

2026



Employee Benefits Guide

Comprehensive Guide to 2026 Employee Benefits

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Welcome to HCSS



HCSS Employer Inc. is committed to providing competitive benefits for all eligible employees and family members. This year we continue to offer benefits that provide quality healthcare coverage and protection against unforeseen events in your life.

We offer a competitive plan that is designed to give you and your family cost-effective healthcare benefits that will meet your needs. Our goal is to help HCSS employees live healthy lives while maintaining a productive work-life balance.



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Benefits Package



2026 Offerings

- Medical Insurance
 - High Deductible Health Plan (HDHP)
 - In-Network
 - Preferred Provider (PPO)
- Dental Insurance
- Vision Insurance
- Life and AD&D
 - Company Paid
 - Voluntary Life and AD&D
- Short-Term and Long-Term Disability
- Long Term Care
- Health Savings Account (HSA)
- Flexible Spending Account (FSA)
- Supplemental Benefits
- Pet Insurance



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Benefits Overview



Benefit	Provider	Employee Paid	Employer Paid	Eligibility
Medical	Cigna	x	x	Day 1
Dental	Cigna	x	x	Day 1
Vision	Cigna	x		Day 1
Life & AD&D	NYL		x	Day 1
STD & LTD	NYL		x	Day 1
Long-Term Care	Unum		x	Day 1
HSA	HSA Bank	x	x	Day 1
FSA	Flores	x		Day 1
Accidental	Cigna	x		Day 1
Hospital Care	Cigna	x		Day 1
Critical Illness	Cigna	x		Day 1
Pet Insurance	Nationwide	x		Day 1
Holidays	HCSS		x	Day 1
PTO	HCSS		x	Day 1
Sick PTO	HCSS		x	Day 1
401k	ADP	x	x	Day 1
Family Leave	HCSS		x	6 months



*Please note that some of the benefits are prorated based on start date



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Enrollment Guidelines

Eligibility

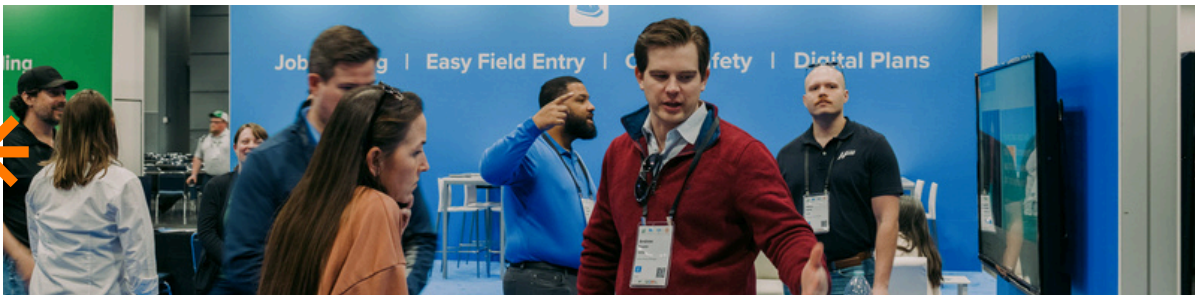


Full-time employees working at least 30 hours per week and their eligible dependents may participate in HCSS Employer Inc. benefits program. Benefits will be effective on the 1st day of the month following the 1st day of employment. If you start on the 1st day of the month, your benefits will start the same day.

Generally, eligible dependents are defined as:

- Legal spouse
- Common law spouse
- Domestic partner
- Natural child(ren)
- Legally adopted children
- Children for whom benefits must be provided through a Qualified
- Medical Child Support Order
- Children placed for adoption and foster children
- Stepchildren
- Children placed for adoption and foster children
- Grandchildren whom the employee and/or their spouse is legally responsible for

Dependent children (as listed above) are eligible for the offered benefits from birth up to age 26. If a child becomes mentally or physically handicapped while covered under the benefit plan(s), the child's coverage may be continued as long as the child remains handicapped and depends on the employee and/or their spouse for support. If you and your spouse are both employees of HCSS, dependent children may only be covered under either you or your spouse's coverage (not under both).



