



2024/2025

employee benefit guide

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WELCOME TO PRIMAL PET GROUP! This guide provides an overview of coverage choices and enrollment information so you can build the best benefits package for you and your family.

Eligibility Requirements

Primal Pet Group is committed to providing exceptional benefits to our employees. Keeping in mind the unique and diverse needs of our employees, we have put together a benefits program that will help protect the personal and financial well-being of you and your family.

Upon joining Primal Pet Group, your benefits begin the first of the month following 30 days from your date of hire. The plan and dependent elections that you make when you are hired or during annual Open Enrollment are effective for the entire calendar year unless you experience a qualifying event (marriage, birth, adoption, or loss of coverage).

Primal Pet Group holds an annual Open Enrollment for a June 1st effective date. During that time, you can make changes to your benefit plan elections such as adding or deleting your spouse, dependents and/or changing health plans.

If you experience a qualifying event after Open Enrollment, you must notify Human Resources within 30 days, otherwise you will be required to wait until the next Open Enrollment to make any changes to your benefit plan elections.

Eligible Dependents

You may cover your dependents under many of the benefit plans as long as they are one of the following:

- Your spouse or registered domestic partner
- Your child(ren) up to age 26 regardless of student or marital status
- Your handicapped child(ren) regardless of age if incapable of self-sustaining employment, and if the handicap began before the limiting age

If you work 30 hours or more per week, you are eligible to enroll in the benefit plans.

How Do I Enroll in Benefits?

Within Employee Navigator, you can enroll yourself and eligible dependents in the plans that fit you and your family best. Contact Human Resources if you have questions or issues. For additional questions, please contact your Acrisure Team:

Benefit Questions/Claims
Patti Harvey
pharvey@acrisure.com

408.350.5738

Eligibility Assistance Monica Mifsud

mmmifsud@acrisure.com

408.350.5733

Please Note: Regardless if you are electing or waiving benefits, you MUST log into the portal and complete the process.

For more information about the plans offered, visit https://mybenefits.cc/ppg/ to review plan designs, required notices, evidence of coverage, documents and much more.

Medical Insurance

Primal Pet Group is proud to offer medical benefits to eligible employees through Kaiser Permanente and United Healthcare.

Kaiser Permanente's HMO plans offer a wide range of care and support to help you stay healthy. As a Kaiser member, you can receive medical care at any Kaiser facility by simply presenting your ID card to receive services. These plans are available to California employees only.

United Healthcare's PPO plans give members the ability to manage their care with a PCP or, if they choose, see any doctor (including specialist) without a referral. Pre-authorizations may be required. United Healthcare's full-network PPO is named "Choice Plus" (and "Select Plus" in California). The limited-network PPO is named "Core" in all states.

In Maharank	Kaiser Permanente (CA Only)		
In-Network	HMO 1500	HMO 3500	HMO 4500
Individual Deductible	\$1,500	\$3,500	\$4,500
Family Deductible	\$3,000	\$7,000	\$9,000
Individual Out of Pocket Maximum	\$4,000	\$6,500	\$6,500
Family Out of Pocket Maximum	\$8,000	\$13,000	\$13,000
Office Visit	\$40	\$40	\$50*
Specialist Visit	\$50	\$50	\$50*
Preventative Care	No Charge	No Charge	No Charge
Diagnostic Lab/X-Ray	\$15*	\$15*	40%*
Complex Radiology (CT, MRI, PET)	30% up to \$150*	30% up to \$150*	40% up to \$150*
Inpatient Hospital	30%*	30%*	40%*
Outpatient Surgery	30%*	30%*	40%*
Urgent Care	\$40	\$40	\$50*
Emergency (waived if admitted)	30%*	30%*	\$250*
Rx Generic	\$10	\$10	\$15
Rx Brand Name	\$30	\$30	\$35
Rx Specialty	20% up to \$250	20% up to \$250	30% up to \$200
Costs Per Pay Period (26)			
Employee Only Employee + Spouse Employee + Child(ren) Family	\$111.50 \$335.21 \$317.61 \$483.58	\$84.54 \$275.89 \$263.69 \$402.69	\$50.87 \$201.81 \$196.35 \$301.67

