

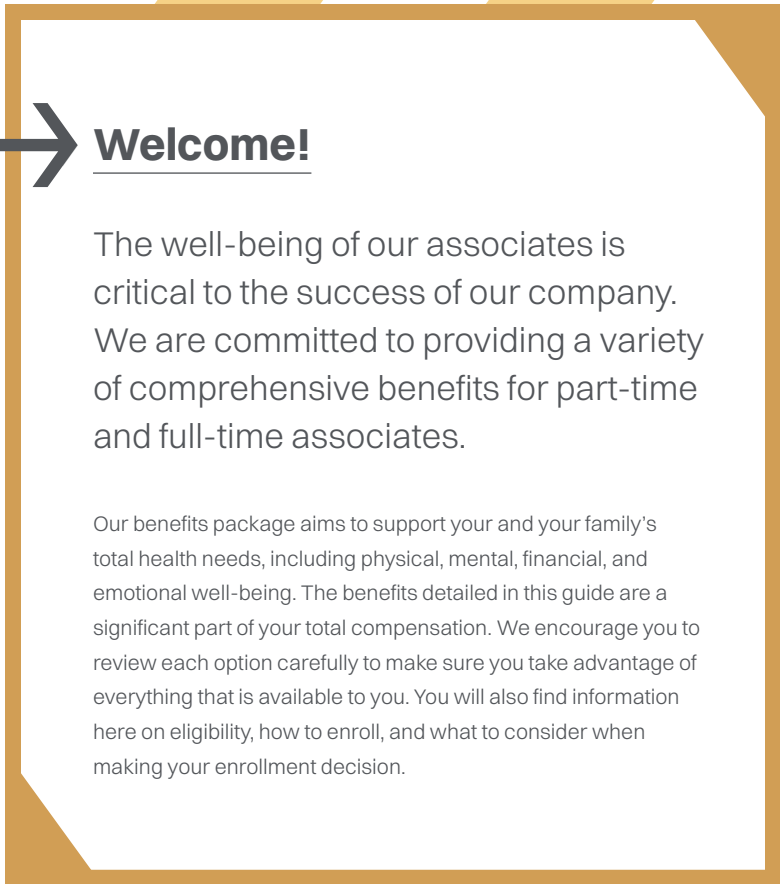


2027

Benefits Guide



Health
Mental Health
Wellness
Life & Disability
Voluntary
Financial
Time Off



Welcome!

The well-being of our associates is critical to the success of our company. We are committed to providing a variety of comprehensive benefits for part-time and full-time associates.

Our benefits package aims to support your and your family's total health needs, including physical, mental, financial, and emotional well-being. The benefits detailed in this guide are a significant part of your total compensation. We encourage you to review each option carefully to make sure you take advantage of everything that is available to you. You will also find information here on eligibility, how to enroll, and what to consider when making your enrollment decision.

Important Information Regarding This Guide

While every attempt has been made to make this guide as accurate as possible, full details of all provisions are not included. Full details of each program or plan are contained in the official plan documents, which are available to you. If a provision described in this guide differs from the provisions of the applicable plan document, the plan document prevails. This guide does not create a contract of employment between the Company and any individual. Bozzuto's Inc. reserves the right to terminate, amend, eliminate, or replace any program, plan, or benefit at its discretion and at any time to the extent permitted by law. The information in this guide is subject to change and should there be a discrepancy, the most recent policy or plan document shall govern.

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Benefits Overview

Eligibility

The benefits available to you depend on whether you are a part-time or full-time associate.

Full-Time Benefits

For active associates averaging 40 hours or more per week.

- Medical, Dental, Vision, and Prescription
- Flexible Spending and Health Savings Accounts
- Basic Life and Disability
- 401(k)
- Time Off and Leave
- Wellness Incentives
- Employee Assistance Program
- Voluntary Benefits

Part-Time Benefits

For active associates averaging fewer than 30 hours per week.

- 401(k)
- Employee Assistance Program
- Voluntary Benefits

Qualified Dependents

Certain individuals are eligible to be added to your coverage based on their relation to you. Qualified dependents include:

- Your legal spouse
- Dependent children up to age 26, including:
 - — Biological children
 - — Legally fostered or legally adopted children
 - — Stepchildren
 - — Disabled children, regardless of age

Dependent Eligibility Verification

Documentation is required to verify your dependents are eligible to receive benefits. You must provide proof of eligibility during your new-hire enrollment period or any time you add a dependent to your coverage who was not previously covered.

Dependent Eligibility Verification

Document Requirements

Dependent Type	Age	Document Options for Verifying Eligibility
Legal Spouse	N/A	Marriage certificate
Biological Child	Up to age 26	Government-issued birth certificate
Foster Child	Up to age 26	Foster care letter of placement
Adopted Child	Up to age 26	Adoption certificate Adoption placement agreement and petition for adoption
Stepchild	Up to age 26	Government-issued birth certificate and marriage certificate
Disabled Child	N/A	Government-issued birth certificate



Enrollment

When can you enroll in coverage?

New hires must enroll within the first 45 days following their date of hire. Benefits are effective (can be used) starting on the first day of the month following 30 days of employment (or a qualifying life event). The benefits you select as a new hire will remain in place until December 31 of the year you are hired.

When can you change or drop coverage?

After your selection of benefits as a new hire, you can only make changes—including adding, dropping, or changing plans—under the following circumstances:

- If you have a change in your **associate classification** (part-time to full-time or full-time to part-time)
- If you have a **qualifying life event**. Benefits are effective retroactively to the event date. Qualifying life events include:
 - — Marriage or divorce
 - — Birth or adoption of a child
 - — Change in employment status for you or your spouse
 - — Loss of or enrollment in other coverage
 - — You or your spouse become eligible for Medicare or Medicaid
 - — Death of an eligible dependent
- During annual **open enrollment**. Open enrollment occurs yearly in the fall and allows you to modify your benefits for the following year, regardless of whether you have had a qualifying life event. Benefits changed during open enrollment are effective January 1 of the following year.