Enrollment Guidelines

Changes During the Year

In most cases, your benefit elections remain in effect for the entire “plan year”. There are circumstances where you may add/change/terminate benefit elections. These circumstances are known as “Qualifying Life Events” or “Family Status Changes”.

Qualifying Life Event (QLE)

The choices you make during Initial Enrollment or Annual Open Enrollment will remain in effect until the next annual enrollment period unless you have a Qualifying Life Event (QLE). The following 5 categories of events are listed in the regulations as being QLEs:

- Employee’s legal marital status changes such as marriage, divorce, legal separation, or death of a spouse.
- Gain or loss of an eligible dependent for reasons such as birth, adoption, court order, disability, death, marriage, or reaching the dependent child age limit.
- Changes in employment status of the employee, the employee’s spouse, or their dependents. This includes:
 - The beginning or ending of employment
 - New or different work hours
 - A change due to strike
 - A change from full-time to part-time or vice versa
 - The beginning or end of an unpaid leave of absence
 - A change in work site
- A dependent becoming eligible or ceasing to be eligible for coverage due to student status, obtaining other group coverage, or any similar circumstance, or loss or gain of eligibility by dependent child(ren) under Medicaid or CHIP.
- A change in residence of the participant or the participant's spouse or dependent.



Enrollment Guidelines

Qualifying Life Event (QLE) cont.



Documentation for a life change must be provided to ADP within 30 days of the event. Benefit coverage changes must satisfy a consistency rule. That is, a change in benefit coverage level or election must be on account of and correspond with a change in status that affects eligibility for coverage under the plan.

Keep In Mind

An election change must be made within 30 days of the qualifying event. You will need to submit your Life Event through ADP for approval before the change can be sent to the carriers. Otherwise, you must wait until the next annual enrollment period to make a change to your benefit elections. Your election changes will become effective the first of the following month, with the exception of birth, death, or adoption. HR will contact you if any additional documentation is required to support your life event.

Our plan year starts on January 1, 2026 through December 31, 2026.

How to Enroll

1. Log into **ADP**
2. On your homepage, navigate to your Benefits tile.
3. Enroll in benefits

If you run into login issues, please contact HR via the HRSD.





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Medical • Dental • Vision

Medical

HCSS offers 3 Medical plans through Cigna. All three plans utilize the “Open Access Plus” network, where you can go to any network doctor of your choice. “Open Access Plus (OAP)” plans make it easy to get quality, in-network care with access to a large, national network of providers. Plus, you have the option to choose a primary care provider to coordinate your care and you don’t need specialist referrals.

Dental

We offer one Dental plan through Cigna, providing comprehensive coverage to help you maintain a healthy smile. The plan uses the Cigna Dental PPO network, giving you the flexibility to see any licensed dentist while saving the most when you visit in-network providers. There’s no need to select a primary dentist or get referrals for specialty care, making it easy to manage preventive, basic, and major dental services on your own schedule.

Vision

Our Voluntary Vision plan through Cigna to help you keep your eyes healthy and your vision clear. The plan provides coverage for routine eye exams, lenses, frames, and contact lenses at an affordable cost. You can visit any eye care provider, but you’ll enjoy the greatest savings when you choose an in-network provider through Cigna’s extensive national vision network.

Please contact HR via the HRSD for any questions.



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Medical



To search for providers, please visit: www.cigna.com click on “Find a Doctor” and select the “Open Access Plus” network.

