

2025 BENEFITS GUIDE



Coca-Cola Beverages Florida



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WELCOME TO YOUR BENEFITS!

Coke Florida appreciates your commitment to our success. We're equally committed to providing you with competitive, affordable health and wellness benefits to help you take care of yourself and your family.

Please read this guide carefully. It has a summary of your plan options and helpful tips for getting the most value from your benefits plans. We understand that you may have questions about annual enrollment, and we'll do our best to help you understand your options and guide you through the process.

This guide is not your only resource, of course. Any time you have questions about benefits or the enrollment process, you can contact the HR Benefits Hotline at 1-877-340-0929, select option 3 for Benefits. Although this guide contains an overview of benefits, for complete information about the plans available to you, please see the summary plan description (SPD) at cokefloridatotalrewards.com.

WHO IS ELIGIBLE?

Benefits are available to all full-time Associates working a minimum of 30 hours per week and their dependents. For those enrolling during Open Enrollment, your benefits will become effective on 1/1/2025. For new hires, all benefits except for Long-Term Disability Insurance will become effective on 1st of the month following 60 days. Long-term Disability goes into effect on the 1st of the month following 90 days of continuous employment.

Eligible dependents include:



Your legal spouse



Your children from birth to age 26

(Including your natural/legally adopted/stepchildren, and/or your unmarried dependent children of any age who are mentally or physically disabled and who are dependent on you for support)

You must submit proof that your dependents are eligible to be covered on our plan before we can complete your election or change request. Supporting documents include:

- Birth Certificate
- Social Security Card
- Marriage License (for spouse)
- Legal Documents (disabled children over age 26)

MAKING CHANGES

You may only make changes to your elections during Open Enrollment each year or during the year if you experience a qualifying event. Qualifying events include, but are not limited to:

- Birth, legal adoption, or placement for adoption.
- Marital status.
- Dependent child reaches age 26.
- Spouse gains or loses employment or eligibility with current employer.
- Death of a covered dependent.
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or CHIP.
- Change in residence that changes eligibility for coverage.
- Court-ordered change.

Changes to your coverage due to a qualifying life event must be made within 30 days of that life event. Proof of the qualifying life event is required (marriage certificate, divorce decree, birth certificate, or loss of coverage letter).

Note: Any change you make to your coverage must be consistent with the change in status.

ENROLLMENT DEADLINES

Type of Associate/Dependent	Enrollment opportunity	Coverage effective date
Current Associate	Annually during the enrollment period	Start of plan year
New hire	Must enroll within 31 days of hire	1st of the month following 60 days
Qualified life event	Changes must be made within 30 days of life event	Date of life event

HOW TO ENROLL

There are two ways to enroll (listed below). Complete enrollment in Dayforce either by yourself or with help from a Benefits Counselor through Prepare My Benefits. Additional details are provided on the following pages for each benefit.



Online:

Log in to [Dayforce](#) or scan the QR code.
Then follow the prompts to complete your enrollment.



Virtual:

Schedule an appointment to meet with a Benefits Counselor virtually. Counselors are available to assist you with enrollment and/or answer any questions you may have about benefits. While we hope you take advantage of their help, you are not required to speak to a counselor to complete your enrollment.

New hires can schedule an appointment at:

<https://cokeflorida.benefitsinfo.com/schedule-your-enrollment-call>

During Open Enrollment, Associates can schedule an appointment at:

<https://cokeflorida.benefitsinfo.com/schedule-your-enrollment-call>

Contact the Benefits Call Center at **904-468-3223** or enrollassist@preparebenefits.com

Operating hours are Monday-Friday between 9am-7pm EST



Scan the QR code to view the [Benefits Presentation](#) to learn more about each of the benefits in detail.

MEDICAL

AETNA

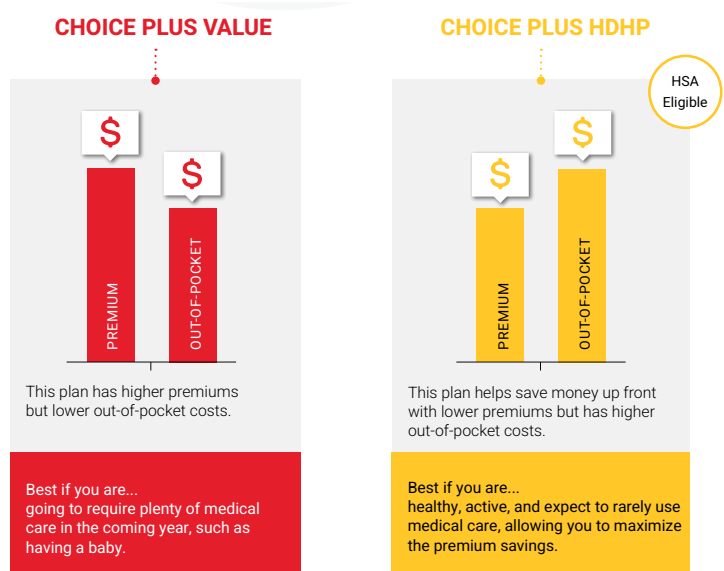


www.aetna.com
1-888-699-1005

Your medical benefits are provided by Aetna and provides coverage for both in-network and out-of-network providers. You will always have stronger benefits when visiting in-network providers. Since health care needs are not one size fits all, Coke Florida offers two medical plan options, so you can choose the coverage level best suits your needs and budget. With the Choice Plus HDHP Plan, you are eligible to open a Health Savings Account (HSA).

Which Plan is Right for You?

Balance your premium cost with the amount you expect to spend on medical services. If you do not require a lot of medical care, you can greatly reduce your upfront premium spend by choosing the Choice Plus HDHP plan. If you require a lot of medical care and need to limit out-of-pocket expenses, the Choice Plus Value plan might make more sense.



