

The Cincinnati Insurance Company • The Cincinnati Indemnity Company The Cincinnati Casualty Company • The Cincinnati Specialty Underwriters Insurance Company The Cincinnati Life Insurance Company • CFC Investment Company • CSU Producer Resources Inc.



# The Cincinnati Insurance Companies 2025 BENEFITS OVERVIEW

PE-1185 (3/25)

# Table of Contents

Health & Prescription Plan	1
Health Savings Account	1
Dental	2
Vision	2
Employee Assistance Program	2
TAP (Flexible Spending Accounts)	3
401(k) Savings Plan	3
Accidental Death and Dismemberment	4
Group Life Insurance	4
Occupational Health	4
Short-Term Disability	5
Long-Term Disability	5
Associate Time Off	5
Change in Benefits Schedule	6
Contacts	7
Definitions	8

# **HEALTH & PRESCRIPTION PLAN**

The Health & Prescription Plan is a high deductible health plan administered by Anthem Blue Cross Blue Shield<sup>®</sup>. It's a PPO + HSA Plan<sup>+</sup> and you will receive free preventive care when using an in-network provider. For non-preventive medical care and prescriptions, you pay 100% of the cost until the deductible is met. Once the deductible is met, the plan pays the full cost for covered in-network services, but only a portion of out-of-network services. Prescription costs are still subject to co-pays when the deductible has been met. Once you reach the out-of-pocket maximum, the plan pays 100% of your eligible expenses for the rest of the calendar year for both in-network and out-of-network services, including prescription costs.

Health Care Coverage	Bi-Weekly Premium	Deductible	Out-of-Pocket Maximum
Associate Only	\$50.14	\$2,000	\$3,000 in network / \$6,000 out of network
Associate + Spouse	\$171.15	\$4,000	\$6,000 in network / \$12,000 out of network
Associate + Child(ren)	\$142.21	\$4,000	\$6,000 in network / \$12,000 out of network
Family	\$191.43	\$4,000	\$6,000 in network / \$12,000 out of network

#### Prescription Co-Pays (after deductible is met)

Prescription Type	Monthly Retail	Home Delivery Caralon Rx Pharmacy
Generic	\$0	\$0
Generic Preventive	N/A*	\$0**
Formulary+	\$25	\$62
Non-Formulary <sup>+</sup>	35% coinsurance with \$40 minimum co-pay	35% coinsurance with \$100 minimum co-pay

\* You will be responsible for applicable co-pay if you don't employ the mail order option for generic preventive medications

\*\* Certain generic, preventive medications are paid at 100% when using the home delivery service

**Eligibility:** Regular<sup>+</sup>, full-time associates. **Spouses employed outside of The Cincinnati Insurance Companies who have employer-sponsored** health care coverage and could get coverage and pay 50% or less of the total premium for any plan offered – even if your spouse prefers a different plan – are not eligible. Spouses may contact their employers to learn that percentage of premium they're expected to pay.

Effective Date: First day of employment

**Enrollment Information:** You can enroll in the Health & Prescription Plan during your first 30 days of employment and during open enrollment. Otherwise, you can enroll only when a qualifying event<sup>+</sup> takes place.

### **Opportunities for Health Plan Savings:**

 Virtual Care: Associates and covered family members have access to virtual care services – virtual doctor visits available for a wide range of minor conditions – that are designed to allow you greater control when you need to see a doctor.

#### **HEALTH SAVINGS ACCOUNT**

Eligible associates have access to a Health Savings Account administered by Fidelity. The HSA is a pre-tax savings vehicle that allows you to save for eligible medical, dental, and vision expenses now and in retirement. It works in conjunction with the Health & Prescription Plan. The company may also make yearly contributions, and the money in your account is always yours to keep – what you don't use, you don't lose.

Type of Health Care Coverage	Maximum Yearly Contribution Limit*
Associate Only	\$4,300.00
Associate + Spouse	\$8,550.00
Associate + Child(ren)	\$8,550.00
Family	\$8,550.00
Catch-Up+	\$1,000

\* Maximum yearly contribution limits include the company contributions

Eligibility: Regular, full-time associates enrolled in the Health & Prescription Plan who meet IRS guidelines

Effective Date: 30 days after hire date

**Enrollment Information:** If eligible, you will receive an email with a link to set up your HSA account. You can also change your contribution amount at any time, up to the maximum yearly contribution limit.