^{*}after deductible

	United Healthcare Select Plus (CA Only)/Choice Plus (Outside CA)			
In-Network	PPO 1500 (CUJD/CUJ2)	PPO 2500 (CQI5/CQJU)	PPO HSA 1600 (DIXW/DIXY)	
Individual Deductible	\$1,500	\$2,500	\$1,600	
Family Deductible	\$3,000	\$5,000	\$3,200	
Individual Out of Pocket Maximum	\$4,500	\$6,500	\$4,500	
Family Out of Pocket Maximum	\$9,000	\$13,000	\$9,000	
Office Visit	\$25	\$25	20%*	
Specialist Visit	\$50	\$50	20%*	
Preventative Care	No Charge	No Charge	No Charge	
Diagnostic Lab/X-Ray	20%	20%*	20%*	
Complex Radiology (CT, MRI, PET)	20%*	20%*	20%*	
Inpatient Hospital	20%*	20%*	20%*	
Outpatient Surgery	20%*	20%*	20%*	
Urgent Care	\$50	\$50	20%*	
Emergency	20%*	20%*	20%*	
Rx Generic	\$10	\$10	\$10*	
Rx Brand Name	\$45	\$45	\$35*	
Rx Specialty Drugs	\$95	\$95	\$70*	
Costs Per Pay Period (26)				
Employee Only Employee + Spouse Employee + Child(ren) Family	\$68.48 \$238.00 \$205.86 \$364.82	\$32.36 \$158.88 \$137.22 \$255.00	\$30.63 \$155.10 \$133.95 \$249.75	

^{*}after deductible

	United Healthcare Core (All Employees)			
In-Network	PPO 1500 (CUKP)	PPO 2500 (CQKL)	PPO HSA 1600 (DIX2)	
Individual Deductible	\$1,500	\$2,500	\$1,600	
Family Deductible	\$3,000	\$5,000	\$3,200	
Individual Out of Pocket Maximum	\$4,500	\$6,500	\$4,500	
Family Out of Pocket Maximum	\$9,000	\$13,000	\$9,000	
Office Visit	\$25	\$25	20%*	
Specialist Visit	\$50	\$50	20%*	
Preventative Care	No Charge	No Charge	No Charge	
Diagnostic Lab/X-Ray	20%	20%*	20%*	
Complex Radiology (CT, MRI, PET)	20%*	20%*	20%*	
Inpatient Hospital	20%*	20%*	20%*	
Outpatient Surgery	20%*	20%*	20%*	
Urgent Care	\$50	\$50	20%*	
Emergency	20%*	20%*	20%*	
Rx Generic	\$10	\$10	\$10*	
Rx Brand Name	\$45	\$45	\$35*	
Rx Specialty Drugs	\$95	\$95	\$70*	
Costs Per Pay Period (26) Employee Only Employee + Spouse Employee + Child(ren) Family	\$60.41 \$207.01 \$182.21 \$321.43	\$26.22 \$132.16 \$117.26 \$217.51	\$28.37 \$136.86 \$121.34 \$224.04	

^{*}after deductible

Medical Coverage Explanations

HMO Plans

An HMO plan requires each member to select a physician as the "Primary Care Physician" (PCP). A PCP is a physician in internal medicine, family/general practice or pediatrics. In order to receive any benefit, the member must receive all care from the PCP or from a PCP-referred provider. If the care is received from a provider that is not your PCP or not referred, no benefits will be paid.