Here's a look at how one family found the plan that is the best fit for them.



SUTTON FAMILY

Typical family with some risk

Ages: Cyrus, 48; Emily, 44; Devin, 13; and Bettina, 12

Lifestyle: Devin and Bettina both play soccer. Devin is an avid skateboarder.

Medical Status: Cyrus has high blood pressure and high cholesterol. Emily is a breast cancer survivor.

Financial Risk Factors: Heart and cardiovascular disease; injury risk from sport activities (skateboarding is a very high-risk activity)

BEST FIT: A plan with lower out-of-pocket costs makes sense because of Cyrus's risk factors and the chances of injury for the kids. Cyrus can also reduce the financial risk with Critical Illness and Accident Insurance.

Medical	Aetna Choice Plus Value Plan		Aetna Choice Plus HDHP w/ HSA	
	In-network	Out-of-network	In-network	Out-of-network
HSA Fund				
Individual	N/A		\$200	
Family	N/A		\$400	
Annual deductible				
Individual	\$1,250	\$2,500	\$2,200	\$4,500
Family	\$3,125	\$6,250	\$5,500	\$11,250
Out-of-pocket maximum*				
Individual	\$5,000	\$8,000	\$4,000	\$8,000
Family	\$10,000	\$20,000	\$10,000	\$20,000
Preventive care	100% Covered	100% Covered	100% Covered	40% AD
Primary physician office visit	20% AD	20% AD	20% AD	40% AD
Specialist office visit	20% AD	20% AD	20% AD	40% AD
Telehealth	100% Covered	Not Covered	100% Covered AD	Not Covered
Inpatient hospital services	20% AD	20% AD	20% AD	40% AD
Outpatient hospital services (lab, x-ray, diagnostic)	20% AD	20% AD	20% AD	40% AD
Advanced diagnostics	20% AD	20% AD	20% AD	40% AD
Urgent care	20%AD	20% AD	20% AD	40% AD
Emergency room care	\$250 Copay	\$250 Copay	20% AD	20% AD
Prescription drugs				
Retail (30-day supply)				
Generic	\$15	Not Covered	\$5	Not Covered
Brand preferred	20% up to \$50	Not Covered	25% AD	Not Covered
Brand non-preferred	35% up to \$100	Not Covered	25% AD	Not Covered
Mail order (90-day supply)				
Generic	\$30	Not Covered	\$10	Not Covered
Brand preferred	20% up to \$125	Not Covered	25% AD	Not Covered
Brand non-preferred	35% up to \$250	Not Covered	25% AD	Not Covered

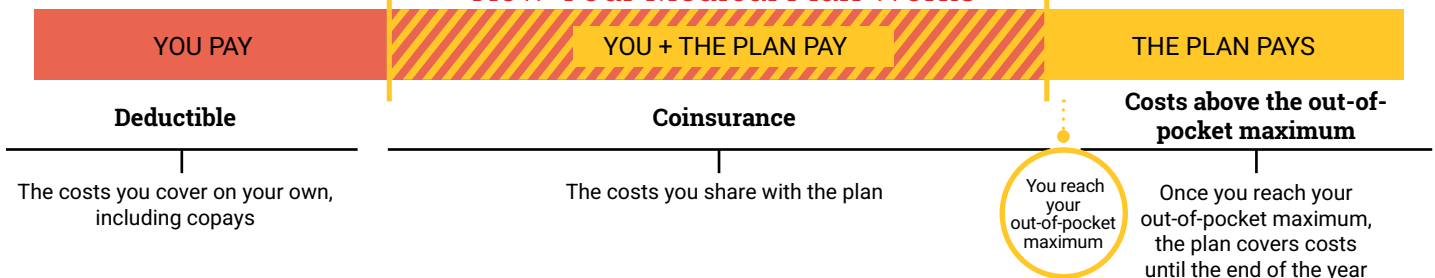
This is a summary of coverage; please refer to your summary plan description for the full scope of coverage. In-network services are based on negotiated charges; Out-of-network services are based on a percentage of Medicare charges.

AD = After Deductible

* Includes Deductible and Copayments

Remember: Getting care from an in-network medical provider always saves you money.

How Your Medical Plan Works



MEDICAL AND RX PROGRAMS

Pharmacy

Both medical plans include prescription drug coverage through CVS Caremark. You may fill prescriptions either at an in-network retail pharmacy or through the mail order service. Find an in-network pharmacy or use the drug cost estimator tool by visiting CVS Caremark at www.caremark.com.

- Discount sites like Good Rx and WellRx can help you instantly save (please note: prescriptions acquired under these plans do not go through your insurance).
- Ask if generic/mail order is available.
- Generic contraceptives and diaphragms are covered and available at no cost.
- See if your drug has a Patient Assistance Program.

In conjunction with your medical benefit election in Dayforce becoming effective, CVS will mail you a corresponding pharmacy ID card. You can also use your current prescription information or your ID card to set up an online account.

Should you experience a qualifying event that results in the loss of coverage, your benefit termination will be effective on the following schedule:

- Date of Event - Death, Job Termination
- End of Month - Divorce, Loss of Dependent Status



Aetna Transform Oncology

Aetna Transform Oncology is included with your medical plan at no cost to you. This program provides assistance and support to members through their cancer treatment. The program aims to provide a better patient experience, faster treatment options, and lower costs.

Program Features:

- Proactive patient support through Aetna Personal Navigator
- Aetna Genetic Testing to help identify risks earlier
- Precision medicine to treat the member's specific cancer
- Clinical trial recommendations

For details, log in to your Aetna account at www.aetna.com and visit the Cancer Support Center.

