



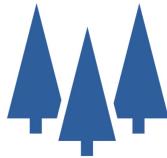
2025 Open Enrollment



Agenda

In an effort to control costs to the employees, while continuing to provide a high level of benefits, Ready Seafood reviewed all options available. All renewal plans are effective July 1, 2025.

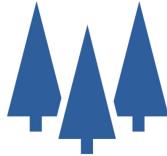
- Review of Medical Plans
 - No change in plan offerings
 - **NO CHANGE IN COST!** Ready Seafood will still continue to cover the single/individual tier of the HSA plan (so, no charge to the employee on this plan!)
- Review of Dental Plans
 - Plans will now be offered through Point32Health (Harvard Pilgrim) with a few minor changes (increased benefit on buy-up plan)
 - Slight increase in cost
- Review of Life/AD&D, STD, LTD, Accident & Critical Illness Plans
 - No change in plan offerings
 - **NO CHANGE IN COST!**
- Review of Vision Plan
 - No change in plan offering
 - **NO CHANGE IN COST!**



Open Enrollment

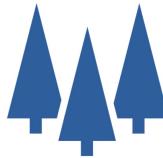
- Open enrollment for benefits is from **May 29th through June 11th**. This is when you can make enrollment changes (add a dependent, drop a dependent, join the plan, etc.) to your benefit plans.
- Any changes made will take effect on July 1.
- Please be sure to notify HR of any changes during the year to the following:
 - Home address
 - Phone number
 - E-mail address (if used for work communications)
 - Change in beneficiary





Making Changes Later

- If you are going to make a change to your coverage level or plan choice due to life events during the plan year, you must complete, sign and submit an enrollment form within 30 days of the qualifying event. Examples of qualifying events include:
 - birth of a child
 - marriage/divorce
 - loss of other coverage
 - spouse/partner open enrollment
 - aging off parents' coverage at age 26
- Any changes submitted after this 30-day window will need to wait until annual open enrollment.
- Please note that any changes in address, phone number or other contact information can be made throughout the year, and you must notify HR directly of those changes. These are NOT qualifying events to change benefit elections during the year.



7/1/2025 Harvard Plans

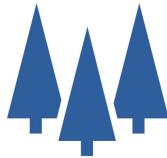
About the 3 Medical 3 plans available.

1. **Option 1 is the Maine's Choice HMO plan** and will require each member to designate a primary care physician in the Preferred or Standard Harvard Network and will need to stay IN the Harvard network for care. This plan requires referrals from your PCP to see specialists.
2. **Option 2 is the HSA HMO plan** and will require each member to designate a primary care physician in the Harvard Network and will need to stay IN the Harvard network for care. This plan requires referrals from your PCP to see specialists. In addition, this plan requires all services be subject to deductible and coinsurance, with the exception of routine preventive services. You may also open a health savings account (HSA) in conjunction with this plan option. Additional information available if interested.
3. **Option 3 is the PPO plan** and does not require members to select a PCP and has both an IN and OUT of network. This plan does not require referrals from your PCP to see specialists.



Health Insurance Definitions

- **Copayment (co-pay):** A Copayment is a fixed dollar amount you must pay for certain Covered Benefits. The Copayment is due at the time of service or when billed by the Provider.
- **Deductible:** A specific dollar amount that you pay for most Covered Benefits each calendar year before any benefits subject to the Deductible are payable by the Plan.
- **Coinsurance:** A percentage of Covered Charges (ie: 20% or 40%) for certain Covered Benefits that must be paid by the Member.
- **Out-of-pocket Maximum:** Money you pay toward the cost of healthcare services. It generally is the deductible and the coinsurance amount added together. In some cases, it may also include the co-pays you have for medical services. Plans vary widely in the amount of out-of-pocket costs you pay.



Important Information

- **Deductible Credit:** Any deductible amounts that have been accumulated from 1/1/25 up until 6/30/25 will be credited to your plan effective 7/1/25. Deductible does not restart until 1/1/26.
- **PCP:** If you elect one of the HMO options you will need to select a PCP. It is important that you establish connection with them ASAP. Should you need a referral, it is highly unlikely they will give you one if they've never met with you.
- The Maine's Choice HMO allows your PCP to be in the Preferred or Standard network.
- Dependent children continue to be covered up to age 26, regardless of student status.
- International coverage provided under plan (Emergency Care).
- Keep in mind that emergency treatment is always covered despite plan type.
- There are no pre-existing condition exclusion clauses.

