

2024 Annual Benefits Enrollment

Your benefits, your way.
Choose the coverage you
need by enrolling from
October 30 – November 10, 2023



ANNUAL BENEFITS ENROLLMENT

*Your benefits,
your way.* Choose
the coverage you
need by enrolling
from October 30 –
November 10, 2023

Welcome

Team Lincoln,

Each year as part of *Your Total Rewards*, we offer a variety of health, well-being and financial benefits, with a focus on health and welfare options during Annual Enrollment. Our 2024 Annual Benefits Enrollment will run from **Mon., Oct. 30, through Fri., Nov. 10**, and during this time you'll have the opportunity to choose *your benefits, your way*.

Your current benefit elections will carry over for 2024, with the exception of contributions to a Health Savings Account (HSA) and any Flexible Spending Accounts (FSAs) that require elections each year. Because we know that one size does not fit all, it's important to review your current benefit coverages and make sure they still align with you and your family's needs. Your benefits include not only medical, dental and vision coverage, but resources to support your physical, mental and social well-being and secure financial future.

We are making minimal changes to our health and welfare benefit offerings in 2024, and you'll even notice a rate decrease for some of our benefits offered through Lincoln Group Protection, such as Vision, Accident, Critical Illness and Supplemental Life.

What you need to do

- ✔ Review this e-Guide, reflect on your healthcare use and consider your options.
- ✔ Attend an Annual Benefits Enrollment webinar to hear about the 2024 benefit highlights and have the opportunity to ask questions. There will be four dates to choose from.
- ✔ Enroll from October 30 – November 10, 2023.

Your current benefit elections will carry over for 2024, with the exception of contributions to a Health Savings Account (HSA) and any Flexible Spending Accounts (FSAs). If you would like to contribute to an HSA and/or FSA for 2024, you must elect to participate during Annual Enrollment each year.

Because we know that one size does not fit all, it is important to review your current benefit elections and make sure they still align with you and your family's needs.

Welcome, cont'd.

Additional updates to next year's benefits:

- **Livongo Diabetes Management is now part of Teladoc Health.** Livongo users will begin to see Teladoc branding as part of their benefits and care information.
- **Expert Second Medical Opinion services are transitioning from Teladoc to Alight Clinical Guidance.** With this change, employees will now have access to a team of multidisciplinary clinical experts referred to as Medical Allies, in addition to the existing assistance of the Benefit Pros.
- **PrudentRx is being added to our High Deductible Health Plan (HDHP),** which will help reduce the out-of-pocket costs for specialty medications. This program is currently available as part of the Core POS and Value EPO plans.

We are committed to your health and well-being and supporting you and your loved ones' wellness. To choose *your benefits, your way*, please review this 2024 e-Guide for more information on the comprehensive benefits available as part of *Your Total Rewards*.

Regards,



Jonmichael Daly
SVP, Total Rewards,
HR Operations and
Systems



Sean Woodroffe
EVP, Chief People,
Culture and
Communications Officer

Highlights for 2024

- **Minimal changes to health and welfare benefits.** Be sure to review your options to confirm the benefit elections that support your physical, mental, social and financial well-being.
- **PrudentRx is being added to the High Deductible Health Plans.** The PrudentRx solution helps reduce your out-of-pocket costs for certain specialty medications. Enrolling in the PrudentRx program allows you to fill specialty medications included on the PrudentRx Specialty drug list at no cost by assisting you with enrollment in drug manufacturers' discount copay cards and assistance programs. If you opt out of PrudentRx (or your specialty medication is not on the PrudentRx list), you will be responsible for 30% coinsurance after the plan deductible for specialty medications. This program is currently available as part of the Core POS and Value EPO plans.
- **Increased Health Savings Account (HSA) contribution limits.** The IRS has increased the amount you can contribute to an HSA in 2024 from \$3,850 to \$4,150, if you enroll in individual coverage in either High Deductible Health Plan, and from \$7,750 to \$8,300 for family coverage. Participants age 55+ may make an additional contribution of \$1,000. As a reminder, **HSA contribution elections do not carry over** and must be elected during Annual Enrollment each year if you want to participate.



Highlights for 2024, cont'd.

- **Increased Healthcare Flexible Spending Account (FSA) contribution limits.** The amount you can contribute to the Healthcare FSA in 2024 is \$3,050. As a reminder, **FSA contribution elections do not carry over** and must be elected during Annual Enrollment each year if you want to participate.
- **Dependent Care Flexible Spending Account (DCFSA)**
While the \$5,000 Dependent Care contribution limit isn't changing for 2024, consider participating in the plan next year and taking advantage of the tax savings. To participate, you'll need to actively submit an election to save on your child care and/or elder care expenses.
- **Livongo Diabetes Management** is now part of Teladoc Health. Livongo users will begin to see Teladoc branding as part of their benefits and care information.
- **Expert Second Medical Opinion** services are transitioning from Teladoc to Alight Clinical Guidance. With this change, employees will now have access to a team of multidisciplinary clinical experts referred to as Medical Allies, in addition to the existing assistance of the Benefit Pros. The Medical Ally Team helps facilitate expert medical opinions and provide clinical guidance so employees and their families can make informed treatment decisions. Medical Allies work closely with the Benefit Pros to provide comprehensive support throughout a member's care journey to drive positive outcomes.



Lincoln's healthcare benefits and the Affordable Care Act — our options meet the government's standards.

Under the Affordable Care Act, employers like Lincoln are required to offer healthcare coverage meeting certain minimum standards to all full-time employees. Our health insurance options continue to meet the government's standards for minimum value, contribution affordability and all other requirements under healthcare reform. This means that, if you are eligible for Lincoln's benefits, you will not qualify for a premium tax credit if you choose to purchase individual health insurance through a state or federal Health Insurance Marketplace.

Health Savings Account (HSA) and Flexible Spending Accounts (FSAs)

- **Increased Health Savings Account (HSA)**

contribution limits: The IRS has increased the amount you can contribute to an HSA in 2024 from \$3,850 to \$4,150 if you enroll in individual coverage in either High Deductible Health Plan, and from \$7,750 to \$8,300 for family coverage. Participants age 55+ may contribute an additional \$1,000.

- **Healthcare Flexible Spending Account (HCFSA)**

contribution limit: The amount you can contribute to the Healthcare FSA in 2024 is \$3,050.

Visit [IRS.gov](https://www.irs.gov), and search for Publication 502 for the full list of items that you can pay for using a Health Savings Account (HSA) or Healthcare FSA.

- **Dependent Care Flexible Spending Account (DCFSA)¹:**

The amount you can contribute to the Dependent Care FSA in 2024 is \$5,000. The limit for highly compensated employees (HCEs), individuals making \$150,000 or more, is \$2,500.

Visit [IRS.gov](https://www.irs.gov), and search for Publication 503 for the full list of expenses that you can pay for using a Dependent Care FSA.

¹*DCFSA covers eligible child care (birth through age 12) such as a child care center, babysitter, nanny, or summer day camp, disabled dependent and/or spouse care, and elder care.*



YOU MUST MAKE AN ACTIVE ELECTION DURING ANNUAL ENROLLMENT FOR YOUR HSA and FSA. IF YOU DO NOT ELECT THESE COVERAGES YOU WILL DEFAULT TO NO COVERAGE IN 2024.

Need help? Reach out to an Alight Benefit Pro or Ayco financial coach to review options and compare costs.

Make your 2024 elections on the Alight Benefits Portal with support from these helpful resources.

- **Alight Benefit Pros** are highly trained healthcare experts who can help you navigate your Lincoln benefits, no matter how simple or complex the issue. Your Benefit Pro can also provide proactive recommendations tailored to your individual healthcare needs.

Your Benefit Pro can help you:

- Understand your benefits
- Locate providers
- Schedule appointments
- Save money on healthcare
- Pay less for prescriptions
- Review healthcare claims and bills
- Watch this [video](#) to learn more.

- **During Annual Benefits Enrollment, Lincoln Benefits Service Center scheduler** can be used to schedule a convenient time to speak with a Lincoln Benefits Service Center representative for support and answers to any questions you have about your health benefits.
- **Health Navigation** tools, including health plan comparison charts and a medical expense estimator tool to help you compare your plan options and a provider search tool.
- **Review your *Total Rewards* online statement** for an overview of current coverages and other rewards programs.



Available to everyone



Wellness Discount: Employees enrolled in a Lincoln medical plan can earn 2,400 wellness points toward their wellness discount when they connect with a Benefit Pro about a doctor recommendation/cost estimate or use the online Navigation tool to perform a search for a doctor recommendation/cost estimate (1x/quarter).



There's an app for that!

Download the Alight mobile app to check your benefits, search for a doctor, ask a medical billing question and more — all while you're on the go!