CVS Transform Diabetes

CVS Transform diabetes is included with your prescription plan at no cost to you and offers tools, education, and support to members managing diabetes.

Program Features

- Customized diabetes care plan
- Clinical support in monitoring blood glucose, lifestyle management, screenings, and medication
- Face-to-face pharmacist and care team consultations and remote support, including email, text, and phone
- BioTel Care blood glucose monitor

If you're managing diabetes, you're enrolled automatically - CVS will reach out to you to help you get started.

Your care. Your way.

Convenient and affordable virtual care wherever you need it*

No matter which medical plan you are enrolled in, you have convenient access to telemedicine! From wellness visits to quick care, we've got you covered. You can use CVS Health Virtual Primary Care™ in addition to your traditional network of providers. Access is included as part of your medical plan from Aetna®, a CVS Health® company because **healthier happens together™**.



On-demand care

Access 24/7 quick care for minor illnesses and injuries



Mental health services

Get counseling for things like anxiety and stress, plus psychiatry services for medication management



Primary care services

Schedule a visit with a dedicated provider within days for preventive care, wellness screenings, sick visits, prescriptions, and chronic disease management

Get coordination of in-person care, when needed, to nearby MinuteClinic® locations or in-network provider clinics.**

Get started today with CVS Health Virtual Primary Care

- 1 Activate your virtual care benefit by visiting CVS.com/virtual-care or scan the QR code below
- 2 Create an account and confirm your details
- 3 Schedule a virtual primary care or mental health appointment, or request on-demand care 24/7/365



Choose your Virtual Primary Care Team

Select a physician who leads the Care Team. Once selected you can start to get the care you need.

Angelina Arvis,
MD



Register today at CVS.com/virtual-care

*Age restrictions do apply. Mental Health services coverage varies by employer. Make sure to check specific plan benefits to better understand covered mental health services.

**MinuteClinic® in-person services are not included with this product and are subject to plan benefit.

Aetna® and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health® family of companies.

Limitations may apply based on services and location.

This material is for informational purposes only. Refer to aetna.com for more information about Aetna plans and for a full list of participating providers.

DENTAL

DELTA DENTAL



deltadentalins.com
1-800-521-2651

Although you can choose any dental provider, when you use an in-network dentist, you will generally pay less. If you choose an out-of-network provider, you may be billed the difference between what Delta Dental pays, and what your out-of-network provider charges for the services. To locate an in-network provider, please visit deltadentalins.com. You can also call the Customer Service line for assistance at 1-800-521-2651.

Should you experience a qualifying event that results in the loss of coverage (such as death, divorce, loss of dependent status, or job termination), your benefits will be terminated effective the date of the event.

Should you experience a qualifying event that results in the loss of coverage, your benefit termination will be effective on the following schedule:

- Date of Event - Death, Job Termination
- End of Month - Divorce, Loss of Dependent Status

Dental	Delta Dental PPO	
	In-network	Out-of-network
Annual deductible (Individual/Family)	\$50 / \$150	\$50 / \$150
Annual maximum (per person)	\$2,000	\$2,000
Diagnostic and preventive care Includes cleanings, fluoride treatments, sealants, and x-rays	no charge	no charge
Basic services Includes fillings, periodontics, scaling and root planning, and oral surgery	20%	50%
Major services Includes crowns, bridges, and full and partial dentures	50%	60%
Orthodontia	50%	50%
Lifetime maximum	\$3,000	\$1,000

Plan includes out-of-network benefits, see plan summary for additional details.
 Note: When you use out-of-network providers, higher charges and balance billing may apply.
 Note: Associates can elect dental and/or vision regardless of whether they are enrolled in medical.

What Does Preventative Dental Care Typically Cover?

Preventative care can save you money later on procedures that are more urgent, complex, and costly.

- Routine dental checkups and cleanings should be scheduled every six months.
- Professional fluoride treatments can be a key defense against cavities.
- Dental sealants go a step beyond fluoride by providing a thin coating to the surface of your teeth.
- X-ray images of your mouth may be taken to better evaluate your oral health, as they provide a more detailed look inside your teeth and gums.

VISION

VSP



www.vsp.com

1-800-877-7195

Our vision care benefits include coverage for eye exams, lenses and frames, contact lenses, and discounts for laser surgery. The vision plan is built around the VSP providers, who have higher benefits at a lower cost to you. When you need services, consider using an in-network provider for the most bang for your buck! When you use an out-of-network provider, you will be reimbursed for services according to the grid below. To locate an in-network provider, visit www.vsp.com. You can also call the Customer Service line for assistance at 1-800-877-7195.

Should you experience a qualifying event that results in the loss of coverage, your benefit termination will be effective on the following schedule:

- Date of Event - Death, Job Termination
- End of Month - Divorce, Loss of Dependent Status

Vision	VSP Vision Plan	
	In-network	Out-of-network
Examination (every 12 months)	\$20 copay	\$30
Lenses (every 12 months)		
Single	100% after copay	Up to \$20
Bifocal	100% after copay	Up to \$30
Trifocal	100% after copay	Up to \$40
Frames (every 24 months)		
New frames	\$20 copay, then up to \$150 allowance for featured frame brands, \$130 for other frames	Up to \$30
Contact lenses (every 12 months)		
Elective	\$150 allowance 100%	Up to \$100
Medically necessary	Covered in full	Up to \$200

Note: Lenses and Frames are fully covered when combined with the Eye Exam. If you elect to not have your Eye Exam a \$20 copay would apply to Lenses and Frames.

Associates can elect dental and/or vision regardless of whether they are enrolled in medical.

