

2018

BENEFITS GUIDE



REVIEW & CHANGE COVERAGE AT DPSGREWARDS.COM FROM NOV. 6-17, 2017

PLAN CHANGES

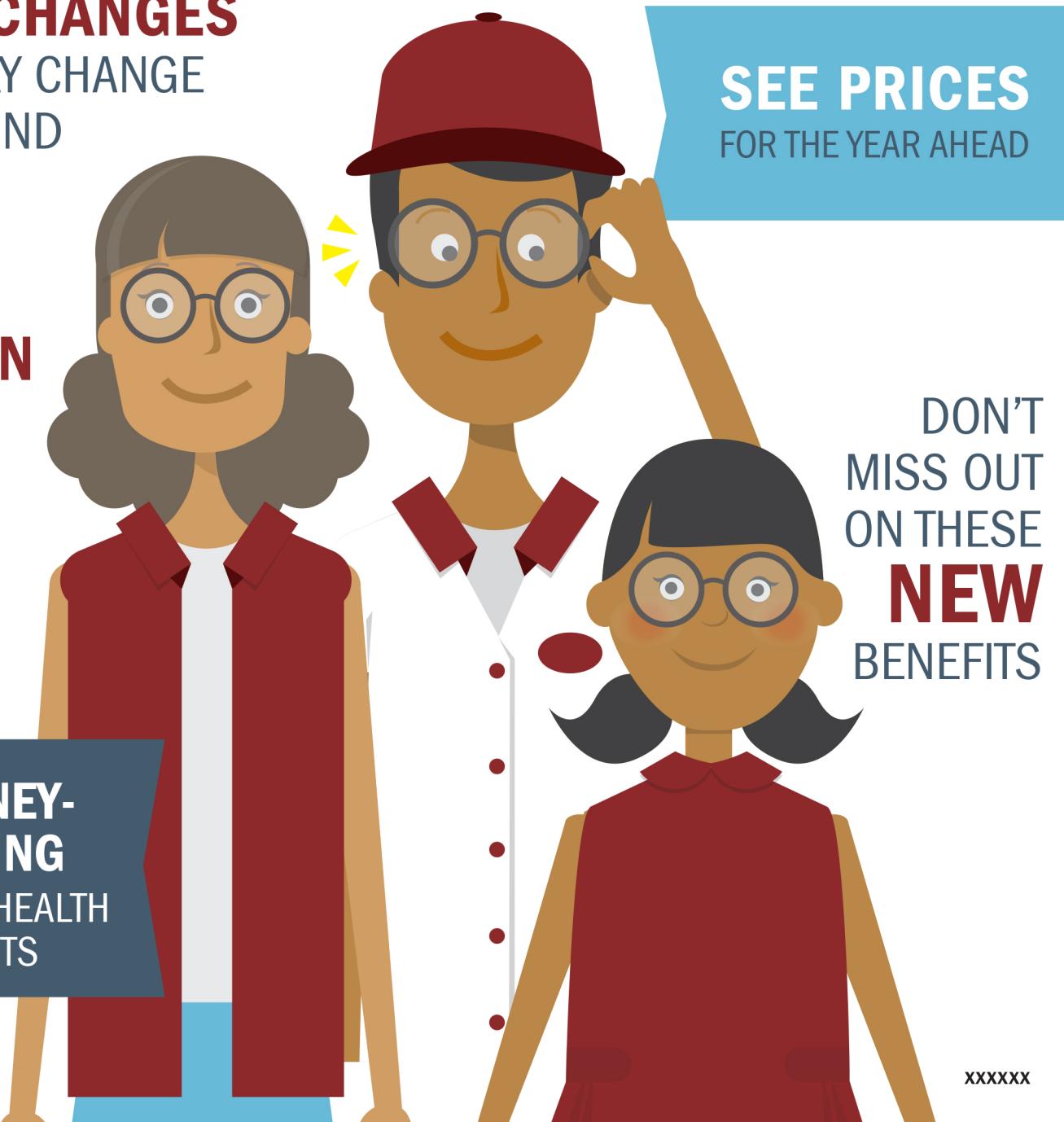
THAT MAY CHANGE
YOUR MIND

HIDDEN
COSTS
OF ER
VISITS

8 MONEY-
SAVING
TIPS FOR HEALTH
CARE COSTS

SEE PRICES
FOR THE YEAR AHEAD

DON'T
MISS OUT
ON THESE
NEW
BENEFITS



XXXXXX

WHAT'S NEW AND CHANGING FOR 2018

NEW BENEFITS

Get even more ways to manage your overall well-being with a variety of new benefits. Turn to page XX for full details.

Critical Illness and Accident: These insurance plans offer you financial support when an illness or accident strikes.

Identity Theft Protection: This coverage monitors identity threats and offers resolution services.

Legal Plan: This coverage covers the most common legal needs you may encounter.

Auto, Home and Pet insurance: Take advantage of the discounts available for DPS employees to cover your belongings and your four-legged family members.

In addition, the new Dependent Care Flexible Spending Account (FSA) can help you save money. Set aside pretax money into your account, then use it to reimburse yourself for dependent care costs (includes care for children and disabled adults). Turn to page XX for full details.

PLAN CHANGES

Both UnitedHealthcare (UHC) plans have changes to the prescription drug coverage. If you are prescribed a brand-name drug – and a generic version is available – your pharmacist will automatically switch it for the cheaper generic version. If you still choose the brand name drug, you'll pay the cost difference.

For those on the UHC PPO Plan, there are some benefit changes:

Slight increase to primary care, specialist and urgent care copays; Slight increase to prescription copays, both retail and mail-order; and Increase to emergency room costs.

ER CHANGES: Instead of a flat copay, users will pay a \$250 copay plus the cost of care until you meet your deductible. Once you meet your deductible, you'll pay the copay plus 20 percent. Because the ER can be more timely and costly, consider going elsewhere for care. Turn to page XX for tips of picking the right place to go for care.

For those on the UHC Consumer-Driven Medical Plan (CDMP) there are no benefit changes.

PRICES CHANGING

To keep our medical plans sustainable and aligned to the market, some employees will see a moderate increase to the cost for medical coverage (premium). The amount your premium changes will depend on the plan and level of coverage you choose.