Mark your calendar - Annual Benefits Enrollment Webinars

- [Session 1](#)
Tuesday, October 24, 3 p.m. to 3:50 p.m. ET
- [Session 2](#)
Wednesday, October 25, 10 a.m. to 10:50 a.m. ET
- [Session 3](#)
Thursday, October 26, 2 p.m. to 2:50 p.m. ET
- [Session 4](#)
Friday, October 27, 10 a.m. to 10:50 a.m. ET

Unable to attend? A recording will be made available on *ONE* on the Annual Benefits Enrollment page under [Your Health](#).



PASSIVE ENROLLMENT for medical, dental, and vision insurance

This year is a passive enrollment for your medical, dental and vision insurance. If you do not make any elections during Annual Enrollment, your current coverage will carry over to 2024.



Our stats

Managing healthcare costs is a shared responsibility and we thank you for taking part in the wellness programs to become healthier and plan for the life you love.

Check out some of these stats from Virgin Pulse in 2022:



4,145 employees completed a digital health assessment.



5,312 employees tracked healthy activities in Virgin Pulse.



8,539 Journeys® were completed by employees.



3,907 employees synced a fitness tracker or app.



2,935 RethinkCare Programs completed by employees.

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Who's eligible for coverage

You can choose coverage under the Lincoln benefits program if you are a regular, full-time employee working at least 35 hours per week or a regular, part-time employee working 20–34 hours per week.

If you are eligible, you may also cover your eligible family members, including:

Your natural children or children of your approved domestic partner, stepchildren, legally adopted children, children for whom you have legal guardianship and who reside with you, children you are required by court order to cover for benefits, or your child of any age who was incapacitated as of their 26th birthday and already enrolled in Lincoln benefits. Your children are eligible for medical, dental and vision coverage through Lincoln Financial up to age 26. Coverage for your dependents up to age 26 will continue through the end of the month in which they turn 26.

Who's eligible for coverage

You can choose coverage under the Lincoln benefits program if you are a regular, full-time employee working at least 35 hours per week or a regular, part-time employee working 20–34 hours per week.

If you are eligible, you may also cover your eligible family members, including:

The person to whom you are legally married under state law.

Who's eligible for coverage

You can choose coverage under the Lincoln benefits program if you are a regular, full-time employee working at least 35 hours per week or a regular, part-time employee working 20–34 hours per week.

If you are eligible, you may also cover your eligible family members, including:

An adult of any gender, not related to you by blood or legal marriage, who shares a significant emotional and financial relationship with you and currently resides at your home address, and has for at least the past 12 months.

The cost of coverage for an eligible domestic partner and eligible children of a domestic partner is no different than the cost for a spouse and children. However, the costs associated with domestic partner coverage are taken after-tax rather than pre-tax. In addition, the employer contribution amount for domestic partner coverage is reportable as taxable income to you. This amount will be shown on your pay statements.

Expecting any life changes next year?

You will have 31 days from the date of the event to make changes to your benefits coverage. Learn how that impacts your coverage.

If you experience a qualifying life event, you have 31 days from the date of the event to make changes to your benefit coverage. These qualifying events include getting married/divorced or gaining/losing coverage due to a change in eligibility. In the case of having or adopting a baby, **you will have 60 days** from the date of the event to make changes.

Certain Medicaid or Children's Health Insurance Program eligibility changes allow for a 60-day enrollment window. You or your covered dependents may also drop coverage under the plan in any month to enroll in Medicaid.



Medical plans

You have four medical plan options through Aetna.

Features	Core High Deductible Plan	Core POS Plan	Value High Deductible Plan	Value EPO Plan
Core High Deductible Health Plan & Value High Deductible Health Plan participants can enroll in a Health Savings Account.				
Annual Lincoln contributions to the HSA	\$500 employee only; \$1,000 employee + family	No HSA	N/A	No HSA
Your annual pretax HSA contributions	Up to \$3,650 employee only; Up to \$7,300 employee + family		Up to \$4,150 employee only; Up to \$8,300 employee + family	
You pay for your medical care				
Annual deductible	\$2,000 employee only; \$4,000 employee + family ¹	\$800 employee only; \$1,600 employee + family	\$3,000 employee only; \$6,000 employee + family ¹	\$1,000 employee only; \$2,000 employee + family
Coinsurance	You share the cost after you pay your annual deductible.			
In-network	You pay 20%	You pay 20%	You pay 20%	You pay 20%
Out-of-network	You pay 50%	You pay 50%	You pay 50%	N/A
Out-of-pocket maximum	The most you'll pay in a year, including your annual deductible, coinsurance and copays (not including your contributions).			
In-network	\$5,000 employee only; \$10,000 employee + family ¹	\$5,000 employee only \$10,000 employee + family	\$6,000 employee only \$12,000 employee + family ¹	\$5,000 employee only \$10,000 employee + family
Out-of-network	\$12,500 employee only; \$25,000 employee + family ¹	\$15,000 employee only; \$30,000 employee + family	\$15,000 employee only; \$30,000 employee + family ¹	N/A

In-network preventive care is covered at 100% in all Plans.

Employees in Hawaii should contact the Lincoln Benefits Service Center for details on their plan.

¹ If you enroll in family coverage, you must meet the entire family deductible before any individual shares the cost through coinsurance. If you enroll in family coverage, no individual will pay more than the single out-of-pocket maximum.

Medical plans, cont'd.

Features	Core High Deductible Plan	Core POS Plan	Value High Deductible Plan	Value EPO Plan
You receive medical care				
Preventive care	You pay nothing (not even your deductible) in-network.			
Office visits				
In-network	Copay (after deductible) \$25 PCP; \$35 specialist	Copay (no deductible) \$25 PCP; \$35 specialist	Copay (after deductible) \$25 PCP; \$35 specialist	Copay (no deductible) \$25 PCP; \$35 specialist
Out-of-network	You pay 50% (after deductible)	You pay 50% (after deductible)	You pay 50% (after deductible)	N/A
MDLIVE – telemedicine	\$65 (before deductible)/ \$10 (after deductible)	\$10 (no deductible)	\$65 (before deductible)/ \$10 (after deductible)	\$10 (no deductible)
Emergency care	Copay (after deductible)	Copay (no deductible)	Copay (after deductible)	Copay (no deductible)
Emergency room	\$150	\$150	\$150	\$150
Urgent care	\$35	\$35	\$35	\$35
Mental health visits	\$25	\$25	\$25	\$25
Your monthly contributions¹				
Employee only	\$146	\$146	\$102	\$133
Annual employee + spouse/domestic partner	\$371	\$371	\$246	\$335
Employee + child(ren)	\$336	\$336	\$224	\$303
Employee + family	\$653	\$653	\$426	\$587

¹ These pretax monthly contributions are for full-time employees. Visit the Alight Benefits Portal for part-time employee rates. Rates for domestic partner coverage are subject to post-tax provisions and imputed income; visit Benefits.LFG.com for information on imputed income.

Important information for employees and their dependents:

Working spouse surcharge \$100 monthly

If you enroll your spouse or domestic partner who is eligible for medical coverage provided by an employer other than Lincoln, we will apply a \$100 monthly surcharge to your medical premiums. It may make sense for your spouse/domestic partner to elect medical coverage from their own employer.

[Click here to view and download frequently asked questions.](#)

\$50 monthly surcharge if you smoke

It pays to be tobacco-free! Tobacco use is bad for your health and drives up healthcare costs for you and Lincoln. Do yourself and your bank account a favor by being tobacco-free. If not, you'll pay a \$50 monthly surcharge if you or your spouse/domestic partner are tobacco users and enroll in medical coverage, and a \$100 monthly surcharge if both you and your spouse/domestic partner are tobacco users and enroll in medical coverage. Visit the [Your Wellness Resources](#) page on *ONE* to find out more information about this program.

Planning to retire in the next year?

Lincoln has partnered with Via Benefits to offer a private marketplace to allow our current and future retirees an opportunity to enroll in a wide range of individual health insurance options. For those long-service employees who were grandfathered in a Lincoln subsidy toward the cost of retiree medical coverage (not common), this subsidy will be offered through a Health Reimbursement Arrangement (HRA) that can be applied toward the cost of coverage. More details will be provided separately.

Refer to this [Retirement Checklist](#) to help you through the retirement process.



Wellness Discount: Employees can receive a \$50 discount on monthly medical contributions by earning 12,000 wellness points each quarter. That's a potential savings of \$600 per year! Visit the [Virgin Pulse page](#) for more details.

Medical coverage provided by Aetna

Through Aetna, you can expect cutting-edge healthcare services with an extensive national provider network. Your Aetna plan offers many added benefits and provides you with the support, tools and programs to help you achieve your best health.

Manage your plan, simply and easily

- Whether you're at home or on the go, you can access your medical benefits on your terms through your Aetna member website or the Aetna Health app.