- You must choose a Primary Care Physician (PCP) who will coordinate your healthcare. (Adults can choose a Doctor in Family or Internal Medicine and a child under 18 can choose a pediatrician).
- Your PCP must provide referrals to specialists.
- Women can have a OB/GYN for Women's health (no referral needed).
- You are allowed to change your PCP anytime during the plan year.
- Family members can have different PCPs.
- Register at www.kp.org to search for a PCP.
- Contact the New Member Entry Department at 888-956-1616 with your PCP selection.

PPO Plans

A PPO plan allows each member to see any provider of their choice. There are two levels of benefits for receiving care, which are "In-Network" and "Out-of-Network". If the care is obtained from an "In-Network" physician, clinic, facility, hospital, etc., the member will receive the "In-Network" level of benefits and their out-of-pocket costs will be less than if an Out-of-Network provider is used.

HSA PPO (Qualified High Deductible Health) Plans

An HSA PPO (QHDHP) plan allows each member to see any provider of their choice and operates just as the PPO plan does when obtaining care. However, this plan has a higher deductible and does not have any "copays" that would apply prior to the deductible being satisfied. Rather, medical and prescription expenses are subject to the plan deductible. When accessing services, members use their medical plan ID card at the Provider (Physician office, clinic, hospital, pharmacy, etc.). Once the Provider has submitted the claim to the carrier and has determined the eligible charge, the individual can use the funds from their HSA to cover expenses applied to deductible or coinsurance.

Health Savings Account

HSA enables tax-free savings for the qualified medical expenses of "eligible individuals" and their dependents. An "eligible individual" is someone covered under an HSA-compatible, High Deductible Health Plan (HDHP) and is not covered under a non-HDHP or claimed as a dependent on another individual's tax return. For 2024, the annual contribution amount for individual coverage is \$4,150 and family is \$8,300. The annual "catch-up" contribution amount (individuals aged 55+) is \$1,000. Some advantages of an HSA includes:

- HSA contributions are tax-deductible and interest on an HSA is tax-deferred.
- HSAs are portable and owned by the individual; contributions cannot be taken away.
- Unspent balances roll over to the following year and can accumulate to help pay for uncovered medical expenses.
- If the account holder dies, HSA balances pass on free of tax to their designated beneficiaries.



Dental Insurance

Dental coverage is provided for you and your family members through United Healthcare. This PPO plan offers you the most flexibility when choosing a dentist as you can seek services in and out of network.

Dental PPO Network	In-Network	Out-of-Network
Preventive Care (exams, cleanings, x-rays)	100%	100%*
Basic Care (basic fillings, extractions, repairs, complex oral surgery)	80%	80%*
Major Care (crowns, inlays and on-lays, bridges and dentures)	50%	50%*
Deductible	\$50 Individual / \$150 Family	
Maximum Benefit**	\$1,500 per member per calendar year	
Orthodontia Lifetime Maximum	50% up to \$2,000 per member	
Costs Per Pay Period (26) Employee Only Employee + Spouse Employee + Child(ren) Family	\$13 \$3.	2.31 3.92 2.55 5.08

^{*}Out-of-Network benefits are paid up to the Usual & Customary Level (U&C). Charges beyond are your responsibility.

Vision Insurance

Primal Pet Group employees are offered vision benefits through United Healthcare. United Healthcare Vision Network delivers affordable vision care solutions through customer-focused people and the most accessible vision care network.

VSP Signature Network	In-Network	Out-of-Network	
Office Visit / Examination (every 12 months)	\$10 copay	Plan pays up to \$40	
Prescription Glasses Copay	\$25 copay		
Lens Replacement (every 12 months)	100% after copay	Reimbursement Varies	
Single Vision	100% after copay	Plan pays up to \$40	
Bifocal	100% after copay	Plan pays up to \$60	
Trifocal	100% after copay	Plan pays up to \$80	
Frame Replacement (every 24 months)	Up to \$150 + 30% discount	Plan pays up to \$45	
Contact Lenses (in lieu of glasses, every 12 months)	Plan pays up to \$150	Plan pays up to \$125	
Costs Per Pay Period (26) Employee Only Employee + Spouse Employee + Child(ren) Family	\$0.92 \$3.89 \$4.03 \$8.37		

^{**}This plan includes a roll-over maximum benefit. Some of the unused portion may be available in future periods.