5 Tips for a Lifetime of Healthy Vision

1. Schedule yearly eye exams. Visiting your eye doctor regularly helps you see your best, protect your eyesight, and even detect serious health conditions such as diabetes.
2. Protect your eyes against UV rays. No matter what the season, it is important to wear sunglasses. When purchasing sunglasses, be sure to confirm they offer 100% UV/UVB protection.
3. Give your eyes a break from digital devices. Digital screens emit a specific type of blue and violet light which can negatively impact eye health and cause eye strain.
4. Quit smoking. Smoking increases your risk of developing macular degeneration, optic nerve damage, and cataracts.
5. Practice safe wear and care of contact lenses. Keep them clean and follow your optometrist's recommendations for use and wear.

HEALTH SAVINGS ACCOUNT (HSA)

www.inspirafinancial.com

1-888-678-8242

INSPIRA FINANCIAL

AVAILABLE TO PARTICIPANTS IN THE CHOICE PLUS HDHP PLAN.



A Health Savings Account (HSA) is a tax-advantaged savings account that can be used for your qualified healthcare expenses. You own your HSA and can contribute to the account with pre-tax payroll deductions based on your needs.

Did you know an HSA provides triple tax benefits? The money you contribute is pre-tax, and the interest that accumulates in the account is tax-free. In addition, money withdrawn from an HSA isn't taxed, provided you use it for qualified healthcare expenses. Like a savings account, you will only be able to withdraw funds that are in the account.

As an added benefit, Coke Florida will annually contribute \$200 to those enrolled in the Associate Only tier and \$400 to those in the Associate + Dependent(s) tiers.

OTHER HSA ADVANTAGES



You can use the account to pay for qualified healthcare expenses.



Unspent dollars roll over each year and are yours to keep if you retire or leave the company.



You can invest your HSA fund balance (amount over \$1,000), so your available healthcare dollars can grow over time.

You are eligible if:

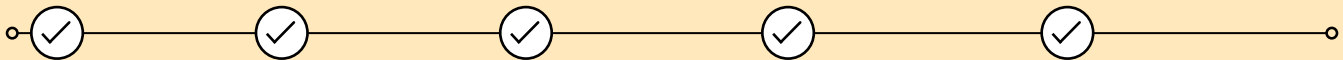
You are enrolled in the HDHP

You are not covered by a spouse's plan

No one else can claim you as a dependent

You are not enrolled in Medicare, TRICARE, or TRICARE for Life

You have not received VA benefits in the past 3 months



How Do I Access / Make Contributions to My HSA?

You can manage your HSA at www.inspirafinancial.com. You'll set up your payroll contributions during your enrollment period and can make changes at any time throughout the year (although it may take between 1-2 payroll periods for any changes to be processed). You can also call the Customer Service line for assistance at 1-888-678-8242.

How Much Can Be Deposited into an HSA in 2025?

<55*

- Up to \$4,300 for individual
- Up to \$8,550 for family
- *Not enrolled in Medicare

The maximum contribution increases by \$1,000

*Not enrolled in Medicare

55+*

FLEXIBLE SPENDING ACCOUNT (FSA)

www.inspirafinancial.com

1-888-678-8242

INSPIRA FINANCIAL (PAYFLEX)

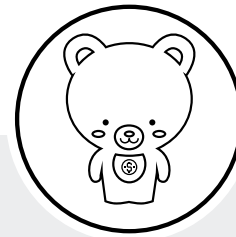
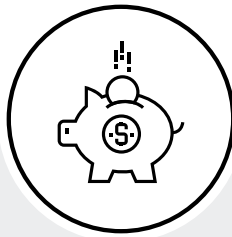


What is a Flexible Spending Account?

A Flexible Spending Account (FSA) is an account that can reimburse you for qualified healthcare or dependent care expenses. You can fund qualified expenses with pre-tax dollars deducted from your paychecks.

When electing an FSA, you will set an annual contribution amount. FSAs do not rollover year to year, so you will have until the end of the plan year to use the funds. According to the IRS rules, any money remaining in a Health Care or Dependent Care FSA after the claims submission deadline must be forfeited. The goal is to choose an amount that will cover medical or dependent care expenses, but that is not so high that the money will be forfeited at the end of the year.

You can choose to participate in one or both accounts, and it's not necessary to "sign up" specific family members for these accounts.



Health Care FSA

A Health Care FSA reimburses Associates for eligible medical expenses, up to the amount contributed for the plan year. Eligible healthcare expenses include many of the out-of-pocket expenses you pay to maintain your health and well-being. Visit irs.gov for a full list of eligible expenses.

You may contribute up to \$3,200 annually (funds will be available as of the election effective date).

Please note: If the IRS increases the annual maximum amount you will be given the option to increase your election.

Dependent Care FSA

You may use pre-tax dollars from your Dependent Care FSA to pay expenses for the care of a dependent child (under the age of 13), spouse or elderly parent inside your home (from a qualified provider), and expenses outside your home, such as baby-sitters, nursery schools, or day care centers.

You may contribute up to \$5,000 annually (or \$2,500 if you are married and file a separate tax return). You can only be reimbursed up to the amount that you have contributed.

VOLUNTARY BENEFITS

AETNA

www.MyAetnaSupplemental.com

1-888-699-1005



Critical Illness Insurance

You can protect yourself from the unexpected costs of a serious illness.

Even the most generous medical plan does not cover all of the expenses of a serious medical condition like a heart attack or cancer. Critical Illness Insurance pays a full lump sum benefit directly to you if you are diagnosed with a covered illness that meets the plan criteria. The benefit is paid in addition to any other insurance coverage you may have.


Should you experience a qualifying event that results in the loss of coverage (such as death, divorce, loss of dependent status, or job termination), your benefits will be terminated effective the 1st of the following month.