Connect with your care

- Search for providers, facilities, procedures and pharmacies.
- Find in-network providers accepting new patients.
- Get cost estimates for visits and procedures.

Manage benefits easily

- View, sort and pay your claims.
- Access your medical ID card whenever you need it.
- Track your spending and progress toward deductibles.

Stay healthy

- Get personalized health actions that are recommended based on your profile.

Get care that's meant for you

- Together, we'll create a customized care plan to improve your health and well-being. Whatever it is, it's your choice. You can decide what's right for you.

There's an app for that!



Download the Aetna Health mobile app to get your digital medical ID card, review claims and more — all while you're on the go!

Additional Aetna resources

24-hour Nurse Line: Speak to a Registered Nurse 24/7.

Aetna Concierge Program is more than just a call center — a personal healthcare assistant can help you understand what's covered under your health plan, provide help with selecting the right doctor and help you plan for any upcoming treatments. **Aetna Concierge** is able to assist with **member pharmacy-related questions** including benefit questions, claims and precertification. However, specialty drug questions still need to be directed to CVS.

Nutritional Counseling Program provides one-on-one expert help with a registered dietitian, at no cost to you.

Aetna Maternity Program is a no-cost online resource that's available throughout your maternity journey.

CVS Pharmacy Advisor® Counseling will help you manage your medications regardless of whether you fill your prescriptions at a local pharmacy or by mail.

The AbleTo Program can help if you're struggling with a health condition, new diagnosis or personal problem. You'll get virtual, personalized support that can help you feel better, manage your emotions and improve your overall health.

Surgical Centers of Excellence through Surgery Plus provides members with access to best-in-class surgeons nationwide to improve your experience in getting a surgical procedure and improving outcomes.

Aetna Back & Joint, in partnership with Hinge Health is a comprehensive approach to musculoskeletal care, including digital physical therapy.

Aetna Transform Oncology increases the level of support in a member's cancer journey by leveraging CVS and Aetna capabilities, resulting in an industry-leading experience and treatment outcome.

Questions? Contact Aetna at 866-925-0656 or visit [Aetna.com](https://www.aetna.com).

Telemedicine

Get the care you need, when you need it

MDLIVE gives you the care you need anytime, anywhere – without ever going to the doctor’s office. Board-certified doctors are on call to diagnose your nonemergency health issues, prescribe medication, and send your prescription to the pharmacy of your choice – all while you’re at home or traveling.

Access a doctor via video or phone consultation; you can also ask questions and get advice privately using a secure email system. Go to MDLive.com/LFG for more information.

This service is available for medically covered employees and dependents:

- Employees enrolled in the Core High Deductible Health Plan or Value High Deductible Health Plan pay \$65 before the deductible and a \$10 copay after the deductible.
- Employees enrolled in the Core POS Plan or Value EPO Plan pay a \$10 copay.

[Click here](#) to register or set up a consultation.



Employees receive 800 wellness points (1x) when they register with MDLIVE.

Download the MDLIVE app

The MDLIVE mobile app makes it even easier and more convenient to speak to board-certified doctors, including pediatricians, from wherever you may be, 24/7 for nonemergencies.



Download the MDLIVE app from Google Play or the App Store today!

Prescription drug coverage

When you use a participating pharmacy, you pay the copay for the Core POS Plan and Value EPO Plan. For the Core High Deductible Health Plan (HDHP) and Value HDHP, you pay the full cost until you meet your annual deductible, except for certain preventive medications where you only pay the copay; once you reach your out-of-pocket maximum, all covered prescription drugs are covered at 100%.

Rx cost share (retail and mail) – For generic medications, you pay a copay. For brand drugs, you pay a percentage of the drug cost after you meet your deductible. A maximum cost applies to cap your out-of-pocket cost. How it works:

- If the full drug cost is less than the minimum amount, you pay the full drug cost.
- If the coinsurance calculation is less than the minimum amount, you pay the minimum amount.
- If the coinsurance calculation is greater than the maximum amount, you pay the maximum amount.
- If the coinsurance calculation falls between the minimum and maximum, you pay the coinsurance amount.

Drug type	Retail pharmacy (30-day supply)	Mail-order (90-day supply)
Prescription drug coverage		
Tier 1: Generic	\$10	\$25
Tier 2: Preferred brand	20% (\$40 min./\$80 max.)	20% (\$100 min./\$200 max.)
Tier 3: Nonpreferred brand	20% (\$60 min./\$100 max.)	20% (\$150 min./\$250 max.)

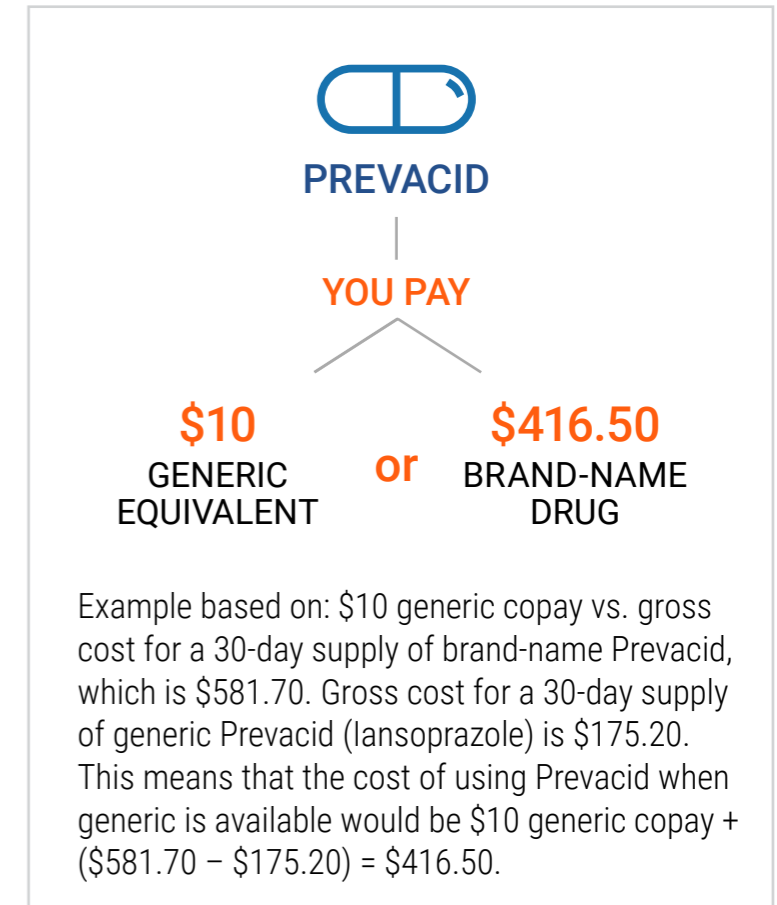
Prescription drug coverage

Mandatory generic drug policy: In addition to lower copays for generic drugs, Lincoln has a mandatory generic drug provision. If you choose a brand-name drug when a generic drug is available, you will pay the difference in cost plus the generic copay. Lincoln plan members use generic drugs for about 85% of their prescriptions. The generic drug may have a different name, color or shape, but it is a chemical copy of the brand-name drug. Most importantly, it follows the same FDA safety rules at a lower cost. Ask your doctor whether generics or other lower-cost alternatives are appropriate for you. See example to the right:

PrudentRx Copay Program¹: PrudentRx allows you to get select specialty medications at no cost to you. That means \$0 out-of-pocket for any medications on the PrudentRx Specialty drug list when you fill by CVS Specialty®.

For participating members enrolled in the Core High Deductible Health Plan (HDHP) or Value HDHP, your final out-of-pocket cost will be \$0 after satisfying any applicable plan deductible. If you choose to opt out of the program, or do not affirmatively enroll in available copay assistance as required by a prescription manufacturer, you will be responsible for the full 30 percent coinsurance on specialty medications after satisfying any applicable plan deductible.

To view the current list of specialty medications included in the PrudentRx Drug Program, visit <https://www.prudentrx.com/prudentrx>.



Find out if your prescription qualifies for savings with a generic equivalent. Contact your [Benefit Pro](#) for more information.

¹ Your plan includes the PrudentRx program for specialty medications. This program is designed to lower your out-of-pocket costs by assisting you with enrollment in drug manufacturers' discount copay cards/assistance programs. When enrolled in PrudentRx, your out-of-pocket cost will be \$0 for medications included on the PrudentRx exclusive specialty drug list. If you opt out, you will be responsible for the 30% coinsurance (only the amount you pay will apply toward your DED/OOP. Amounts paid by a manufacturer's copay assistance program or PrudentRx program will not count toward your DED/OOP).

Prescription drug coverage, cont'd.

