



2025 Team Member Benefits Guide



Table of Contents

This benefits guide is designed to help you:

- Better understand the benefits Patrick offers so you can choose the plans that are right for you and your family.
- Know what to expect when you use your benefits (what your plan covers, how much you will pay, etc.).

TABLE OF CONTENTS

Benefits Eligibility	3
Benefits Enrollment.....	4
Patrick Benefit Options.....	5
Medical Insurance	7
Wellness Incentive Programs	11
Health Savings Account	12
Critical Illness Insurance.....	14
Hospital Insurance.....	15
Accident Insurance	16
Dental Insurance.....	17
Vision Insurance.....	18
Life and AD&D Insurance	19
Whole Life Long-Term Care.....	22
Short-Term Disability Insurance.....	23
MetLife Legal and Identity Theft	25
Pet Insurance.....	26
401(k) Retirement Plan.....	27
Employee Assistance Program.....	28
Medicare Decision Support	29
Important Terms to Know.....	30
Health Care and Insurance Carrier Resources.....	34
Benefits Contact Information.....	38

Please refer to the official plan documents for more complete descriptions of the benefit plans. In the event of any inconsistencies or discrepancies between the information provided in this guide and the official plan documents, the official plan documents will prevail. Patrick Industries reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time without notice, including making changes to comply with and exercise its options under applicable laws. The authority to make such changes rests with the Plan Administrator. Summary plan descriptions and certificates of coverage are available through the enrollment portal. You may obtain a printed copy of the summary plan description and other official plan or program documents from the Alight Patrick Benefits Portal.

Benefits Eligibility

At Patrick Industries, our Team Members are key to our overall success. Offering a comprehensive benefits package is an important part of your overall compensation. Each year we review our benefits package to ensure we are providing you and your family members with quality plan options at an affordable cost.

Team Member Eligibility

You are eligible to enroll in Patrick benefits if you are a full-time Team Member working at least 30 hours per week.

- Your benefits are effective the first day of the month following 45 days of full-time employment.
- For Team Members who newly elect coverage, or make changes during open enrollment, your new benefits are effective January 1 of the following year.

Covering Your Family Members

If you are an eligible Team Member, you can also cover:

- Your legal spouse. If your spouse is eligible for medical insurance through their employer, they cannot enroll in the Patrick medical plan.
- Your dependent children up to the age of 26, including stepchildren, adopted children, and children for whom you are the legal guardian.
- Your dependent children of any age who are physically or mentally unable to care for themselves.

Important note for Team Members whose spouse or dependent children also work at Patrick.

Spouses and dependents of Team Members who also work at Patrick Industries are not eligible for dual coverage. Your eligible dependents may enroll in their own plan, or they can be on their parent's plan, but not both.

Termination of Coverage

Your coverage will end with the following occurrences:

- You no longer regularly work at least 30 hours per week
- Your contributions are discontinued
- Your employment status terminates
- The Group Insurance Policy is terminated

Your spouse's and dependent's coverage will end when your employment terminates, or if your spouse or dependent is no longer eligible. Coverage terminates on the last day of the month in which your child turns 26 years of age (unless your child is disabled, and your selected medical carrier approves to continue their coverage).

Rehire Eligibility

If you were eligible for benefits prior to termination and are rehired within 13 weeks after termination, you are not required to satisfy the new hire waiting period to elect benefits.



Benefits Enrollment

When to Sign Up for Benefits

Newly-hired Team Members

Newly-hired Team Members must enroll within 30 days of their eligibility date. Please complete the enrollment process even if you wish to waive benefits. Coverage will be waived for Team Members who do not enroll within 30 days of their eligibility date.

All eligible Team Members

Open enrollment is the only time during the year that eligible Team Members can enroll or make changes to their current benefits elections. The only exception is if you experience a qualifying life event.

Changing Your Benefits During the Year

As stated above, you cannot change your benefits during the year unless you experience a qualifying life event.

The most common qualifying life events are:

- Marriage, legal separation, or divorce
- Birth of a child (including adoption)
- Loss of other coverage (e.g., child turns 26 and loses coverage through parent's plan)

There are other, less common life events that allow you to change your benefits. Please contact your local HR representative or call the Alight Patrick Benefits Center at 844-816-6796 for a complete list of qualifying life events.

To request a benefits change, log into the Alight Patrick Benefits Portal within 30 days of the qualifying life event (60 days for the loss/gain of Medicaid or State Children's Health Program coverage), click on the "Change your Coverage" tile, and follow the steps to change your coverage. Change requests submitted after 30 days cannot be accepted. You may need to provide proof of the event, such as a marriage certificate or record of birth. If you do not provide the requested documentation, your coverage may revert to your original election. If you have questions regarding your qualifying life event, or need assistance with completing the qualifying life event, please reach out to the Alight Patrick Benefits Center at 844-816-6796.

Enroll in 3 Easy Steps

1. Get started at <https://digital.alight.com/patrick>
2. Click the "New User" link
3. Enter your personal identification number to create a username and password

Download the Alight mobile app.

Text 'Benefits' to 67426 (U.S. Only)
Visit <http://alight.com/app>.
Scan the QR Code.



Patrick Benefits

At Patrick, our benefits are designed to support overall well-being complimented with choice and value so you can make selections which best meet the unique needs of you and your family.

Choice

You'll be able to select your coverage level, your insurance carrier, and your plan design.

Value

Multiple carriers will be competing for your business, so it's in their best interest to offer you their best prices. Plus, Patrick will continue to provide an employer contribution (credit) to apply toward the cost of your selected health coverage and plan.

Support:

- Insurance Carrier "Preview" Websites: These sites will get you up to speed on the carrier's provider networks, prescription drug information, and other programs.
- **"Help Me Choose" Tool:** The **"Help Me Choose"** tool will easily guide you through the question and answer process. Once you have answered the questions, you will receive suggestions on which plans might be best suited for you and your family.
 - **Whether you use the "Help Me Choose" tool or not, remember it's important to search for your current doctor(s) to be sure your plan has them listed as in-network doctors. It's just as important to search for any prescriptions you may currently be taking to make sure they will be covered under the medical plan of your choice.**
- Alight Patrick Benefits Portal and the Alight Mobile App: During the Enrollment period, you will enroll through the Alight Patrick Benefits Portal or Alight Mobile app, as well as have access to state-of-the-art customer support including a virtual assistant, web chat, and more. Further, the insurance carriers will be available for questions.
- Alight Patrick Benefits Center: Call 844-816-6796 if you have questions regarding how the enrollment process works, or if you need help navigating within the portal. The Alight Patrick Benefits Center is available Monday – Friday, 11:00 a.m. through 8:00 p.m. EST.

After you enroll in your benefits, you can take advantage of all the personalized resources offered through your new insurance carrier. And you'll have access to:

- Health Pros, who can explain how benefits work and help resolve issues. Alight Health Pros are experts in handling and resolving your claims and billing issues. If you need help with more complex coverage issues, call 1.866.300.6530 and ask to be connected with a Health Pro.

In addition, you have access to a variety of benefits for all stages of your life and your personal situation. You have the option to enroll in other valuable benefits including voluntary life insurance, short-term disability coverage, critical illness insurance, hospital indemnity insurance, accident insurance, legal services, and identity theft protection. You can also get discounted rates for pet insurance.


Remember, you must enroll in your benefits during your enrollment period or you will not have coverage for the plan year.



Medical Plan Options

Patrick offers five medical plan options to meet you and your family's needs. Each plan is available from multiple insurance carriers at varying costs.

When making a decision about a medical plan that is right for you, compare the key features of the plans and make sure to take into account your total costs. The **"Help Me Choose"** Tool can help you decide which plan may be best for you and your family.

Key Plan Features	Bronze	Bronze Plus	Silver	Gold ¹	Platinum
In-network deductible individual Family	\$4,900 \$9,800	\$2,500 \$5,000	\$1,000 \$2,000	\$800 \$1,600	\$250 \$500
Individual deductible applies even when covering other family members	✓	✗	✓	✓	✓
In-network out-of-pocket maximum Individual Family	\$7,000 \$14,000	\$4,500 \$9,000	\$5,300 \$10,600	\$3,600 \$7,200	\$2,300 \$4,600
In- and out-of-network benefits	✓	✓	✓	✓	✓
Cost per paycheck	Lowest				Highest
In-network preventive care 100% paid by the plan	✓	✓	✓	✓	✓
Copays or co-insurance for in-network office visits and most prescription drugs	✓	✗	✓	✓	✓
Deductible applies to all covered health services except preventive care	✗	✓	✗	✗	✗
PPACA ² prescription drugs are paid for by the plan ²	✓	✓	✓	✓	✓
Health savings account (HSA) eligible	✗	✓	✗	✗	✗

¹Gold II offered for California population.

