Confirmation Statement Annual Enrollment

VonErik Barren 45 Converse Drive Winchendon, MA 01475 US Confirmation 20231114152511 on Nov 14, 2023 3:25:11 PM EST Event on Jan 01, 2024

Please review your selections carefully to ensure these elections represent your benefits decisions for the 2024 plan year. This statement confirms the benefits you have selected for the 2024 calendar year. They will be effective as of the date displayed below. If you need to make any changes, please ensure you do so before no later than your stated enrollment deadline. For additional information or assistance, please contact Prime Benefits via email at Benefits@primecomms.com or by calling 281.275.6801. It is important that you review your selections carefully and confirm accurate deductions for benefits elected as of your first paycheck in 2024 that includes the Benefits you have elected. For record-keeping purposes, please print or download this.

Per Paycheck = \$98.80

This estimate is based on the cost of the plan today, it may change in the future. For example, when benefits that are shown as 'pending' change status.

You have elected the benefit plan options as listed below. If you are enrolling dependents in the medical, dental, vision or critical illness options for the first time, you must provide proof of verification before your coverage effective date. Please submit verification documents in the My Profile section on your ADP Dashboard no later than 30 days from the date your benefits become effective. Coverage will not be active for dependents until the required documentation is submitted.

PLANS PLAN COST



Medical \$54.72

Effective Date: Jan 01, 2024

Coverage: You



Voluntary Short Term Disability

Waived

\$0.00



Health Savings Account

Annual Contribution: \$780.00

Effective Date: Jan 01, 2024

\$30.00

Before-tax: \$30.00



Dental \$11.31

Effective Date: Jan 01, 2024

Coverage: You



Vision \$2.77

⊘ Vision Coverage Before-tax: \$2.77

Effective Date: Jan 01, 2024

Coverage: You

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PLANS		PLAN COST
	Basic Life Company Paid Basic Life: \$10,000.00 Effective Date: Jan 01, 2024 Beneficiaries: Neil'Xavier Barren-Tucker	\$0.00
	Optional Life Waived	\$0.00
(d)	Spouse Life Waived	\$0.00
1	Child Life Waived	\$0.00
0	Basic AD&D Company Paid Basic AD&D: \$10,000.00 Effective Date: Jan 01, 2024	\$0.00
	Short Term Disability Company Paid STD: \$360.00 Effective Date: Jan 01, 2024	\$0.00
(FA)	Basic LTD Company Paid LTD: \$1,560.00 Effective Date: Jan 01, 2024	\$0.00

Who Is Covered

VonErik Barren - You

Covered For: Medical, Dental, Vision

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Beneficiary Only

Neil'Xavier Barren-Tucker

Primary Beneficiary For: Basic Life 100%