Mandatory mail-order for maintenance medications

Use the CVS Caremark mail-order service (90-day supply) or CVS retail pharmacy for most maintenance medications. After three fills of a maintenance medication at a non-CVS retail pharmacy (30-day supply) you will be charged the full price of the drug each time you refill at a non-CVS retail pharmacy. You can save on your maintenance medication by filling a 90-day prescription through CVS Caremark mail-order or a CVS retail pharmacy. This provision does not apply to controlled substances and compound medications.

You can spread out your payment

When you purchase a 90-day supply of prescription medication through the CVS Caremark mail-order service, you will have the option to pay for it over a three-month period of time. To get started, you will need to enroll through Caremark and have an active credit or debit card available to put on file.

Maintenance choice

You have the option to fill a 90-day maintenance prescription from a CVS retail pharmacy, including the CVS pharmacies in Target, in addition to standard mail-order. The mail-order cost-share will apply.



CVS AccordantCare

CVS AccordantCare is a care management program that offers 24-hour support from a nurse who specializes in providing care for certain covered conditions. It is open to covered plan members and their dependents who have certain chronic, complex or rare conditions such as:

- Amyotrophic Lateral Sclerosis (ALS)
- Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP)
- Crohn's Disease
- Cystic Fibrosis
- Dermatomyositis
- Epilepsy (seizures)
- Gaucher's Disease
- Hemophilia
- Hereditary Angioedema
- Human Immunodeficiency Virus (HIV)
- Multiple Sclerosis
- Myasthenia Gravis
- Parkinson's disease
- Polymyositis
- Rheumatoid Arthritis
- Scleroderma
- Sickle Cell Disease
- Systemic Lupus Erythematosus (SLE or Lupus)
- Ulcerative Colitis

Once signed up, you'll have an AccordantCare nurse and a resource specialist who can help you:

- Get answers and learn more about your health
- Set goals and stay on track – spot risks early, before they affect your health
- Find support in your community
- Make lifestyle changes for better health
- Get the care you need by working with your doctor and healthcare team

Whether you need a lot of support, or you just have a question now and then, AccordantCare is tailored to your needs. Along with one-on-one phone support, you'll have digital tools to help you keep track of your health.

To learn more and find out if you are eligible, visit [Accordant.com](https://www.accordant.com) or call 800-948-2497.

Note: If you have a health condition not listed above, such as elevated blood pressure, high cholesterol, or asthma, benefit-eligible employees can speak with a nurse or pharmacist at Virgin Pulse for condition management. Go to [BeWell.LFG.com](https://www.BeWell.LFG.com) or call 855-824-2449 to get started. This program is free of cost to employees as part of *Your Total Rewards*.

Teladoc Diabetes Management (formerly Livongo) — effective January 1, 2024

Certain medical conditions require a special level of care. Our enhanced diabetes program ensures you have the support, tools and guidance you need. Teladoc Diabetes Management helps improve outcomes for employees with diabetes. This program is available for employees enrolled in a Lincoln medical plan.

Participation in the program is FREE and includes:

- A connected glucometer that offers specific insights
- Outreach if your readings are too high or too low
- Unlimited test strips and lancets delivered to your door
- 24/7 access to diabetes-specific coaching
- Digital tools through the Livongo mobile app
- Coordination and communication with providers



Did you know?

Employees can earn wellness points for participating in Teladoc Diabetes Management.

Testing and tracking your blood glucose levels

Testing and tracking is critical to successfully managing your diabetes, but it can be a time-consuming, manual process. With the connected meter, every time you test your blood glucose levels, your numbers will be automatically sent to a secure online account so you can easily track your levels, see trends, and share your data with whomever you choose, like your doctors or family.

Visit [Livongo.com/Start](https://www.livongo.com/Start) or call 800-945-4355 to get started today. You'll need to provide your registration code, "LFG."

Download the Livongo app

If you currently have the Livongo app downloaded, you will be prompted to download the new version of the app. Member data will autotransfer upon logging in to the existing Livongo app. The mobile app allows you to view your readings, get daily insights and send messages directly to coaches.

Go to your device app store to get started.

Alight Clinical Guidance — expert second medical opinion

Alight Clinical Guidance provides access to a team of multidisciplinary clinical experts referred to as Medical Allies. The Medical Ally Team helps facilitate expert medical opinions and provide clinical guidance so employees and their families can make informed treatment decisions. Medical Allies work closely with the Benefit Pros to provide comprehensive support throughout a member's care journey to drive positive outcomes.

Visit Benefits.LFG.com to get started.



Core High Deductible Plan and Value High Deductible Plan

More flexibility

These plans work differently from a traditional medical plan, such as the Core POS Plan and Value EPO Plan.

- They are designed to offer you more flexibility around how and when you pay for healthcare.
- The plans have the same network of providers and cover the same services as the Core POS Plan: doctor visits, hospital care, mental healthcare, prescription drugs, and more.
- You can see any provider you like, but you save money by going to in-network providers. And you'll have the opportunity to save money in your HSA on a tax-free basis.

For additional information, visit Benefits.LFG.com.

Here is how the plan works with the HSA

(Click each topic to learn more.)



Health Savings Account

Save and pay for eligible expenses

Use your tax-free HSA funds to pay for eligible healthcare expenses or save for future healthcare expenses. Maximum annual HSA contributions:

- \$4,150 (employee only) — if enrolled in the Core HDHP, Lincoln contributes a maximum of \$500 to your HSA divided equally on a per-pay-period basis
- \$8,300 (employee + spouse/domestic partner, employee + child(ren), or employee + family) — if enrolled in the Core HDHP, Lincoln contributes a maximum of \$1,000 to your HSA divided equally on a per-pay-period basis

Please note there is a catch-up contribution for members 55+ of \$1,000.

Core High Deductible Plan and Value High Deductible Plan

More flexibility

These plans work differently from a traditional medical plan, such as the Core POS Plan and Value EPO Plan.

- They are designed to offer you more flexibility around how and when you pay for healthcare.
- The plans have the same network of providers and cover the same services as the Core POS Plan: doctor visits, hospital care, mental healthcare, prescription drugs, and more.
- You can see any provider you like, but you save money by going to in-network providers. And you'll have the opportunity to save money in your HSA on a tax-free basis.

For additional information, visit Benefits.LFG.com.

Here is how the plan works with the HSA

(Click each topic to learn more.)



Preventive

100% coverage for in-network care

- Preventive care covered at 100% in-network (e.g., annual physicals, mammograms, colonoscopy, etc.)
- Preventive medications covered at copay and not subject to deductible (e.g., blood pressure lowering, cholesterol lowering, insulin, osteoporosis, etc.)

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More flexibility

These plans work differently from a traditional medical plan, such as the Core POS Plan and Value EPO Plan.

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- The plans have the same network of providers and cover the same services as the Core POS Plan: doctor visits, hospital care, mental healthcare, prescription drugs, and more.
- You can see any provider you like, but you save money by going to in-network providers. And you'll have the opportunity to save money in your HSA on a tax-free basis.

For additional information, visit Benefits.LFG.com.

Here is how the plan works with the HSA

(Click each topic to learn more.)



Deductible

The deductible applies for all nonpreventive services, including prescription drugs

You pay all eligible expenses, including prescription drugs (except for preventive medications, which are at a copay), until the deductible is satisfied. You may use funds in your HSA to meet your deductible.

Note: If you enroll in family coverage, you must meet the entire family deductible before any individual shares the cost through coinsurance.

Core High Deductible Plan and Value High Deductible Plan

More flexibility

These plans work differently from a traditional medical plan, such as the Core POS Plan and Value EPO Plan.

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- The plans have the same network of providers and cover the same services as the Core POS Plan: doctor visits, hospital care, mental healthcare, prescription drugs, and more.
- You can see any provider you like, but you save money by going to in-network providers. And you'll have the opportunity to save money in your HSA on a tax-free basis.

For additional information, visit Benefits.LFG.com.

Here is how the plan works with the HSA

(Click each topic to learn more.)



Copay/coinsurance

What you pay for services

Once the deductible is satisfied, you pay these amounts for services:

- \$25 for PCP visits; \$10 for MDLIVE; \$35 for specialist visits
- \$150 for emergency room visits; \$35 for urgent care visits
- After the deductible: \$10 generic drug; 20% for preferred brand drug (\$40 min./\$80 max.); 20% for nonpreferred brand drug (\$60 min./\$100 max.) (30-day supply; mail-order copays are 2.5 times retail copays for up to a 90-day supply)
- 20% coinsurance in-network
- 50% coinsurance out-of-network

Core High Deductible Plan and Value High Deductible Plan

More flexibility

These plans work differently from a traditional medical plan, such as the Core POS Plan and Value EPO Plan.

- They are designed to offer you more flexibility around how and when you pay for healthcare.
- The plans have the same network of providers and cover the same services as the Core POS Plan: doctor visits, hospital care, mental healthcare, prescription drugs, and more.
- You can see any provider you like, but you save money by going to in-network providers. And you'll have the opportunity to save money in your HSA on a tax-free basis.