Covered Illnesses Include:


- Heart Attack
- Stroke
- Cancer
- Major Organ Transplant
- End Stage Renal (Kidney) Failure
- Coronary Artery Disease Requiring Bypass Graft
- COVID-19
- Alzheimer's Disease
- Parkinson's Disease

Plan Features:

 **Guaranteed Acceptance:** There are no health questions or physical exams required.

 **Family Coverage:** You can elect to cover your spouse and children.

 **Payroll Deduction:** Premiums are paid through convenient payroll deductions.

 **Portable Coverage:** You can take your policy with you if you change jobs or retire.

Health Screening Benefit

The plan provides a \$50 benefit per covered person per calendar year if you or your covered dependents complete a covered health screening test such as a physical exam, total cholesterol blood test, mammogram, lipid panel, and more.

How Critical Illness Insurance Works

When Marco had a heart attack, he was grateful his doctors were able to stabilize his condition. He learned there was some permanent damage to his heart. He began to see his costs adding up quickly. The good news is Marco received a lump sum payment of \$10,000 to help cover these expenses from the Critical Illness coverage he elected.

Accident Insurance

Major injuries are painful. But the financial impact doesn't have to be.

Accident Insurance pays benefits directly to you if you suffer a covered injury such as a fracture, burn, ligament damage, or concussion. Benefits are paid even if you have other coverage.


The benefit amount is calculated based on the type of injury, its severity, and the medical services required in treatment and recovery. The plan covers a wide variety of injuries and accident-related expenses, including:


- Injury Treatment (fractures, dislocations, concussions, burns, lacerations, etc.)
- Hospitalization
- Physical Therapy
- Emergency Room Treatment
- Transportation


Should you experience a qualifying event that results in the loss of coverage (such as death, divorce, loss of dependent status, or job termination), your benefits will be terminated effective the 1st of the following month.

Plan Features:

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How Accident Insurance Works

Sam trips playing basketball. He breaks his arm and chips a tooth which require a trip to the emergency room, physician follow-up visits, and physical therapy.

Fortunately, Sam has Accident Insurance which helps cover his out-of-pocket medical costs including his deductible and coinsurance.

 How Sam's Accident Benefit Was Calculated:

Medical Service	Sample Benefit
Emergency Room	\$ 250
Fracture Benefit	\$ 2,000
Dental Repair Benefit	\$ 500
Physician Follow-Up Visits (2)	\$ 300 (\$150 per visit)
Physical Therapy Visits (6)	\$ 450 (\$75 per visit)
TOTAL SAMPLE BENEFIT	\$3,500

Hospital Indemnity Insurance





Receive payments to help cover the cost of a hospital stay.

If you are admitted into a hospital, it doesn't take long for the out-of-pocket costs to add up. Hospital Indemnity Insurance pays benefits directly to you if you are admitted into a hospital for care as a result of a covered accident or sickness. Benefits are paid even if you have other coverage.

You receive a benefit based on the number of days you are confined to the hospital. The benefit increases if you are admitted and confined to an intensive care unit. Additional benefits are available for confinement to an inpatient mental health or drug and alcohol treatment facility.

Should you experience a qualifying event that results in the loss of coverage (such as death, divorce, loss of dependent status, or job termination), your benefits will be terminated effective the 1st of the following month.

Plan Features:

-  **Guaranteed Acceptance:** There are no health questions or physical exams required.
-  **Family Coverage:** You can elect to cover your spouse and children.
-  **Payroll Deduction:** Premiums are paid through convenient payroll deductions.
-  **Portable Coverage:** You can take your policy with you if you change jobs or retire.

Health Screening Benefit

The plan provides a \$50 benefit per covered person per calendar year if you or your covered dependents complete a covered health screening test such as a physical exam, total cholesterol blood test, mammogram, lipid panel, and more.

How Hospital Indemnity Insurance Works

Cindy is admitted to the hospital for treatment of COVID-19. Over the course of her illness, she spends 8 days in the hospital, including 4 days in an intensive care unit. Thankfully, Cindy's condition improves, and she is well enough to return home. She uses her Hospital Indemnity Insurance to help cover her medical bills, so she can focus on what matters most - making a full recovery.



How Cindy's Hospital Indemnity Benefit Was Calculated:

Medical Service	Sample Benefit	Total
Daily In-Hospital Benefit	\$100 per day (4 days)	\$400
Intensive Care Unit Benefit	\$100 per day (4 days)	\$400
Hospital Confinement Benefit	\$1,500	\$1,500
TOTAL SAMPLE BENEFIT		\$2,300

LIFE AND DISABILITY INSURANCE

LINCOLN FINANCIAL



www.mylincolnportal.com

Life Claims: 1-888-787-2129

Group Life Conversion:

1-800-423-2765

Disability & FMLA:

1-888-408-7300

Life Insurance

Coke Florida provides Basic Life insurance at no cost to you!

Insurance coverage	Benefit
Basic Life	The amount of your annual earnings, rounded to the next higher \$1,000 times 1.5 up to \$400,000.

Voluntary Life Insurance

If you would like additional coverage, Voluntary Life and AD&D insurance is available to you, your spouse, and your dependent children. You must enroll in coverage for yourself in order to cover your spouse or children. If you don't enroll in Voluntary Life when it's first available to you, or decide to increase your current coverage, you may be required to complete an Evidence of Insurability (EOI) form. EOI is not required for Dependent Spouse Life elections up to the \$50,000 Guarantee Issue amount. Please refer to the plan summaries for additional details.