How to Enroll

New Hires

Your store manager should provide you with initial benefits info and contacts, and the benefits team will send an email outreach with info as well once informed of new hire eligibility. If you have not received info on benefits either from your manager or the benefits team within your first two weeks please ensure inform the benefits team ASAP.

To make your benefit elections, you will need to enroll online through Ceridian Dayforce:

- 1 Log in to **dayforcehcm.com**.
- 2 Navigate to the dropdown menu in the upper left-hand corner.
- 3 Select **'Benefits'** and then **'Overview.'**
- 4 Under **'Enrollments,'** click on **'New Hire Enrollment.'**
- 5 Complete the steps that follow.

If you do not enroll within 45 days of your hire date, you will not receive benefits. Changes can only be made under the conditions listed (see "When can you change or drop coverage?", on the left).

Qualifying Events

To make changes to your benefits following a qualifying life event, log in to Dayforce and submit a life event form. You will have 30 days to submit the appropriate documentation in support of your event. For example, for a birth event, you will need to provide proof of birth. To drop your coverage, you will need to provide proof that you have obtained other coverage.



Health Benefits



Administered by Aetna
aetna.com



Available to
Full-time associates

Which plan is right for me?

Aetna High Deductible Plan with Health Savings Account (HSA)

This plan has the highest deductible but the lowest cost per paycheck. With this plan, you can save pretax income in a Health Savings Account. Money saved in an HSA can be used to pay for qualifying health-related expenses. The funds deposited roll over from year to year and are yours to keep, regardless of future plan changes.

Aetna Copay Plan

This plan allows for fixed copays, specialist and office visits, and more predictable health care rates.

Aetna Choice POS II Plan with Health Reimbursement Arrangement (HRA)

This plan provides access to the general Aetna network but has the highest cost per paycheck. The out-of-network deductible is the same as the in-network deductible and includes an HRA contribution from Adams Hometown Markets to lower the cost of care.



BENEFITS ALL IN

Bozzuto's has partnered with the healthcare consulting team at Benefits All In (BAI) to **expand and enhance** the insurance options available to all associates beyond the Aetna offerings. Over the years, BAI has helped thousands of families discover and navigate valuable resources they may not have known were available. Through this partnership, associates will have access to BAI's dedicated support tools, which advocate on their behalf, help them choose the best healthcare coverage. See page 34 for contact information.

MEDICARE - SENIOR ADVISOR

Are you Medicare eligible (65 or older) but don't know where to start? Bozzuto's has partnered with Senior Advisors to guide Bozzuto's associates and their families through the Medicare process. Need help? Call now! (908) 272-1970.





Plan Comparison

	Aetna HSA	Aetna Copay	Aetna Choice POS II
Annual In-Network Deductible	\$2,500 associate \$5,000 family	\$2,000 associate \$4,000 family	\$2,000 associate \$4,000 family \$500 with HRA associate \$1,000 with HRA family
In-Network Coinsurance	20% after deductible	20% after deductible	20% after deductible
Annual Out-of-Network Deductible	\$2,500 associate \$5,000 family	\$5,000 associate \$10,000 family	\$2,000 associate \$4,000 family
In-Network Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%
How to Use the Plan	You pay upfront costs until you meet your deductible, after which coinsurance covers 80% of services. Use the HSA to save pre-tax money to pay for services.	Copays apply to office visits and urgent care; the deductible is waived for these services. For other services, you pay up to your deductible, after which coinsurance covers 80% of services.	HRA funds are used first. Once HRA funds are exhausted, you pay up to your deductible, after which coinsurance covers 80% of services.

Health Reimbursement Account (HRA)

Every year, Adams Hometown Markets contributes funds into a Health Reimbursement Account (HRA) for associates who are enrolled in the Choice POS medical plan. HRA funds are used to pay 100% of eligible in network health care expenses. Once an associate's HRA account is exhausted, each associate is responsible for paying all expenses up to the annual out-of-pocket maximum. When the associate reaches their deductible, the insurance will switch to 80% coinsurance coverage for in-network expenses. Aetna tracks and manages the payment of expenses through the HRA.

HRA Rollover

For 2027, unused HRA funds will automatically roll over into the following year's account, and balances will reflect the amount carried over.

Your Deductible

Your deductible is the amount you pay each year before your medical plan begins to pay. You can use the HRA fund to help pay a portion of your deductible.

Adams Hometown Markets Annual HRA Contribution

Associate Only	Associate + Dependent
\$500	\$1,000

* Amount is prorated depending on date of hire

You can check your balance or available funds by creating an account and logging in to aetna.com.



In-Network Plan Benefits

	Aetna HSA	Aetna Copay	Aetna Choice POS II
Annual In-Network Deductible	\$2,500 associate \$5,000 family	\$2,000 associate \$4,000 family	\$2,000 associate \$4,000 family
Coinsurance	20% after deductible	20% after deductible	20% after deductible
Annual Out-of-Pocket Limit (Includes Deductible)	\$7,000 associate, \$14,000 family	\$7,000 associate, \$14,000 family	\$7,000 associate, \$14,000 family
HRA Annual Employer Contribution	N/A	N/A	\$500, associate \$1,000, family
Preventive Care	Covered at 100%, deductible waived	Covered at 100%, deductible waived	Covered at 100%, deductible waived
Office Visit/PCP	Deductible and coinsurance apply	\$25 copay deductible waived	Deductible and coinsurance apply
Specialist Office Visits	Deductible and coinsurance apply	\$40 copay deductible waived	Deductible and coinsurance apply
Mental Health Office Visits	Deductible and coinsurance apply	\$40 copay deductible waived	Deductible and coinsurance apply
Walk-In Clinics	Covered at 100% after deductible at CVS MinuteClinics and HealthHubs. Deductible and coinsurance apply	Covered at 100% at CVS MinuteClinics and HealthHubs. \$25 at all other providers	Covered at 100% at CVS MinuteClinics and HealthHubs. Deductible and coinsurance apply
Urgent Care	Deductible and coinsurance apply	\$40 copay deductible waived	Deductible and coinsurance apply
Emergency Room	Deductible and coinsurance apply	\$150 copay after deductible	Deductible and coinsurance apply
Inpatient Hospital	Deductible and coinsurance apply	20% after deductible	Deductible and coinsurance apply
Outpatient Surgical	Deductible and coinsurance apply	20% after deductible	Deductible and coinsurance apply
Lab/X-Ray	Deductible and coinsurance apply	20% after deductible	Deductible and coinsurance apply
Complex Imaging (MRI, CAT, or PET)	Deductible and coinsurance apply	20% after deductible	Deductible and coinsurance apply
Physical Therapy	Deductible and coinsurance apply	20% deductible waived	Deductible and coinsurance apply
Generic Drugs (In-Network Only)	20% after deductible	20% deductible waived	20% after deductible
Brand-Name Drugs (In-Network Only)	20% after deductible	20% deductible waived	20% after deductible