The price change reflects the overall rising health care costs. We all have been working hard to reduce expenses as we can – employees complete a health screening and taking healthy action to improve any out of range risk factors; DPS negotiates to keep our administrative costs as low as possible.

As a result, we were able to keep the cost for medical coverage flat for two years. Even with the price changes, DPS continues to pay for almost two-thirds of medical plan costs through the employer premium portion.

Now is a good time to double check:

- Are you in the right plan and coverage?
- Does your spouse/domestic partner have coverage through his/her employer?
- Are you using the Health Savings Account or Flexible Spending Account to pre-fund your out-of-pocket health expenses?

SAVE MONEY BY STAYING SMART

You're already a smart consumer when you go shopping for TVs or cars.

You search a few places, look online, read reviews and make sure you get the best value for your money.

You can be a smart consumer when it comes to your health care, too. Let us help you along the way. Turn to page XX for eight simple things you can do to save money all year long.

BENEFITS BACKGROUND

Three Things to know before you enroll

1 WHO IS ELIGIBLE FOR BENEFITS?

DPS provides benefits to all full-time active employees and their eligible dependents:

Full-time active employees: Those regularly scheduled to work 30 or more hours per week.

Dependents: According to the IRS, employees can only add eligible family members as a dependent on their plan. This includes:

- Legal spouse
- Domestic partner
- Common-law spouse (as defined by the state; affidavit required)
- Child(ren) up to age 26
- Disabled child(ren) if disabled before age 19

2 WHEN CAN I CHANGE MY COVERAGE?

Annual enrollment is the one chance to review and update your coverage for the year ahead. This year enrollment runs Nov. 6-17, 2017.

Outside of annual enrollment, you cannot make changes unless you have a qualifying life event. The IRS sets this rule, because most benefits are paid with pretax dollars.

Qualifying life events include:

- Marriage and/or divorce
- Change in work status (for you or your legal spouse/domestic partner)
- Birth and/or adoption
- Qualified medical child support order
- Dependent no longer eligible
- Gain and/or loss of coverage

3 WHAT HAPPENS IF I DON'T ENROLL?

If you don't take action, you'll keep your current level of coverage. But you will miss out on some things.

Additional Benefits: You'll miss the chance to enroll in the new benefits added in 2018.

Correct Coverage: You'll miss the chance to review your coverage and make sure you're in the most cost-effective plan for you and your family.

Pre-funded Expenses: You'll miss the chance to renew or set up a pre-tax health account. See below.

Health Savings Account (HSA): The amount you contribute will continue into 2018. The account remains active, but no new money will be added from your paycheck.

Flexible Spending Account (FSA): Your account will not remain active. You must enroll and select your contribution amount. Unused funds will not roll over if your account is not active.

Roll over up to \$500!

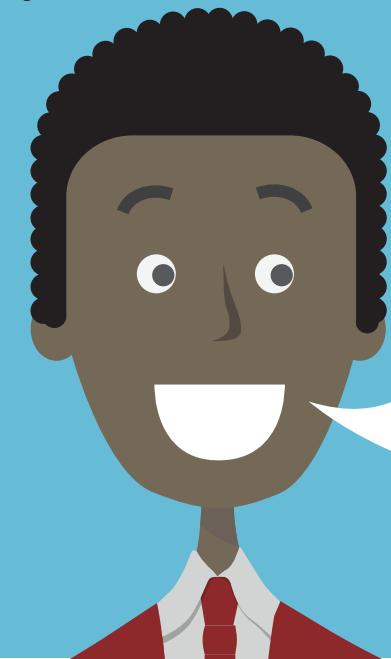
You can roll over up to \$500* of unused FSA funds each year. You must actively enroll in the FSA again to keep your account active.

*Any amount over \$500 will be forfeited.

Planning a life event in 2018?

You have 31 days from the event (like the birth of a child) to update your coverage.

Miss that window and you'll have to wait until next year's annual enrollment.



WOW, THAT'S A WHOLE HEAP OF BENEFITS.

Don't miss out on the wide range of benefits available to you. They're here to provide for your physical, emotional and financial well-being.

PHYSICAL

MEDICAL PLANS

With two main UnitedHealthcare (UHC) medical plans – and alternate plans for certain locations – you can choose the plan that best fits into your budget, lifestyle and healthcare habits. Make sure you compare the plans to find the one that best meets your needs.

PRESCRIPTION DRUGS

Whether you have regular maintenance medications or as-needed prescriptions, the medical plan helps cover the costs. Consider getting regular medications mailed to your home to save money and time.

FLU SHOTS FREE

DPS pays 100 percent of the cost for medical plan participants to get a flu shot each year.

ANNUAL EXAM FREE

DPS pays 100 percent of the costs for medical plan participants to get a preventive exam each year.

CRITICAL ILLNESS COVERAGE NEW

Supplement your medical plan with this new option. Get financial support when a serious illness strikes.

ACCIDENT COVERAGE NEW

Supplement your medical plan with this new option. Get financial support when an accident or injury occurs.

DENTAL PLAN

A reason to keep on smiling! The DPS dental plan offers free preventive care and low deductible to help you maintain your oral health.

VISION PLAN

It's clear to see the value the DPS vision plan offers. Get low copays for eye exams and an annual allowance for frames or contact lenses.

DPS WELLNESS

Log in to DPSWellness.com to learn about your health risks, find free tools to help you improve your health and take part in health challenges to earn points for the chance to win prizes.

Don't forget to Check Up & Step Up too! Get a health screening – showing improvement, if needed – by Aug. 31 each year to avoid paying more for medical coverage the following year. Participants get a free health screening each year!

WELLNESSCODES.COM

Use the points you earn from DPS Wellness or pay out of pocket for discounts on hundreds of fitness and wellness products.

NICOTINE CESSION FREE

Visit uhccoaching.com/quitpower/ to sign up. Connect with a coach and receive up to eight weeks of nicotine replacement therapy, at no extra cost, if eligible. Available to all employees (whether enrolled in a DPS medical plan or not).