	HSA OAP		OAP IN		OAP Plus	
	(HDHP)		(In-Network)		(PPO)	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year - Deductible (Individual)	\$1,700	\$4,000	\$2,000	N/A	\$500	\$1,000
Calendar Year - Deductible (Family)	\$3,400	\$8,000	\$4,000	N/A	\$1,000	\$2,000
Out-of-Pocket Maximum (Individual) *Deductible, Coinsurance, & Copays	\$4,000	\$8,000	\$4,000	N/A	\$3,000	\$6,000
Out-of-Pocket Family (Individual) *Deductible, Coinsurance, & Copays	\$8,000	\$16,000	\$8,000	N/A	\$6,000	\$12,000
Preventative Care	100%	N/A	100%	N/A	100%	N/A
Telehealth MDLive	80% AD	N/A	Variable	N/A	Variable	N/A
Coinsurance	80%	60%	80%	N/A	90%	70%
Office Visits - Primary / Specialist	80% AD	60% AD	\$25 / \$50	N/A	\$25 / \$50	70% AD
Labs & X-Rays	80% AD	60% AD	100%	N/A	100%	N/A
In-Patient & Outpatient Hospital Facility	90% AD	90% AD	90% AD	N/A	90% AD	70% AD
Emergency Room	80% AD		\$300	N/A	\$250	
Urgent Care	80% AD	60% AD	\$50	N/A	\$50	70% AD
Pharmacy Benefit Copays - Retail Generic / Preferred Brand / Non-Preferred Brand	\$10 / \$25 / \$50		\$10 / \$25 / \$50		\$10 / \$25 / \$50	
Pharmacy Benefit Copays - Mail Order Generic / Preferred Brand / Non-Preferred Brand	\$25 / \$63 / \$125 (90 day supply)		\$25 / \$63 / \$125 (90 day supply)		\$25 / \$63 / \$125 (90 day supply)	
Medical Specialty Drugs Outpatient / Physicians Office / Home Setting	90% AD	N/A	90% AD	N/A	90% AD	N/A

This is a brief description of the plan, please refer to the medical summary of benefits for more information.

Paycheck Deductions

	HSA OAP (HDHP)		OAP IN (In-Network)		OAP Plus (PPO)
	Semi-Monthly Deductions				Semi-Monthly Deduction
	< 3 years of Tenure	> 3 years of Tenure	< 3 years of Tenure	> 3 years of Tenure	Premium Plan
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$88.68
Employee + Spouse/Domestic Partner	\$309.37	\$309.37	\$269.47	\$269.47	\$310.63
Employee + Child/Children	\$251.19	\$0.00	\$218.58	\$0.00	\$258.07
Employee + Family	\$532.62	\$317.31	\$496.84	\$278.77	\$564.68

Please contact HR via the HRSD for any questions.



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Dental



To search for providers, please visit: www.cigna.com click on “Find a Dentist” and select the “Open Access Plus” network. Your DPPO** plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

	Dental
	(PPO)
Calendar Year - Deductible (Individual)	\$50
Calendar Year - Deductible (Family)	\$150
Calendar Year Maximum	\$2,500
Preventative Services Coinsurance	100%
Basic Services (includes endodontics & periodontics)	80% AD
Major Services (includes crowns, bridges, implants)	50% AD
Orthodontic Services (children under 19 years of age)	50% AD
Orthodontic Lifetime Maximum	80% AD

This is a brief description of the plan, please refer to the dental summary of benefits for more information.

Paycheck Deductions

	Dental (PPO)	
	Semi-Monthly Deductions	
	< 3 years of Tenure	> 3 years of Tenure
Employee Only	\$0.00	\$0.00
Employee + Spouse/Domestic Partner	\$16.86	\$16.86
Employee + Child/Children	\$25.48	\$0.00
Employee + Family	\$42.35	\$16.94



Vision



The voluntary vision plan through Cigna is a full-service insurance plan, that has a copayment schedule for in-network services, as well as out-of-network allowances. You have the choice to use any provider you like but selecting an in-network provider will maximize your vision benefits.

	Voluntary Vision	
	In-Network	Out-of-Network
Eye Exam (every 12 months)	\$10 copay	up to \$45
Lenses (every 12 months)	\$25 copay	Allowance:
Single	\$0 after copay	Up to \$32
Bifocal	\$0 after copay	Up to \$55
Trifocal	\$0 after copay	Up to \$65
Lenticular	\$0 after copay	Up to \$80
Contact Lenses (every 12 months)		
Elective	Up to \$130	Up to \$105
Medically Necessary	\$0 after copay	Up to \$210
Frames (every 12 months)	\$130 allowance	Up to \$71

Please refer to the vision benefit summary for the plan details to include limitations and exclusions.