Basic Life and AD&D Insurance

Primal Pet Group provides all eligible employees with a Basic Life and AD&D policy for \$25,000 through Guardian. You will automatically be enrolled in this benefit.

Voluntary Life and AD&D Insurance

You may choose to elect Voluntary Life Insurance from Guardian for yourself and your dependents.

- Guarantee Issue Amount for Employee is \$200,000 with maximum benefit of \$500,000.
- Guarantee Issue Amount for Spouse is \$25,000 with maximum benefit of \$250,000.
- Guarantee Issue Amount for Child(ren) is \$5,000 or \$10,000.

Critical Illness Insurance

Critical Illness Insurance with Guardian provides a cash benefit for a range of covered serious illnesses such as Cancer, Stroke and Heart Attack, in addition to whatever your medical plan may cover. Payments are made directly to you and can be used for any purpose. Employees may choose a lump sum benefit of \$10,000 to a maximum of \$30,000. You can also receive a \$100 wellness benefit per year for each covered member after you've had your preventive care visit with qualified screening.

Accident Insurance

Accident Insurance through Guardian protects you from unexpected medical costs. Guardian pays you cash benefits based on the covered injuries, treatments and services. Payments go to you, not the doctor and can be used at your discretion. Employees may choose a benefit amount of \$10,000 or \$50,000. You can also receive a \$100 wellness benefit per year for each covered member after you've had your preventive care visit with qualified screening.

Pet insurance

With two budget-friendly options, there's never been a better time to protect your pet. Nationwide offers preferred-pricing coverage for your pet with either 50% or 70% reimbursement. This allows you to go to any vet, anywhere and receive cash back on vet bills.

Employee Assistance Program

Balancing work and home life can be challenging and sometimes the hardest part is knowing where to turn for help. The confidential EAP can provide guidance for personal issues that you might be facing, such as locating childcare, providing elder care, planning for adoption or learning about pregnancy or child development. An EAP can provide unlimited Telephonic Counseling, resources to assist persons who are facing life challenges, an online database of information, and more.

WorkLifeMatters provides guidance for personal issues that you might be facing and information about other concerns that affect your life, whether it's a life event or on a day-to-day basis.

- Unlimited free telephonic consultation with an EAP counselor available 24/7 at 800-386-7055
- Referrals to local counselors up to three sessions free of charge
- Website with over 3,400 helpful articles about wellness, training courses, legal and financial center
- Visit to www.worklife.uprisehealth.com; Access Code: worklife

Contacts

Plan	Provider	Phone	Website	Policy Number
Medical HMO	Kaiser Permanente	800.464.4000	www.kp.org	607019
Medical PPO	United Healthcare	800.782.3158	www.uhc.com	0924291
Dental	United Healthcare	800.357.0987	www.uhc.com	0924291
Vision	United Healthcare	800.357.0987	www.uhc.com	0924291
Life Products	Guardian	888.600.1600	www.guardianlife.com	00020627
Voluntary Products	Guardian	888.600.1600	www.guardianlife.com	00020627
Pet	Nationwide	877.738.7874	benefits.petinsurance.com/ primalpetgroup	n/a
EAP	Guardian	800.386.7055	www.worklife.uprisehealth.com	n/a



This summary is not intended to provide a complete plan description. If there is an actual or apparent conflict between this benefit summary or the Evidence of Coverage (EOC) booklet and the official plan documents, the provisions of the EOC prevail.

IMPORTANT: All official documents relating to your Employee Benefits Program, including the Summary Plan Descriptions, HIPAA Privacy Notice, Initial COBRA Notice, Medicare Part D Notice and any other relevant Plan Documents or Notices, are available electronically through your employee benefits website. You may also receive a paper copy of any of the documents by contacting HR.



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