CONDITION MANAGEMENT FREE

UnitedHealthcare (UHC) participants can sign up at myUHC.com for programs to help manage certain conditions like diabetes, chronic obstructive pulmonary disease and coronary artery disease.

EMOTIONAL

DPS LIFE SOLUTIONS FREE

Get confidential, professional help online, over the phone or with a counselor in person. Visit LiveandWorkWell.com using the DPS access code 704374.

TIME OFF

Time away from work – vacation, holidays, leaves of absence and sick days – let you recharge your batteries and relax.

PAID PARENTAL LEAVE

Both birth and non-birth parents welcoming a new addition to the family can receive two weeks of paid leave following the birth and/or adoption of a child.

IDENTITY THEFT PROTECTION NEW

Get alerted to identity threats and resolution services if you're ever compromised.

**TURN THE PAGE FOR
DETAILS ON THE NEW BENEFITS
ADDED FOR 2018.**



LEGAL PLAN NEW

Cover the most common legal needs and get access to quality law firms.

PET INSURANCE NEW

Protect the health of the four-legged members of your family.

RECOGNITION AWARDS

Significant accomplishments deserve recognition. Our various recognition programs are designed to make it easy for managers and colleagues to recognize and reward others.

SERVICE AWARDS

Whatever anniversary you may be celebrating this year, thank you for being a part of our ACTION-focused team! Each milestone anniversary comes with special awards.

GRANTS FOR GOOD

When you accumulate 25 volunteer hours in a year, you earn a \$250 grant for a charity of your choice, within DPS guidelines. Serve on a board? Get \$500.

EMPLOYEE RESOURCE GROUPS (ERG)

Connect with colleagues and expand your leadership skills through employee led groups at select locations. Groups include: Multicultural ERGs, Women's ERG and Military ERG.

Note: Eligibility of all benefits in this guide may vary. Please refer to the Summary Plan Description, your collective bargaining agreement, or contact your local HR representative who will refer you to the appropriate document or vendor. Benefits on this page provide a summary explanation only. Refer to full policies for more information.

FINANCIAL

HEALTH SAVINGS ACCOUNT (HSA) + DPS DEPOSIT!

Save money pretax to pay for health expenses. Put money from your paycheck into the account. DPS will also give you an annual deposit – \$500 employee-only coverage or \$1,000 any family coverage. Roll over all of your unused funds each year. Available if you enroll in the Consumer-Driven Medical Plan (CDMP).

FLEXIBLE SPENDING ACCOUNT (FSA)

Save money pretax to pay for health expenses. Put money from your paycheck into the account. Roll over up to \$500 of unused funds each year. Available if you enroll in the PPO Plan or one of the alternate plans.

DEPENDENT CARE FSA NEW

As a working adult, you may also have dependents – children and disabled adults – who need care while you are away. These expenses can quickly add up. Use the Dependent Care FSA to save money pretax for eligible expenses.

LIFE INSURANCE

You are automatically enrolled – and DPS covers the cost – of basic life insurance coverage.

SUPPLEMENTAL INSURANCE

For added peace of mind, you can choose additional life insurance for yourself and your eligible family members, and accidental death & dismemberment (AD&D) coverage for yourself.

SHORT- AND LONG-TERM DISABILITY COVERAGE

DPS offers disability benefits to support you financially when you can't work because of a non-work related illness or injury.

401(K) MATCH FROM DPS

DPS matches your 401(k) contribution, dollar-for-dollar up to 4 percent of your eligible earnings. Sign up, change your contribution or modify your investment anytime of year.

**Access free financial education from
Fidelity at www.401k.com.**

ENHANCED DEFINED CONTRIBUTION (EDC)

DPS makes an annual EDC deposit for eligible employees. The 2018 deposit – which is paid out in early 2019 – will be equal to 3 percent of your eligible earnings. You can choose how to invest the funds, similar to a 401(k).

TUITION REIMBURSEMENT

DPS will pay up to \$5,250 each calendar year for tuition and textbooks.

ADOPTION ASSISTANCE

DPS will pay up to \$8,000 for the adoption of a non-related child by eligible employees.

NEW EXTRA COVERAGE

More ways to manage your well-being

SUPPLEMENT YOUR MEDICAL PLAN WITH EXTRA COVERAGE!

CRITICAL ILLNESS

Get financial support to help you when a serious illness strikes. Receive a lump-sum cash benefit if you are diagnosed with a covered serious illness. To help prevent illness, you can also qualify for an annual cash benefit when you complete an annual physical or health screening.

ACCIDENT

You can't always avoid accidents – but you can protect yourself from accident-related costs that can strain your budget. Accident insurance pays a benefit directly to you if you have a covered injury and need treatment. You can get coverage for your spouse and dependents, too.

LEGAL PLAN

Cover the most common legal needs you may encounter and get access to quality law firms for advice, consultation and representation.

Covered legal services:

- Wills and estate planning
- Consumer protection matters
- Criminal matters
- Debit-related matters
- Family law
- Real estate matters
- Traffic violations

IDENTITY THEFT PROTECTION

Identity theft protection monitors and alerts you to financial and privacy threats. Resolution services are included should your identity ever be compromised while you are covered.

Covered protection services:

- Identity and credit monitoring
- Credit scores and reports
- Privacy advocate remediation
- Financial transaction monitoring

Sign up for these only during enrollment, Nov. 6-17.

Go to DPSGRewards.com. They appear after you select your DPS benefits.

GET A SPECIAL DPS DISCOUNT ON THESE POLICIES AS WELL!

HOME

Whether it's a house, condo, or apartment, there's no place like home. Protect your property and belongings from the unexpected.

AUTO

Whether it's a car, boat, or RV, protect the vehicles that get you where you want to be.

PET

Get coverage for the four-legged members of your family.

Sign up for these any time of year.

Go to DPSGRewards.com and click the "Benefit Hub" tile.

LET'S TALK MONEY

Some of the Financial Benefits from DPS

DEPENDENT CARE

FLEXIBLE SPENDING ACCOUNT NEW

As a working adult, you may also have dependents – children and disabled adults – who need care while you are away.

These expenses can quickly add up. Use the Dependent Care FSA to save money pretax for eligible expenses. You can set aside up to \$2,500 into a special account. Then use this to reimburse yourself.