Paycheck Deductions

	Voluntary Vision
	Semi-Monthly Deductions
Employee Only	\$3.59
Employee + Spouse/Domestic	\$6.81
Employee + Child/Children	\$7.99
Employee + Family	\$11.24



Please contact HR via the HRSD for any questions.



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YOUR HEALTH HAS MET ITS APP®

Get the myCignaMobile App and access your health plan anytime and anywhere you go.

Life can be busy and complicated. So, we created a simple-to-use tool that can help make your life easier (and healthier) while you're on the go. The myCigna Mobile App helps you personalize, organize and access your important plan information on your phone or tablet. The app has a new look and feel and it's available in Spanish too! Use the myCigna Mobile App, to log in anytime, anywhere to:

- › **Manage** and track claims
- › **View**, fax or email ID card information
- › **Find** doctors and compare cost and quality information
- › **Review** your coverage
- › **Track** your account balances and deductibles
- › **Submit** receipts for reimbursement from your Cigna HRA and/or FSA*

The myCigna Mobile App is all about helping you stay organized and in control of your health – anytime, anywhere – so you can get more out of life.

Download the myCigna Mobile App for your mobile device.**



Disponible en Español.

Together, all the way.™



Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company or their affiliates.

The Apple logo is a trademark of Apple Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc. | Google Play is a trademark of Google Inc. *Available for Cigna Choice Fund® Health Reimbursement Account (HRA) and Flexible Spending Account (FSA) plans. **The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply. All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Connecticut General Life Insurance Company (CGLIC), and HMO subsidiaries of Cigna Health Corporation, including Cigna HealthCare of Arizona, Inc., Cigna HealthCare of California, Inc., Cigna HealthCare of Colorado, Inc., Cigna HealthCare of Connecticut, Inc., Cigna HealthCare of Florida, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Illinois, Inc. (IL & IN), Cigna HealthCare of Indiana, Inc., Cigna HealthCare of St. Louis, Inc. (MO, KS & IL), Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of New Jersey, Inc., Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of Tennessee, Inc. (TN & MS), and Cigna HealthCare of Texas, Inc. OK Policy Forms: GM6000 C1 et al (CGLIC); HP-APP-1 et al (CHLIC). The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.



Health Savings Account (HSA)

HCSS provides access to a Health Savings Account (HSA) for employees and covered dependents who have elected the "HSA Open Access Plus" medical plan, to help with annual out-of-pocket health care costs. HCSS supports your savings by making an employer contribution to your HSA each year. You can also contribute pre-tax dollars through payroll deductions, and any unused funds roll over from year to year, allowing your balance to grow over time. For 2026, the maximum contribution amounts are the following:



2026 Maximum HSA Contributions	Total Contribution Amount
Self-Coverage	up to \$4,400
Family Coverage	up to \$8,750
Age 55+ catch-up	up to \$1,000*

Important note: These limits are the maximums you can contribute. Any employer contributions to your HSA are included in this total. The limits above is a combined limit for both spouses, which can be split between their individual accounts as they choose. *Additionally, if both spouses are 55+, each can make a \$1,000 catch-up contribution.

At the beginning of the plan year, your account will be funded by HCSS. Funds that are not used during the plan year can be rolled year to year and are portable. If you make a coverage level change during the plan year, it could affect your available balance.



Medical Coverage Election	HCSS Contribution Amount
Employee Only	\$1,000
Employee +1 (Spouse/Child/Children)	\$2,000
Employee + Family	\$3,000





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Eligible HSA Expenses

Eligible Expenses

- Health Insurance Deductibles
- Co-Insurance
- Copays
- Contact Lenses and Eyeglasses
- Dental Expenses, Braces, Dentures
- Hearing Aids
- Weight Loss Program
- Diabetic Testing Supplies



Making the most of your Health Savings Account (HSA) is easy. You can use your HSA funds to pay for a wide variety of eligible health and wellness items. For convenient shopping and to see what qualifies, visit the [HSA Store](#) or search for HSA eligible items at other retailers.