²PPACA – Patient Protection and Affordable Care Act. Please contact carrier for full drug list.

844-816-6796 - <https://digital.alight.com/patrick>

Medical Plans

Bronze and Bronze Plus

Summary of Covered Benefits	Bronze		Bronze Plus	
	In Network	Out-Of-Network	In-Network	Out-of-Network
Type of Plan	PPO		High deductible plan with HSA	
Coinsurance	30%	50%	25%	45%
Annual Deductible (Individual/Family)	\$4,900/\$9,800	\$9,800/\$19,600	\$2,500/\$5,000	\$2,500/\$5,000
Annual Out-of-Pocket Max (Individual/Family)	\$7,000/\$14,000	\$14,000/\$28,000	\$4,500/\$9,000	\$11,500/\$23,000
Deductible & Out of Pocket Max Type	Traditional	Traditional	True Family	True Family
Preventive Care	100% Covered	50%*	100% Covered	45%*
Primary Care / Specialist	\$30 / \$60	50%*	25%*	45%*
Urgent Care	\$60	50%*	25%*	45%*
Emergency Room	\$150 + 30%*	Same as In-Network	25%*	Same as In-Network
Diagnostic Tests / Imaging	30%*	50%*	25%*	45%*
Outpatient Surgery Inpatient Surgery	30%*	50%*	25%*	45%*
Prescription Drugs				
Tier 1 (many generics)	\$15	50% No Deductible	25%*	45%*
Tier 2 (mostly preferred brand)	\$60	50% No Deductible	25%*	45%*
Tier 3 (non-preferred brand & some generic)	\$80	50% No Deductible	25%*	45%*

*After Deductible

Definitions

- Traditional / True Family Deductible & Traditional / True Family Out-of-Pocket Maximums can be found in the Important Terms section at end of guide.

Insurance Carriers

- National carriers: Aetna, Anthem, Cigna, UnitedHealthcare plus Regional carriers for CA, MI and OH
- Each state will have a lowest cost carrier.

See Pricing as you Complete Enrollment digital.alight.com/patrick

844-816-6796 - <https://digital.alight.com/patrick>

Medical Plans

Silver, Gold, Platinum

Summary of Covered Benefits	Silver		Gold		Platinum	
	In-Network	Out of Network	In-Network	Out of Network	In-Network	Out of Network
Type of Plan	PPO		PPO		PPO	
Coinsurance	30%	50%	20%	40%	15%	35%
Annual Deductible (Individual/Family)	\$1,000 \$2,000	\$2,000 \$4,000	\$800 \$1,600	\$1,600 \$3,200	\$250 \$500	\$5,000 \$10,000
Annual Out-of-Pocket Max (Individual/Family)	\$5,300 \$10,600	\$10,600 \$21,200	\$3,600 \$7,200	\$7,200 \$14,400	\$2,300 \$4,600	\$11,500 \$23,000
Deductible & Out of Pocket Max Type	Traditional	Traditional	Traditional	Traditional	Traditional	Traditional
Preventive Care	100% Covered	50%*	100% Covered	40%*	100% Covered	35%*
Primary Care / Specialist	\$30 / \$50	50%*	\$25 / \$40	40%*	\$25 / \$40	35%*
Urgent Care	\$50	50%*	\$40	40%*	\$25	35%*
Emergency Room	\$150 + 30%*	Same as In-Network	\$150 + 20%*	Same as In-Network	\$150 + 15%*	Same as In-Network
Diagnostic Tests / Imaging	30%*	50%*	20%*	40%*	15%*	35%*
Outpatient Surgery Inpatient Surgery	30%*	50%*	20%*	40%*	15%*	35%*
Prescription Drugs						
Tier 1 (many generics)	\$12	50% No Deductible	\$10	50% No Deductible	\$8	50% No Deductible
Tier 2 (mostly preferred brand)	\$50	50% No Deductible	\$40	50% No Deductible	\$30	50% No Deductible
Tier 3 (non-preferred brand & some generic)	\$70	50% No Deductible	\$60	50% No Deductible	\$50	50% No Deductible

*After Deductible

Definitions

- Traditional / True Family Deductible & Traditional / True Family Out-of-Pocket Maximums can be found in the Important Terms section at end of guide.

Insurance Carriers

- National carriers: Aetna, Anthem, Cigna, UnitedHealthcare plus Regional carriers for CA, MI and OH
- Each state will have a lowest cost carrier.

See Pricing as you Complete Enrollment digital.alight.com/patrick

844-816-6796 - <https://digital.alight.com/patrick>



The Alight Patrick Benefits Portal website at <https://digital.alight.com/patrick> provides a more detailed look at all of your coverage options. To see summaries when you enroll online, check the boxes next to the options you want to review and click **Compare**.

Medical Plans

Find the Medical Plan that Fits

There's a lot to consider when you choose a medical plan. That's why the **"Help Me Choose"** tool was created. The tool will ask you to enter some basic information about yourself and your family, including your doctors and medications. It will then develop a score for each plan based on your age, gender, family status, and cost to help you decide which options may be best for you.

The **"Help Me Choose"** score is not based on the current medications you take or your health specifically. When making your decision, it is best to consider this score as well as other items not captured by the tool, like your ability to cover an unexpected large medical expense, or upcoming planned medical expenses (such as a surgery or the birth of a child).

Remember it's important to search for your current doctor(s) to be sure your plan has them listed as in-network doctors. It's just as important to search for any prescriptions you may currently be taking to make sure they will be covered under the medical plan of your choice.

844-816-6796 - <https://digital.alight.com/patrick>

Wellness Incentive Programs

Patrick Industries is committed to investing in the health and wellness of our Team Members and their families.

Fitness Membership Reimbursement

Team Members enrolled in a medical plan are eligible to receive a reimbursement of fitness membership fees, or online workout subscription fees, up to the maximum allowed. Submit a receipt, along with the Fitness Membership Reimbursement Form, to your HR Representative for approval. The Fitness Reimbursement form can be found in the Alight Patrick Benefits Portal.

Coverage Tier	Amount Reimbursed
Employee Only Medical Coverage	Up to \$200
Employee + Spouse Medical Coverage	Up to \$400
Employee + Child(ren) Medical Coverage	Up to \$400
Employee + Family Coverage	Up to \$600

Note: Reimbursement is only allowable for membership fees which occurred in the current calendar year (January 1–December 31). This is a taxable benefit.

Tobacco-Free Wellness Program

To start your tobacco-free journey, contact your medical insurance carrier and ask about available resources or programs they offer. They may provide access to cessation programs, counseling, and medications that can help support you in quitting.

Remember, quitting tobacco products can save you \$850 each year on your medical premiums. Once you quit, log into the Alight Patrick Benefits Portal and remove the weekly tobacco surcharge of \$16.35. Call the Alight Patrick Benefits Center at 844-816-6796 for assistance.



Health Saving Account

Be Prepared for Health Care Expenses this Year and Anytime in the Future

If you enroll in the Bronze Plus HSA plan and are not enrolled in Medicare, you may be eligible to open and fund a Health Savings Account (HSA) through Bank of America. An HSA is a personal savings account that works in combination with a High Deductible Health Plan to let you set aside pre-tax money for health care expenses and helps you keep more money in your pocket.

You also have the opportunity to invest a portion of your HSA for tax-free earning potential that can help you save more for your future

How an HSA Works

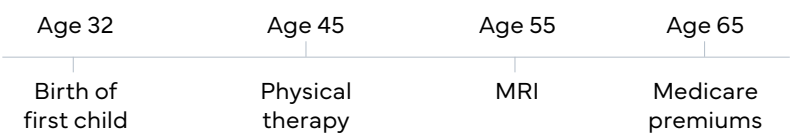
1. Save It

Contribute funds into your HSA, up to the annual maximum, when enrolled in an HSA-qualified health plan. Patrick Industries will contribute to your HSA on a per pay period basis if you are enrolled in the Bronze Plus medical plan and are contributing to an HSA. Employer HSA contributions are based on your medical plan coverage level:

Medical Coverage Level	EE HSA Minimum Contribution	Employer Contribution
Employee Only	\$2.50 Weekly/\$5.00 Biweekly (Minimum annual \$130.00)	\$5.00 Weekly/\$10.00 Biweekly (Maximum annual \$260.00)
Employee +Children Employee + Spouse Family	\$2.50 Weekly/\$5.00 Biweekly (Minimum annual \$130.00)	\$10.00 Weekly/\$20.00 Biweekly (Maximum annual \$520.00)

2. Use It

Use funds from your HSA when you need to pay for qualified health care expenses—now or anytime in the future.