Insurance coverage	Benefit
Voluntary Associate Life & AD&D	Life: Choice of 1x, 2x, 3x, 4x, or 5x your basic annual earnings rounded to the next high \$1,000 times your choice up to \$1,600,000. AD&D: Choice of 1x, 2x, 3x, 4x, or 5x your basic annual earnings rounded to the next high \$1,000 times your choice up to the lesser of 5x your basic annual earnings or \$1,000,000.
Voluntary Spouse Life & AD&D	Life: Increments of \$5,000 up to 50% of your Supplemental Life Benefit or \$100,000 AD&D: Spouse Only - Equal to 70% of your Voluntary AD&D benefit up to a maximum of \$700,000. Spouse with Child(ren) - Equal to 40% of your Voluntary AD&D benefit up to a maximum of \$700,000
Voluntary Child Life & AD&D	Life: Choice of \$5,000 or \$10,000 AD&D: Child(ren) Only - Equal to 20% of your Voluntary AD&D benefit for each child up to a maximum of \$100,000 for each child. Child(ren) with Spouse - Equal to 10% of your Voluntary AD&D benefit for each child up to a maximum of \$100,000 for each child.

After your benefit election in Dayforce becomes effective, further action may be required of you. If you have completed a statement of health (SOH) application, Lincoln Financial will mail you an approval letter or will provide you with any next steps if you have not been approved. To submit and view claims, you can set up an online account at the website provided above and click on "Report a New Life Claims". You can reach out to Lincoln Financial directly with any questions at 1-888-787-2129.

How Much Life Insurance Do You Need?

Many financial experts recommend you have at least five to eight times your household income in Life Insurance. To calculate the level sufficient to cover your needs, you should consider your current income and how much it costs to maintain your family's standard of living. You should also consider your current expenses and your family's future financial needs such as the following:

Current Expenses

- ✓ Home Mortgage/Rent
- ✓ Car Payments
- ✓ Credit Card Debt
- ✓ Other Debt

Future Needs

- ✓ Child Care
- ✓ College Tuition
- ✓ Spouse's Retirement
- ✓ Routine Household Expenses

After you add your financial responsibilities, how does the sum compare with your current coverage?

Disability Insurance

Short-Term and Long-Term Disability Insurance is provided to you at no cost. These plans provide income protection, paying benefits you can use to offset out-of-pocket expenses and make up for lost wages.

After your benefit election in Dayforce becomes effective, no further action is required of you. To submit and view claims, you can set up an online account at www.mylincolnportal.com and click “Start a New Claim”. You can reach out to Lincoln Financial directly with any questions at 1-888-408-7300.



Short-Term Disability

You are eligible to receive Short-Term Disability (STD) benefits for a qualified non-work-related illness or injury that prevents you from working for an extended period of time. Benefits depend on whether you are an hourly or salaried Associate.

Hourly Associate STD Benefit		Salaried Associate STD Benefit	
Elimination Period	7 days	Elimination Period	None
Weekly Benefit	75% of weekly earnings	Weekly Benefit	100% of weekly earnings for weeks 1-8 and 75% for the remainder of the benefit period.
Maximum Benefit Period	26 weeks	Maximum Benefit Period	26 weeks









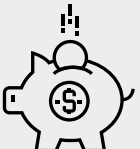

Long-Term Disability





Coke Florida provides employer-paid Long-Term Disability (LTD) Insurance that pays a monthly benefit in the event you cannot work because of a long-term illness or injury. Voluntary LTD coverage is also available for purchase and provides an additional 10% or 20% of your monthly earnings up to a \$20,000 monthly maximum.

Employer-Paid LTD Benefit		Voluntary LTD Buy-Up Benefit	
Elimination Period	180 days	Elimination Period	180 days
Weekly Benefit	50% of monthly earnings (up to \$20,000)	Weekly Benefit	Option 1: 60% of monthly earnings (up to \$20,000) Option 2: 70% of monthly earnings (up to \$20,000)
Maximum Benefit Period*	Retirement Age	Maximum Benefit Period*	Retirement Age

*Please see the plan summaries for more detailed information on the maximum benefit period.

ADDITIONAL BENEFITS

Benefit	Description	Contact information	Who pays?
 <p>Employee Assistance Program</p>	<p>We are pleased to offer an Employee Assistance Program to assist you and your family through difficult times. This benefit is available for all household members.</p> <ul style="list-style-type: none"> • Unlimited access to Master’s-level counselors by phone 24/7. • Up to 8 face-to-face visits with a counselor at no cost. • Unlimited access to helpful tools and resources online. • Referrals available. 	 <p>ComPsych 1-888-664-6512 www.guidanceresources.com User ID: CCBF</p>	Employer Paid
 <p>Pet Insurance</p>	<p>With Pet Insurance, you'll have peace of mind knowing you can get help with some of your pet's medical bills. The plan reimburses eligible veterinary expense relating to accidents, illnesses, and injuries for dogs, cats, birds, and several exotic pets.</p> <p>You can choose the level of reimbursement that best fits your needs, either 50% or 70% of your vet bill. A \$250 annual deductible and \$7,500 maximum annual benefit apply. For more details, call or visit the website to get a free quote.</p>	 <p>Nationwide® Nationwide Pet Insurance 1-877-738-7874 www.petinsurance.com/cocacolaflorida</p>	Associate Paid Discounted rates available
 <p>Identify Theft Protection</p>	<p>Every online transaction leaves a trace behind, taking on a life of its own, which can put your credit and identity at risk. Norton LifeLock can help monitor your credit and protect your identity. Please be aware, if you have a personal Norton account, you will have to terminate that account to enroll in this benefit.</p>	 <p>NortonLifeLOCK™ Norton LifeLock 1-800-607-9174 my.norton.com</p>	Associate Paid Discounted rate available
 <p>DayForce Wallet</p>	<p>Dayforce Wallet lets Coke Florida Associates make any day payday! It is a modern way to give you access to your net earned wages on demand. Funds are deposited in real-time to the Dayforce Prepaid MasterCard, which comes from Dayforce Wallet. You can access 85% of your net pay which will be available to you in Dayforce Wallet. All taxes, deductions, and garnishments will be applied before you see any available earnings. To get started with Dayforce Wallet, click here.</p>	 <p>Dayforce Wallet Make any day payday with Dayforce Wallet DayForce Wallet</p>	Employer Paid
 <p>401(k) Retirement Savings Plan</p>	<p>You are eligible to participate in the 401(k) Retirement Savings Plan once you have completed 60 days of service. You may elect to defer a percentage of your pay each period. Your current taxable income is reduced by the amount you contribute through pre-tax salary deferral. This plan allows you to defer 100% of your pay. In addition, you may also elect to defer a percentage of your pay each period as Roth deferral, which are after-tax contributions. For any contributions up to 6% of your pay, Coke Florida will match \$1.00 for each dollar you invest for the first 1% and \$0.50 for every dollar for the next 5%.</p> <p>This retirement plan includes an automatic contribution arrangement that applies to all eligible participants. If you are a new participant, you will be automatically enrolled in the retirement plan, meaning 3% of your pay will be deducted from paychecks and contributed to the retirement plan on your behalf unless you elect a different salary deferral percentage.</p>	 <p>Principal™ Principal 1-800-547-7754 Monday - Friday 7a.m. - 9p.m. (CT) www.principal.com/welcome or www.principal.com/LearnNow</p>	Associate Paid with Employer Contribution