LIFE & DISABILITY COVERAGE

BASIC LIFE INSURANCE COVERAGE

DPS provides basic life insurance coverage at no cost to you. You are automatically enrolled in this.

Basic life is 1x your annual pay (\$40,000 minimum to \$1.2 million maximum).

SUPPLEMENTAL LIFE ACCIDENTAL DEATH & DISMEMBERMENT

You can choose to get additional life insurance coverage. This is available for you, your legal spouse/domestic partner and your child(ren). You can also choose to get AD&D coverage for yourself.

	Employee ¹	SPOUSE ^{1,2}	Child(ren) ^{1,2,3}
Supplemental Life	1x – 6x your annual pay	Up to \$100,000	Up to \$15,000
Supplemental AD&D Coverage	1x – 7x your annual pay	n/a	n/a

1) Rates are determined by coverage amount, age and/or nicotine user status.

2) Legal spouse and child coverage cannot exceed 100 percent of an employee's Basic and Supplemental combined coverage.

3) If you choose Supplemental Life Coverage for your child, he/she must be your natural child, adopted child or stepchild. Eligibility begins at 14 days old and coverage is available for unmarried dependent children through the age of 25. Coverage ends at age 26 for dependent children.

Choosing Supplemental Life?

No evidence of insurability (EOI) will be required for those who sign up or increase coverage during enrollment this year!*

*For those not previously denied.

SHORT- AND LONG-TERM DISABILITY (STD & LTD)

DPS completely pays for your disability coverages. If you are entitled to receive other disability benefits your DPS benefits will be reduced.

STD: If you can't perform your job because of a non-work related illness or injury, you may be eligible for STD benefits for up to 26 weeks if approved by Unum, the claims administrator.

LTD: If you are off the job because of an illness or injury, LTD benefits may begin after you've been continuously disabled for 26 weeks if approved by Unum, the claims administrator. LTD benefits are subject to pre-existing condition limits and reduce at certain ages.

RETIREMENT

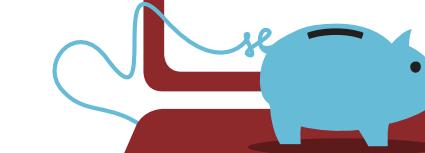
401(K) MATCH

Save twice as fast for retirement. DPS matches your contribution dollar-for-dollar, up to 4 percent of your eligible earnings. Sign up for the 401(k) any time of year!

You can also change your contribution amount and modify your investments any time of year. You are fully vested immediately.

WWW.401K.COM

Follow the enrollment steps to automatically connect your profile to the DPS plan.



ENHANCED DEFINED CONTRIBUTION (EDC)

DPS makes a yearly deposit into eligible employees' 401(k) account. This deposit is called the EDC. The 2017 deposit – which is paid out in early 2018 – is equal to 3 percent of your eligible earnings.

You can choose how to invest the funds. You are fully vested after three years of service. Think of it as a bonus contribution toward your retirement!

PICK YOUR PLAN.

UNitedHealthCare Options

ANNUAL COST & COVERAGE		CDMP CONSUMER-DRIVEN MEDICAL PLAN	PPO PLAN	ANNUAL COST & COVERAGE	KAI SER PERMANENTE CALIFORNIA ONLY	EXCELLUS HMO NEW YORK ONLY
PREMIUM Cost to be enrolled, don't count toward expenses	\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family		\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family		\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family	\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family
ANNUAL DEDUCTIBLE Level 1: Once you pay this amount, coinsurance kicks in.	\$1,500 (Individual) -\$500 HSA deposit from DPS \$1,000 "Adjusted" deductible \$3,000 (Any family) -\$1,000 HSA deposit from DPS \$2,000 "Adjusted" deductible	USE THE MONEY DPS PUTS IN YOUR HEALTH SAVINGS ACCOUNT (HSA) TO OFFSET YOUR DEDUCTIBLE COSTS!	\$1,000 (Individual) \$2,000 (Any family)		\$1,000 (Individual) \$2,000 (Any family)	None (Individual) None (Any family)
COINSURANCE RATE Level 2: Once you meet your deductible, DPS picks up 80% of costs through "coinsurance."	Coinsurance: DPS pays 80% and you pay 20% Until you reach coinsurance max: \$3,000 (individual) or \$3,850 (any family)		Coinsurance: DPS pays 80% and you pay 20% Until you reach coinsurance max: \$4,000 (individual) or \$8,000 (any family)		Coinsurance: DPS pays 80% and you pay 20% Until you reach coinsurance max: \$3,000 (individual) or \$6,000 (any family)	No Coinsurance No coinsurance max
TOTAL MAX Once you meet the deductible and coinsurance max, you've reached your yearly total. DPS pays 100% of additional costs beyond this amount.	\$4,500 (Individual) \$6,850 (Any family)		\$5,000 (Individual) \$10,000 (Any family)		\$4,000 (Individual) \$8,000 (Any family)	None (Individual) None (Any family)
OVERALL COST? Reaching your total max isn't likely, but what if you did? Some consider this their "worst case" cost scenario.	\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family Annual Premium + Total Max - DPS Money = Overall Cost		\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family Annual Premium + Total Max - DPS Money = Overall Cost		NORTH \$x,xxx Individual \$x,xxx Individual + One \$x,xxx Individual + Family SOUTH \$x,xxx Individual \$x,xxx Individual + One \$x,xxx Individual + Family Annual Premium + Total Max - DPS Money = Overall Cost	\$x,xxx Individual \$x,xxx Individual + Child(ren) \$x,xxx Individual + Spouse/Partner \$x,xxx Family Annual Premium + Total Max - DPS Money = Overall Cost
PREVENTIVE CARE FREE	DPS pays 100%		DPS pays 100%		DPS pays 100%	DPS pays 100%
OFFICE VISITS Typical full price cost of primary care visit is \$100 and specialist/urgent care visit is \$175	Once you meet your deductible, you pay 20%		Primary Care: \$25 copay Specialist/Urgent Care: \$45 copay CHANGED		\$20 copay	\$30 copay
EMERGENCY ROOM Typical cost of ER visit is \$1,500	Once you meet your deductible, you pay 20%		You pay \$250 copay + full price of care Once you meet your deductible, you pay \$250 copay + 20% CHANGED		Once you meet your deductible, you pay 20% 1,500	\$150 copay
PREVENTIVE & GENERAL PRESCRIPTION COST	PREVENTIVE You pay 20% GENERAL You pay full price, then 20% after you meet deductible		MAIL RETAIL TIER I \$10 copay \$10 copay TIER II \$70 copay You pay 20% up to \$45 max TIER III \$150 copay You pay \$85 min then 20% CHANGED Note: \$1,500 max out-of-pocket for prescriptions		MAIL RETAIL Generic \$20 copay \$10 copay Brand Name \$60 copay \$30 copay	MAIL RETAIL Generic \$20 copay \$10 copay Brand Name \$60 copay \$30 copay Non-Formulary \$100 copay \$50 copay
INPATIENT/OUTPATIENT SERVICES						
Depending on your location, you may be eligible to enroll in an alternate medical plan. Please refer to the Summary Plan Description or your collective bargaining agreement, or contact your local HR representative who will refer you to the appropriate document or vendor.						