Out-of-Network Plan Benefits

	Aetna HSA	Aetna Copay	Aetna Choice POS II
Annual Out-of-Network Deductible	\$2,500 associate \$5,000 family	\$5,000 associate \$10,000 family	\$2,000 associate \$4,000 family
Coinsurance	40% after deductible	40% after deductible	40% after deductible
Annual Out-of-Pocket Limit	\$10,000 associate \$20,000 family	\$10,000 associate \$20,000 family	\$10,000 associate \$20,000 family



Medical & Dental Combined Premium Rates

Weekly payroll deductions. See page 26-27 for more information on qualifying for credited rate incentives.

Spousal Surcharge: If you enroll your spouse in Bozzuto's medical plan, a spousal surcharge of **\$46.15 per week** may apply. This amount is taken from your pay **before taxes** and is added to your regular medical plan contribution.

The surcharge applies when your **spouse could get medical coverage through their own employer** but chooses not to and instead enrolls in Bozzuto's plan. The surcharge does not apply if your spouse:

- Is not employed
- Is self-employed and does not have access to employer-sponsored medical coverage
- Is not eligible for medical coverage through their employer
- Does not otherwise have access to employer-sponsored medical coverage

If your spouse gains or loses employer-sponsored medical coverage outside of open enrollment, you must notify Human Resources **within 30 days**. If you do not report the change in time, you may need to wait until the next open enrollment period or until you experience another qualifying life event before making changes to your coverage.

Aetna HSA

Gross Income	Associate		Associate + Spouse		Associate + Child(ren)		Associate + Spouse + Child(ren)	
	Standard	Credited	Standard	Credited	Standard	Credited	Standard	Credited
< \$49,999	\$43.82	\$39.44	\$109.81	\$99.91	\$69.14	\$61.44	\$116.41	\$105.41
\$50,000-\$74,999	\$53.65	\$48.15	\$126.22	\$114.12	\$85.55	\$75.65	\$134.14	\$120.72
\$75,000-\$124,999	\$63.46	\$56.86	\$136.04	\$122.85	\$95.36	\$84.36	\$142.64	\$128.34
>\$125,000	\$70.06	\$60.60	\$142.64	\$126.50	\$101.96	\$88.20	\$149.24	\$132.21

Aetna Copay

Gross Income	Associate		Associate + Spouse		Associate + Child(ren)		Associate + Spouse + Child(ren)	
	Standard	Credited	Standard	Credited	Standard	Credited	Standard	Credited
< \$49,999	\$52.62	\$47.13	\$120.80	\$108.71	\$83.43	\$73.79	\$135.11	\$111.76
\$50,000-\$74,999	\$64.65	\$56.95	\$141.62	\$127.24	\$104.25	\$92.15	\$157.02	\$141.62
\$75,000-\$124,999	\$76.66	\$67.86	\$153.64	\$138.24	\$116.26	\$103.06	\$167.94	\$148.39
>\$125,000	\$83.26	\$72.02	\$160.24	\$141.72	\$122.86	\$106.27	\$174.54	\$154.09

Aetna Choice POS II

Gross Income	Associate		Associate + Spouse		Associate + Child(ren)		Associate + Spouse + Child(ren)	
	Standard	Credited	Standard	Credited	Standard	Credited	Standard	Credited
< \$49,999	\$55.68	\$49.34	\$123.01	\$110.91	\$85.64	\$75.74	\$137.31	\$124.11
\$50,000-\$74,999	\$67.84	\$60.25	\$143.82	\$129.52	\$106.45	\$94.35	\$159.22	\$142.72
\$75,000-\$124,999	\$79.79	\$71.16	\$155.84	\$140.44	\$118.46	\$105.26	\$170.14	\$152.54
>\$125,000	\$86.39	\$74.73	\$162.44	\$143.63	\$125.06	\$108.17	\$176.74	\$155.99



How to Save Money On Your Plan



For non-emergency care, **avoid the emergency room** — it will cost you the most money out of pocket. Try Teladoc for after-hours 24/7 care or MinuteClinic® for walk-in treatment seven days a week with qualified doctors at little or no cost, depending on your plan. Both offer more affordable options to get care.

You have several affordable and convenient options for immediate care. Keep this chart handy to help you make a smart choice the next time you need medical care. You may save time and money.

In-Network Providers

You will save the most money by staying in-network.

To find in-network providers and facilities near you:

- Log into [Aetna's directory](#) and search by location.
- Use the Aetna Health app (see page 16).
- CVS Virtual Care for telehealth appointments (see page 14).
- CVS Minute Clinics for in-person appointments.