For additional information, visit Benefits.LFG.com.

Here is how the plan works with the HSA

(Click each topic to learn more.)



Out-of-pocket maximum

The most you could pay out of pocket in a calendar year

If you're eligible out-of-pocket expenses paid annually exceed the maximum, the plan then pays 100% of your eligible in-network expenses for the balance of the calendar year excluding your payroll deductions. Your deductible, copays and coinsurance all count toward your out-of-pocket maximum. If you enroll in family coverage, no individual will pay more than the single out-of-pocket maximum.

Health Savings Account (HSA)

Here's how the HSA¹ works

You can contribute tax-free dollars to help cover qualified out-of-pocket healthcare costs for yourself and your qualified dependents today – or to save for future healthcare expenses, including during your retirement, with the HSA.

Core High Deductible Health Plan

If you choose	Lincoln contributes to your HSA ²	+ You may contribute up to this amount in your HSA ³	= Maximum combined HSA contribution	Potential tax savings ⁴
Employee-only coverage	\$500	\$3,650	\$4,150	\$1,095
Employee + family coverage ⁵	\$1,000	\$7,300	\$8,300	\$2,190

Value High Deductible Health Plan

Employee-only coverage	N/A	\$4,150	\$4,150	\$1,245
Employee + family coverage ⁵	N/A	\$8,300	\$8,300	\$2,490

¹ To be an eligible individual and qualify for an HSA, you must be covered under the Core High Deductible Plan or the Value High Deductible Plan, have no other health coverage, not be enrolled in Medicare and can't be claimed as a dependent on someone else's tax return. Employees age 65 and older may contribute to the HSA and receive HSA seed money (where applicable) if they are NOT enrolled in any part of Medicare. If enrolled in any part of Medicare, contributions must stop. ² Lincoln divides its contribution into equal per-pay-period installments throughout the year. ³ If you will be age 55 or older in 2024, you have the option to contribute an additional \$1,000 in "catch-up" contributions to your HSA. ⁴ If you contribute the maximum to your HSA and your taxes are on average 30%. ⁵ Employee + spouse/domestic partner and employee + child(ren) tiers are subject to the employee + family HSA limit.

The HSA is a great way to save for healthcare expenses in retirement!

Consider talking with a [Lincoln retirement consultant](#) or an [Ayco financial coach](#) to find out how an HSA can factor into your retirement savings plan.

The HSA gives you a triple tax advantage



Your HSA contributions are pretax or tax-deductible.



Your HSA earns interest, and once your balance reaches \$5,000, you may invest a portion. Any interest and investment earnings are also tax-free.



Any withdrawals for qualified healthcare expenses are tax-free.*

[*Download a copy of Publication 502 for a complete list of qualified expenses.](#)

Flexible Spending Accounts (FSAs)

Save taxes on your healthcare and child care costs

Lincoln Financial provides two types of FSAs. Both FSAs allow you to contribute tax-free dollars to cover certain expenses you expect to incur during the year.

Use the Healthcare FSA to save on healthcare expenses.

Contribute up to \$3,050 annually.

- Pay for eligible healthcare expenses not covered by your health plan or taken as income tax deductions (e.g., copays, deductibles, orthodontia, and contact lenses).
- Contribute up to \$3,050 tax-free each year for healthcare expenses.
- You may not participate in the Healthcare FSA if you elect either the Core High Deductible Health Plan or Value High Deductible Health Plan.
- Visit [IRS.gov](https://www.irs.gov), and search for Publication 502 for the full list of items that you can pay for using a Health Savings Account (HSA) or Healthcare FSA.

Use the Dependent Care FSA to save on child care or other dependent care expenses.

Contribute up to \$5,000 annually.

- Pay for eligible day care expenses (e.g., day care centers, nursery schools, and before- or after-school care or day camp) for children under age 13.
- Contribute up to \$5,000 tax-free each year (\$2,500 if married and filing separate tax returns).
- Dependent Care Flexible Spending Account (DCFSA) for highly compensated employees: The DCFSA election limit is \$2,500 for HCEs making \$150,000 or more.
- Visit [IRS.gov](https://www.irs.gov), and search for Publication 503 for the full list of expenses that you can pay for using a Dependent Care FSA.



Use it or lose it!

The IRS requires you to forfeit unused funds in your FSA at the end of the plan year, so plan carefully.

What's the difference between an HSA and a healthcare FSA?

Both an HSA and a healthcare FSA are used to pay qualified medical expenses – but take a look at how these two accounts differ:

Let's compare...

HSA	vs.	FSA
Lincoln makes contributions to your account for Core High Deductible Plan ONLY.	↻	You contribute tax-free dollars.
You may contribute tax-free dollars.		
Unused funds roll over from year to year, even into retirement – you never forfeit your balance.	↻	Must use funds within the plan year – or you lose them.
You take funds with you if you leave Lincoln.	↻	You can't take funds with you if you leave Lincoln.
Available only if you elect the Core or Value High Deductible Health Plan	↻	Not applicable.
Earns interest and offers investment options for your funds once your HSA balance reaches \$5,000.		

IMPORTANT: You must make an active contribution election during Annual Enrollment for your HSA and FSAs.



Commuter benefit plan through Alight Smart-Choice

Similar to Flexible Spending Accounts (FSAs), the commuter benefit plan offers a before-tax benefit. This benefit is available to eligible employees who travel to work using public transportation – such as trains, buses, subways, ferries, or vanpools – as well as those who pay for a combination of both transit and parking expenses. Also available is a bicycle commuter option for eligible cities.

There are three resources for managing the commuter benefit:

- **Via website:** The Smart-Choice website enables you to manage your commuter benefits online. Through the website, you can:
 - Order a transit and/or parking pass
 - Have a transit and/or parking pass automatically renewed (monthly)
 - Track order history
 - Maintain personal account information
- **Via the commuter benefits mobile app:** The app brings many of the website features to your fingertips for on-the-go convenience. With the app, you can:
 - Review your pending order(s)
 - Activate and manage your Commuter Check Prepaid Mastercard and view current balance and transaction history
 - Report your Commuter Check Prepaid Mastercard lost/stolen to obtain a replacement
- **Via phone:** If you have additional questions, the Smart-Choice Customer Care Team is available Monday through Friday during regular business hours at 833-418-1944.

Visit the Smart-Choice website via the Alight Benefits Portal at Benefits.LFG.com.



Dental coverage

Lincoln offers dental coverage through *Lincoln DentalConnect*[®], with access to 96,000 unique providers and 320,000 provider locations nationwide. Visit LincolnFinancial.com to determine which dentists in your area participate in the *Lincoln DentalConnect* network.

WELLNESS REMINDER

Oral health and your heart

According to the Academy of General Dentistry, there is a relationship between gum (periodontal) disease and health complications, such as a stroke and heart disease. Lincoln covers routine cleanings twice a year at 100%. Don't forget, you can earn wellness points when you get preventive dental exams, so schedule your appointment today!



Plan provision	Benefit
Annual deductible	\$50 single; \$150 family
Preventive care (e.g., routine cleanings)	Covered at 100% ¹ (no deductible)
Basic care (e.g., fillings, extractions)	You pay 20% ¹ after deductible
Major care (e.g., crowns, bridges)	You pay 50% ¹ after deductible
Orthodontia ²	You pay 50% ¹ (no deductible) \$2,000 lifetime maximum
Annual benefit maximum	\$2,000 per covered individual
Monthly premium	
Employee	\$13.50
Employee + spouse/domestic partner	\$31.29
Employee + child(ren)	\$34.30
Family	\$61.73

¹ If you see a dentist who doesn't participate in the *Lincoln DentalConnect*[®] network, the plan will pay the specified coinsurance amount based on usual and customary charges. You may be required to pay any charges in excess of the payment made by the plan.

² You must be enrolled in dental coverage for 12 consecutive months before the plan pays orthodontia benefits unless you are a new hire or making a qualifying life event change and are currently in the process of orthodontic treatment.

These pretax monthly contributions are for full-time employees. Visit the Alight Benefits Portal for part-time employee rates. Rates for domestic partner coverage are subject to post-tax provisions and imputed income; visit Benefits.LFG.com for information on imputed income.

Vision coverage

Lincoln offers vision coverage through *Lincoln VisionConnect*[®]. You may visit any provider, but you receive a higher level of benefit coverage (and there is no claims paperwork) if you use an in-network provider. Call 800-440-8453, or [click here](#) to find in-network providers or get an out-of-network reimbursement form.

WELLNESS REMINDER

Your eyes are a window to your health

Eye doctors often are the first healthcare professionals to detect chronic systemic diseases, such as high blood pressure, diabetes and inflammatory conditions. An annual eye exam is recommended for those over age 40 and is covered at 100%, in-network, after a \$20 copay, under our vision insurance. Be sure to schedule your appointment today!