3. Never Lose It

And one of the biggest benefits of all, there are no “use-it-or-lose-it” rules. Any unused funds in your HSA roll over from year to year. It doesn’t matter if you change jobs, change health care plans, or retire—the money in the account is yours!

HSA Contribution Limits 2025

Individual coverage	\$4,300
Family coverage	\$8,550
Catch-up contributions (Starting at age 55)	\$1,000



800-992-3200 - <https://healthaccounts.bankofamerica.com>

Health Savings Account

Get started with the HSA savings calculator!

The HSA calculator can help you estimate how much to set aside for health care expenses—now and in the future. In addition to helping you plan for your current year's contribution, the calculator can show you how saving just a bit more or spending just a bit less each year could impact your balance over the long term. Find out if you're an HSA Saver or Spender and tips for making the most of your HSA at <https://healthaccounts.bankofamerica.com>.

Am I eligible to have an HSA?

If you elect the Bronze Plus plan, you can have a Health Savings Account. However, **you are not eligible for an HSA if you are:**

- Covered under another medical plan that is not a high deductible health plan.
- Entitled to AND enrolled in Medicare benefits.
- Eligible to be claimed on another person's tax return.

How do I set up my HSA?

Patrick Industries will work directly with Bank of America to open an HSA for Team Members who do not have an account on file and are enrolled in the Bronze Plus plan. If you already have an HSA account and are contributing, your HSA bank will not change.

How do I access funds from my HSA?

Once you enroll in a Bank of America HSA, you will receive a Visa® debit card to access the funds in your account. Present your card at the doctor's office, pharmacy or other merchant or service provider to pay for qualified health care expenses. Your card makes it easier for you to manage your health care expenses, which means you have less claims paperwork and fewer billing hassles.

What can I spend my HSA funds on??

The IRS allows you, as well as any covered dependents, to use your HSA funds to pay for your out-of-pocket costs for qualified medical, dental, and vision expenses. Go to www.irs.gov/pub/irs-pdf/p502.pdf to see a complete list of HSA-eligible expenses. Please keep all your receipts in the event of an IRS audit.

800-992-3200 - <https://healthaccounts.bankofamerica.com>

Critical Illness Insurance

You have the option to elect critical illness insurance through MetLife.

A serious illness often means unexpected costs that aren't covered by your health insurance. MetLife critical illness insurance can help protect your finances during life-changing events, so you can focus on healing.

To help promote a healthy lifestyle, our plans can also pay a \$50 wellness benefit when you get a covered health screening test.

Critical Illness Insurance Can Provide a Lump-Sum Benefit for Diagnoses Such As:

- Cancer, heart attack, coronary artery disease, stroke, major organ failure.

Coverage is Available for You, Your Spouse, and Your Children

Employee	Choose from \$10,000 to \$30,000 in increments of \$10,000.
Spouse	Spouses from ages 17 and up can get from \$10,000 to \$15,000 in increments of \$5,000, as long as you have purchased coverage for yourself.
Children	Dependent children from newborns to age 26 are automatically covered at no extra cost. Their coverage amount is 50% of yours. They are covered for all the same illnesses, plus these specific childhood conditions: cerebral palsy, cleft lip or palate, cystic fibrosis, Down syndrome and spina bifida. The diagnosis must occur after the child's coverage effective date.

Critical Illness Insurance Can Help Pay for:

- Deductibles/copays/coinsurance, diagnostic tests, transportation, childcare—Whatever you choose.

Weekly Critical Illness Payroll Deductions

Employee coverage: \$10,000 Spouse coverage: \$5,000 Be Well benefit: \$50			Employee coverage: \$20,000 Spouse coverage: \$10,000 Be Well benefit: \$50			Employee coverage: \$30,000 Spouse coverage: \$15,000 Be Well benefit: \$50		
Age	Employee	Employee and Spouse	Age	Employee	Employee and Spouse	Age	Employee	Employee and Spouse
under 25	\$0.51	\$0.81	under 25	\$1.02	\$1.62	under 25	\$1.52	\$2.42
25 - 29	\$0.60	\$0.99	25 - 29	\$1.20	\$1.98	25 - 29	\$1.80	\$2.98
30 - 34	\$0.81	\$1.32	30 - 34	\$1.62	\$2.63	30 - 34	\$2.42	\$3.95
35 - 39	\$0.99	\$1.59	35 - 39	\$1.98	\$3.18	35 - 39	\$2.98	\$4.78
40 - 44	\$1.41	\$2.22	40 - 44	\$2.82	\$4.43	40 - 44	\$4.22	\$6.65
45 - 49	\$2.10	\$3.21	45 - 49	\$4.20	\$6.42	45 - 49	\$6.30	\$9.62
50 - 54	\$3.00	\$4.59	50 - 54	\$6.00	\$9.18	50 - 54	\$9.00	\$13.78
55 - 59	\$4.29	\$6.48	55 - 59	\$8.58	\$12.97	55 - 59	\$12.88	\$19.45
60 - 64	\$6.30	\$9.51	60 - 64	\$12.60	\$19.02	60 - 64	\$18.90	\$28.52
65 - 69	\$9.30	\$14.10	65 - 69	\$18.60	\$28.20	65 - 69	\$27.90	\$42.30
70 - 74	\$14.10	\$14.91	70 - 74	\$28.20	\$29.82	70 - 74	\$42.30	\$44.72
75 - 79	\$20.01	\$30.12	75 - 79	\$40.02	\$60.23	75 - 79	\$60.02	\$90.35
80 - 84	\$27.90	\$42.00	80 - 84	\$55.80	\$84.00	80 - 84	\$83.70	\$126.00
85+	\$44.31	\$66.51	85+	\$88.62	\$133.02	85+	\$132.92	\$199.52

Critical Illness Insurance is NOT a replacement for medical coverage

800-438-6388 - <https://metlife.com/info/patrick-industries/>

Hospital Insurance

You have the option to purchase hospital insurance through MetLife.

It's no secret that hospital bills can set you back financially. When you're admitted to a hospital, hospital insurance can help you cover the expenses that often follow, so you can focus on your recovery.

Hospital Insurance Provides a Lump-Sum Benefit:

- Hospital Insurance pays a set amount for a hospital admission, as well as other items covered by your plan, such as emergency room treatment and daily hospital confinement.
- Coverage is available for you, your spouse, and your children.

Hospital Insurance Can Help Pay for:

- Deductibles/copays/coinsurance, other bills, transportation, childcare—whatever you choose.

Register and Log into Your Account at www.mybenefits.metlife.com to easily:

- File and manage claims
- Set up direct deposit
- Update your information
- Upload documents
- Add/update medical provider
- View your policy documents

Weekly Hospital Payroll Deductions:

Coverage Tier	Hospital
Employee	\$1.68
Employee + Spouse	\$3.62
Employee + Child(ren)	\$2.37
Employee + Family	\$4.32
Hospital Insurance is NOT a replacement for medical coverage	
800-438-6388 - https://metlife.com/info/patrick-industries/	

Accident Insurance

You have the option to purchase accident insurance through MetLife.

Accidents can happen to anyone, at any time. MetLife Accident Insurance can help you pay for expenses not covered by your medical insurance.

Accident Insurance Provides a Lump-Sum Benefit:

- Accident Insurance can pay a benefit directly to you if you are injured and need treatment, whether you go to a physician’s office, urgent care center, or the emergency room.
- Coverage is available for you, your spouse, and your children.

Accident Insurance Can Help Pay for:

- Deductibles/copays/coinsurance, other bills, transportation, childcare—whatever you choose.

Register and log into your account at www.mybenefits.metlife.com to easily:

- File and manage claims.
- Set up direct deposit.
- Update your information.
- Upload documents.
- Add/update medical provider.
- View your policy documents.

Weekly Accident Payroll Deductions:

Coverage Tier	Accident
Employee	\$2.02
Employee + Spouse	\$3.49
Employee + Child(ren)	\$4.42
Employee + Family	\$5.88

Accident Insurance is NOT a replacement for medical coverage

800-438-6388 - <https://metlife.com/info/patrick-industries/>

Dental Insurance

Patrick offers three dental plan options. Each plan is available from various insurance carriers at varying costs. Compare the key features of the plans to help you determine which plan may be the best fit for you and your family.