Please Note: Eligible expenses must be incurred by the employee or eligible members of your family and take place within the benefit plan year.



Our HSA accounts are administered with [HSA Bank](#). To receive your HSA card, please contact their support team at (800) 357-6246 or (414) 978-5294.

Please contact HR via the HRSD for any questions.



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Flexible Spending Accounts (FSA)

HCSS offers a Medical Flexible Spending Account (FSA), Limited Purpose FSA, and a Dependent Care FSA through Flores & Associates. These accounts allow you to set aside pre-tax dollars to pay for certain IRS approved healthcare and dependent care expenses. In other words, you won't pay taxes on the money you spend on qualified medical and dependent care expenses.



2026 FSA Contributions	Maximum Amount	Rollover Amount
Health Care FSA	up to \$3,400	up to \$680
Limited Purpose FSA	up to \$3,400	up to \$680
Dependent Care FSA	up to \$7,500	N/A

Health Care Flexible Spending Account (MFSA)

The Medical Flexible Spending Account (FSA) allows you to set aside pre-tax dollars to pay for eligible healthcare expenses such as copays, prescriptions, and vision or dental care. Your full annual election is available on day one of the plan year, and contributions are deducted from your paycheck before taxes, helping you save money. These expenses can be for yourself and/or eligible dependents.

If you are enrolled in a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA), IRS rules do not allow you to also participate in a standard Medical FSA.

Eligible Expenses

Your Flexible Spending Account (FSA) funds can be used for a wide range of eligible health and wellness items, including first aid kits, over-the-counter medications, sunscreen, and contact lens solution. To make shopping simple, visit the [FSA Store](#) or search for FSA eligible items at other retailers.



Please contact HR via the HRSD for any questions.



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Flexible Spending Accounts (FSA)

Limited Purpose Flexible Spending Account (LPFSA)

The Limited Purpose FSA is available to employees enrolled in a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA). This account lets you set aside pre-tax dollars specifically for eligible dental and vision expenses, including exams, cleanings, fillings, contact lenses, and eyeglasses.

With IRS rules restricting the use of both a standard Medical FSA and an HSA at the same time, the Limited Purpose FSA provides a compliant way to save on out-of-pocket dental and vision costs while preserving your HSA eligibility.

Dependent Care Flexible Spending Account (DCFSA)

The Dependent Care FSA helps you save on eligible dependent care expenses by allowing you to set aside pre-tax dollars from your paycheck. You can use these funds to pay for child care, before- and after-school programs, summer day camps, or care for a dependent adult who is unable to care for themselves.

This account is separate from your Medical or Limited Purpose FSA and has its own IRS annual contribution limits. Unlike the Medical FSA, funds are available only as they are contributed throughout the year, and any unused amounts generally do not roll over.

For married couples filing jointly. For married individuals filing separately, the maximum is \$3,750.

Rollover & Claim Cutoff

For 2026, the rollover amounts into 2027 for MFSA and LPFSA are up to \$680. There is no rollover amount for DCFSA.

The claim cutoff date is March 31, 2027.