Eyeglass lens allowance (once every 12 months)¹

In-network:

Single and lined bifocal/trifocal lenses covered at 100% after \$20 copay

Out-of-network:

Single, up to \$50; lined bifocal, up to \$75; lined trifocal, up to \$100

Eyeglass frame allowance (once every 12 months)¹

In-network:

Up to \$130, plus 30% off amounts over \$130

Out-of-network:

Up to \$70

Contact lens allowance (once every 12 months)¹

In-network:

Fully covered up to \$125

Out-of-network:

Up to \$125

Annual exam (once every 12 months)¹

In-network:

\$20 copay

Out-of-network:

Up to \$50

¹You may receive benefits for eyeglasses or contacts (not both) in any year, based on date of service.

Monthly premium

Employee	\$5.65
Employee + spouse/domestic partner	\$10.43
Employee + child(ren)	\$10.76
Family	\$16.63

Be prepared for the unexpected

Short-term disability (STD) coverage

If you can't work due to illness or injury, Lincoln provides up to 26 weeks of STD coverage while you're disabled – at no cost to you. STD coverage will begin on the eighth calendar day of an approved disability. When your STD coverage begins, you will receive:

- 100% of your eligible weekly earnings for the first eight weeks¹, and
- 70% of your eligible weekly earnings for up to the remaining 18 weeks.

Long-term disability (LTD) coverage

If you remain disabled, you are eligible for LTD benefits, available at no cost to you. You'll receive 50% of your monthly eligible earnings (less other income) while you are on an approved LTD leave.²

Want more LTD coverage?

Purchase LTD buy-up coverage and increase your LTD benefit to 66²/₃% of your monthly eligible earnings. If you didn't enroll in the LTD buy-up when you were first eligible, you'll be required to submit an Evidence of Insurability (EOI) form.

¹Week one of the first eight weeks of your disability is the seven-day waiting period and is paid through your PTO.

²\$25,000 per month combined basic LTD and LTD buy-up benefit maximum.

Life insurance

Lincoln's basic group term life insurance coverage ensures that, in the event of your death, your beneficiary(ies) will receive a benefit equal to your annual eligible earnings, at no cost to you.

You can purchase supplemental coverage for yourself, your spouse/domestic partner and/or your dependent children (unless they are a Lincoln employee).

Who's covered?	Coverage available
Yourself	1x–5x your eligible earnings, up to \$2.5 million (including your basic life insurance)
Your spouse/domestic partner ¹	Increments of \$10,000 up to \$100,000
Your dependent child(ren) ¹	Increments of \$5,000 up to \$20,000

¹ The amount you elect for your spouse/domestic partner or child(ren) may not exceed 50% of your total life insurance coverage (basic life plus supplemental life).

Accidental death and dismemberment coverage

Lincoln provides accidental death and dismemberment coverage at no cost to you.

Continuation of coverage

Once you have had coverage for at least 12 months, you may continue coverage for your supplemental life insurance, spouse/domestic partner life insurance and dependent child life insurance, if you terminate employment for a reason other than sickness, injury or Social Security normal retirement.

Visit Benefits.LFG.com for more information.

Want more life insurance coverage?

You can purchase supplemental life insurance for yourself, your spouse/domestic partner and/or your dependent children (unless they are Lincoln employees). If you enroll or increase coverage for yourself or spouse/domestic partner, you will need to submit an Evidence of Insurability (EOI) form.

Accident insurance

Lincoln's accident insurance helps protect your income from unexpected expenses related to an accident. The plan pays you a lump-sum cash benefit – you decide the best way to use it. The cash benefit can help fill in the gaps and pay for deductibles, copays and any other living expenses you have. Accident insurance does not require Evidence of Insurability (EOI).

Monthly premium	
Employee	\$5.05
Employee + spouse/domestic partner	\$8.16
Employee + child(ren)	\$8.73
Family	\$11.81

Accident insurance pays you for covered injuries

Benefits for more than 70 covered injury expenses and treatments are included. Some examples follow:

What's covered?	
Accident follow-up treatment	\$50 per visit up to six visits
Emergency room treatment or initial physician office visit	\$150 emergency room \$50 initial physician office visit
Hospital admission confinement	\$1,000 per accident \$200 per day (up to 365 days) \$400 per day ICU (up to 15 days)
Fractures	Nonsurgical: \$50–\$1,500 per fracture Surgical: \$100–\$3,000 per fracture
Ambulance	Air ambulance ride—\$600 Ground ambulance ride—\$150
Major diagnostic exam	\$50
Family care benefit	\$20 per day per child
Emergency dental work	Crown—\$150 Extraction—\$50

Critical illness insurance

If serious illness strikes, the last thing you need to worry about is how to pay the bills. Elect critical illness insurance from Lincoln for financial protection from any future covered illness or condition. This insurance provides you with a cash benefit to help with the extra expenses associated with your recovery.

If you are enrolling for the first time or increasing your coverage, you will be required to submit an Evidence of Insurability (EOI) form.

At the core of Lincoln's critical illness insurance is the *Lincoln CareCompass*[®] program.

Benefits include:

- Each year, you can get a cash benefit for completing one of 24 covered health assessment tests
- Access to an expert advocate for help at any time
- Referrals to community resources and support groups
- Travel and lodging arrangements for out-of-town care

Covered illnesses/conditions:

- Cancer
- Stroke
- End-stage kidney failure
- Heart attack
- Permanent paralysis
- Coma
- Major organ failure

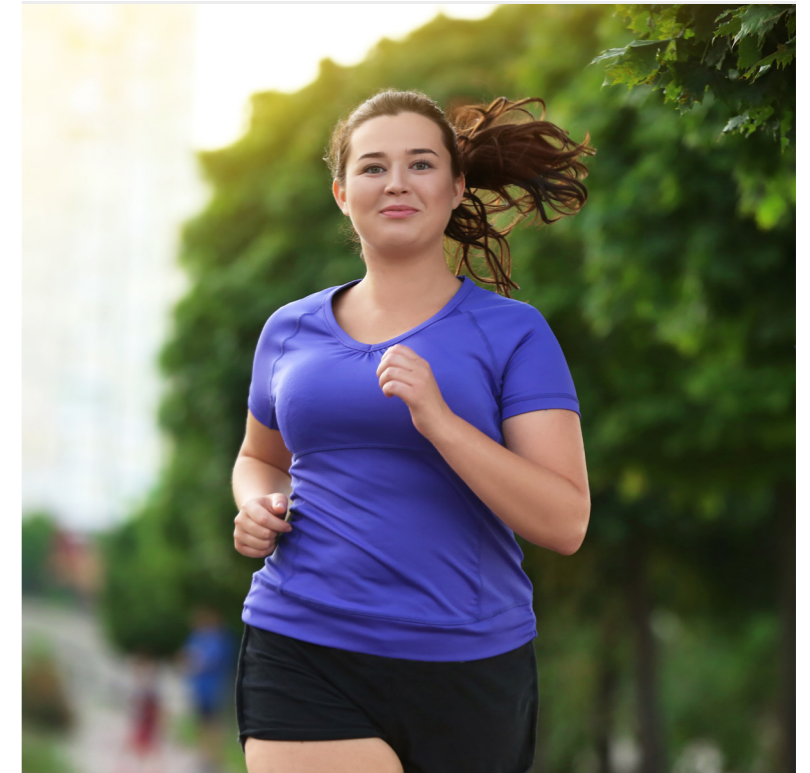
[Click here](#) to view Critical Illness rates for 2024.

Hospital indemnity coverage

If you or a covered family member needs to go to the hospital for an accident or injury, hospital indemnity insurance provides a lump-sum cash benefit to help you take care of unexpected expenses.

Monthly premiums for hospital indemnity

	Low Plan	High Plan
Employee	\$5.90	\$11.18
Employee + spouse	\$12.52	\$23.83
Employee + child(ren)	\$9.85	\$18.65
Family	\$17.31	\$32.89





Pet insurance

Lincoln offers pet insurance through Nationwide®. Pet insurance covers accidents, illnesses and preventive care. Nationwide® plans help you provide your pets with the best care possible and are accepted by all vets – even specialists and emergency providers. [Click here](#) to learn more or call **877-PETS-VPI** for more information.

Both plans reimburse veterinary bills, with guaranteed issuance for pets of all ages. Go to the Alight Solutions Benefits Portal for more information, or visit PetInsurance.com/LFG. Pre-existing conditions are not covered.



Available to everyone



The Active&Fit Direct™ Program

Choose from a broad network of 12,200+ standard fitness centers and/or 6,100+ premium exercise studios with flexibility to change anytime.