Dental Plans

	Bronze		Silver		Gold	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Calendar Year Deductible Single/Family	\$100/\$300		\$100/\$300		\$50/\$150	
Annual Dental Maximum per Person (excludes orthodontia)	\$1,000		\$1,500		\$2,500	
Preventive Services—Oral exams & cleanings, bitewing x-rays, fluoride (child < age 19), sealants and space maintainers (child < 16)	100%		100%		100%	
Basic Services—Fillings, extractions, x-rays, periodontics	80%		80%		80%	
Major Services—Major restorative services, crowns, bridges, dentures	Not Covered		60%		80%	
Orthodontia Lifetime max per individual	Not Covered		Includes child orthodontia (up to age 19) Lifetime max: \$1,500		Includes child and adult orthodontia Lifetime max: \$2,000	

Five Carriers to Choose from:

- Aetna
- Cigna
- Delta Dental
- MetLife
- UnitedHealthcare

Rates vary by carrier

See Pricing as you Complete Enrollment <https://digital.alight.com/patrick>



844-816-6796 - <https://digital.alight.com/patrick>

Vision Insurance

Patrick offers three vision plan offerings. Each plan is available from various insurance carriers at varying costs. This plan allows you to choose any eye care provider. However, you will maximize the plan benefits when you choose an in-network provider.

Vision Plan

Summary of Covered Benefits	Bronze		Silver		Gold	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Benefit Allowance—Glasses or Elective Contact Lenses	None		\$130 Allowance	\$70 Allowance	\$200 Allowance	\$70 Allowance
Routine Vision Exams	\$0 copay	\$45 Allowance	\$20 copay	\$45 Allowance	\$10 copay	\$45 Allowance
Lenses	Discounts may apply	Not Covered	\$20 Copay	\$30-\$90 Allowance	\$10 copay	\$30-\$90 Allowance
Lens Options —	Discounts may apply	Not Covered	\$15-\$45 copay	Not Covered	\$15-\$45 copay	Not Covered
Exam – Lens – Frame Frequency Per Plan Year	Exams – Once per plan year; Lens and Frames N/A		Once per plan year		Once per plan year	

Four Carriers to Choose from:

- EyeMed
- UnitedHealthCare
- MetLife
- VSP

Rates vary by carrier

See Pricing as you Complete Enrollment <https://digital.alight.com/patrick>



844-816-6796 - <https://digital.alight.com/patrick>

Life and AD&D Insurance

Life and accidental death and dismemberment (AD&D) insurance provide financial protection for those who depend on you for support. You have the option to elect term life and AD&D insurance for yourself, your spouse, and your dependent children through MetLife. The cost of coverage depends on the benefit amount and age.

If you purchase life and AD&D insurance when you are first eligible to enroll, you may purchase up to the guarantee issue (GI) amounts without completing evidence of insurability. If you do not enroll when first eligible and choose to enroll during a future open enrollment period, or you elect coverage over the GI amounts, you may be required to complete evidence of insurability, which is a list of medical questions. Should EOI be required, you will be able to complete the same during the enrollment process in the Alight Web portal. Coverage will not take effect until approved by MetLife.

Term Life Benefit	Employee	Spouse	Dependent Child
Benefit paid to designated beneficiary upon death of insured. Coverage is for a certain term and has no cash value.	Choice of \$10,000 increments. Not to exceed 5 times your salary.	Choice of \$5,000 increments. Team Members must elect coverage for spouse to be eligible. Not to exceed 50% of Team Member elected amount.	Child—birth to 6 months: \$250. Child—six months to age 26: \$10,000.
Minimum Amount	\$10,000	\$5,000	\$10,000
Maximum Amount	\$750,000	\$100,000	\$10,000
Guarantee Issue Available amounts shown are offered to any eligible applicant (Team Member and dependent(s) without regard to health status if you enroll during the initial new Team Member waiting period). No medical questions are asked on the application unless the amount applied for exceeds the amounts shown.	\$250,000 of coverage is available on a guaranteed acceptance basis within your new Team Member waiting period	\$50,000 of coverage is available on a guaranteed acceptance basis within your new Team Member waiting period.	Team Member must elect coverage for dependent child to be eligible. No health questions required for eligible children.

800-438-6388 - <https://www.metlife.com/info/patrick-industries/>

Life And AD&D Insurance

AD&D Benefit	Employee	Spouse	Dependent Child
Double indemnity for accidental death or a percentage of the benefit payable per covered non-work-related accidental injury.	The benefit amount is equal to the life amount elected by you. Cost included in the schedule.	Team Member must elect coverage for Dependent to be eligible.	No Child AD&D coverage
Additional Benefits			
Accelerated death benefit Portability Conversion Will preparation, identity theft, & travel assistance	Cash advance against the death benefit available if insured has a terminal illness (proof of terminal illness will be required). You may continue your term insurance coverage when employment ends by paying the required premiums; you may apply to convert your term life insurance to a whole life policy at termination of employment; call (877) 275-6387. Please note, you will need to have your coverage information when you contact the conversion team.		
Eligibility	Employee	Spouse & Dependents	
Neither spouse or child(ren) can have duplicate coverage. Team Members married to each other may each elect employee supplemental life but may not carry additional life insurance as spouse of each other. Likewise, one Team Member spouse may elect child life, if applicable, but not both.	A delayed effective date will apply if the Team Member is not actively at work.	Cannot be in a period of limited activity* on the day coverage takes effect. *Period during which a dependent is confined to a health care facility and/or unable to perform what would be considered regular and usual activities of a healthy person of same age and gender.	

Life and AD&D Insurance

TEAM MEMBER COST—WEEKLY Calculated based on EE age

Age	Wkly per \$1,000	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
<25	\$0.0162	\$0.16	\$0.32	\$0.48	\$0.65	\$0.81	\$0.97	\$1.13	\$1.29	\$1.45	\$1.62
25 - 29	\$0.0185	\$0.18	\$0.37	\$0.55	\$0.74	\$0.92	\$1.11	\$1.29	\$1.48	\$1.66	\$1.85
30 - 34	\$0.0231	\$0.23	\$0.46	\$0.69	\$0.92	\$1.15	\$1.38	\$1.62	\$1.85	\$2.08	\$2.31
35 - 39	\$0.0254	\$0.25	\$0.51	\$0.76	\$1.02	\$1.27	\$1.52	\$1.78	\$2.03	\$2.28	\$2.54
40 - 44	\$0.0277	\$0.28	\$0.55	\$0.83	\$1.11	\$1.38	\$1.66	\$1.94	\$2.22	\$2.49	\$2.77
45 - 49	\$0.0415	\$0.42	\$0.83	\$1.25	\$1.66	\$2.08	\$2.49	\$2.91	\$3.32	\$3.74	\$4.15
50 - 54	\$0.0600	\$0.60	\$1.20	\$1.80	\$2.40	\$3.00	\$3.60	\$4.20	\$4.80	\$5.40	\$6.00
55 - 59	\$0.1052	\$1.05	\$2.10	\$3.16	\$4.21	\$5.26	\$6.31	\$7.37	\$8.42	\$9.47	\$10.52
60 - 64	\$0.1592	\$1.59	\$3.18	\$4.78	\$6.37	\$7.96	\$9.55	\$11.15	\$12.74	\$14.33	\$15.92
65 - 69	\$0.2395	\$2.40	\$4.79	\$7.19	\$9.58	\$11.98	\$14.37	\$16.77	\$19.16	\$21.56	\$23.95
70+	\$0.4823	\$4.82	\$9.65	\$14.47	\$19.29	\$24.12	\$28.94	\$33.76	\$38.58	\$43.41	\$48.23

EXAMPLE: This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency. Use this formula to calculate premium for benefit amounts over \$100,000.

Benefit	Age	Weekly (52 Weeks) Rate Per \$1,000	X	Benefit in \$1,000s	=	Weekly (52 Weeks) Cost
\$150,000	35	\$0.0254	X	150	=	\$3.81

SPOUSE COST - WEEKLY Calculated based on EE age

Age	Wkly per \$1,000	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<25	\$0.0162	\$0.08	\$0.16	\$0.24	\$0.32	\$0.40	\$0.48	\$0.57	\$0.65	\$0.73	\$0.81
25 - 29	\$0.0185	\$0.09	\$0.18	\$0.28	\$0.37	\$0.46	\$0.55	\$0.65	\$0.74	\$0.83	\$0.92
30 - 34	\$0.0231	\$0.12	\$0.23	\$0.35	\$0.46	\$0.58	\$0.69	\$0.81	\$0.92	\$1.04	\$1.15
35 - 39	\$0.0254	\$0.13	\$0.25	\$0.38	\$0.51	\$0.63	\$0.76	\$0.89	\$1.02	\$1.14	\$1.27
40 - 44	\$0.0277	\$0.14	\$0.28	\$0.42	\$0.55	\$0.69	\$0.83	\$0.97	\$1.11	\$1.25	\$1.38
45 - 49	\$0.0415	\$0.21	\$0.42	\$0.62	\$0.83	\$1.04	\$1.25	\$1.45	\$1.66	\$1.87	\$2.08
50 - 54	\$0.0600	\$0.30	\$0.60	\$0.90	\$1.20	\$1.50	\$1.80	\$2.10	\$2.40	\$2.70	\$3.00
55 - 59	\$0.1052	\$0.53	\$1.05	\$1.58	\$2.10	\$2.63	\$3.16	\$3.68	\$4.21	\$4.74	\$5.26
60 - 64	\$0.1592	\$0.80	\$1.59	\$2.39	\$3.18	\$3.98	\$4.78	\$5.57	\$6.37	\$7.17	\$7.96
65 - 69	\$0.2395	\$1.20	\$2.40	\$3.59	\$4.79	\$5.99	\$7.19	\$8.38	\$9.58	\$10.78	\$11.98
70+	\$0.4823	\$2.41	\$4.82	\$7.23	\$9.65	\$12.06	\$14.47	\$16.88	\$19.29	\$21.70	\$24.12

Example: This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency. Use this formula to calculate premium for benefit amounts over \$50,000.