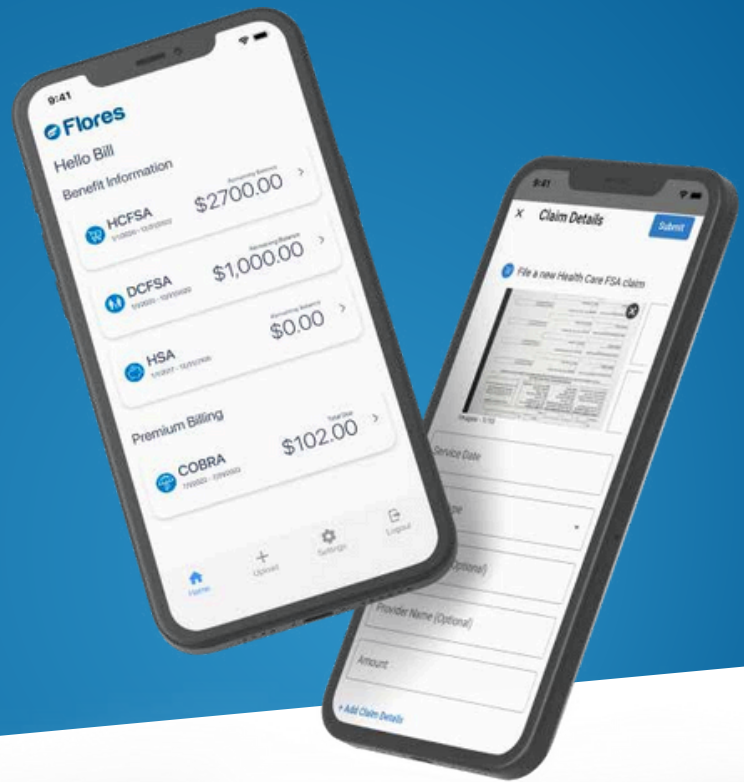
Our FSA accounts are administered with **Flores 247**. For any questions or concerns, please contact their support team at (704) 335-8211 or (800) 532-3327.





Flores *mobile*

Access Benefits Wherever. Whenever.



FEATURES

- ✓ View your account balances right on the home screen
- ✓ Submit Supporting Documentation
- ✓ Request for Reimbursement
- ✓ Upload documents from your camera roll

Download Flores Mobile today



HOW TO USE

Capture for Debit Card Documentation or Claim Submissions

To submit a claim, select "Upload" from the main screen then select the type of claim to upload. You can then photograph your documentation, upload up to 10 images from your camera roll, and add claim details.

Once your claim is submitted you will receive the standard e-Status messages as the document is processed by Flores.

Viewing Account Information

You are also able to access your Flores Account Information using this mobile app. By selecting one of your accounts, you will be taken to the responsive Flores247.com website without a need for an additional login. Through this portal you can view account history, plan documents, add Authorized Users, add/edit Direct Deposit information, and access helpful guides.

Company Paid Benefits



Basic Life and Accidental Death & Dismemberment

HCSS provides all eligible full-time employees with \$100,000 of basic life and \$100,000 of accidental death and dismemberment (AD&D) benefit coverage at no cost to you. The AD&D benefit will be paid in the event of a loss of life or limb by accident, while covered under the plan.

Short-Term Disability

Should you get hurt and are unable to work, HCSS provides Short-Term Disability insurance through New York Life. In the event you become disabled from non-work-related injury or illness, disability income benefits are provided as a source of income at no cost to you.

Elimination Period	0 day accident / 7 day illness
Gross Weekly Benefit	60% of weekly pay up to maximum \$2,500
Maximum Benefit Period	13 weeks

Long-Term Disability

HCSS also provides Long-Term Disability insurance through New York Life with a benefit of 60% of your monthly pay to a maximum benefit of \$6,000 per month until you can return to work or reach Social Security Normal Retirement Age. This benefit has a 90-day elimination period and is provided at no cost to you.

Long-Term Care

HCSS provides all active full-time employees a \$2,000 monthly LTC benefit for up to 3 years through UNUM at no cost to you. This benefit has a 90-day elimination period. You have the opportunity to buy additional LTC benefits, up to \$9,000 per month, with options of benefit duration of 3 years, 6 years, or a lifetime. An evidence of insurability form will be required for a monthly benefit over \$6,000, for a lifetime benefit duration or if you did not elect to buy up when you were initially offered this benefit. Contact HR for buy-up costs.