Where to Go For Care

	Care From Anywhere	In-Person Options For Care			
	Non-Emergency	Non-Emergency	Non-Emergency	Urgent	Emergency
Care Options	CVS Virtual Primary Care® CVS VPC provides access to Primary Care doctors, 24/7 on-demand care and mental health support services.	Primary Care Physician (PCP) Your PCP is the best option for in-person, non-emergency care. To find in-network PCPs near you, log in to your member website.	MinuteClinic® MinuteClinic offers convenient care 7 days a week from certified nurse practitioners and physician assistants at select CVS Pharmacy® and Target stores nationwide.	Urgent Care Centers Urgent care centers provide quick care for serious, but not life-threatening, situations. Many urgent care centers offer imaging, X-ray, and lab services.	Emergency Room The emergency room (ER) is for emergencies that can permanently impair or endanger your life. Using the ER for non-life-threatening issues can be very costly and probably means a very long wait time.
Average Cost to You	\$ ■ On-Demand: \$55 ■ Mental Health: \$85-\$215 ■ VPC: \$99-\$144 Costs varies depending on appointment type, e.g., initial consult, evaluations, or follow-up visits.	\$\$ ■ Pay your copay at the appointment, if applicable. ■ Pay your estimated patient responsibility at time of the visit, if applicable. ¹ ■ You may be billed for any balance.	\$ ■ No-cost or low-cost access to all covered services ² ■ Pay your estimated patient responsibility at time of the visit, if applicable. ³ ■ You may be billed for any balance.	\$\$\$ ■ Pay your copay at the time of the visit, if applicable. ■ Pay your estimated patient responsibility at the time of the visit, if applicable. ³ ■ You may be billed for any balance.	\$\$\$\$ ■ Pay your copay at the time of the visit, if applicable. ■ Pay your estimated patient responsibility at the time of the visit, if applicable. ³ ■ You may be billed for any balance.
When to Use	■ Allergies ■ Flu ■ Bronchitis ■ Sinus infection ■ Food poisoning ■ Rash ■ Poison ivy & oak ■ Sunburn ■ Sore throat ■ Headache & migraine ■ Eye infection and more ■ Primary Care appointments ■ Routine wellness exams ■ Chronic condition management ■ Mental Health support	■ Physicals (wellness, screening) ■ Vaccinations & injections ■ Chronic condition management (heart disease, diabetes, arthritis, etc.) ■ Acute care (sinus infections and injuries) Urgent care may be available by appointment.	■ Minor illnesses & injuries ■ Screenings & monitoring ■ Skin conditions ■ Vaccinations & injections ■ Wellness & physicals ■ Women's services ■ Travel health Visit minuteclinic.com to confirm services available at your location.	■ Back & neck pain ■ Cuts that require stitches ■ Minor burns ■ Flu ■ Sprains ■ Fractures ■ Bronchitis ■ Headaches and more	■ Chest pain ■ Severe abdominal pain ■ Trouble breathing ■ Uncontrollable bleeding ■ Symptoms that may put your life at risk
Availability	24 hours a day 7 days a week for on-demand care 7 days a week including evenings for mental health	Weekdays during business hours (may be open extended hours and/or Saturdays)	7 days a week (including evenings and weekends)	Many open 7 days a week with extended hours	24 hours a day 7 days a week 365 days a year
How to Access	www.cvs.com/virtualcare To schedule your on-demand visit, Primary Care appointment, or Mental Health visit	By appointment only	At select CVS Pharmacy and Target stores Schedule an appointment at minuteclinic.com or through the CVS Pharmacy app .	Walk-in	Walk-in

¹ For a general medical visit only. Dermatology and mental health services are a separate buy-up.

² Lab, tests, and additional services may result in additional charges. Labs and tests cannot be purchased separately and are only performed as part of a standard visit.

³ Applies only to covered services at MinuteClinic. Video visits are not a covered service under this benefit. Such members should refer to their benefits plan documents in order to determine coverage and applicable cost share for walk-in clinic benefits and services, as applicable. Visit **minuteclinic.com** for age and service restrictions.





CVS Virtual Care

Get quality virtual care that fits into your busy life

From wellness visits to quick care, we've got you covered. Easily schedule a virtual care appointment from anywhere. You can use CVS Health Virtual Primary Care™ in addition to your traditional network of providers. Access is included in your medical plan, made available through Aetna®, a CVS Health® company because **healthier happens together™**.



On-demand care

Access 24/7 quick care for minor illnesses and injuries via laptop or phone



Mental health services

Schedule mental health counseling 7 days a week including evenings, by appointment



Primary care services

Book a new patient visit within days with your selected provider

Use CVS Health Virtual Primary Care™ for the following:



On-demand care

Available to adults and children over 18 months

- Coughs, colds, flu and strep
- Joint, head, and stomach pain
- Minor skin conditions including skin infections, rashes, insect bites and cuts
- Infections (ear, sinus, UTI)
- Medication refills



Mental health services

Available to adults ages 18 and up

- Anxiety and mood disorders
- Depression screening
- Medication management
- Support with stress, life adjustments and conflict resolution
- Sleep and related health behaviors



Primary care services

Available to adults ages 18 and up

- Chronic illnesses (asthma, diabetes)
- Sick care
- Wellness and annual health assessment
- Follow-ups from in-person visits
- Medication adjustments and refills

Some visits cost as low as zero dollars*

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



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



About Angelina

Based in GA, special interest in Internal Medicine and Primary Care where she can establish a

Schedule a virtual primary care visit quickly and easily

You get to choose your provider and enjoy flexible appointments that work with your busy lifestyle.



Get started today

Scan the QR code or go to **CVS.com/virtual-care** to register and schedule an appointment.

*Members enrolled in qualified high-deductible health plans must meet their deductible before receiving covered non-preventive services at no cost-share.

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

CVS Health Virtual Primary Care™ services are only available in the USA. Limitations may apply based on services and location.

Aetna® is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).

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.

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.

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1191151-08-01



Aetna Member Portal



Administered by Aetna
aetna.com



Available to
Full-time associates

Manage your benefits, connect to care, and handle claims — from anywhere. To get started, download the Aetna HealthSM app through the Apple App or Google Play store, log in to the Aetna member website, or text “GETAPP” to 90156 for a link to the app. Message and data rates apply.

Connect with Care

Find in-network doctors, including those offering virtual care services, as well as walk-in clinics and urgent care facilities near you.

Manage Prescriptions

Learn about drug information and side effects, estimate drug costs, find a pharmacy, and refill prescriptions.

