the following requirements are met:

- ⇒ 21 years of age
- ⇒ 1,000 hours of service
- ⇒ 12 months consecutive service

#### Entry Dates:

January 1, July 1

#### Employer contribution:

Ayres will match 50% of the first 6% of team member contributions

#### Vesting:

Your contributions are always 100% vested. Your employer's contributions are vested as follows:

Year of Service	Percentage Vested
1	0%
2	20%
3	40%
4	60%
5	80%
6+	100%

401(k) IRS Maximums	2018	2019
Elective Deferral	\$18,500	Indexed for Inflation
Catch-Up for Team Members Age 50+	\$6,000	Indexed for Inflation

See your Summary Plan Description for more details about taking a distribution from the Plan. Be sure to talk with your tax advisor before taking a distribution of any money from your Plan account.



### Accessing Your 401(K) Account

Go to [www.ayresgroup401k.com](http://www.ayresgroup401k.com). Refer to plan/group number G38412.

# BENEFITS

## Life and AD&D Insurance

### Guardian Life Insurance Company | Basic Life and AD&D Insurance

Life insurance protects your family or other beneficiaries in the event of your death while you are still actively employed with the company. Ayres Group pays for coverage, offered through Guardian Life Insurance Company, in the amount of \$20,000 provided you are enrolled in the Ayres Group Medical Plan, Team Members not enrolled in the Ayres Group Medical Plan may purchase life insurance separately. If your death is due to a covered accident or injury, your beneficiary will receive an additional amount through Accidental Death and Dismemberment (AD&D) coverage. Please note that age reductions apply.

A beneficiary is the person or entity who you designate to receive your death benefits. Choosing a beneficiary and keeping your beneficiary up-to-date is an essential part of owning life insurance. Please remember to review your beneficiary designation as new situations arise, such as the birth or adoption of a child, marriage or divorce. You may call the Human Resources Department for a copy of the Beneficiary Designation Form as needed.



#### For More Information

Go to [www.guardiananytime.com](http://www.guardiananytime.com), to login to your portal. Select “Find a Form” select “Claim: Life” under Type of Form and State that you reside in. Download the “Group Life Claim Form” in the event of a claim.

## Employee Assistance Program

### Guardian Life Insurance Company | WorkLife Matters

When you choose life insurance, the WorkLife Matters Employee Assistance Program (EAP) through Guardian Life provides you and your household members with free, confidential assistance to help with personal or professional problems that may interfere with work or family responsibilities and obligations. Services are available by a Integrated Behavioral Health provider 24 hours a day, 7 days a week via a toll-free nationwide number.



#### Accessing the EAP

Go to [www.ibhworklife.com](http://www.ibhworklife.com), and select “WorkLife Matters” (Username: Matters / Password: wlm70101) or you may call (800) 386-7055 to be immediately connected to an EAP counselor.



# BENEFITS

## Banking

### Orange County's Credit Union | Checking, Savings, & Loans

Orange County's Credit Union is a Nonprofit organization community-chartered credit union in California serving Team Members living or working in Orange and Riverside counties, Long Beach, Signal Hill, Lakewood and Cerritos. OCCU provides a broad range of banking products and services like checking, savings, loans, and investments for every season of life. New participants are eligible for \$50 bonus deposit from OC Credit Union when you open a checking account with free e-statements, Debit MasterCard, and Direct Deposit. Plus the monthly service fee is waived for Direct Deposit. With over 29,500 surcharge-free CO-OP ATMs nationwide, banking has never been simpler with OCCU.



#### For More Information

Go to [www.orangecountyscu.org](http://www.orangecountyscu.org), or call (888) 354-6228 for more details.

## Continuing Education

### California Baptist University | Higher Education

The corporate partnership program with CBU, allows Team Members to access CBU's wide range of 40 different bachelor's, 45 master's and credential emphasis at their campus in Riverside, San Bernardino, and online. Financial aid available for those who qualify and credits can be transferred. The corporate partnership program offers 10% tuition scholarship for Team Members who enroll in the school.



#### For More Information

Go to [www.cbuonline.edu](http://www.cbuonline.edu) or call (951) 343-3927 for more details.

## Ayres Cares

### Benefits and Scholarship Fund

The Well Being of our Team Members and their families is very important to Ayres. It is our hope, that we can expand our Ayres Cares to an ongoing successful program that will be beneficial to our Team Members in the years to come.

### Scholarship Fund

Scholarships are available for Ayres Hotels/Group Team Members in good standing and children or legal ward(s) of Team Members in good standing who have a sincere desire to further their education. Up to (3) \$2,500 scholarship awarded to the winning applicant who is pursuing a degree in hospitality, business, finance, accounting, or economics. Up to (1) \$2,500 scholarship awarded to winning applicant pursuing a degree not mentioned above. Additionally, up to (3) \$1,000 scholarships to be awarded to any applicant at the discretion of the Committee.



#### For More Information

For more information about Ayres Cares and our benefits, go to [www.ayrescares.com](http://www.ayrescares.com).

## Employee Discounts

### Fun Express | Discount Tickets

Fun Express is California's largest provider of discount entertainment programs. Fun Express has discount tickets to 50+ Southern California attractions including, Universal Studios, Knott's Berry Farm, SeaWorld, Legoland, Dinner Shows, Movie Theatres, Water Parks, and much more! As a Team Member, you and your family are now eligible to save up to 55% on Southern California's best family entertainment. You can order discount tickets immediately by registering as a Team Member with your Team Member Access Code (EAC) provided above. Simply go to [FunEx.com](http://FunEx.com) and click "Register". Fun Express has a processing fee of \$4 per attraction (not per ticket). Go to [www.funex.com](http://www.funex.com), and enter access code (EAC) "16-58430" or call (949) 367-1900 for orders by phone.