Benefit	Description	Contact information	Who pays?
 Auto & Home Insurance	<p>This voluntary program offers discounted coverage for your home, condo, car, boat, motorcycle, recreational vehicle, and other possessions. Good driving rewards, loyalty discounts, and multi-policy savings are also available. Enroll directly through the carrier at any time throughout the year. Rates are based on your personal history.</p> <p>After enrollment directly with the carrier, you will be mailed your Policy ID card (if applicable), and welcome documents. Farmers will contact you directly to renew your Policy each year.</p>	 Farmers GroupSelect 1-800-438-6381 www.myautohome.farmers.com Use discount code "FBP" to access quotes.	Associate Paid
 Legal Insurance	<p>Unexpected legal concerns can be difficult to handle alone. The LegalEASE legal insurance plan provides support and protection for a variety of personal legal issues. As a member, you will have access to a national network of over 20,300 attorneys who can help with matters such as:</p> <ul style="list-style-type: none"> • Home and Consumer • Financial • Auto and Traffic • Family • Estate Planning and Wills 	 LegalEASE 1-800-248-9000 (reference Coke Florida) Member Services: 1-888-416-4313 www.legaleaseplan.com/cocacolaflorida	Associate Paid

VACATION TIME

Paid vacation is available to full-time Associates and, on a reduced basis, to part-time Associates.

EXEMPT & NON-EXEMPT VACATION TIME	
January 1 of the Calendar Year in Which You Will Complete	Total Weeks Accrued
1 - 9 years of service	3 weeks
10 - 19 years of service	4 weeks
20 - 29 years of service	5 weeks
30+ years of service	6 weeks



Exempt Associates

As a newly hired exempt Associate, you will be eligible to take vacation as of your date of hire with the Company. Your vacation time may be prorated your first year, depending on your hire date.

Non-Exempt Associates

As a newly hired non-exempt Associate, you will be eligible to take vacation after you have worked for the Company for 6 months from your date of hire. Your vacation time may be prorated your first year, depending on your hire date.

BI-WEEKLY ASSOCIATE PAYROLL CONTRIBUTIONS

Medical/Rx

	Choice Plus Value Plan	Choice Plus HDHP
Tobacco Use	Non-Tobacco User/1 Tobacco User/2 Tobacco Users	Non-Tobacco User/1 Tobacco User/2 Tobacco Users
Associate	\$101.08 / \$124.15 / NA	\$37.65 / \$60.72 / NA
Associate + Spouse	\$337.41 / \$360.49 / \$383.57	\$155.76 / \$178.84 / \$201.91
Associate + Child(ren)	\$235.57 / \$258.65 / NA	\$96.33 / \$119.40 / NA
Family	\$424.04 / \$447.11 / \$470.19	\$198.74 / \$221.82 / \$244.90

Dental

	Dental Plan
Associate	\$7.44
Associate + Spouse	\$14.41
Associate + Child(ren)	\$16.77
Family	\$24.10

Vision

	Vision Plan
Associate	\$2.01
Associate + Spouse	\$4.89
Associate + Child(ren)	\$4.04
Family	\$6.99

Supplemental Life and AD&D Insurance

Life Insurance: Associate & Spouse Monthly Rates per \$1,000 of Coverage											
Age	0-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
Associate Rates	\$0.039	\$0.055	\$0.062	\$0.068	\$0.105	\$0.177	\$0.306	\$0.474	\$0.880	\$1.429	\$1.552
Spouse Rates	\$0.068	\$0.092	\$0.104	\$0.116	\$0.174	\$0.266	\$0.497	\$0.762	\$1.466	\$2.378	\$2.378
Life Insurance: Child(ren) Monthly Rate per \$1,000 of Coverage											
Child(ren) Rates	\$0.065										
AD&D Insurance: Monthly Rates per \$1,000 of Coverage											
Associate Rates	\$0.016										
Spouse Rates	\$0.024										

Voluntary Long-Term Disability (LTD) Insurance

Monthly Rates per \$100 of Covered Payroll	
Benefit	Rate
LTD Buy-Up: 10%	\$0.240
LTD Buy-Up: 20%	\$0.350

Disability Benefits are based on your salary, but your coverage is not automatically increased when your salary changes. Annual Enrollment is the only time you can change your coverage. Covered Payroll references the total salary/compensation paid to all active members.