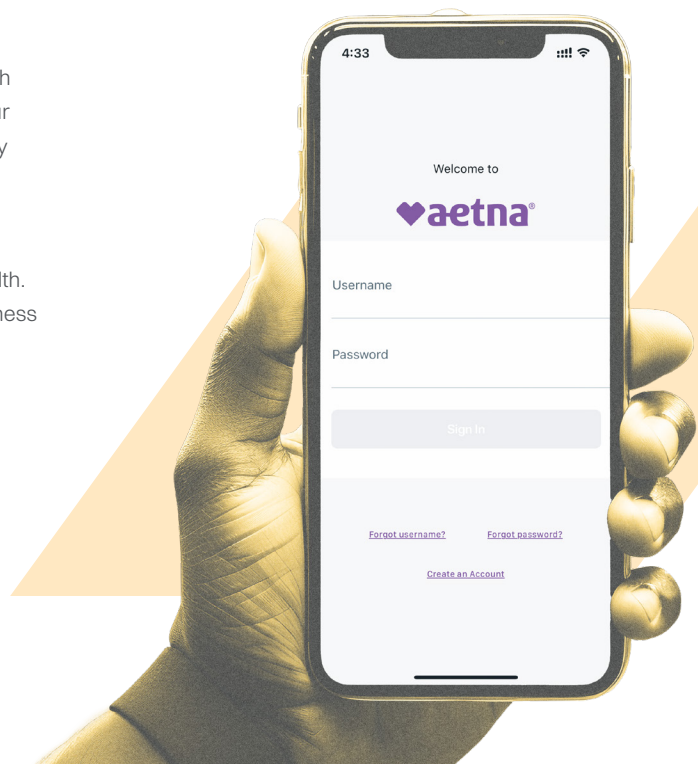
See Coverage and Costs

Track spending for you and your family. See how much is covered by your plan and where you stand with your deductible and out-of-pocket maximum. View and pay claims and see the breakdown of your costs.

Stay Healthy

Get personalized reminders to help improve your health. Take a health survey, try health coaching, start a wellness program, and get treatment options.

New enrollees will receive their ID cards two to three weeks after their enrollment is submitted. Remember that benefits are effective the first day of the month following 30 days of employment. If you need to use your coverage before your ID card arrives, contact Aetna at 1.800.962.6842.





Prescription Drugs



Administered by Aetna

aetna.com



Available to

Full-time associates

Aetna Standard Open Formulary

Through our Aetna Medical plans, you are provided with the Standard Formulary prescription drug coverage. The full cost of a prescription drug will be applied to the deductible before any benefits are considered for payment under the pharmacy plan. The Aetna Standard Formulary program assigns each prescription into one of the following tiers:

- 1 Generic
- 2 Brand Preferred
- 3 Brand Non-Preferred



Use generic drugs whenever possible.

Generic drugs contain the same active ingredients as the brand-name drug and are subject to the same food and drug administration (FDA) standards for quality.

Maintenance Choice

Each year, over 62% of prescriptions filled are considered maintenance medications. To ensure you are getting your medications at the lowest cost, we have implemented this new program that now requires all maintenance medications to be filled through mail order or at a CVS/Target retail pharmacy location (where you will get the mail order price).

Over the Counter Health Solutions

OTCHS provides \$55 per quarterly allowance to use towards health and wellness products at most CVS pharmacies. Create your account on www.otchs.com.





Dental Benefits



Administered by Aetna
aetna.com



Available to
Full-time associates

Dental coverage is included with Aetna medical plan coverage — you pay the same rate for medical and dental combined. This is designed to encourage good preventive care to help you maintain healthy teeth and gums. Your dental benefits will help you pay for a broad range of dental care and supplies. You can also reduce your out-of-pocket costs by using dental providers who participate in the dental care network. Preventive care is covered with no deductibles. Basic and major dental care is covered with a deductible and cost share. Read a detailed summary on [Aetna's website](#).

Aetna Dental Passive PPO Benefits

Service Category	In-Network Coverage
Deductible	\$50, individual \$150, family
Preventive & Diagnostic	Aetna pays 100%
Basic Restorative (after deductible)	Aetna pays 80%
Major Restorative (after deductible)	Aetna pays 60%
Annual Benefit Maximum	\$1,500
Orthodontia (up to age 19)	Aetna pays 50% \$1,000 lifetime max



Find a Provider

It's easy to find out if your dentist is in the Aetna Dental PPO network. Visit [aetna.com](#) to check for in-network dentists by using the online directory. You can also access all your plan information, review your claims, and find cost-saving tools through your secure member account.



A dentist who is "out-of-network" means the provider hasn't agreed to negotiated rates. The Aetna Passive PPO plan does not have out-of-network coverage.



Vision Benefits



Administered by VSP
vsp.com

FT

PT

Available to
Full-time and part-time associates

New this year! Adams is proud to offer vision insurance designed to provide quality vision services and products at a reasonable cost. The Bozzuto's vision care plan is designed to provide quality vision services and products at a reasonable cost. The vision care plan is administered by VSP, a leading national administrator of vision care programs. If you elect coverage, you'll have access to care from great eye doctors, quality eye wear, and the affordability you deserve, all at low out-of-pocket costs.

When you arrive for your appointment, tell your provider that you have VSP. There is no ID card necessary. If you'd like a card as a reference, you can print one on **vsp.com**.

VSP Vision Weekly Contribution

Associate Only	Associate + Spouse	Associate + Child(ren)	Associate + Family
\$1.26	\$2.03	\$2.05	\$3.30

VSP Designer Benefits

Service Category	In-Network Coverage
WellVision Eye Exam (once per calendar year)	\$10 copay
Frames (once per every other calendar year)	<p>\$25 copay. Choose from a wide selection of frames.</p> <p>\$130 frame allowance (\$150 allowance for featured brands), plus 20% off balance</p>
Lenses (once per calendar year)	Included in \$25 frame copay. Single vision, lined bifocal, and lined trifocal lenses
Contact Lenses (in lieu of eyeglasses; once per calendar year)	\$130 allowance contact lens exam, fitting, and evaluation included





Flexible Spending Accounts



Administered by Inspira
inspirafinancial.com



Available to
Full-time associates

Flexible Spending Accounts (FSAs) allow you to set aside money directly from your paycheck before taxes are taken out. FSAs are a great way to save money for eligible expenses and to lower your taxable income. Adams Hometown Markets has partnered with Inspira, in order to provide you with FSA management. You are able to use your FSA debit card for all eligible purchases at eligible merchandise locations.