Note for CDMP: All health care claims count toward your deductible. Costs for preventive prescriptions do not count toward your deductible (as they are not subject to the deductible), but do count toward the out-of-pocket max. PPO Plan: Office visit copays do not count toward your deductible. Costs for prescriptions do not count toward your deductible (as they are not subject to the deductible), but do count toward the out-of-pocket max.

PICK YOUR PLAN.

Alternative Options

PICK YOUR PRETAX SAVINGS

Choose your health plan. Then enroll in the matching health account.

HEALTH SAVINGS ACCOUNT (HSA)

PLAN OPTION: You can enroll in the HSA if you choose the CDMP.

WHERE MONEY CAN BE SPENT: Pay for things like doctor's bills, dental work and eye glasses.* You'll get a debit card that can be used just like any bank card.

HOW YOU GET MONEY IN YOUR HSA:

- Once enrolled, DPS will contribute a lump sum to your account in January 2018** for you to use right away.

YOU GET \$500 FROM DPS
(if enrolled in employee-only coverage)

YOU GET \$1,000 FROM DPS
(if enrolled in any type of family coverage)

- You can put more money in your HSA for the year. This amount is taken out pretax – in equal amounts – from your paycheck. You can use the money as it is added.

HOW LONG YOU KEEP IT: You'll never lose this money! If you don't use it all during the year, it all rolls over. Plus, if you leave DPS, switch jobs or retire the account goes with you.

*Funds can be used for eligible expenses.

**The amount is pro-rated for new hires in 2018.

Note: IRS annual maximum is \$2,600 for all coverage levels.
Note: IRS annual maximum is \$3,450 for individual coverage and \$6,900 for family coverage.

**GET FREE MONEY
FROM DPS. USE
IT TO PAY FOR
DOCTOR'S BILLS.**

FLEXIBLE SPENDING ACCOUNT (FSA)

PLAN OPTIONS: You can enroll in the FSA if you choose the PPO, Kaiser Permanente or Excellus HMO plans.

WHERE MONEY CAN BE SPENT: Pay for things like doctor's bills, dental work and eye glasses.* You'll get a debit card that can be used just like any bank card.

HOW YOU GET MONEY IN YOUR FSA:

You decide how much to put in your FSA for the year. This is credited to you in full in January 2018 so you can immediately start using it. Your total contribution is then deducted, in equal amounts, from your paycheck throughout the year.

HOW LONG YOU KEEP IT: If you don't use it all during the year, you can roll over up to \$500 into the next year as long as your account remains active.

* Funds can be used for eligible expenses.

Note: IRS annual maximum is \$2,600 for all coverage levels.



**NO FREE MONEY
FROM DPS.**

PICK YOUR PLAN LIKE A PRO

Let Us Do The math for you.

Get a personalized cost comparison at DPSGRewards.com with the Medical Cost Comparison tool. Simply answer a few questions and it will calculate the overall cost differences between the UnitedHealthcare CDMP and PPO plans.

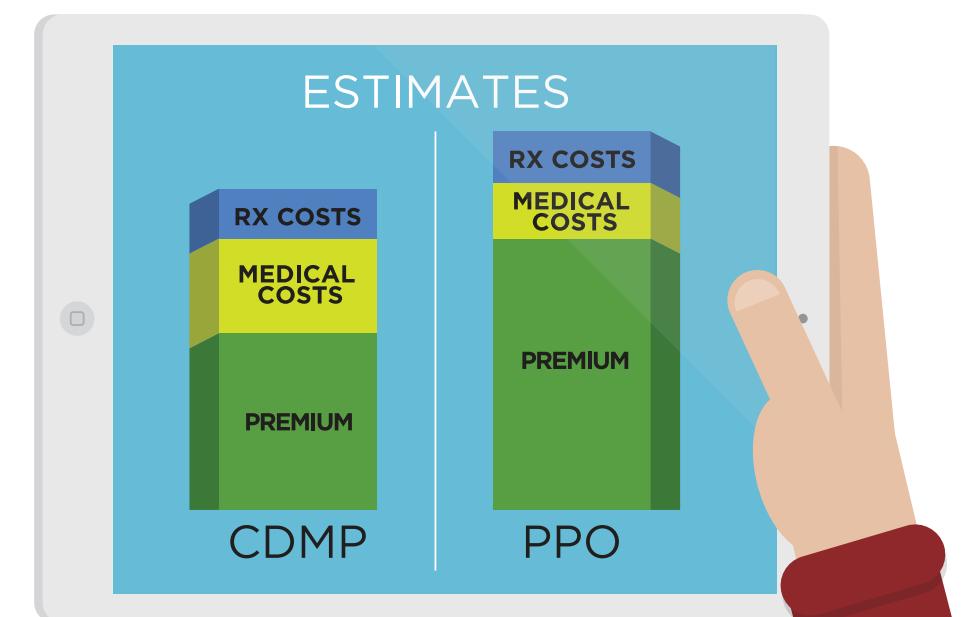
Look at the big picture.