Benefit	Age	Weekly (52 Weeks) Rate Per \$1,000	X	Benefit in \$1,000s	=	Weekly (52 Weeks) Cost
\$50,000	33	\$0.0231	X	50	=	\$1.16

CHILD COST—WEEKLY Dependent Child Benefit: \$10,000 per child. Dependent Child Rate = \$0.46 per week (52 weeks); premium is the same regardless of the number of children.

800-438-6388 - <https://www.metlife.com/info/patrick-industries/>

Whole Life Insurance With Long-Term Care

Patrick partners with Allstate to offer Team Members the option to elect a whole life plan with an accelerated death benefit for long term care.

Financial Protection

Protect your finances and your family in three different ways with one life insurance product:

- Traditional whole life insurance, which pays a cash benefit to your beneficiaries when you die
- Access the death benefit to help pay for any necessary long-term care
- Accumulated cash value, which can be accessed when it's needed

Guaranteed Rate Lock:

You have a special opportunity to elect life insurance with a guaranteed rate lock for the life of your coverage. This means the younger you are when you enroll, the lower your rates will be (and your rates will never increase).

Here's how it works:

- If you enroll during the annual open enrollment period or after a qualifying life event, there are no medical questions you need to answer. You must meet the "Actively at Work" requirement
- You can choose to cover yourself, your spouse, or both, and the level of coverage.
- You lock in affordable rates that are only available through Patrick and are guaranteed for the life of your coverage
- A monthly advance of the death benefit may be paid to help cover the costs associated with long-term care
- Your coverage builds cash value that you may borrow against if needed
- You can take your coverage with you if you change jobs or retire

800-521-3535 - <https://allstatevoluntary.com/patrickindustries/>



Use the QR Code
for quick access
to Allstate's
benefits and to
file a claim.

Short-Term Disability Insurance

You have the option to purchase short-term disability insurance through MetLife. Short-term disability insurance is designed to help you meet your financial needs if you become unable to work due to an illness, injury, or following the birth of a child.

Benefit: 60% of Salary up to \$1,250 per week (\$10 minimum weekly benefit).

Maximum Benefit Duration: 24 weeks.

Elimination period (number of days you are disabled before benefits begin):

- Accident (non-occupational)—14 days.
- Sickness—14 days.
- You can satisfy the days in your elimination period with either total disability (off work entirely) or partial disability (working some hours at your current job).

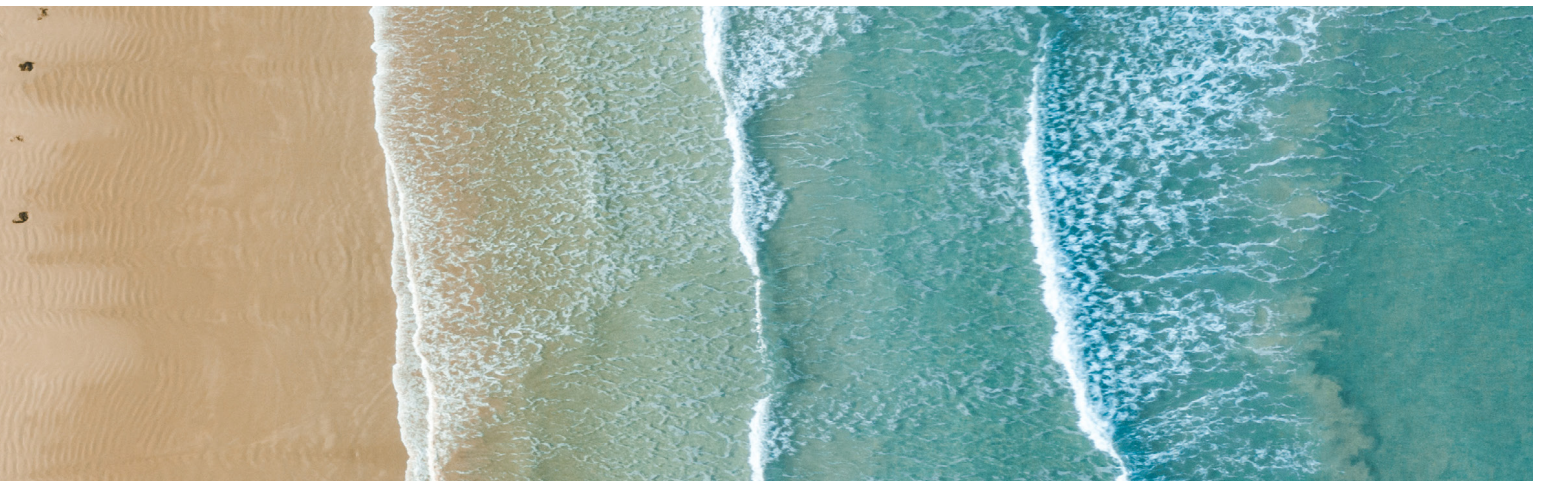
Pre-existing Conditions:

- This plan will cover a disability if it is caused by, contributed to by, or results from a pre-existing condition if the disability begins after being insured for twelve (12) consecutive months from your effective date of coverage. If the time period requirements are not met, the disability is excluded from coverage under the plan.
- Pre-existing condition means a sickness or injury for which you received treatment within three (3) months prior to your coverage effective date, including consultation, services from a doctor or other medical professional. It also includes prescribed medications (even if you did not take them) and receiving diagnostic measures.

Signing up for Short-Term Disability Insurance:

- A simple enrollment process with no medical questionnaires if enrolling during your initial eligibility period.
- Convenient payroll deductions.
- 24/7 access to your benefits information with our user-friendly online administration tool, www.mybenefits.metlife.com.

800-438-6388 - <https://www.metlife.com/info/patrick-industries/>



Short - Term Disability Insurance

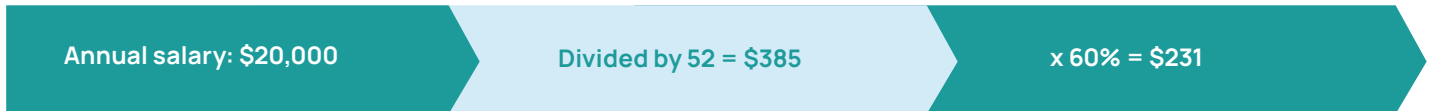
Monthly Short-Term Disability Payroll Deductions

Age	Rate per \$10 of Coverage
0-24	\$0.594
25-29	\$0.674
30-34	\$0.641
35-39	\$0.528
40-44	\$0.507
45-49	\$0.558
50-54	\$0.640
55-59	\$0.777
60-64	\$0.859
65-69	\$1.126
70+	\$1.475



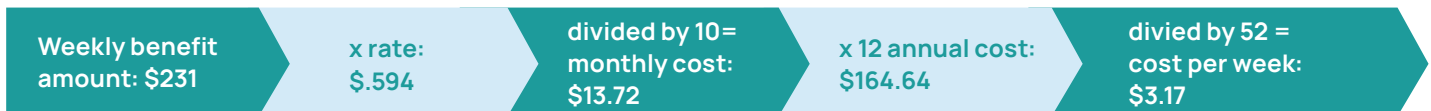
1. Calculate Your Maximum Weekly Benefit Amount:

EXAMPLE: 23-year-old with \$20,000 annual salary



Annual Salary \$ _____ Divided by 52 = \$ _____ x 60% = \$ _____

2. Calculate Costs per Week:



Benefit amount \$ _____ x rate = \$ _____ divided by 10 = monthly cost \$ _____

x12 = annual cost \$ _____ divided by 52 = cost per check \$ _____

800-438-6388 - <https://www.metlife.com/info/patrick-industries/>

Legal & Identity Theft Plans

Patrick partners with MetLife to offer Team Members the option to elect legal advice and identity fraud protection plans.