Voluntary Benefits

Voluntary Life and AD&D

In addition to Basic Life/AD&D Insurance, you may also purchase Voluntary Life/AD&D insurance for you, your spouse, and your children through NewYork Life. You pay the full cost of this benefit with premiums based on your age and amount of coverage elected.

If you did not elect voluntary coverage when first eligible, you may be asked to complete the evidence of insurability (EOI) form, subject to New York Life approval. Any amount over the guaranteed issue amount is subject to the EOI process. Employee coverage reduces at age 70 to 67% of your benefit amount and then to 50% at age 75. Spouse coverage ends at age 70.

Coverage Guidelines	Minimum	Guarantee Issue	Maximum
Employee	\$10,000	2 x Annual Salary, up to \$250K	5 x Annual Salary, up to \$500K
Spouse	\$5,000	50% of employee's benefit up to \$30K	50% of employee's benefit up to \$30K
Children			
(14 days to 6 months)	\$500	\$500	\$500
(6 months to age 26)	\$10,000	\$10,000	\$10,000

Paycheck Deductions (monthly)

Age	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
Employee Monthly Rate per \$1000	\$0.091	\$0.091	\$0.098	\$0.114	\$0.16	\$0.222	\$0.314	\$0.507	\$0.804	\$1.274	\$2.03	\$3.387	\$7.590
Spouse Monthly Rate per \$1000 (based on employee's age)	\$0.088	\$0.088	\$0.095	\$0.111	\$0.157	\$0.219	\$0.311	\$0.504	\$0.801	\$1.272			
Child/Children per \$1000	\$0.231	\$0.231											

Please contact HR via the HRSD for any questions.



Additional Vol. Benefits



HCSS offers group rates on several supplemental benefit plans on a voluntary basis to all employees who work over 20 hours. An unexpected illness or injury can disrupt every facet of your life, including your physical, emotional, and financial well-being. Regular expenses, big and small, can add up. These voluntary benefits are designed to help strengthen your overall benefits package and provide additional protection for you and your family through fixed benefits paid directly to YOU.

Key Features to Consider:

- **Flexible.** Use the money however you want. Pay for anything you need—medical deductibles, childcare, groceries, etc. Supplement your medical plan. Benefits are paid in addition to other coverage you may have.
- **Cost-effective.** Your premium is conveniently deducted from your pay check at a low group rate.

Accidental Injury Insurance

Accidental Injury insurance pays you (or whoever you designate) for treatments or injuries resulting from a covered accident. It can help you pay for expenses while you're recovering from an accident such as rehabilitation, transportation, child care, travel or other out-of-pocket expenses that are not covered by your primary health insurance. HCSS offers 2 voluntary plans to choose from. Please refer to the Benefit Summary on the Hive for more information.

Critical Illness Insurance

Critical Illness insurance can help provide you and your family with the additional financial protection you may need for expenses associated with an unexpected covered critical illness. Cigna HealthcareSM Critical Illness insurance pays you, or whoever you designate, a lump-sum benefit for diagnosis of a covered critical illness or specified event such as a heart attack or stroke. It can help you pay for expenses such as travel, room and board, transportation, child care or treatment options not covered by primary insurance. Please refer to the Benefit Summary on the Hive for more information.



Additional Vol. Benefits



Hospital Care Insurance

With our Hospital Care Insurance, benefits are paid after a qualified hospitalization resulting from a covered injury or illness. You can use the money however you'd like. It can help you pay for expenses such as child care, travel, or other out-of-pocket expenses. Please refer to the Benefit Summary on the Hive for more information.

Pet Insurance

MyPet Protection from Nationwide helps you provide your pets with the best care possible by reimbursing you for vet bills. You can get cashback for accidents, illnesses, hereditary conditions, and more!

- Custom-made plans
- Visit any vet, anywhere
- Choose from 70% and 50% reimbursement of vet's invoice
- Low \$250 annual deductible
- Pet Rx Express for prescription medications
- Easy online claim submission
- 24/7 Vet Helpline access for policyholders

Visit petinsurance.com or call 877-738-7874 for a fast, no-obligation quote today!