**Details:** A HSA debit card will be provided to you from Fidelity and you must have money in your HSA account to use it. For Anthem to apply charges against your deductible, present both your HSA card and medical card to health care providers and pharmacies. The company contribution(s) will be made after 30 days of enrollment in the HSA. We do not stop your contribution amounts from going over the maximum yearly limits – you must plan accordingly. You can add and update your HSA beneficiaries on Fidelity's website, *401k.com*, or by calling 800-544-3716.

#### **DENTAL PLAN**

The Dental Plan makes affordable dental coverage available to all associates and is administered through Delta Dental. The focus of the Dental Plan is on proper preventive care. While the Dental Plan covers 100% of most preventive maintenance benefits, restorative benefits are paid at a lesser amount. If you add dependents at a later date, their coverage will begin on the first of the next month. You may use any licensed dentist you choose; however, the use of a network dentist in the Delta Dental PPO or Premier Network reduces your portion of dental care expenses.

Coverage	<b>Bi-Weekly Premium</b>	Deductible	Maximum Payments
Associate Only	\$15.87	\$50/person	\$1,500/person
Associate + Spouse	\$29.94	\$50/person; \$150/family max	\$1,500/person
Associate + Child(ren)	\$32.95	\$50/person; \$150/family max	\$1,500/person
Family	\$52.23	\$50/person; \$150/family max	\$1,500/person

The deductible applies to non-preventive procedures.

Eligibility: Regular, full-time associates

Effective Date: First day of employment

**Enrollment Information:** You can enroll in the Dental Plan during your first 30 days of employment and during open enrollment. Otherwise, you can enroll only when a qualifying event takes place.

Details: Dental cards are available on The Bridge, Benefits & Pay then Dental. Your group number is 9696, and your member ID is 9696 + your 5-digit associate ID number. Delta Dental cannot identify a member or process any claim submitted with your Social Security number.

Exclusion: Orthodontia is not covered in the Dental Plan.

#### **VISION PLAN**

The Vision Plan provides associates with the opportunity to have Humana Vision services at a known cost. A fixed co-pay applies to standard services. To take advantage of these benefits, you must use a Vision Care Plan in-network vision provider.

Coverage	Bi-Weekly Premium
Associate Only	\$3.71
Associate + Spouse	\$7.41
Associate + Child(ren)	\$7.03
Family	\$11.04

**Eligibility:** Regular, full-time associates

Effective Date: First day of employment

**Enrollment Information:** You can enroll in the Vision Plan during your first 30 days of employment and during open enrollment. Otherwise, you can enroll only when a qualifying event takes place.

Details: Vision cards are provided by Humana®, and you will receive them within 2-3 weeks of selecting coverage.

#### EMPLOYEE ASSISTANCE PROGRAM

LifeMatters<sup>®</sup>, our company's employee assistance program, has counselors and consultants available all day, every day, to help when you need it. They are ready to listen, understand and suggest next steps. Our company provides this confidential service at no cost to you.

#### Eligibility: All associates

Effective Date: First day of employment

**Covered services include:** Unlimited 24/7 telephone assessment and counseling, including holidays and weekends; up to six face-to-face sessions, per issue, per year, with a local provider in your area; counseling services; legal consultation; identity theft program; financial consultation; adoption resources; child care referrals; college resources; home repair referrals; and pet-sitting referrals.

# TAX ADVANTAGE PLAN

The Tax Advantage Plan is also known as a Flexible Spending Account. You can put money into your TAP account to reimburse your dental, vision, or dependent care expenses with before-tax dollars. Up to \$640 of unused Dental and Vision TAP funds may be carried over for use the following year, if you elect Dental and Vision TAP for the next year. Your taxable income is reduced by the amount of money you place in TAP. You cannot transfer money between your Dental and Vision TAP and your Dependent Care TAP accounts. There is no debit card for your TAP account; associates seek reimbursement after paying for services rendered by submitting a TAP claim form with receipts to HR-Benefits, and reimbursements will be deposited into your selected checking account. The amount you pledge for the year cannot be changed.