MetLaw

- The MetLaw plan includes legal assistance for estate planning, civil lawsuits, home, and real estate, as well as many other areas.
- When you use a network attorney, services are covered in full, and billing is between MetLaw and the attorney.
- There are no waiting periods, no copays, no deductibles, and no claim forms!
- Connect with in-network attorneys as many times as you want.

How to Get Started:

- Log into www.legalplans.com to see your coverage options, access documents, or grant access to your dependents.
- Select an attorney.
- Make an appointment by contacting your selected attorney.

800-821-6400 - www.legalplans.com

Aura Identity Fraud Protection

- The Aura Identity Fraud Protection plan is an all-in-one digital security solution designed to protect your digital life and help stop fraud before it happens.
- Keep your identity secure with proactive monitoring and alerts in the event of threats to your personal info—like your bank accounts, credit, Social Security Number, IDs and more—are detected.
- Get alerted to new inquiries to your credit, suspicious transactions on your bank accounts, and changes to your car or home title.
- Shop, bank, and work online more privately with safety tools (VPN/Wi-Fi security, antivirus, and password manager).
- Aura requests removal of your personal info from data broker lists to help reduce spam.
- Get \$1 million identity theft insurance per adult member and 24/7 customer support for account, technical, and billing questions. If you are a victim of fraud, you will receive resolution and remediation services from dedicated Resolution Specialists.

833-552-2123 - www.metlife.com/identity-and-fraud-protection

How to Get Started:

- Upon enrollment, you will receive a welcome letter from MetLaw inviting you to verify your identity and create an account.
- Once you log in, you will then be able to add all your financial accounts.
- Aura starts working on your behalf immediately to protect your identity, finances, privacy and devices.

Weekly MetLife Legal and Identity Theft Payroll Deductions

Coverage Tier	Legal	Identity & Fraud
Employee Only	\$3.63	\$2.30
Employee + Family		\$3.82


Pet Insurance

Patrick partners with MetLife to offer Team Members the option to purchase pet insurance coverage. A MetLife Pet Insurance plan helps cover the costs when unexpected accidents or illnesses occur, so nothing gets in the way of caring for your pet when they need it most. Please note, MetLife will bill you directly as this benefit is not through payroll deduction.


With MetLife Pet Insurance, You Can Get:

- Flexible insurance plans that can cover the entire pet family with no breed exclusions
- Freedom to visit any U.S. veterinarian and reimbursement up to 90%¹ of the cost of services
- Family plans covering multiple cats and dogs on one policy – a benefit exclusive to MetLife Pet²
- 24/7 access to Telehealth Concierge Services for immediate assistance
- Discounts up to 30%³ and additional offers on pet care, where available
- Optional Preventive Care coverage⁴
- Coverage of previously covered pre-existing conditions when switching providers


How does MetLife Pet Insurance work?




Choose the coverage that's right for you.




Download our mobile app.



Visit any U.S. licensed veterinarian or emergency clinic.



Pay the bill and send it to us with your claim documents within 90 days via our mobile app; online portal, email, fax or mail.



Get a percentage of your money reimbursed¹ by check or direct deposit if the claim expense is covered under the policy.

With MetLife Pet Insurance, Pet Parents have the Power of Choice to Customize their Pet Insurance to Meet their Needs.

Meeting pet parent needs

Essential Needs	Sophisticated Care	Policy Features (where available)	Optional Preventative Care Coverage ⁴
Accidents and illness Diabetes Ear infections Pancreatitis Cancer Hip dysplasia Cruciate ligament And more ...	Laser therapy Holistic care Acupuncture Hydrotherapy IVDD And more ...	Telehealth Mortality benefits Discounts and rewards Deductible savings And more ...	Flea and tick Spay and neuter Heartworm Behavioral training Teeth cleaning And more ...

¹Reimbursement options include: 70%, 80% and 90% and a 50% option for MetGen policies and a 65% option for IAIC policies only. Pet age restrictions may apply.
²Based on a January 2023 review of publicly available summary information. Competitors did not furnish copies of their policies for review. If you have questions about a particular competitor's policy or coverage, please contact them or their representative directly.
³When using multiple discounts, discounts cannot exceed 30%. Each discount may not be available in all states. Please contact MetLife Pet for further details.
⁴For IAIC policies, optional Preventive Care coverage is based on a Schedule of Benefits. For MetGen policies, optional Preventive Care coverage is included in the annual limit.

800-348-6388 - www.metlife.com/getpetquote

401(k) Retirement Plan

Fidelity 401(k) Retirement Plan

Patrick offers a 401(k)-retirement savings plan to help Team Members prepare for retirement.

- Newly-hired Team Members will be automatically enrolled in the 401(k) plan—at a 2% contribution level—on the first of the month following 90 days of employment.
- Rehired Team Members who were eligible when previously working at Patrick will be automatically enrolled at a 2% contribution within 60 days of their rehire date—but may begin contributing sooner.

Patrick Helps You Save More with a Company Match!

- Patrick matches 100% of the first 3% you contribute + 50% of the next 2% you contribute.
- Thus, if you contribute 5% of your eligible earnings, Patrick will match it with an additional 4%.

Additional information—such as managing contributions, investment options, loans rollovers, and withdrawals—can be found at www.401k.com or by calling a Fidelity Representative at **800-835-5097**.

Manage Your Workplace Savings on the Go.

The NetBenefits® app gives you access to your account whenever—and wherever—you want.

With the App, You Can:

- Change your contributions and investments, update your email address, phone number, and beneficiaries, and sign up for eDelivery communications.
- View your account balances, investments, personal rate of return, next steps to financial wellness, and how much you may need for retirement.
- Request a new loan or hardship withdrawal, explore rollovers, and send paperwork directly to Fidelity.
- Access educational articles, videos, podcasts, and interactive tools to help you save and plan for your future.

IMPORTANT REMINDER:

Log into Fidelity at www.401k.com and make sure to add a beneficiary.



Scan the QR code to download the NetBenefits app directly to your mobile device

800-835-5097 - www.401k.com

Employee Assistance Program

Emotional wellbeing and work-life balance resources to keep you at your best.

Patrick is proud to provide the SupportLinc EAP to all Team Members and their household family members at no cost.

SupportLinc Offers Expert Guidance to Help Address and Resolve Every Day Issues.

- **In-the-moment support**—Reach a licensed clinician by phone 24/7/365 for immediate assistance.
- **Short-term counseling**—Access in-person or video counseling sessions to resolve concerns such as stress, anxiety, depression, relationship issues, work-related pressures, or substance use.
- **Financial expertise**—Planning and consultation with a licensed financial counselor.
- **Convenience resources**—Referrals for child and elder care, home repair, housing needs, education, pet care, and so much more.
- **Legal consultation**—By phone or in-person with a local attorney.

Web Portal and Mobile App

- The one-stop shop for program services, information, and more.
- Discover on-demand training to boost wellbeing and life balance.
- Find search engines, financial calculators, and career resources.
- Explore thousands of articles, tip sheets, self-assessments, and videos.

CREATE AN ACCOUNT AT:
patrick.mysupportportal.com
Click Create Account.
Enter code: patrick

Convenient, On-the-Go Support

- **Textcoach®**—Personalized coaching with a licensed counselor on mobile or desktop.
- **Animo**—Self-guided resources to improve focus, wellbeing, and emotional fitness.
- **Virtual Support Connect**—Moderated group therapy sessions on an anonymous, chat-based platform.

888-881-5462 – patrick.mysupportportal.com



Medicare Decision Support

Medicare Choice Group

Choosing your healthcare plan is extremely important. We have taken steps to ensure you receive the best guidance possible to understand your Medicare options.

To do this, we have partnered with Medicare Choice Group to provide free Medicare education programs and enrollment services to Patrick Team Members. This service is free to all Patrick Team Members and their spouses, parents, and loved ones who are eligible for Medicare.

Representing the most respected regional and national Medicare health insurance plans, Medicare Choice Group provides free one-on-one, unbiased advice, practical decision support, and detailed coverage options based on the specific needs of eligible beneficiaries.

During your free one-on-one Medicare consultation, your certified Medicare advisor will:

- Assess your health needs to find a plan that is right for you.
- Provide Medicare coverage options from national healthcare carriers.
- Make recommendations and plan your Medicare transition timeline.
- Guide you step-by-step through the enrollment process.

You can schedule your free one-on-one Medicare consultation by going on-line or by calling them directly.

855-944-3719 - <https://visit.medicarechoicegroup.com/patrickindustries>



Important Terms To Know

Allowable Charge

The amount a doctor or hospital can charge for a health care service or item they give you.