How to Calculate Your LTD Cost per Paycheck		
\$ _____ X _____ ÷ 100 = \$ _____	Monthly Income*	Your Rate**
		Monthly Associate Cost
\$ _____ 12 ÷ _____ = \$ _____	Monthly Associate Cost	Pay Periods Per Year
		Pay Period Deduction

Accident Insurance

Bi- Weekly Rates	
Associate Only	\$2.91
Associate + Spouse	\$5.16
Associate + Child(ren)	\$6.50
Associate, Spouse, & Child(ren)	\$8.64

Hospital Indemnity

Bi- Weekly Rates	
Associate Only	\$4.08
Associate + Spouse	\$11.52
Associate + Child(ren)	\$8.27
Associate, Spouse, & Child(ren)	\$12.88

Legal Plan

Bi- Weekly Rates	
Associate, Spouse, & Child(ren)	\$7.13

Identity Theft Protection

Bi- Weekly Rates	
Associate Only	\$3.69
Associate, Spouse, & Child(ren)	\$6.91

All Other Benefits

Rates for benefits including Critical Illness Insurance, Pet Insurance, and Auto & Home Insurance will vary based on Individual factors and will be provided at the time of enrollment.

Note: Every Effort has been made to ensure the information in this document is accurate. However, if there is any inconsistency between this document, and the applicable plan documents, the official plan documents will always govern.

GLOSSARY OF TERMS

COPAYMENT: A copayment (copay) is the fixed dollar amount you pay for certain in-network services on a PPO-type plan. In some cases, you may be responsible for coinsurance after a copay is made.

COINSURANCE: Your share of the costs of a healthcare service, usually figured as a percentage of the amount charged for services. You start paying coinsurance after you've met the deductible. Your plan pays a certain percentage of the total bill, and you pay the remaining percentage.

DEDUCTIBLE: A deductible is the amount of money you must meet before your plan begins paying for services covered by coinsurance. Some services, such as office visits that require copays do not apply to the deductible. For example, if your plan's deductible is \$1,000, you'll pay 100 percent of eligible healthcare expenses until you have met the \$1,000 deductible. After that, you share the cost with your plan by paying coinsurance.

FORMULARY: A list of prescription drugs covered by the plan. Also called a drug list.

HIGH DEDUCTIBLE HEALTH PLAN (HDHP): This is a type of medical plan that requires the member to reach a deductible prior to having services covered by coinsurance. All expenses paid by the member count toward the deductible and out-of-pocket maximum.

IN-NETWORK: A group of doctors, clinics, hospitals, and other healthcare providers that have an agreement with your medical plan provider. You pay a negotiated rate for services when you use in-network providers.

OUT-OF-NETWORK: Care received from a doctor, hospital, or other provider that is not part of the plan agreement. You'll pay more when you use out-of-network providers since they don't have a negotiated rate with your plan provider. You may also be billed the difference between what the out-of-network provider charges for services and what the plan provider pays for those services.

OUT-OF-POCKET MAXIMUM: This is the most you must pay for covered services in a plan year. After you spend this amount on deductibles and coinsurance, your health plan pays 100 percent of the costs of covered benefits. However, you must pay for certain out-of-network charges above reasonable and customary amounts.

CONTACTS

Benefit	Contact	Phone Number	Website	Plan/Group ID
Medical Plan(s)	Aetna	1-888-699-1005	www.aetna.com	868660
Prescription Services	CVS Caremark	1-855-383-9428	www.caremark.com	1586
Telemedicine	CVS Health Virtual Care	N/A	CVS.com/virtual-care	N/A
Dental	Delta Dental	1-800-521-2651	deltadentalins.com	17681
Vision	VSP	1-800-877-7195	www.vsp.com	30057528
Health Savings Account (HSA) and Flexible Spending Account (FSA)	Inspira Financial	1-888-678-8242	www.inspirafinancial.com	145812
Life, Disability, & FMLA	Lincoln Financial	Life Claims: 1-888-787-2129 Group Life Conversion: 1-800-423-2765 Disability & FMLA: 1-888-408-7300	www.mylincolnportal.com	09-LF0935 Company Code: CokeFL
Accident, Critical Illness, and Hospital Indemnity	Aetna	1-888-699-1005	www.MyAetnaSupplemental.com	803165
Employee Assistance Program	ComPsych	1-888-664-6512	www.guidanceresources.com	User ID: CCBF
Pet Insurance	Nationwide Pet Insurance	1-877-738-7874	www.petinsurance.com/cocacolaflorida	Coca-Cola Beverages Florida, LLC
Identify Theft Protection	Norton LifeLock	1-800-607-9174	my.norton.com	E0011712
DayForce Wallet	DayForce Wallet	1-877-723-7434	DayForce	N/A
401(k) Retirement Savings Plan	Principal	1-800-547-7754	www.principal.com/welcome www.principal.com/LearnNow	N/A
Auto & Home Insurance	Farmers GroupSelect	1-800-438-6381	www.myautohome.farmers.com	Group #: 160264 Website Employer ID: Coke Florida Discount Code: FBP
Legal Insurance	LegalEASE	1-800-248-9000 (reference Coke Florida) Member Services: 1-888-416-4313	www.legaleaseplan.com/cocacolaflorida	Coke Florida
Human Resources		Coke Florida Benefits Hotline Phone: 1-877-340-0929, select option 3 for Benefits	https://cokefloridatotalrewards.com	N/A

Virtual Enrollment



Schedule a virtual session with a Benefits Counselor.

- New Hires <https://cokeflorida.benefitsinfo.com/schedule-your-enrollment-call>
- During Open Enrollment <https://cokeflorida.benefitsinfo.com/schedule-your-enrollment-call>



Online Enrollment

Log in to Dayforce and follow the prompts to complete your enrollment.

Annual notices are available here:

<https://online.flippingbook.com/view/1013069330>



The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.