There may be times during a plan year when Inspira will ask you to send documentation for a card purchase. If you receive a request, make sure to respond promptly. You can sign up to receive email notifications to let you know when Inspira needs documentation from you. In addition to the fully functional debit card, you have more flexibility regarding when and where to use your debit card. The plan will not automatically withdraw your FSA funds for any out-of-pocket eligible expenses. You choose what, where, and when to use your FSA funds.



Estimate carefully with an FSA. **FSAs are "use-it-or-lose-it" accounts**, which means you will forfeit any amount left in the account at the end of the plan year. There is a grace period that provides you with an additional 2½ months after the close of the plan year to incur eligible FSA expenses that will be reimbursed from your prior year's remaining balance.

Must re-enroll into FSA to maintain the benefit.



Health Care FSA

FSAs allow you to pay for eligible expenses with pre-tax dollars. The Health Care FSA may be used for reimbursement of eligible medical, dental, and vision care expenses incurred by you and your eligible dependents.

- The minimum annual deposit to the FSA is \$100, up to the IRS maximum.
- Learn more about FSAs in our [Employee Support Center](#).

Dependent Care FSA

The Dependent Care FSA (DCFSA) allows you to pay for eligible childcare expenses with pre-tax dollars. The DCFSA provides you with a reimbursement for childcare expenses for dependent children under the age of 13 during the calendar year.

- The minimum annual deposit to the DCFSA is \$100, with a maximum of \$7,500 for households filing jointly or for single individuals, and \$3,750 for married couples filing separately. Funds are not front loaded, reimbursement depends on amount contributed.

→ Manage Your FSA

You can easily manage your FSA account(s) online.

- 1 Go to inspirafinancial.com.
- 2 Click **'Sign In.'**
- 3 If you are a new user, click **'Create Your Profile'** under **'Member.'**

Once logged in, you can manage your account balance, deposits, request reimbursement, and upload documentation.





Health Savings Account



Administered by Fidelity
netbenefits.com



Available to
Full-time associates

A Health Savings Account (HSA) is a separate bank fund that allows you to put aside pre-tax dollars to pay for medical expenses such as deductible, coinsurance, medications, dental, vision, or other healthcare expenses. Individuals can contribute up to \$4,500, family plans can contribute up to \$9,000 in 2027. If over the age of 55, individuals can contribute an additional \$1,000.

You're eligible to open and contribute to an HSA if:

- You're covered by an HSA-high deductible health plan (you must enroll in the HSA Medical plan).
- You're not enrolled in Medicare.
- You cannot be claimed as a dependent on someone else's tax return.

Here are three key things to know about HSAs:

- **They offer a triple tax advantage:** Your contributions are pre-tax, your withdrawals are tax-free, and the money grows tax-free.
- **The funds roll over if unused and are yours to use and keep.** You can use the funds to pay for any health expenses as needed or save the funds to invest. Funds can also be used to pay yourself back for any health expenses you paid out of pocket.
- **The contributions are flexible.** Contributions are made directly from your paycheck, and you can even change the amount you contribute during the year. You will get a debit card to use, or you can access your account online to submit reimbursement.



Get answers to frequently asked questions about Health Savings Accounts at fidelity.com/go/hsa/faqs.

How It Works

- 1 Log in to **dayforcehcm.com** and select the HSA Medical plan (remember you can only enroll as a new hire, during a life event, or during open enrollment).
- 2 Under **'Health Savings Account,'** select a yearly amount to contribute. This amount will be split up by the remaining pay weeks in the year—this will be your weekly payroll deduction. (Consider a higher contribution at the beginning of the year since there are more pay periods.)
- 3 Next, log in to **fidelity.com/go/hsa/why-hsa** and click **'Open an HSA'** to create an HSA account. This will ensure there is a fund where your payroll contributions can be deposited. If you don't open up an actual account, your payroll deductions will not be available in your account.

If you want to change your contribution midyear, you can fill out the health savings account enrollment in benefits. You can change to a higher or lower amount, and this will then update your weekly deduction depending on the pay periods remaining.



Hinge Health



Administered by Aetna
aetna.com



Available to
Full-time associates

Provides personalized care plans to help you accomplish your health goals related to musculoskeletal (back, muscle, and joint) health.

How does Hinge Health help?

They assess your condition and match you to a care team to help personalize your treatment.

Who is my care team?

Depending on your treatment, your care team could include a physical therapist and a health coach. You will keep the same care team throughout your treatment.

What could be included in my treatment plan?

- 1 **Access to the Hinge Health app** with guided exercise therapy
- 2 **Virtual visits** with members of your care team
- 3 **Kit with a tablet and tools** to assist in guiding exercise therapy

How much does the program cost?

It's free for eligible participants. This includes access to your care team, the Hinge Health app, and any materials that we send to assist in your care.

Eligibility: Employees and dependents 18+ enrolled in an Aetna® medical plan through Aetna are eligible. *Participants with chronic knee and back pain after 12 weeks. Bailey, et al. Digital Care for Chronic Musculoskeletal Pain: 10,000 Participant Longitudinal Cohort Study. JMIR. (2020). Aetna has partnered with Hinge Health to provide services that are included in the Aetna Back and Joint Care Program. This program does not replace formal physical therapy in office prior to surgery.

→ Apply Today

No referral or diagnosis needed. Scan the QR code to learn more or apply at

hinge.health/aetnaem

855.902.2777



Aetna Personal Health Solutions



Administered by Aetna
aetna.com



Available to
Full-time associates

Aetna Personal Health Solutions (APHS) is designed to **provide personalized support based on your unique health needs and learning style**. You'll have access to multiple solutions for each condition, with members connected to resources and programs that best fit their individual needs. You have access to a dedicated call center is focused on helping you navigate your benefits and connect with the right resources. The program also works closely with Aetna's Care Management team to provide coordinated support, making it easier to get the guidance you need when you need it.