Appeals

When you ask a carrier to take another look at a decision they've made. For example, if the carrier says that a certain service isn't covered or isn't medically necessary—but you disagree, or your doctor disagrees, and you want the carrier to reconsider.

Coinsurance

This is your share of the costs for covered health care services, calculated as a percentage.

Co-payment (or co-pay)

A set dollar amount you pay for a covered service, such as a doctor visit.

Cost share

The amount you pay toward covered services, like copayments, coinsurance and/or deductibles. For most of your health care costs, you pay your share and we pay our share — as agreed to in your health coverage contract.

Deductible

A set amount of money you pay at first for covered health care services, before your health plan begins paying.

Evidence of insurability (EOI)

A statement of your medical history that is used by the insurance company to assess whether you will be approved for coverage.

Explanation of benefits (EOB)

A statement you get after you go to the doctor or hospital that lists the health care treatment you received. It shows the amount the doctor charged, how much we paid and what you'll be billed based on your benefits. An EOB is not a bill.

Formulary

A list of prescription drugs that have been selected and approved by a carrier's Pharmacy and Therapeutics Committee for their safety, quality, and sometimes cost. Your health plan's formulary includes drugs from every therapeutic drug class, as well as health care supplies and devices.

Generic drug

When a drug company develops a new drug, they're the only ones allowed to make it and sell it for awhile under their "brand name." At some point, other companies are allowed to start making "generic" versions of it. These versions have the same active ingredients and quality standards but cost less.

Health savings account (HSA)

A bank account you can use to pay for health expenses. You can put tax-free money into your HSA. You'll use that money to pay for your share of care costs, like your deductible or coinsurance. If you don't use all the money, it stays in there next year and beyond. You can also take it with you if you change health plans or jobs.

Important Terms To Know

High deductible health plan (also referred to as a CDHP)

A health plan that may cost less in monthly premiums, but then you'll need to pay for your own health care for a little while, up to a set dollar amount, before your health plan starts paying. Preventive care is still covered at 100% from day one. And you have the option of opening a health savings account to help you use tax-free dollars for your care.

In-network

In-network refers to a health care provider that has a contract with your health plan to provide health care services to it plan members at a pre-negotiated rate. Because of this relationship, you pay a lower cost-sharing when you receive services from an in-network doctor.

Medically necessary

Health care services or supplies that are a reasonable part of your care. Sometimes a carrier will ask your doctor to show that the care they're proposing for treatment is medically necessary.

Non-formulary drug

A drug that's not listed on your health plan's list of covered drugs. It requires authorization from the health plan in order to be covered.

Open enrollment

The time period when you can sign up for health coverage for the following year.

Out-of-network provider

A doctor or hospital who has not necessarily agreed to accept your insurance. Some plans give you coverage when you go to out-of-network providers and some don't. But even if yours does, you'll almost always pay more for the same level of care. Also sometimes called "non-participating" or "non-par" provider — meaning they don't participate in your health plan network.

Out-of-pocket maximum

The maximum dollar amount you'll pay for covered services during the year. After that, your plan will pay for the rest of your covered care that year.

Pharmacy benefit manager (PBM)

A company that administers and manages your prescription drug benefits.

Pre-authorization/pre-certification/pre-approval

Pre-Authorization, Pre-certification and Pre-approval all mean the same thing. It's a process to determine if the proposed health care or service is medically necessary.

It helps determine if certain outpatient care, elective inpatient hospital stay, non-Emergency care, technology or procedure is medically necessary. It requires a health care doctor or facility to get pre-approval before providing specific services or procedures. Prior authorization is required for many services. Emergency or out-of-area urgent care services do not need prior authorization.

If you have questions or to check if your treatment needs pre-authorization, call the Member Services number listed on the back of your ID card.

Important Terms To Know

Pre-existing Condition

A health condition that was diagnosed or treated before you enrolled in a health benefit plan.

Preventive care

Tests or treatments that may help you stay healthy or catch problems early on when they're easier to treat.

Prior authorization

For some health care services, you or your doctor needs to let the carrier know about it ahead of time. The carrier asks this so they can check whether it's covered by your plan. During this step, the carrier may also double check that it makes sense and does not conflict with other care you're getting, or medications you're taking. Also sometimes called pre-certification, authorization, certification or pre-authorization.

Qualifying event

A change in your life that can make you eligible for a special enrollment period to enroll in health coverage. Examples of qualifying life events include moving to a new state, certain changes in your income, and changes in your family size like getting married, divorced or having a baby.

Summary of benefits and coverage (SBC)

A document that summarizes your health plan benefits including what is covered, how much you will pay, and more. What's covered, how much you'll pay if you need care and more.

Traditional Deductible

Once a covered family member meets the individual deductible, your insurance will begin paying benefits for that family member.

Traditional Out-of-Pocket Maximum

Once a covered family member meets the individual out-of-pocket maximum, your insurance will pay the full cost of covered charges for that family member.

True Family Deductible

The entire family deductible must be met before your insurance will pay benefits for any covered family member.

True Family Out-of-Pocket Maximum

The entire family out-of-pocket maximum must be met before your insurance will pay the full cost of covered charges for any covered family member.



Health Care and Insurance Carrier Resources

Your specific medical carrier options are based on where you live (so it's important to make sure your address on record is correct before you enroll). You'll be able to see the options available to you when you enroll.

National Insurance Carriers

Note: Except where noted below, these insurance carriers are offered nationally.

Aetna	<p>Areas we serve: Offered in all states except AK, ID, MT, WY, MO and SD. Availability in some states may be limited.</p> <p>Before you're a member (preview site): https://www.aetna.com/aon/fi</p> <p>Once you're a member (website): https://www.aetna.com</p> <p>Customer Service Hours: Monday – Friday: 8:00 a.m. – 6:00 p.m. local time</p> <p>Phone Number: 1-855-496-6289</p>
Anthem BCBS	<p>Areas we serve: Offered in all states</p> <p>Before you're a member (preview site): https://www.anthem.com/learnmore</p> <p>Once you're a member (website): https://www.anthem.com/</p> <p>Customer Service Hours: Monday – Friday: 8:00 a.m. – 8:00 p.m. EST</p> <p>Phone Number: 1-844-404-2165</p>
Cigna	<p>Areas we serve: Generally offered in all states except MN and ND. Availability in some states may be limited.</p> <p>Before you're a member (preview site): https://connections.cigna.com/carrierbenefits-fi2025/</p> <p>Once you're a member (website): https://my.cigna.com</p> <p>Customer Service Hours: Cigna One Guides are available Monday – Friday: 8:00 a.m. – 9:00 p.m. (all U.S. continental time zones) Outside of the standard hours, customer service advocates are available 24 hours a day, 7 days a week.</p> <p>Phone Number: 1-855-694-9638</p>
UnitedHealthcare	<p>Areas we serve: Generally offered in all states, but availability in some states may be limited.</p> <p>Before you're a member (preview site): https://www.whyuhc.com/aon9</p> <p>Once you're a member (website): http://myuhc.com</p> <p>Customer Service Hours: Monday – Friday: 7:00 a.m. – 7:00 p.m. ET</p> <p>Transaction Center: Monday – Friday: 8:00 a.m. – 5:00 p.m. PT</p> <p>Phone Number: 1-888-297-0878</p>

Regional Insurance Carriers

Note: As noted below, these insurance carriers are offered in select regions. These insurance carriers may offer in-network coverage outside of their regional service area through partnerships with other carriers. Please contact the insurance carrier for additional details.