It can be tempting to consider individual costs when comparing plans. For example, a visit to your primary care doctor for bronchitis would cost a \$25 copay with the PPO Plan and around \$120 with the CDMP.

But look at the big picture for the year. The amount you pay for coverage from your paycheck (premium) is hundreds more with the PPO Plan. That simple \$25 copay is actually costing you hundred more when you look at yearly costs. That's why the cost comparison tool is such a big help!

Leave Yourself time to decide.

Don't rush one of your most important financial decisions. Give yourself some time to review the plans, compare the costs and talk to any fellow decision-makers in your household about the right choices for you.



Compare your costs quickly and easily
at DPSGRewards.com!

DO YOU GET WHAT YOU PAY FOR?

The PPO Plan may cost more, but it doesn't mean its a better value. Both UHC plans cover the same procedures and care.

Both plans also use the same network of doctors and facilities, so you don't have to switch if you move from the PPO to the CDMP.

8 TIPS TO SAVE MONEY ON YOUR HEALTH CARE COSTS

#1 PRE-FUND YOUR EXPENSES ENROLL IN THE HEALTH ACCOUNT THAT GOES WITH YOUR PLAN.

Both the Health Savings Account (HSA) and the Flexible Spending Account (FSA) give you a great way to set aside pretax money to pre-fund health care expenses. Then when you need to pay for things like a doctor bill, dental work or eyeglasses you already have the money set aside. Turn back a page for details.

#2 STAY IN-NETWORK CERTAIN PROVIDERS CONTRACT FOR LOWER "IN-NETWORK" RATES.

The in-network discount means you get the same service at a lower rate, saving you and the plan money! Before you get care, double-check that your doctors, facilities and so forth are in-network. UHC members can visit myuhc.com or use the Health4Me app to check a person or facility. The profile will tell you if in-network.



NURSELINE
Call 24/7 for questions about minor illnesses.
Get personalized information from a registered nurse.
Call the number on the back of your UHC ID card or on the Health4Me app* / myUHC.com.



VIRTUAL VISITS
Visit with a doctor from your mobile device or computer for commonly occurring medical conditions.
TIP: Find a primary care doctor for routine care and treatment of ongoing conditions like diabetes, high blood pressure or high cholesterol.



DOCTOR'S OFFICE OR WALK-IN CLINIC
Get in-person treatment for minor medical problems and illnesses.
TIP: Find a primary care doctor for routine care and treatment of ongoing conditions like diabetes, high blood pressure or high cholesterol.



URGENT CARE
Use when the doctor's office is closed or if it is a non-life-threatening illness or injury.
RULE OF THUMB: If you would normally address the medical need with your doctor (but the office is closed), then an urgent care is more appropriate than the ER.



EMERGENCY ROOM
Go to the ER for all life-threatening illnesses and injuries that require immediate attention.

NO WAIT

*Available to UnitedHealthcare (UHC) plan participants only.

NO WAIT

30-40 MINUTES

1 HOUR

2+ HOURS

HOW TO TELL THE DIFFERENCE?

WALK-IN CLINICS
Usually in retail locations (CVS Minute Clinic, Walgreen, Target)

URGENT CARE
Will have the words "urgent care" in the name

EMERGENCY ROOM
Will have the words "emergency room" in the name.

Be aware! An ER isn't always connected to a hospital.

#4 ESTIMATE COSTS. YOU ALREADY SHOP SMART AT THE STORE. BE SMART WITH HEALTH CARE.

When doctors order a test or procedure, they are first and foremost thinking about your health.

That means it's your job to think about the costs. With the Cost Estimator Tool from UHC you can do a quick search to make sure there isn't a less expensive in-network option.

For example, you could get an MRI at the hospital down the street (which oftentimes has a facility fee) or you could go to a nearby freestanding imaging place (which gives the same service and quality of care, but with less cost).

By spending a few minutes looking at your options, you can save yourself money, but with less cost. Find the tool at myUHC.com and the Health4Me app.

#8 LIVE NICOTINE FREE KICK THE HABIT FOR GOOD WITH FREE PROGRAMS AND MEDICATIONS.

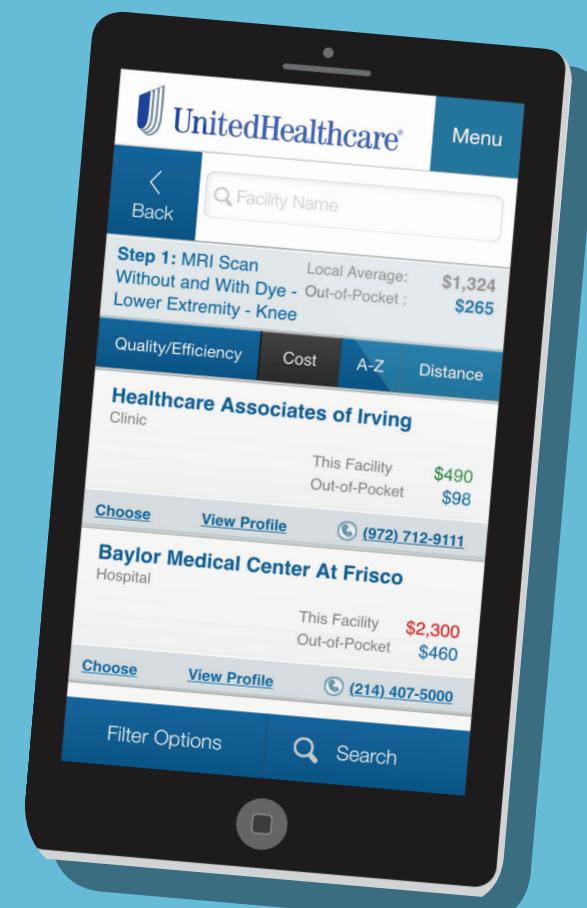
There's a \$500 nicotine surcharge for each individual – employees and covered spouses/domestic partners – who use nicotine. If you aren't a nicotine user, great choice! You won't pay this surcharge. If you are a nicotine user, you can avoid this cost in the future by quitting now.