- Standard membership: \$28 a month (plus a \$28 enrollment fee and applicable taxes)
- Premium network membership: A discount of 20% – 70% off of regular membership pricing (plus an enrollment fee and applicable taxes) for higher-priced fitness centers, studios and activity-based experiences not available with a standard membership.

The program offers:

- Access to 10,800+ on-demand workout videos, giving enrolled members the flexibility to participate in a fitness class or perform exercises at home or on the go
- Online directory map and locator for fitness centers (available on any device)
- The ability to enroll your spouse/ domestic partner in their own membership
- Online fitness tracking from a wide variety of popular wearable fitness devices, apps and exercise equipment
- An online, educational resource library

Who's eligible? All benefit-eligible Lincoln employees are eligible to receive the preferred pricing through the Active&Fit Direct program. Employees do not need to be enrolled in a Lincoln-sponsored medical plan in order to participate. Spouses/domestic partners who live in the same household are eligible if the employee is enrolled in the program.

How to access: Participants enroll in the Active&Fit Direct Program by using the weblink on *ONE* under [Total Rewards: Benefits and wellness](#) > [Your Wellness Resources](#) > Active&Fit Direct Access.



Available to everyone



Other terms and conditions apply.

Aetna Resources for Living (EAP)

Stressed out? Aetna Resources for Living employee assistance program (EAP) is a confidential, round-the-clock service available to help you and your family balance the demands of work, life and personal issues.

The EAP services include:

- [Emotional support](#) – Meet with a counselor in person or virtually for up to 10 free sessions per topic each year to talk about what’s on your mind – stress, relationships, grieving, anxiety, depression, substance abuse, etc.
- **Daily life assistance** – Specialists can help you with:
 - Identifying child care or day care
 - Senior care living, have your home evaluated by a senior care manager
- [myStrength](#) – An online tool to help you cope with stress, practice mindfulness, and more
- [Total Brain](#) – Train your brain for less stress and more success
- [On-Demand Tutoring](#) – Access free, online homework tutoring for students in kindergarten through college



Available to everyone

Aetna Resources for Living is free, confidential and available 24 hours a day/7 days a week.



Available to everyone

Goldman Sachs Ayco Financial Management Wellness Program

What's included?

- **24/7 access to digital financial guidance**
The Financial Wellness site includes unlimited access to financial planning tools, calculators and resources to help you better understand and implement the moving pieces of your financial plan. You can also access these resources on the go with the Goldman Sachs Wellness app.
- **One-on-one financial coaching**
Your Financial Wellness coaches have been trained on benefits and compensation plans and can help you understand what's available to you and how it all fits into your financial plan. You can reach out to your coach with specific questions or simply for general financial guidance.

During Annual Enrollment, Ayco can help you answer questions including:

- How do I make the most of my benefits?
- Would a Health Savings Account (HSA) or a Flexible Spending Account (FSA) make sense for me?
- Do I have enough life and/or disability insurance coverage?
- Is there anything else that I should be thinking about?



Employees can earn 1,600 wellness points per year for completing an Ayco financial assessment plus an additional 1,600 wellness points (2x/year) for meeting with an Ayco financial coach.



Available to everyone

Goldman Sachs Ayco Financial Management Wellness Program

Who's eligible?

Ayco is available to full- and part-time employees, at no cost to you as part of *Your Total Rewards*.

How to get started

Employees have single sign-on access to Ayco financial counseling.

- Access digital financial resources
 - Download Goldman Sachs Wellness in the App Store® or Google Play or log in to the Financial Wellness platform and create an account
 - Single Sign-on: www.ayco.com/login/lfg
 - Complete the financial wellness assessment for a quick financial check-up
 - Review your recommended financial to-dos and set your priority
- Connect with a coach for personalized guidance
 - Schedule a one-on-one coaching session through the app or online
 - Need help with an immediate question? Call a coach at 844-292-6123

Working with an Ayco financial coach and a Lincoln retirement consultant

Did you know that as part of *Your Total Rewards*, you also have access to a [Lincoln retirement consultant](#)? The best part is Lincoln retirement consultants and Ayco financial coaches complement one another. You can connect with both an Ayco financial coach and a Lincoln retirement consultant to get a full picture of your financial wellness.

Here's how:

- Lincoln retirement consultants can work with you specifically on your retirement readiness. [Click here](#) to schedule your appointment.
- Contact an Ayco financial coach at 844-292-6123. Telephonic coaching is available toll-free Monday through Thursday, 9 a.m. to 5 p.m. ET, with evening appointments available until 8 p.m., and Friday 9 a.m. to 5 p.m. ET.

If you don't have an account with Ayco, you will be prompted to create one prior to registering for the webinar. If you have a personal Goldman Sachs account (outside of Lincoln) you will need to use your login and password for that personal account.

Please note: Some participants may already work with (or may plan in the future to work with) a Lincoln-affiliated or other outside financial advisor. Ayco is not intended to replace that type of personal financial advice. It is to be used as another resource in your wellness tool kit that can help you meet your financial wellness goals.

Advisory services offered by The Ayco Company, L.P. d/b/a Goldman Sachs Ayco Personal Financial Management ("Ayco Personal Financial Management" or "Ayco"), a registered investment adviser and an affiliate of Goldman Sachs & Co. LLC ("GS&Co.") and subsidiary of The Goldman Sachs Group, Inc., a worldwide, full-service investment banking, broker-dealer, asset management, and financial services organization. Brokerage services are offered through GS&Co. and Mercer Allied Company, L.P. (a limited purpose broker-dealer), both affiliates of Ayco and members FINRA/SIPC.

Lincoln is not responsible for the content of linked third-party websites or third-party services. We make no representation or warranty regarding the accuracy of the information contained in the linked site. Ayco may also offer you additional, optional services. Lincoln does not guarantee Ayco's services. Please be aware that Ayco's security and privacy policies may be different from Lincoln Financial Group's policies. It is your responsibility to read third-party privacy and security policies closely. If you have any questions or concerns about the products and services offered by Ayco, please contact them directly.

Ovia Health mobile apps, at no cost to you!

Whether your goal is to start a family, have a healthy pregnancy, navigate parenting (for children up to about age 17), manage menopause or just track your health, Ovia Health offers three mobile apps to support you. The apps are easy to use, private and confidential.¹ With each Ovia Health app, you have access to:

- Daily personalized articles and tips to help you achieve your goals
- Unlimited in-app messaging with clinical health coaches, who provide guidance on reproductive health, prenatal health, breastfeeding, return-to-work and more. Experts include registered nurses, midwives, lactation and sleep consultants, nutritionists and mental health professionals
- Instant analysis and personalized insights on your health data
- Highlights about related benefits available through Lincoln

Who's eligible?

Available to all benefit-eligible employees at no cost to you. Spouses/ domestic partners who are covered under a Lincoln medical plan are also eligible.

¹Lincoln Financial Group will not have access to your Protected Health Information (PHI), as required by the Health Insurance Portability and Accountability Act of 1996, as amended (HIPAA). Lincoln only receives aggregated, de-identified health data.

[Click here](#) to read Ovia Health's privacy policy.



Available to everyone



Employees can earn 1,600 wellness points (1x/quarter) for using an Ovia Health app.

Questions?

[Click here](#) to review FAQs or contact Ovia Health at Support@OviaHealth.com.

Infertility benefits through Progyny

Infertility benefits are covered for employees and spouses/domestic partners enrolled in Lincoln's medical plans administered by Aetna. Lincoln has partnered with Progyny to provide employees with access to high-quality fertility doctors and a comprehensive fertility benefit to support your path to parenthood.



Comprehensive coverage for your family-building journey, including IUI, IVF and more



Unlimited guidance and personalized support from a Patient Care Advocate throughout your fertility journey



Access to the largest national network of premier fertility specialists

To make your fertility benefit easier to use, Progyny has bundled the individual services, tests and treatments into a Smart Cycle. The easiest way to think of a Smart Cycle is like a pie. Some treatment types will use only a segment of pie, while other more comprehensive treatments will require the use of an entire pie. Lincoln's benefit includes two Smart Cycles.

For more information about Smart Cycles, [click here](#).

Progyny Rx, in partnership with CVS, is a fertility pharmacy benefit program designed to work seamlessly with the Progyny benefit.

Maternity Leave/Parental Leave

Maternity Leave

Under Lincoln's Short-term Disability benefit, you may take six weeks for regular delivery and eight weeks for cesarean. You may also choose to extend maternity leave through the FMLA.

Parental Leave

Employees with one or more years of service at the time of the birth or adoption of their child may be eligible for up to ten weeks of paid Parental Leave.



Available to everyone



Be Well with Virgin Pulse

Lincoln Financial partners with Virgin Pulse to provide you with the tools you need to get active, be healthy and live better every day. This includes physical activity challenges and useful tips to help you understand, maintain and improve your health to reduce your risk of future illness.