#### Dental and Vision TAP

You may contribute to TAP regardless of your health, dental and vision plan choice. The full amount you pledge is available to you for reimbursement at any time during the year for eligible expenses incurred by you or your tax dependents.

#### Dependent Care TAP

The Dependent Care TAP account is used to pay for childcare and adult care services, including the following:

- Licensed nursery schools
- Dependent daycare centers
- Regular babysitting (including care by a relative age 19 or older, verified by Tax ID)
- Licensed disability daycare centers
- Home care specialists who provide care to a disabled dependent

TAP Account	Maximum Yearly Limit
Dental and Vision	\$3,300
Dependent Care	\$2,500 or \$5,000*

\* Limit depends on your tax filing status

Eligibility: Regular, full-time associates

Effective Date: First day of employment

**Enrollment Information:** You can enroll in TAP during your first 30 days of employment and during open enrollment. Otherwise, you can enroll only when a qualifying event takes place.

#### 401(K) SAVINGS PLAN

The 401(k) Savings Plan allows associates the opportunity to save money for anticipated retirement needs. Eligible associates can contribute up to the IRS maximum annual allowance on a pre-tax or post-tax basis. The company matches dollar for dollar for up to 6% of your bi-weekly pay that you choose to contribute and will also match up to 6% of your bonus. The company match will be in pretax dollars and will not contribute any money unless the associate contributes money. Please note, associates are automatically enrolled to contribute at the 6% level, unless the associate manually elects a different amount.

#### **Maximum Yearly Limit**

The maximum yearly limit is determined annually by the IRS. Associates who will be age 50 or older during the selected calendar year are also eligible for a catch-up contribution, as determined by the IRS.

Eligibility: Regular, full-time and part-time associates

Effective Date: First day of the month following 30 days of employment

**Enrollment Information:** Associates are automatically enrolled at 6%, and Fidelity<sup>®</sup> will enroll you automatically in the Fidelity Freedom Index Fund Class W. Fidelity will send you an enrollment packet within three weeks of your start date. You will need to update your beneficiaries on Fidelity's website. To make changes to your account, beneficiaries or contribution amounts, you can contact Fidelity, 800-835-5095, 401k.com.

# ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

AD&D provides a benefit of \$65,000 in the event of a loss of life resulting from an accident. The coverage also includes benefits for dismemberments.

For loss of:	Benefit Payable:
Both feet, both hands or entire sight of both eyes	\$65,000
One hand and one foot	\$65,000
Either one hand or one foot and entire sight of one eye	\$65,000
One hand, one foot or entire sight of one eye	\$32,500
Thumb and index finger of either hand	\$16,250

#### Bi-Weekly Cost: \$0.34

Eligibility: Regular, full-time associates

Effective Date: First day of employment

**Enrollment Information:** Associates can sign up and drop AD&D at any time. You will need to fill out an AD&D Beneficiary Change form and submit it to Human Resources – Benefits.

#### **GROUP LIFE INSURANCE**

The Group Life Insurance Plan provides additional financial security to your beneficiary at no cost to you. The company pays 100% of the premium. If you want to purchase additional life insurance, you can go through any of our life agents. Please visit *cinfin.com* to find an agent.

Length of Employment	Benefit Level
0-3 years	1 X annual salary; \$15,000 minimum, \$50,000 maximum
More than 3 years	2 X annual salary; \$1,500,000 maximum

Bi-Weekly Cost: No cost. However, you will pay taxes on the premium for coverage above \$50,000.

Eligibility: Regular, full-time associates

Effective Date: First day of employment

Enrollment Information: Associates are automatically enrolled at the start of employment and will need to fill out beneficiary information.

# **OCCUPATIONAL HEALTH**

Our Occupational Health department gives headquarters associates access to the expertise of two registered nurses and an on-site health coach from our medical provider. Available services include allergy injections, blood pressure checks, health coaching, nursing mother assistance and over-the-counter medications. Regular office hours are Mondays-Thursdays, 9 a.m.-3 p.m., and Fridays, 9 a.m.-2 p.m.