Health Net	<p>Areas we serve: Select markets in California</p> <p>Before you're a member (preview site): https://www.healthnet.com/myaon</p> <p>Once you're a member (website): https://www.healthnet.com/myaon</p> <p>Customer Service Hours: Monday – Friday: 8:00 a.m. – 6:00 p.m. PT</p> <p>Phone Number: 1-888-926-1692</p>										
Kaiser Permanente	<p>Areas we serve: Generally available in CA, CO, GA, MAS, NW, WA</p> <p>Before you're a member (preview site): https://kp.org/aon</p> <p>Once you're a member (website): https://www.kp.org</p> <table><tr><th>Customer Service Hours:</th><th>Phone Numbers:</th></tr><tr><td>CA: Monday – Friday 8:00 a.m. – 5:00 p.m. CT</td><td>CA: Pre-Enrollment 1-877-580-6125 CA Post-Enrollment: 1-800-464-4000</td></tr><tr><td>CO: Monday – Friday 8:00 a.m. – 5:00 p.m. CT</td><td>CO: Pre-Enrollment 1-877-580-6125 CO: Post-Enrollment HMO: 1-800-632-9700 CO: Post-Enrollment Added Choice: 1-855-364-3185</td></tr><tr><td>NW: Monday – Friday: 7:30 a.m. – 5:30 p.m. ET</td><td>NW: Pre-Enrollment 1-877-580-6125 NW: Post-Enrollment HMO: 1-800-813-2000 NW: Post-Enrollment Added Choice: 1-866-616-0047</td></tr><tr><td>WA: Monday – Friday: 8:00 a.m. – 6:00 p.m. PT</td><td>WA: Pre & Post Enrollment 1-855-407-0900</td></tr></table>	Customer Service Hours:	Phone Numbers:	CA: Monday – Friday 8:00 a.m. – 5:00 p.m. CT	CA: Pre-Enrollment 1-877-580-6125 CA Post-Enrollment: 1-800-464-4000	CO: Monday – Friday 8:00 a.m. – 5:00 p.m. CT	CO: Pre-Enrollment 1-877-580-6125 CO: Post-Enrollment HMO: 1-800-632-9700 CO: Post-Enrollment Added Choice: 1-855-364-3185	NW: Monday – Friday: 7:30 a.m. – 5:30 p.m. ET	NW: Pre-Enrollment 1-877-580-6125 NW: Post-Enrollment HMO: 1-800-813-2000 NW: Post-Enrollment Added Choice: 1-866-616-0047	WA: Monday – Friday: 8:00 a.m. – 6:00 p.m. PT	WA: Pre & Post Enrollment 1-855-407-0900
Customer Service Hours:	Phone Numbers:										
CA: Monday – Friday 8:00 a.m. – 5:00 p.m. CT	CA: Pre-Enrollment 1-877-580-6125 CA Post-Enrollment: 1-800-464-4000										
CO: Monday – Friday 8:00 a.m. – 5:00 p.m. CT	CO: Pre-Enrollment 1-877-580-6125 CO: Post-Enrollment HMO: 1-800-632-9700 CO: Post-Enrollment Added Choice: 1-855-364-3185										
NW: Monday – Friday: 7:30 a.m. – 5:30 p.m. ET	NW: Pre-Enrollment 1-877-580-6125 NW: Post-Enrollment HMO: 1-800-813-2000 NW: Post-Enrollment Added Choice: 1-866-616-0047										
WA: Monday – Friday: 8:00 a.m. – 6:00 p.m. PT	WA: Pre & Post Enrollment 1-855-407-0900										
Priority Health	<p>Areas we serve: Available in the lower peninsula of MI; Outside of MI, Priority Health utilizes the Cigna national network.</p> <p>Before you're a member (preview site): https://priorityhealth.com/aon</p> <p>Once you're a member (website): https://member.priorityhealth.com/login</p> <p>Customer Service Hours: Monday – Thursday 7:30 a.m. – 7:00 p.m. ET; Friday 9:00 a.m. – 5:00 p.m. ET; Saturday 8:30 a.m. – noon ET</p> <p>Phone Number: 1-833-207-3211</p>										

Dental Insurance Carriers

Aetna	<p>Areas we serve: Generally offered in all states, but availability in some states may be limited.</p> <p>Before you're a member (preview site): https://www.aetna.com/aon/fi</p> <p>Once you're a member https://www.aetna.com</p> <p>Customer Service Hours: Monday – Friday: 8:00 a.m. – 6:00 p.m. local time</p> <p>Phone Number: 1-855-496-6289</p>
Cigna	<p>Areas we serve: Generally offered in all states except MN and ND. Availability in some states may be limited.</p> <p>Before you're a member (preview site): (preview site): https://connections.cigna.com/carrierbenefits-fi2025/</p> <p>Once you're a member (website): https://my.cigna.com</p> <p>Customer Service Hours: Cigna One Guides are available Monday – Friday: 8:00 a.m. – 9:00 p.m. (all U.S. continental time zones). Outside of the standard hours, customer service advocates are available 24 hours a day, 7 days a week.</p> <p>Phone Number: 1-855-694-9638</p>
Delta Dental	<p>Areas we serve: Generally offered in all states, but availability in some states may be limited.</p> <p>Before you're a member (preview site): https://www.deltadental.com/us/en/aon/indiana.html</p> <p>Once you're a member (website): http://www.deltadentalin.com</p> <p>Customer Service Hours: Monday – Friday: 8:30 a.m. – 8:00 p.m. ET</p> <p>To supplement that service, our DASI (Delta Dental Automated Service Inquiry) system can provide callers with answers to many routine inquiries via the same number 24 hours a day, seven days a week.</p> <p>Phone Number: 1-877-380-2051</p>
MetLife	<p>Areas we serve: Generally offered in all states, but availability in some states may be limited.</p> <p>Before you're a member (preview site): https://www.metlife.com/aon-benefit-experience</p> <p>Once you're a member (website): https://www.metlife.com/mybenefits</p> <p>Customer Service Hours: Monday – Friday: 8:00 a.m. – 11:00 p.m. ET Phone Number: 1-888-309-5526</p>

Dental Insurance Carriers (con't.)

UnitedHealthcare

Areas we serve: Generally offered in all states, but availability in some states may be limited.
Before you're a member (preview site): <https://www.whyuhc.com/aon9>
Once you're a member (website): <https://www.myuhc.com>
Customer Service Hours: Monday – Friday: 7:00 a.m. – 10:00 p.m. CT
Phone Number: 1-888-571-5218

Vision Insurance Carriers

EyeMed

Areas we serve: Available nationally
Before you're a member (preview site): <https://eyemed.com/en-us/benx-aon>
Once you're a member (website): <https://member.eyemedvisioncare.com/member/en>
Customer Service Hours: Monday – Saturday: 7:30 a.m. – 11:00 p.m. ET;
Sundays: 11:00 a.m. – 8:00 p.m. ET
Closed: Easter, Thanksgiving and Christmas
Phone Number: 1-844-739-9837

MetLife

Areas we serve: Generally offered in all states, but availability in some states may be limited.
Before you're a member (preview site): <https://www.metlife.com/aon-benefit-experience>
Once you're a member (website): <https://www.metlife.com/mybenefits>
Customer Service Hours: Monday – Friday: 8:00 a.m. – 11:00 p.m. ET;
Saturday: 10:00 a.m. – 11:00 p.m., ET; Sunday: 10:00 a.m. – 10:00 p.m. ET
Phone Number: 1-888-309-5526

UnitedHealthcare

Areas we serve: Generally offered in all states, but availability in some states may be limited..
Before you're a member (preview site): <https://www.whyuhc.com/aon9>
Once you're a member (website): <https://www.myuhcvision.com>
Customer Service Hours: Monday – Friday: 7:00 a.m. – 10:00 p.m. CT;
Saturday: 8:00 a.m. – 5:30 p.m. CT IVR and website is available 24 hours a day, seven days a week.
Phone Number: 1-888-571-5218

VSP

Areas we serve: Generally offered in all states, but availability in some states may be limited.
Before you're a member (preview site): <https://www.vsp.com/aon>
Once you're a member (website): <https://www.vsp.com/signon.html>
Customer Service Hours: Monday – Friday: 5:00 a.m. – 8:00 p.m. PT;
Saturday: 7:00 a.m. – 8:00 p.m. PT; Sunday: 7:00 a.m. – 7:00 p.m. PT
Phone Number: 1-877-478-7559

Benefits Contact Information

Fidelity 401(k)

Policy Number	Patrick Industries
Website	www.401k.com
Customer Service	800-835-5097

MetLife Short-Term Disability

Policy Number	243081-1
Website	www.mybenefits.metlife.com
Customer Service	800-438-6388

MetLife Supplemental Life

Policy Number	243081-1
Website	www.mybenefits.metlife.com
Customer Service	800-438-6388

MetLife Voluntary Plans

Policy Number	
Accident	243081-1
Critical Illness	243081-1
Hospital	243081-1
Website	www.mybenefits.metlife.com
Customer Service	800-438-6388

Medicare Decision Support

Website	visit.medicarechoicegroup.com/patrickindustries
Customer Service	855-944-3719

MetLife Pet Insurance

Website	www.metlife.com/getpetquote
Customer Service	800-438-6388

Allstate Whole Life with Long Term Care

Website	www.allstatevoluntary.com/patrickindustries/
Customer Service	888-282-2550
Policy Number	E1386

Supportline EAP

Website	patrick.mysupportportal.com
Company Code	patrick
Customer Service	888-881-5462

Bank of America HSA

Website	https://myhealth.bankofamerica.com/
Customer Service	800-992-3200
Policy Number	Your HSA Bank Account Number



Patrick Industries, Inc.
Corporate Office

107 W. Franklin Street

Elkhart, IN 46516
(800) 331-2151 / (574) 294-7511

www.patrickind.com