Please contact HR via the HRSD for any questions.



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PTO & 401(k)

Paid Time Off

HCSS recognizes that employees sometimes require time off from work for rest, relaxation, and personal pursuits. We have established a paid time off (PTO) program to meet those needs.

PTO begins accruing immediately upon hire. It is expected that PTO is entered into ADP within 2 business days of the time off. The following schedule illustrates employee PTO accrual:

Tenure	Hours Accrued per Month	Hours Accrued per Year
< 5 years	10 hours	120 hours
5 - 10 years	13.33 hours	160 hours
> 10 years	16.67 hours	200 hours

Up to 80 hours of PTO can rollover to the following year.

Paid Holidays

HCSS will observe **9 paid holidays** in 2026. Likewise, employees will have **3 floating holidays** to use within the year. New hires receive a prorated floating holiday amount based on their month of hire. Floating PTO does not rollover.

Paid Family Leave

HCSS provides Paid Family Leave to support employees during significant family events that require time away from work. Eligible employees who have completed at least one year of continuous service are entitled to **up to six weeks of paid leave within a rolling 12-month period**. Paid Family Leave may be used to bond with a new child, care for a seriously ill family member, or manage qualifying family needs related to military service.

This leave is designed to supplement other available benefits, such as FMLA or applicable state family leave programs, ensuring you can focus on what matters most without financial stress.



PTO & 401(k) cont.



Sick Time Off

HCSS values the well-being and health of its employees and their families. In recognition of the need for time off due to illness or medical needs, HCSS provides a comprehensive paid sick leave policy designed to support our team members during times of illness or medical necessity, whether for themselves or their immediate family members. Each employee is entitled to **40 hours, equivalent to five days**, of paid sick leave annually. This leave is granted as a lump sum at the start of the calendar year, on January 1. New hires receive a prorated sick leave grant based on their month of hire.

Paid sick leave can be used for a variety of health-related purposes, including but not limited to:

- Personal illness or injury.
- Medical appointments and treatments.
- Care for an ill or injured immediate family member.
- Preventive care, such as medical, dental, or vision check-ups.

Any unused sick leave will not carry over to the following year and will be forfeited at the end of the calendar year.

Retirement

Knowing your goals for retirement is key to creating a strategy that works for you. The HCSS 401K Plan makes it easy for you to start saving for your future financial security. You may contribute from 1% to 87% of your pre-tax salary to the plan each year. The IRS **projected** limit on your total 2026 annual contributions is \$24,500.

When you participate in the plan, **HCSS will match 100% up to the first 5%** of your eligible compensation.

Vesting Schedule		
1 Year	2 Years	3 Years
25%	50%	100%





Contacts

HCSS	HR	HRSD or hr@hcss.com
Kaplan	Broker	sam.cooke@kaplanbenefits.com
ADP	Benefit Portal	adp.com
Cigna	Medical, Pharmacy, & HSA Group #624524	Customer Service: (800) 244-6224 myCigna.com
	Dental & Vision Group #3340493	
	Supplemental Benefits	
New York Life	Life and AD&D Group # SGM607983	(800) 225-5696 newyorklife.com/claims
	Group # SOKG05837	
	Voluntary Life and AD&D	
	STD	
	Group # VDT601926	
	LTD	
	Group # SGD608474	
Flores	FSA	(800) 532-3327
	COBRA	flores247.com
Nationwide	Pet Insurance	Customer Service: (877) 738-7874 petinsurance.com/employee-benefits/company-search
ADP	401(k) Plan & Trust	ADP Participant Service Center (800) 695-7536 mykplan.com





Disclosure

This brochure summarizes the benefit plans that are available to HCSS eligible employees and their dependents. Official plan documents, policies, and certificates of insurance contain details, conditions, maximum benefit levels, and restrictions on benefits. These documents govern your benefits program. If there is conflict, the official documents prevail.

These documents are available upon request through the Human Resources Department and located on the HIVE. Information provided in this brochure is not a guarantee of benefits.