# SHORT-TERM DISABILITY

Short-term disability is a pay continuation plan that provides you with regular payroll deposits when you are unable to work due to a qualifying medical condition. The conditions include an accident, illness and pregnancy. Short-term disability pay can extend up to 26 weeks or 130 working days. You receive a percentage of your salary based on your length of service with the company. Any event that caused disability prior to your employment date or during the three-month waiting period would not be covered. You are eligible for total benefit coverage for any pre-existing condition after you have actively worked 12 consecutive months. This benefit does not provide you with a continuation of pay for mental illness or functional nervous disorders, except during a period of confinement in an appropriate care facility. The period of disability for childbirth is generally 12 weeks. However, your period of disability could be extended to the maximum of 26 weeks if you continue to be disabled due to a pregnancy-related covered condition.

# NON-PREGNANCY-RELATED COVERED CONDITIONS

	Less Than 1 Year of Service	1 to 4 Years of Service	5 to 9 Years of Service	10 or more Years of Service
100% of Salary	Weeks 2 and 3	Weeks 2 and 3	Weeks 2 and 3	Weeks 2 and 3
70% of Salary	N/A	Weeks 4 through 8	Weeks 4 through 12	Weeks 4 through 26
60% of Salary	Weeks 4 through 26	Weeks 9 through 26	Weeks 13 through 26	N/A

# PREGNANCY-RELATED COVERED CONDITIONS

	Less Than 1 Year of Service	1 to 4 Years of Service	5 to 9 Years of Service	10 or more Years of Service
100% of Salary	Weeks 1 through 12	Weeks 1 through 12	Weeks 1 through 12	Weeks 1 through 12
70% of Salary	N/A	N/A	N/A	Weeks 13 through 26
60% of Salary	Weeks 13 through 26	Weeks 13 through 26	Weeks 13 through 26	N/A

## Bi-Weekly Cost: No cost

Eligibility: Regular, full-time associates

Effective Date: After three months of full-time employment

Enrollment Information: Associates are automatically enrolled

**Details:** Associates will need to submit a Leave of Absence form and a Short-Term Disability claim form to the leave administrator in Human Resources – Benefits. The benefit goes into effect at the end of a 5-day waiting period. During the 5-day waiting period, you will need to use any remaining PTO, sick or vacation time – depending on your role. If you have exhausted all eligible paid time off, the waiting period will be unpaid.

## LONG-TERM DISABILITY

Long-term disability offers you financial protection in the event you are disabled from working for an extended period of time. Coverage will replace 66 2/3% of your wages up to a maximum of \$7,500 per month. Long-term disability begins after 26 weeks of short-term disability.

Bi-Weekly Cost: Varies; Monthly Salary/100 x .2060 x 12/26

Eligibility: Regular, full-time associates

Effective Date: After three months of employment, or three months after the date you receive approval from the underwriting process.

**Enrollment Information:** Associates can enroll within 30 days of hire and will be automatically accepted. If you decide to waive long-term disability and add it at a future date, you will need to go through an underwriting process. You may or may not be accepted under the plan when you go through the underwriting process.

# **ASSOCIATE TIME OFF**

You deserve and need time off for rest and relaxation. The Cincinnati Insurance Companies offers you paid time off or vacation and sick time dependent upon your pay status and length of employment.

Exempt Associates: Exempt associates are eligible for an allotment of PTO each year\*.

Years of Service	PTO Days
0-4	18
5-9	21
10-19	26
20 or more	30

Non-exempt Associates: Non-exempt associates are eligible for an allotment of vacation time each year\*.

On days when your health does not permit you to work, non-exempt associates are eligible to receive sick days. Sick leave is computed on the basis of one-half day per month, for a total of six days per year. In the year of hire, sick leave is determined on a pro rata basis. Payment for earned, unused sick leave is paid in the new calendar year. All associates must submit a doctor's note to the leave administrator after three or more consecutive days of absence.

Years of Service	Vacation Days	Sick Days
0-4	10	6
5-9	15	6
10 or more	20	6

\*All associates receive prorated PTO or vacation days within your first year of hire. All PTO or vacation time must be taken in the year it is granted; remaining days are forfeited.