!

The five points of wellness that APHS tends to are **weight management, mental well-being, musculoskeletal, digestive health and women's health.**



Employee Assistance Program



Administered by Resources for Living
resourcesforliving.com

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Available to
Full-time and part-time associates

The Employee Assistance Program (EAP) offers assistance and support for a variety of life's challenges, including mental well-being, counseling, work and family issues, legal or financial advice, and finding care. Through the EAP, you also have access to many online webinars and articles.

Mental & Emotional Well-Being Support

- Three free counseling sessions per issue, per year. These sessions can be conducted face-to-face, online via video chat, or by phone.
- Common uses include grief support, stress management, work/life balance, anxiety, depression, personal development, and substance abuse.
- EAP is extending its 3 free counseling sessions with Talkspace. Talkspace provides additional support for private, convenient mental health support. Talkspace can be used for counseling, therapy, and medication services from an iOS, Android, or web. Talkspace's three free visits can also be text to chat for three weeks.

Daily Life Resources

- Childcare, summer camp, elder care, and special needs support
- Home repair, household services, and community resources

Legal Services

- Estate planning, will preparation, mediation, and real estate transactions
- General law, family law, and court law assistance

Financial Services

- Budgeting, retirement, financial planning, credit issues, college saving, and mortgage support



Reach Out Today

Resources for Living is a confidential, 24/7 Employee Assistance Program available at no cost to associates and all members of their households.

888.238.6232 (TTY: 711)

resourcesforliving.com/login

- Username: BOZZUTOS
- Password: EAP



Wellness Incentive Plan



Aetna/Nectar



Available to

Full-time associates

All Aetna enrolled employees and dependents can earn up to \$800 in gift cards for completing healthy activities from January 1 to December 31, 2027

Two ways to earn money!

1 Aetna Health Your Way:

Earn up to \$100 per year by completing well-being activities. You can review your progress and redeem gift cards in the Reward Center.

2 Rewards through Nectar:

In addition to Aetna's Health Your Way, the Benefits team will reward health actions via Nectar points every month.



How It Works

- The Benefits Team will calculate the amount earned for each activity for every associate on the reward list each month and allocate rewards through the Nectar platform.
- Nectar is our recognition platform, giving every employee a place to celebrate great work, milestones, and wellness incentives. Whether it's a shoutout from a teammate, a birthday, or a service anniversary, Nectar makes recognition visible and easy. Gift cards can be redeemed through December 31, 2027.

2027 Reward Program & Activities

Activity	Description	Reward	Limit	Redeem with
Annual well visit	Make sure you and your covered spouse complete a yearly check up with your primary care provider	\$200 associates \$100 for dependent spouse	1 time per year	Nectar
Complete preventive screenings	Eligible screenings include colonoscopy, mammogram, pap smear, cancer screenings, and biometric screening with Quest (Associates receive a reward for one Quest screening only, not on re-screenings)	\$100	4 times per year	Nectar
Log in to Aetna's new Platform- Health Your Way and complete an activity	Eligible activities: fill out wellbeing questionnaire, join a personal challenge, view a wellness webinar or complete a mental health check in	\$50	2 times per year	Aetna Health Your Way



Credited Rate Incentive



Administered by Quest Diagnostics
my.questforhealth.com



Available to
Full-time associates

We recognize paying for and using your health plan can be costly. We want to encourage associates to invest in their health, so we are offering an opportunity to pay less per paycheck by taking healthy actions to get a screening.

When does the program start?

The program effective date is January 1, 2027.

Who qualifies?

Any associate who is enrolled in one of the three health plans with Aetna in Dayforce.

What is required?

Associates enrolled in Aetna medical must complete a biometric screening and pass three of the five factors tested.

What is a biometric screening?

A biometric screening gives you an overview of your overall health and can help identify potential health risks before they become fully fledged.

Biometric screenings include a blood draw and measure the following factors: cholesterol-HDL, triglycerides, glucose (blood sugar), blood pressure, and waist circumference.

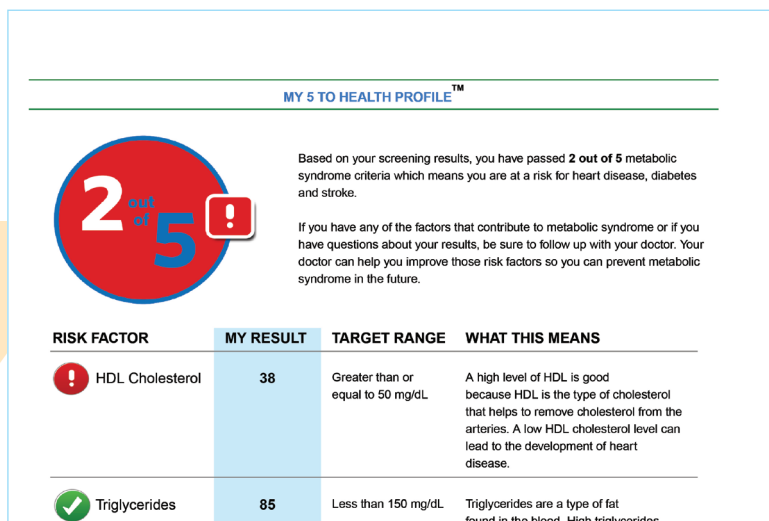
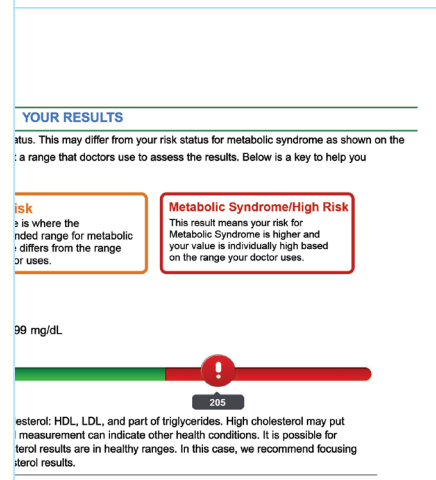
To learn more, visit my.questforhealth.com/mobile/info/faq.