2025 Maine's Choice HMO Plan – Option 1



Maine's Choice HMO – IN NETWORK COVERAGE ONLY	
Deductible	
Preferred Network Single/Family	\$2,000/\$4,000
Standard Network Single/Family	\$5,000/\$10,000
Coinsurance	
Preferred Network Single/Family	20%
Standard Network Single/Family	40%
Total Out Of Pocket	
Preferred Network Single/Family	\$5,500/\$11,000
Standard Network Single/Family	\$6,850/\$13,700
Facility Inpatient Charges	DEDUCTIBLE & COINSURANCE
Facility Outpatient Charges	DEDUCTIBLE & COINSURANCE
Routine Preventive Care	Covered In Full
Primary Care Visit	\$35 Preferred/ \$50 Standard
Specialist Visit	\$35 Preferred/ \$50 Standard
Diagnostic Testing	DEDUCTIBLE & COINSURANCE
MRI/Cat/Pet Scan	DEDUCTIBLE & COINSURANCE
Emergency Room	\$300 COPAY
Physical, Speech & Occ. Therapy (60 VISITS/YR.)	\$50 Preferred/ DED&COINS Standard
Prescriptions, 30-days	\$10/\$35/\$60/30% to \$250
Retail/Mail Order Prescriptions, 90 Days	\$20/\$70/\$120/30% to \$500

2025 HSA HMO Plan – Option 2



HSA HMO-IN NETWORK COVERAGE ONLY	
Deductible	
In Network Single/Family	\$6,000/\$12,000
Out of Network Single/Family	N/A
Coinsurance	
In Network Single/Family	20%
Out Of Network Single/Family	N/A
Total Out Of Pocket	
In Network Single/Family	\$6,450/\$12,900
Out Of Network Single/Family	N/A
Facility Inpatient Charges	DEDUCTIBLE & COINSURANCE
Facility Outpatient Charges	DEDUCTIBLE & COINSURANCE
Routine Preventive Care	Covered In Full
Primary Care Visit	DEDUCTIBLE & COINSURANCE
Specialist Visit	DEDUCTIBLE & COINSURANCE
Diagnostic Testing	DEDUCTIBLE & COINSURANCE
MRI/Cat/Pet Scan	DEDUCTIBLE & COINSURANCE
Emergency Room	DEDUCTIBLE & COINSURANCE
Physical, Speech & Occ. Therapy (60 VISITS/YR.)	DEDUCTIBLE & COINSURANCE
Prescriptions, 30-days	DED THEN \$10/\$35/\$60/30% to \$250
Retail/Mail Order Prescriptions, 90 Days	DED THEN \$20/\$70/\$120/30% to \$500
Preventative Rx	DEDUCTIBLE WAIVED

2025 PPO Plan – Option 3



PPO- IN AND OUT OF NETWORK COVERAGE	
Deductible	
In Network Single/Family	\$4,000/\$8,000
Out of Network Single/Family	\$8,000/\$16,000
Coinsurance	
In Network Single/Family	20%
Out Of Network Single/Family	40%
Total Out Of Pocket	
In Network Single/Family	\$6,600/\$13,200
Out Of Network Single/Family	\$12,000/\$20,000
Facility Inpatient Charges	DEDUCTIBLE & COINSURANCE
Facility Outpatient Charges	DEDUCTIBLE & COINSURANCE
Routine Preventive Care	Covered In Full
Primary Care Visit	\$30 (IN)
Specialist Visit	\$30 or \$50 (IN)
Diagnostic Testing	DEDUCTIBLE & COINSURANCE
MRI/Cat/Pet Scan	DEDUCTIBLE & COINSURANCE
Emergency Room	\$250
Physical, Speech & Occ. Therapy (60 VISITS/YR.)	\$50 (60 VISITS/YR.)(IN)
Prescriptions, 30-days	\$10/\$35/\$60/30% to \$250 (IN)
Retail/Mail Order Prescriptions, 90 Days	\$20/\$70/\$120/30% to \$500 (IN)
Preventative Rx	N/A



Health Savings Accounts (HSA)

WHAT IS IT:

- A tax favored bank account used to help pay medical expenses
- Members own and manage the account
 - Deposit funds through pre-tax payroll deduction
- Unused funds carry over year to year, you own the account!