## IMPORTANT INFORMATION

### The Burnham Advocate Help-Line: (800) 391-6812

The Burnham Advocate toll-free customer service help-line can provide assistance with insurance related issues when you are unable to resolve them directly with the insurance carriers. With the Burnham Advocate help-line, you will receive fast, skilled assistance with Medical, Dental and Vision provider issues, referral assistance, and claims management.

Simply call the Burnham Advocate help-line at (800) 391-6812. You will be asked to fill out a Service Resolution Form to start the process of researching your question. Simply filled out the form to open a resolution ticket for your issue. The form can be used for more complicated questions, claims issues, and/or bills from providers. A Burnham representative will work as your insurance advocate, researching and resolving problems quickly and effectively.

### Annual Notices

Various state and federal laws require that employers provide disclosure and annual notices to their plan participants. Ayres Group has posted all federally required annual notices on our intranet for you to download and read at your convenience. The following is a list of the annual notices:

- Medicare Part D Notice of Creditable Coverage
- Women's Health and Cancer Rights Act (WHCRA)
- Newborns' and Mothers' Health Protection Act
- Special Enrollment Rights
- Medicaid & Children's Health Insurance Program
- HIPAA Notice of Privacy Practices

Refer to the options listed below for copies of the Annual Notices.

### Ayres Team Member Intranet (Website)

Access to the Ayres benefit information is available through the internet by visiting Ayres Team Member Intranet. The Summary of Benefits Coverage (SBC), annual notices, carrier benefits summaries, claim forms etc. are available. In order to access the Ayres Team Member Intranet enter <http://lighthouse.ayreshotels.com>; Login: Ayres, Password: TEAM. Select "English Company Benefits". Team Members may also request a hard copy from your supervisor or Ayres' Human Resources office at (714) 850-0409 ext 105.

# RESOURCES AND CONTACTS

Benefit	Group Number	Member Services	Website
<b>Medical - HealthComp / Anthem Blue Cross</b>			
Anthem Network PPO Plan	278572M003 (CA) 278572M004 (Non-CA)	Anthem Blue Cross P.O. Box 60007 Los Angeles, CA 90060-0007 (800) 274-7767	<a href="http://www.anthem.com/ca">www.anthem.com/ca</a>
Anthem PPO Plan	278572M001 (CA) 278572M002 (Non-CA)		
HealthComp Explanation of Benefits Questions	A85	HealthComp P.O. Box 45018 Fresno, CA 93718-5018 (800) 442-7247	<a href="http://www.healthcomp.com">www.healthcomp.com</a>
WellDyne Rx - Prescription Drugs	See ID Card	(800) 479-2000, option 5	<a href="http://www.welldynernx.com">www.welldynernx.com</a>
<b>Dental - Guardian</b>			
DHMO Plan	426864	(800) 273-3330	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
DPPO Alliance / Preferred Plan	426864	(888) 600-1600	
<b>Vision - Guardian (VSP)</b>			
VSP Network Discount	Ayres Group	(877) 814-8970	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
<b>Flexible Spending Accounts - HealthComp</b>			
HealthComp	Ayres Group	(800) 442-7247	<a href="http://www.healthcomp.com">www.healthcomp.com</a>
<b>Basic Life/AD&amp;D and Additional Benefits - Guardian Life</b>			
Basic Life/AD&D	Ayres Group	(800) 423-2765	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
Employee Assistance Program WorkLife Matters	Ayres Group	(800) 386-7055 <a href="mailto:eapcounselor@ibhcorp.com">eapcounselor@ibhcorp.com</a>	<a href="http://www.ibhworklife.com">www.ibhworklife.com</a> Username: Matters Password: wlm70101
Travel Assistance Program TravelAid	329111 (UHC Global)	(410) 453-6330 (800) 537-2029 (UHC Global)	<a href="http://www.ibhtravelaid.com">www.ibhtravelaid.com</a>
<b>401(k) Savings and Investment Plan - One America</b>			
One America	G38412	One American Square Indianapolis, IN 46206-0368 English & Spanish Line (800) 249-6269	<a href="http://www.ayresgroup401k.com">www.ayresgroup401k.com</a>
Raymond James & Associates Investment Consultant		John C. Fleishman, CRPCR (844) 811-7727	<a href="mailto:John.fleishman@raymondjames.com">John.fleishman@raymondjames.com</a>
<b>Miscellaneous Benefits</b>			
Banking	N/A	Orange County Credit Union (888) 287-9475	<a href="http://www.orangecountycu.org">www.orangecountycu.org</a>
Entertainment Card	N/A	Fun Express (949) 367-1900	<a href="http://www.funex.com">www.funex.com</a>
Continuing Education	N/A	California Baptist University (951) 343-3927	<a href="http://www.cbuonline.edu">www.cbuonline.edu</a>
Ayres Group Human Resources	N/A	(714) 850-0409, ext 105 (714) 549-4459 (Fax)	<a href="http://lighthouse.ayreshotels.com">http://lighthouse.ayreshotels.com</a>
Insurance Broker Burnham Benefits	Ayres Group	(800) 391-6812	<a href="mailto:Gedalanga@burnhambenefits.com">Gedalanga@burnhambenefits.com</a>