Virgin Pulse offers a variety of healthy activities that are designed to empower you with an understanding of your current health status and how you can take steps toward being a healthier you.

With Virgin Pulse, you'll enjoy:

- Wellness discount of \$600 per year (\$50 per month).¹
- Earn wellness points by logging in every day to complete daily cards with inspiring ideas and activities.
- Daily well-being content, gamification and personalization.
- Health coaching, healthy recipes, a sleep guide, health tracking and much more!

The Protected Health Information (PHI) you share (or that is shared with Lincoln vendors) is secure and will remain confidential. Lincoln will not have access to your PHI, as required by the Health Insurance Portability and Accountability Act of 1996, as amended (HIPAA). Lincoln receives only aggregate or unidentified health data (e.g., number of people with high blood pressure).

¹Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward through a different means.

It pays to be tobacco-free

Lincoln is here to help you kick the habit.

Lincoln provides several tools and resources to help you kick the habit, including tobacco cessation programs through our wellness vendor.

Rewards for participating in a wellness program and maintaining nontobacco user status are available to all employees. If you think you might be unable to meet standards for a reward under these programs, you might qualify for an opportunity to earn the same reward through different means. Contact the **Lincoln Benefits Service Center** at **833-418-1944**, and we will work with you (and if you wish, with your doctor) to find a program with the same reward that is right for you in light of your health status.

The tobacco surcharge can be waived by completing the Virgin Pulse tobacco cessation program.

Visit the [Your Wellness Resources](#) page on *ONE* to find more information about the program.

RethinkCare

At Lincoln, we recognize that many employees are experiencing stress and other challenges related to emotional well-being. That's why we offer **RethinkCare** — a leading digital tool for mindfulness, resilience, and emotional well-being as part of the Virgin Pulse platform.

In just a few minutes a day, you can learn and apply new skills through a variety of daily practices and mini-courses to help manage stress and improve your relationships, sleep and more.

RethinkCare's courses can help you:

- Reduce stress / calm anxiety
- Manage depression and conquer challenging feelings
- Improve sleep
- Understand and support your emotions
- Build resilience and concentration
- Thrive in the workplace
- Break bad habits
- Feel more in control
- Take care of yourself and much more!

Who's eligible?

All health and welfare benefit-eligible employees, regardless of participation in a Lincoln medical plan, can use Virgin Pulse and RethinkCare.

How to access RethinkCare:

RethinkCare is fully integrated as part of your Virgin Pulse account. Once you create your Virgin Pulse account, you can use RethinkCare within the Virgin Pulse platform at [BeWell.LFG.com](https://www.BeWell.LFG.com). To find RethinkCare, go to your homepage, select "Benefits" and click "View All." RethinkCare can be found toward the end of the page.



Available to everyone

Earn a wellness discount



When you complete a RethinkCare session or program, you earn points toward your wellness discount.

Points will automatically be added to your Virgin Pulse account upon completion of a RethinkCare session or program.

There's an app for that!

Staying in touch with your daily wellness habits is easy when you download and use the Virgin Pulse mobile app — including accessing RethinkCare sessions and programs. Once you register your Virgin Pulse account, you can easily download the free Virgin Pulse app from the App Store or Google Play.



WeightWatchers

Lincoln partners with WeightWatchers to bring you special savings on valuable and convenient weight loss solutions. There are two ways to participate:

Option 1: Core (formerly “Digital”)

Eat well, move more and lose the weight you want! Get an individualized nutrition plan, plus easy-to-use tracking tools, 24/7 live WeightWatchers Chat and more.

Option 2: Premium (formerly “Unlimited Workshops + Digital”)

Get in-person and virtual weight loss support from WeightWatchers – when and how you want it! Choose from thousands of sessions morning to night, 7 days a week. Plus, all the benefits of the Core plan.



In 2022, employees at Lincoln lost a total of 1,020 pounds with WeightWatchers!



Available to everyone

Earn a wellness discount.



Employees receive 4,000 wellness points (2x/year) for participating in WeightWatchers.

Get the support you need

For help with 2024 benefits questions, please contact the **Lincoln Benefits Service Center at 833-418-1944**. Representatives are available from 9 a.m. to 6 p.m. ET. For questions regarding a life event, payroll, PTO, and other HR-related inquiries, contact the HR Service Center via AskHR at [AskHR.LFG.com](https://www.lfg.com/askhr) by calling 866-922-6543. Have other questions? Check out the resources below.

Your health

Carrier/administrator	Contact information
Medical benefits	
Aetna	Call: 866-925-0656 Visit: Aetna.com
Prescription drug benefits	
CVS Caremark	Call: 844-345-4154 Specialty: 800-237-2767 7:30 a.m. to 9:00 p.m. ET, Monday to Friday Visit: Caremark.com
PrudentRx Copay Program	Call: 800-578-4403
Dental	
<i>Lincoln DentalConnect</i> [®]	Call: 800-423-2765 Visit: LincolnFinancial.com
Vision	
<i>Lincoln VisionConnect</i> [®]	Call: 800-440-8453 Visit: LVC.LFG.com

Carrier/administrator	Contact information
Virtual health consultations	
MDLIVE	Call: 888-632-2738 Visit: MDLive.com/LFG
Expert second medical opinion	
Alight Clinical Guidance	Call: 855-380-7828 Visit: Benefits.LFG.com
Navigating the healthcare system	
Alight Solutions – Lincoln Benefits Service Center	Call: 833-418-1944 Visit: Benefits.LFG.com
Wellness providers	
Virgin Pulse	Call: 855-824-2449 Visit: BeWell.LFG.com

Your health, cont'd.

Carrier/administrator	Contact information
Weight management program	
WeightWatchers	Call: 866-204-2885 Visit: WW.com/wellness Access ID: 10141906 You will also need to enter your 6-digit employee ID, which can be found in myHR.
Employee assistance program (EAP)	
Aetna Resources for Living	Call: 855-449-4817 Visit: ResourcesForLiving.LFG.com
Voluntary pet insurance	
Nationwide® Pet Insurance	Call: 877-738-7874 Visit: PetInsurance.com/LFG
Infertility and family planning	
Ovia Health	Email: Support@OviaHealth.com
Progyny	Call: 833-505-6172 Visit: Progyny.com

Carrier/administrator	Contact information
Gym membership discount program	
The Active&Fit Direct™ Program	Call: 844-646-2746 Email: AFDcontactus@ashn.com Visit Your Wellness Resources on ONE for information on Active&Fit Direct and accessing their website.



Your financial future

Carrier/administrator	Contact information
Ayco financial counseling	Call: 844-292-6123 Visit: Your Financial Future on ONE for information on Ayco and accessing their website.
Alight Smart-Choice Health Savings Accounts (HSA), Flexible Spending Account (FSA) and Commuter Benefit	Call: 833-418-1944 Visit: Benefits.LFG.com
Life and Accidental Death and Dismemberment (AD&D) Insurance through Lincoln Insurance Solutions	Call: 800-680-4652 Visit: Benefits.LFG.com
Short-term and Long-term Disability Insurance through Lincoln Insurance Solutions	Call: 800-680-4652 Visit: Benefits.LFG.com
Critical Illness and Accident Insurance through Lincoln Insurance Solutions	Call: 800-680-4652 Visit: Benefits.LFG.com

Carrier/administrator	Contact information
Lincoln Retirement Plan Services	Call: 800-234-3500 for customer service Visit: LincolnFinancial.com
Lincoln Financial Retirement Plan Service Center	Call: 800-685-6349 Visit: Pension.MyPlansConnect.com/LFG
Delaware Retirement Plan	Call: 800-234-3500 for customer service Visit: LincolnFinancial.com
UBS Financial Services Inc.	Call: 844-LFG-LTIP Visit: UBS.com/OneSource/LNC
Nolan Financial Group	Call: 888-907-8633 Visit: nolanlink.com
Via Benefits	For Medicare-eligible retirees and dependents – Call: 833-414-1411 Visit: my.viabenefits.com/LFG For pre-Medicare retirees or dependents – Call: 833-414-1412 Visit: marketplace.viabenefits.com/LFG

For more information

To help you make an informed choice for your health coverage, your plan makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about your options in a standard format. You can find the SBC [here](#).

This guide provides summary information on various employer-sponsored programs and benefits. If there are any conflicts between this summary information and the terms and provisions of the official plan documents for these programs and benefits, the plan documents govern.

While every attempt has been made to make this guide an accurate description of our programs and benefits, it is not intended to be a substitute for the actual plan documents.

This guide is not an employment contract or any type of employment guarantee, or a guarantee of benefits. Lincoln National Corporation reserves the right to amend or terminate any employer-sponsored program at any time. Services may be provided by vendors who are not Lincoln Financial Group® companies.