ELIGIBILITY:

- Must be enrolled in a qualified high-deductible health plan...for Ready that plan is the HSA-HMO
- Cannot have other health insurance, not enrolled in Medicare

ARE THERE CONTRIBUTION LIMITS?

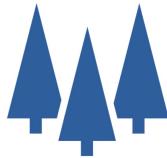
- Max amount allowed to be deposited is:
 - 2025: individual: \$4,300 / family: \$8,550 / catch up over age 55: \$1,000
 - 2026: individual: \$4,400 / family: \$8,750 / catch up over age 55: \$1,000

WHAT ARE QUALIFIED EXPENSES THAT I CAN SPEND THE MONEY ON?

- All medical expenses, deductible, coinsurance, prescriptions
- All 213(d) expenses...OTC items, dental, vision
- Can use funds for yourself or any taxable dependents, even if not covered by your medical plan

WHAT HAPPENS IF I USE THE MONEY FOR NON-QUALIFIED ITEMS?

- Non-qualified expenses are subject to income tax and a 20% penalty



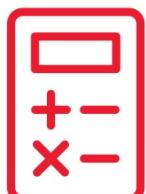
2025 Weekly Medical Cost

	Option 1 – Maine's Choice HMO	Option 2 – HSA HMO	Option 3 – PPO
Full Time Employees			
Employee Only	\$35.10	\$0.00	\$37.51
Employee & Spouse	\$130.04	\$62.10	\$134.80
Employee & Child(ren)	\$115.09	\$52.24	\$119.50
Family	\$221.17	\$115.86	\$228.56



Member Savings Tools

- **ESTIMATE MY COST**– The cost of a medical procedure or test can vary at different hospitals and facilities. Harvard’s online treatment cost estimator tool helps you plan for the cost of your care, before you visit the doctor.
 - Find cost estimates for over 800 services, including office visits; lab and radiology services; outpatient procedures; and inpatient procedures, like surgery
 - Use the filter to narrow down or expand your search results by specialty, location and more
 - Compare cost estimates for up to four providers
 - Save and print your estimates
 - Always “Log in to begin” and click “Tools & Resources”
- **REDUCE MY COSTS PROGRAM** – Toll-free number available to seek recommendations on outpatient tests and procedures that are ordered by your provider (lab work, MRIs, mammograms, etc.) This voluntary program can help you find lower-cost providers. Plus, Harvard will reward you for choosing to save money (up to \$75 per service). When a member calls **855.772.8366**, they are connected to a Reduce My Cost nurse (8am-6pm, M-F)
- **CALL MEMBER SERVICES** at: **888.333.4742**





Wellness Discounts & Perks

- **WELLNESS REIMBURSEMENT** – \$150 per person per calendar year. Employees and another covered family member can earn up to \$300 total (submissions for reimbursement must be made altogether). You must be a member of both Harvard Pilgrim and a qualified fitness facility for at least four months in a calendar year. Qualifying membership fees include gyms/fitness facilities, virtual fitness subscriptions, select nutrition and mindfulness meditation programs, cardio and strength-training equipment, etc.
- **LIVING WELL PROGRAM** – Enroll to earn rewards (up to \$120 in annual gift cards) for participating in a variety of informative, fun and interactive activities, included topics such as: Stress management, healthy eating, financial literacy, environmental wellness, self-care, volunteerism, physical activity, health plan literacy. Enroll at: **harvardpilgrim.org/livingwelleveryday**
 - Covered dependents or employees who are not Harvard Pilgrim members can participate in a separate program where they can earn points towards monthly gift card drawings (*Sign Up for free with CGUEST as the program code*)



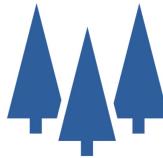
Telehealth – Virtual Care

- Through **DOCTOR ON DEMAND**, members have options to meet with board-certified physicians and psychologists 24/7 (in all states) by smartphone, tablet or computer, using the highly-rated app. No referrals or authorization required, and prescriptions can be electronically submitted to the member's pharmacy. Telemedicine visits for urgent care and routine care are currently available for a \$57.85 copay for HSA plans (\$30, \$35 or \$50 copay for traditional plans). For Behavioral Health Services, deductible & coinsurance apply for HSA plans, with contracted rates ranging from \$104-\$269.
- **DOWNLOAD** the Doctor On Demand app or go to:
doctorondemand.com/Harvard-pilgrim
 - After registering and completing the screening process, you'll be able to connect for an appointment in less than 15 minutes
- **URGENT CARE TREATMENT** – Cold & flu, cough, sinus infections, skin rashes, COVID-19, asthma & allergies, urinary tract infections, headaches & migraines, etc.
- **BEHAVIORAL HEALTH TREATMENT** – Anxiety & depression, stress, trauma & loss, PTSD, Bipolar disorder, relationship issues, mental health screening, grief, etc.