DPS medical plans 100% cover two 90-day treatments* of Bupropion (generic Zyban), Nicotrol Inhaler*, Nicotrol Nasal Spray and Chantix Tablet.*

Quit for Life is available for UnitedHealthcare (UHC) members. Get one-on-one coaching and up to 8 weeks nicotine cessation therapy.

Visit www.uhccoachings.com/quitpower/ to sign up.

NICOTINE DISCLAIMER



#5 GET FREE PREVENTIVE CARE. EVERYONE ENROLLED IN YOUR HEALTH PLAN GETS A FREE ANNUAL EXAM.

If you don't make time for health now, you may have to make time for illness later. Each calendar year you can get a free annual physical and a yearly flu shot.

#6 BE PICKY WITH PRESCRIPTIONS GENERIC HAS SAME ACTIVE INGREDIENTS BUT LESS COST THAN BRAND NAME DRUGS

When you choose a generic prescription, you'll pay less. Always ask your doctor for the generic version. If you do choose a brand name, you'll pay more.

#7 CHECK UP & STEP UP AVOID PAYING MORE AND GET IMPORTANT INFO ON YOUR HEALTH.

Did you complete your health screening – showing improvement, if needed – before the Aug. 31, 2017, deadline? Awesome! You've avoided paying up to \$1,500 more for medical coverage in 2018.

Because your health is constantly changing, it is important to get a screening each year. Plus, you'll keep avoiding paying more! Log in to DPSWellness.com all year round to find tools and resources to help you continue to Step Up and take ACTION for your health.



DENTAL & VISION

PLAN FEATURE	DELTA DENTAL
PREVENTIVE CARE (FREE) (Exams, cleanings, X-rays, etc.)	DPS pays 100%
BASIC CARE (Fillings, extractions, root canal, etc.)	You pay 20% after deductible
MAJOR CARE (Bridges, Crowns, etc.)	You pay 40% after deductible
ORTHODONTIA	You pay 40% after deductible
ANNUAL DEDUCTIBLE	\$50 per individual \$100 per family
ANNUAL BENEFIT MAXIMUM	\$1,500
LIFETIME ORTHODONTIA	\$2,000

PLAN FEATURE	EYEMED VISION
EYE EXAM (Once per calendar year)	\$5 copay
EYEGLASS FRAMES (Once per calendar year)	\$150 allowance You pay 20% on any balance above \$150
STANDARD LENSES (Once per calendar year)	\$15 copay Progressive lenses are more expensive
CONTACT LENSES (Once per calendar year, in place of frames and lenses)	\$130 allowance You pay 15% on any balance above \$130
RETINAL IMAGING	Up to \$39

ADDITIONAL COVERAGE TYPE 1 AND TYPE 2 DIABETIC EYEMED PARTICIPANTS

EYE EXAM	
RETINAL IMAGING (Not covered if extended ophthalmoscopy is provided within six months)	No copay Twice per calendar year
EXTENDED OPTHALMOSCOPY (Not covered if retinal imaging is provided within six months)	

**CONSIDER FILLING YOUR EYE
PRESCRIPTION ONLINE!
CONTACTSDIRECT.COM
GLASSES.COM**

HABLAS ESPAÑOL?

¿HABLAS ESPAÑOL? Si quieras tener una copia de este folleto en español, llama a HR Solutions al (866) 602-3774 de lunes a viernes de las 7 a.m. a las 5 p.m., hora del Centro, y sigue las instrucciones para los Beneficios de Grupo de Dr Pepper Snapple, o ve a www.DPSGrewards.com y da un clic en "Communications."

LEGAL DISCLAIMERS

This guide provides a general description of the 2017 benefit plans. The plans are governed by the terms of the more detailed plan documents. Dr Pepper Snapple Group reserves the right to change or terminate these plans at any time without notice. Benefit program eligibility for employees in bargaining units is separately negotiated with applicable bargaining unit representatives. The benefits described may or may not apply to such employees.

ELIGIBILITY NOTE

Providing coverage for dependents who don't meet DPS eligibility requirements makes it more difficult for DPS to provide quality, affordable health care coverage to our eligible participants. That's why DPS requires dependent verification at the time of enrollment for newly covered dependents. In addition, DPS reserves the right to conduct random checks to ensure only eligible dependents are covered. If DPS determines that you have ineligible dependents covered under the plan, you will be required to repay past expenses, which could affect your past IRS tax returns. Ineligible dependents will be retroactively dropped from coverage and any premiums paid for that dependent will not be refunded. If you cover someone who is not an eligible dependent, it will be considered a violation of DPS's Fraud Policy and you will be subject to disciplinary action, up to and including termination of employment.

SIMPLE STEPS TO ENROLL

DURING ENROLLMENT

REVIEW YOUR OPTIONS

Compare costs. Consider the new coverage available for 2018.

Get more details and watch benefits videos online at DPSGrewards.com

ENROLL AT DPSGREWARDS.COM.

Review and change Coverage from Nov. 6-17, 2017.

Call HR Services at 1-866-602-3774 for help.
Monday-Friday from 7 a.m. to 5 p.m. (Central)

AFTER ENROLLMENT

LOOK FOR YOUR CONFIRMATION STATEMENT

WILL ARRIVE IN THE MAIL OR EMAIL.

You'll get a statement that shows: the coverage you selected and/or the coverage to which you defaulted, the dependents you have enrolled and a breakdown of your costs for the year. The statement will be emailed to those opted in to electronic communication, mailed to those not.

DEPENDENT VERIFICATION REQUEST

OPEN RIGHT AWAY, TIME-SENSITIVE

If you enrolled any new dependents, you'll need to confirm their eligibility. Typically this means providing documents such as a birth certificate for your child or a tax return for your legal spouse/domestic partner. You'll get a mailed packet with more instructions.

WHAT'S DEPENDENT REVERIFICATION?

Only eligible dependents can be enrolled in our health plans. It's the law, and it ensures quality, affordable coverage for everyone.

When you add a dependent to your plan for the first time, you'll confirm their eligibility after enrollment.