Holidays: Full-time associates receive seven paid holidays each year: New Year's Day, Martin Luther King, Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and Christmas Day. Our company usually offers full-time associates an additional two days off during the year-end holiday season.

	During first 30 days of employment	After 30 days of employment	
Employee Benefit Plan	Anytime	During open enrollment	Anytime
Health & Prescription Plan	Х	X	
Dental Plan	х	X	
Vision Plan	х	X	
Contribution Option	Anytime	During open enrollment	Anytime
HSA contribution amount nust be enrolled in our Health Plan)	Х		Х
Tax Advantage Plan (Flexible Spending Accounts)	х	x	
401(k) contribution amount	X		Х
Other Employee Benefits	Anytime	During open enrollment	Anytime
ccidental Death & Dismemberment	х		Х
Group Life Insurance	Automatically enrolled	Automatically enrolled	
Short-Term Disability	Automatically enrolled	Automatically enrolled	
Long-Term Disability*	X*		Х*
Updating Information	Anytime	During open enrollment	Anytime
Dependents	Х	x	
Beneficiaries (AD&D, 401(k), Group Life, HSA)	x		Х

\* If you choose to not enroll in Long-Term Disability within the first 30 days of employment, you will need to go through an underwriting process and you may be declined coverage.

All benefits can be changed within 30 days of a qualifying event. These include:

- Marriage
- Death
- Divorce
- Birth and adoption
- Your spouse or eligible dependent's loss of employment that causes a loss of insurance coverage
- Your spouse or eligible dependent's new employment that provides insurance coverage

# **HUMAN RESOURCES – BENEFITS**

Benefits Phone: 513-870-2197 Benefits Email: *benefits@cinfin.com* HR-Benefits Fax (Secured): 513-870-2911

# **OTHER HUMAN RESOURCES CONTACTS**

Human Resources Phone: 513-870-2199 Human Resources Email: *humanresources@cinfin.com* Human Resources Fax: 513-371-7373

# **HEALTH & PRESCRIPTION PLAN**

Anthem 833-947-5723 anthem.com

# HEALTH SAVINGS ACCOUNT (HSA)

Fidelity Investments 1-800-544-3716 *401k.com* 

# DENTAL PLAN

Delta Dental 1-800-524-0149 *deltadentaloh.com* 

# **VISION PLAN**

Humana Vision 1-866-537-0229 humanavisioncare.com

# TAX ADVANTAGE PLAN (TAP)

Human Resources – Benefits 513-870-2197

# 401(k) SAVINGS PLAN

Fidelity Investments 1-800-835-5095 *401k.com* Check Fidelity website for locations

# ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

Human Resources – Benefits 513-870-2197

# **GROUP LIFE INSURANCE**

Human Resources – Benefits 513-870-2197

# SHORT-TERM DISABILITY

Human Resources – Benefits Terri Howard 513-870-2198

# LONG-TERM DISABILITY

Human Resources – Benefits Terri Howard 513-870-2198 **Catchup contribution** – associates who will be age 50 or older during the selected calendar year are eligible to contribute more money into their 401(k)-accounts above the usual IRS limits; associates who will be age 55 or older during the selected calendar year are eligible to contribute more money into their HSA accounts above the usual IRS limits

**Deductible** – a fixed amount of money associates must pay before the health insurance plan begins to pay covered services

Formulary prescription – preferred prescription

High deductible health plan – a health insurance plan with low monthly payments and a high deductible

Non-formulary prescription – non-preferred prescription

**Out-of-pocket maximum** – the amount of money associates must meet for insurance to pay 100% of the policy's benefits

**PPO + HSA Plan** – a health insurance plan that provides access to a network of providers and a tax-advantaged account for saving money on medical expenses

Premium - the monthly amount you pay for health insurance

**Qualifying event** – marriage, death, divorce, birth, adoption, spouse or eligible dependent's loss of employment that causes a loss of insurance coverage, or spouse or eligible dependent's new employment that provides insurance coverage

Regular associates – associates who are not temporary



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