Harvard Pilgrim Dental Plans

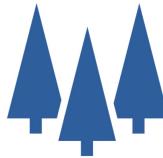
	Base Plan	Buy-Up Plan
<u>Annual Deductible</u> Preventive (I) Basic (II) / Major (III) Orthodontics (IV)		N/A <i>\$50/\$150 Combined (II, III & IV)</i>
<u>Coinurance</u> Preventive Basic Major Orthodontics (child only)	100% 100% 60% N/A	100% 100% 60% 50%
<u>Maximum Benefits</u> Annual Benefit (II & III) Lifetime Benefit (IV Only)	\$1,500 N/A	\$2,000 \$1,500
<u>Waiting Periods</u> Basic & Major Orthodontics	No Waiting Period N/A	No Waiting Period No Waiting Period
<u>Max Rollover</u>	<p><i>Members may rollover a portion of unused annual max for Class I, II & III Services – Requirements:</i></p> <ul style="list-style-type: none"><i>-At least one claim must be submitted for Class I services during the benefit year</i><i>-Member must have received services in excess of any deductible</i>	
	Service Max (Paid by plan): \$750 Rollover Max: \$1,875	Service Max (Paid by plan): \$1,000 Rollover Max: \$2,500



2025 Weekly Dental Cost

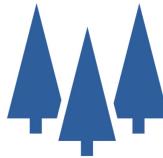
	Base Plan	Buy-Up Plan
Employee	\$7.98	\$10.37
Employee & Spouse	\$16.38	\$21.37
Employee & Child(ren)	\$20.07	\$26.75
Family	\$28.47	\$37.73

Find an in-network dentist near you: point32health.org/find-a-dentist



Harvard Pilgrim Vision Plan

Vision Plan		
EXAM	1 Every Calendar Year	
LENSES	1 Every Calendar Year	
FRAME	1 Every 2 Calendar Years	
CONTACT LENSES	1 Every Calendar Year	
	Both Frame & Contacts within 24-Month Period	
ALLOWANCES		
FRAME	\$130 Allowance	
CONTACTS	\$130 Allowance	
REIMBURSEMENT AMOUNTS	IN NETWORK	OUT OF NETWORK
EXAM	\$10 Copay	\$57 Allowance
LENSES		
SINGLE VISION	\$25 Copay	\$47 Allowance
BIFOCAL	\$25 Copay	\$79 Allowance
TRIFOCAL	\$25 Copay	\$113 Allowance
FRAME	See allowance	\$130 Allowance
CONTACT LENSES		
MEDICALLY NECESSARY	COVERED IN FULL	UP TO \$210
ELECTIVE	See allowance	UP TO \$130

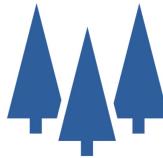


2025 Weekly Vision Cost

Vision Cost	
Full Time Employees	
Employee	\$1.59
Employee & Spouse	\$3.17
Employee & Child(ren)	\$3.25
Family	\$4.83

Find a provider near you: point32health.org/find-an-eye-doctor



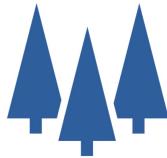


Unum Life/AD&D and STD Plans

LIFE/AD&D	
LIFE/AD&D AMOUNT	\$10K to \$500K in \$10K increments
GUARANTEE ISSUE (new hires only)	\$100,000
SPOUSE	\$10K to \$500K in \$5K increments
GUARANTEE ISSUE (new hires only)	\$25,000
CHILDREN	\$10K in \$2K increments
AD&D BENEFIT	Same as life benefit (no EOI for AD&D)

Short-Term Disability	
MAX WEEKLY BENEFIT %	60%
MAX WEEKLY BENEFIT \$	\$2,000
ELIMINATION PERIOD	7/7
BENEFIT PERIOD	12 WEEKS
PRE-EXISTING CONDITION	3/12
RATE/\$10	Age banded

Please note the 1-week elimination period applies to ALL claim's instances, including maternity. This means you would actually get paid for 5 weeks and not 6, since the first week would be the elimination period.