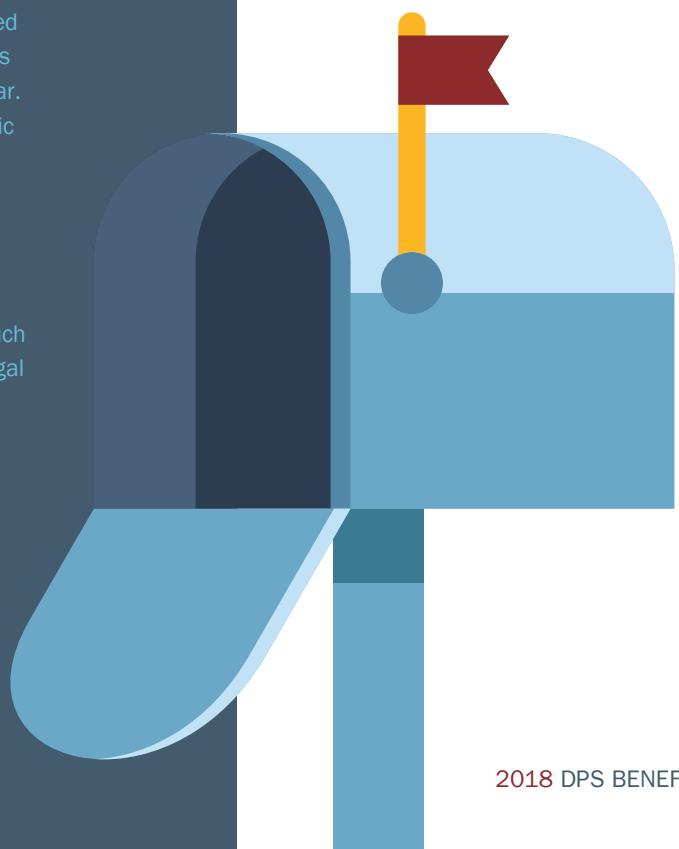
But life happens. As time goes on a dependent once eligible may not be anymore. Because people may forget to update their coverage, we reverify dependents every few years.

Do you have dependents on your plan?* You'll receive a reverification request every few years. This is based on the date they were added or last verified.

Alight is our confidential third-party vendor. If you get a mailed letter from Alight – don't throw it away! It has instructions about what you need to provide by the deadline.

You'll also see a tile titled "Dependent Verification" on your DPSGrewards.com page if you need to take action.

*Once eligibility is confirmed, birth children will not be reverified.



RECAP OF RATES

MONTHLY PRICE FOR COVERAGE (PREMIUMS)

BENEFITS COVERAGE YOU CAN CHOOSE	YOU ONLY	YOU + SPOUSE	YOU + CHILD(REN)	YOU + FAMILY
MEDICAL UHC CDMP	\$80.25	\$177.67	\$150.92	\$250.17
MEDICAL UHC PPO	\$134.75	\$293.92	\$253.92	\$413.67
MEDICAL Excellus HMO (NY only)	\$131.58	\$302.42	\$302.42 (child) \$331.00 (children)	\$348.25
MEDICAL UHC Out-of-Network	\$181.75	\$360.25	\$313.25	\$501.25
DELTA DENTAL	\$18.33	\$40.58	\$38.83	\$60.67
EYEMED VISION	\$7.58	\$14.33	\$14.33	\$22.75

YOU COULD PAY MORE!

If you and/or your covered spouse/domestic partner didn't get your health screening – showing improvement, if needed – by the Aug. 31, 2017, deadline then you'll pay \$750 more (per person who did not complete it) for your medical coverage in 2018*.

If you and/or your covered spouse/domestic partner use nicotine, you'll pay a \$500 nicotine surcharge (per person who uses nicotine) each year.

	YOU ONLY	YOU + 1	YOU + FAMILY
MEDICAL Kaiser Permanente North (CA only)	\$104.50	\$209.00	\$296.08
MEDICAL Kaiser Permanente South (CA only)	\$113.25	\$226.50	\$320.42

Enroll online at **DPSRewards.com**

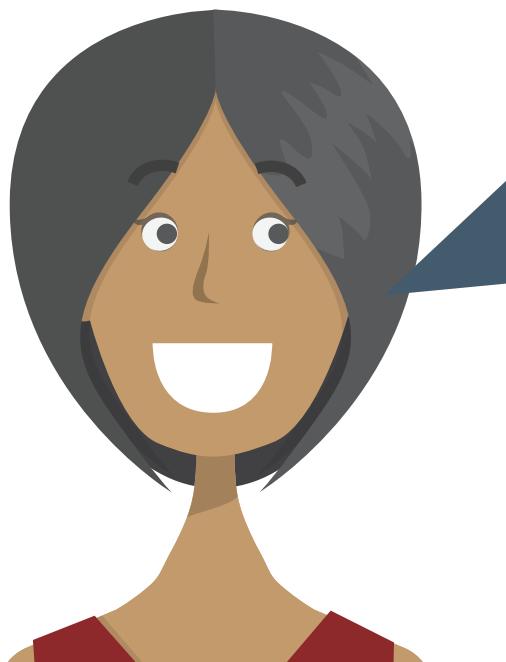
Call 1-866-602-3774 for help | Monday-Friday from 7 a.m. to 5 p.m. (Central)



YOU ARE AUTOMATICALLY ENROLLED IN THESE BENEFITS (FOR FREE, COURTESY DPS)!

DPS Life Solutions (for you and your family)
Employee Basic Life Insurance

Short-Term Disability Insurance
Long-Term Disability Insurance



DON'T FORGET!

1. Enroll in the matching health account (HSA or FSA) that goes with your medical plan to prefund your out-of-pocket expenses.
2. Enroll in any of the additional benefits that you need – Critical Illness, Accident, ID Theft, Legal Plan, Auto, Home and Pet – from DPSG Rewards.
3. Sign up for a Dependent Care FSA to set aside money for child or adult care expenses..

*The 2017 health screening applied to all employees and their covered spouses/domestic partners who were enrolled in a DPS medical plan (UnitedHealthcare, Kaiser Permanente or Excellus HMO) in 2017. New hires in 2017 and anyone newly enrolled in a DPS medical plan after Jan. 1, 2017, were not eligible for the 2017 screening.

Note: Eligibility may vary. Please refer to the Summary Plan Description, your collective bargaining agreement, or contact your local HR representative who will refer you to the appropriate document or vendor.