Unum Long-Term Disability

Long-Term Disability	
MONTHLY BENEFIT	60% TO \$10,000
ELIMINATION PERIOD	90 DAYS
OWN OCCUPATION	2 YEAR OWN OCC
BENEFIT DURATION	SSNRA
PRE-EXISTING CONDITION	3/12
MENTAL & NERVOUS	24 MONTHS
RATE	Age banded



Unum Accident Insurance



GROUP ACCIDENT INSURANCE

Accident Insurance is an extra layer of protection that gives you a cash payment to help cover out-of-pocket expenses when you suffer an unexpected, qualifying accident (on and off job).

It's a lump sum benefit after an accident happens – whether it be a severe burn, broken bone or ER visit.

Unum's policies also offer an increased benefit that pays extra for children injured while playing an organized sport.

Weekly Premium	
Employee	\$2.72
Employee + Spouse	\$4.70
Employee + Child(ren)	\$5.94
Family (EE/SP/CH)	\$7.91



Unum Critical Illness Insurance



GROUP CRITICAL ILLNESS INSURANCE

Critical Illness Insurance may help you cover expenses not covered by your health insurance.

It's a cash payment you receive if you ever experience a serious illness like cancer, a heart attack or a stroke, giving you the financial support to focus on recovery.

Employee may choose a lump sum benefit of \$10,000, \$20,000 or \$30,000

Spouse benefit of up to 50% of employee's benefit

Child benefit of up to 50% of employee's benefit

Rates are based on Age Brackets

Example: Weekly premium for a \$10,000 benefit, for a 30-year old employee = \$0.76



Evidence of Insurability & Beneficiary Designation

Evidence of Insurability

- EOI may be required if you are a late entrant and/or you request any additional coverage above your Guaranteed Issue Amount.
- After the enrollments are processed, if Unum has employee email addresses, Unum will email the employees directly with a secure link that allows them to access electronic EOI. If Unum does not have employee email addresses, they'll instead email Ready Seafood's HR Team with a list of employees who require EOI along with the secure link, which they'll then distribute.

You must elect coverage for yourself for your dependent(s) to be eligible

Beneficiary Designation

- When enrolling in optional life, it is important that you select a beneficiary to receive your life benefit. Your beneficiary may be anyone, not just a family member and your beneficiary designation may be updated at any time.



Additional Unum Resources

Employee Assistance Program (EAP)

- Confidential resource for employees for assistance on numerous personal issues from finances to counselling needs

Worldwide Travel Assistance

- 100+ miles from home: medical or crisis assistance while travelling

Rehab and Return to Work Services

- Assistance with resources to help get you better to return to work sooner

Life Planning: Financial and Legal Resources

- Will preparation and estate planning guidance



Employee Advocate

Employees occasionally need assistance in resolving issues with insurance carriers, such as unpaid claims on insurance, referral questions or have questions on their prescription drug plan.

Did you know that you and your covered dependents have an Employee Advocate available to you at no cost?

Contact Sara

Toll Free: 866-761-2426 Ext. 223

Direct Dial: 207-523-0065

sclossen@acadiabenefits.com





Important Reminders

- Enrollment is done through **UKG** – There are no paper enrollment forms to complete!
 - Please log-on to UKG so that you may either enroll or waive coverage on the new benefit plans available to you. If you are not making any changes to your current elections, then your enrollment on all other plans will remain as-is, effective July 1st, 2025.
 - Make any benefit election changes here
 - Confirm that your current benefit elections are what you thought
 - Confirm what you are currently paying for your benefits
 - Make sure all dependents are covered as you thought
 - Check your beneficiary information to make sure it is current
- Don't forget your **Employee Benefit Center (EBC)**! www.readyseafood.acadiabenefitsportal.com
Accessible by employees online 24/7 and a one stop shop to find:
 - Benefits information
 - Carrier forms and information
 - Resources and tools
 - Other important company information

****Please see HR with questions on UKG or the EBC****



Raffle Prize Entry

Ready Seafood will be holding a raffle at the end of Open Enrollment week – Please scan the QR Code to be eligible for a certificate to our employee store!:.





THANK YOU!!