When do I need to complete my screening?

You can sign up and complete a screening once your medical insurance becomes effective. The month of January will be a grace period for employees to get their biometric exam to renew for the rest of the year.

How will results be sent?

Results will be uploaded to my.questforhealth.com within one to three business days of an onsite or patient service center screening. Results are also mailed to home addresses within two to three weeks.





How do I keep the credited rate?

Teammates will keep their credited rate for the month of January, allowing time to complete the Quest biometric screening. If an associate does not complete the screening in January or does not pass it, their rate will revert to the standard rate on February 1.

How do I know I passed?

Results in your My 5 to Health profile will show you a summary of how many factors you pass. Each factor will also have a detailed result, target range, and information on what it means for you. See the example on previous page.

When will I get the lower rate?

The benefits department will get a weekly pass/fail report from Quest of all associates who complete a screening at a patient service center or following an on-site event. The benefits team will not see any details of the results. You will show as a "pass" if you fall into the appropriate range for three of the five factors. The lower rate will be updated on your next available payroll following receipt of results. To qualify for a lower rate in 2027, associates will need to re-certify with a new screening. The lower rate will be in place thorough December 31, 2027.

What if I don't pass?

If you do not pass, you will still qualify for a \$100 reward just for completing the screening. You will have the ability to re-screen three times after your first attempt. There must be 90 days between screenings in 2027, whether that is on-site or via a patient service center.



Call the Participant Call Center if you have questions or issues, or for assistance with the registration or scheduling process.

Phone: **1.855.6.BE.WELL** (1.855.623.9355)

Monday – Friday: 6 a.m. – 6 p.m. Eastern

Saturday: 6:30 a.m. – 1 p.m. Eastern

→ Complete Your Screening

You will have three convenient options for completing your screening this year. It is recommended to complete your screening in January or as soon as possible as that will enable those who pass to achieve a lower rate all year. New hires should complete your screening the month after you become eligible for and enroll in benefits.

Quest Diagnostics Patient Service Center (PSC)

Schedule a screening at a PSC near you. First-time users *must* register first.

- Participant Website: **my.questforhealth.com**
- Registration Key: **Bozzutos2027**
- Unique ID: **Aetna ID** (can be found on insurance card; Include "W" and 9-digit number with no spaces; for example, "W123456789")

On-Site Screenings

Attend an on-site biometric screening in either NDC-Cheshire or NHDC-North Haven. There will be one on-site screening at NDC and NHDC in during the January grace period. Specific event details and sign-up will be provided by the benefits department via email, Dayforce Hub, and the ESC.

Physician Form

A form can be downloaded from Quest's wellness engine for those who prefer to work through their provider. The primary care physician must fill out the form, and participants are responsible for uploading their form to Quest online via the wellness engine. **Note: Griffin Hospital forms will no longer be accepted.**



Life & Disability



Administered by The Hartford
thehartford.com

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Available to
Full-time associates

Life Insurance

Basic Life Insurance

The effective date is the first of the month following your first 30 days of employment.

Adams Hometown Markets helps you protect your beneficiaries by providing free group term life insurance coverage, with a benefit that is equal to one times your annual base salary, rounded to the nearest \$1,000, to a maximum of \$350,000. If eligible, you are automatically enrolled in this coverage at no cost to you.

- Salary associates receive basic life insurance at no cost at 2x their annual salary up to a maximum of \$400,000.
- Full-time Hourly associates receive basic life insurance at 1x annual salary up to a max of \$400,000.

Disability



Disability approvals are **contingent upon proper medical certification**. Please contact Human Resources for more information.

Short-Term Disability

- Salary associates receive up to 12 weeks of pay (four weeks at 100% each, 4 weeks at 80% each and 4 weeks at 60% each) after one year of service.
- Hourly associates have disability available through the state of New York, Rhode Island, Connecticut and Massachusetts. Check state guidelines for how to apply and notify HR benefits team about any disability applications.
- Please note that state paid leave or disability benefits (i.e CT PFL) will be primary and will offset company provided STD.

Long-Term Disability

Long-term disability benefits are available to all hourly and salaried full-time associates after a 90 day waiting period. The plan pays 60% benefits with a maximum monthly benefit of \$5000.





Voluntary Benefits



Available to

Full-time and part-time associates

Aetna Voluntary Benefits

Supplemental benefits are available to all associates averaging 15 hours or more per week in 2027. These new benefits are portable, have affordable group rates, and include seamless claims integration with Aetna's medical. If you are not enrolled in medical, the online site still makes it simple to start a claim.

Aetna Accident Plan

Aetna Accident Plan pays you cash for the treatment of covered accidental injuries.

Aetna Critical Illness Plan

Aetna Critical Illness Plan pays you cash for the diagnosis of a covered illness or condition like a heart attack, a stroke, cancer, and more.

Aetna Hospital Indemnity Plan

Aetna Hospital Indemnity Plan pays you cash for a covered hospital stay.



Manage Your Plan

You have two easy ways to manage your plan:

- 1 The member portal at **myaetnasupplemental.com**
- 2 From your app store, download The "My Aetna Supplemental" mobile app, where you can:
 - View coverage and plan documents
 - Submit and track claims
 - Sign up for direct deposit of benefits
 - Upload documents on the portal or take a picture on the mobile app
 - Download forms

Chubb Voluntary Benefits

Chubb Guaranteed Life with Long-Term Care insurance

This plan combines two powerful benefits — life insurance to help protect your family's lifestyle, and long-term care (LTC) benefits if you need home health care, assisted living or nursing care in the future. If you need long-term care, you can accelerate your Death Benefit to access cash benefits. Even if you receive your entire Death Benefit early to help pay for long-term care, our plan will restore up to \$100,000 of your Death Benefit for your beneficiaries.

Advantage DNA

Advantage DNA by Chubb Benefits makes it easy to access cutting-edge precision cancer services not typically covered by major medical plans to help improve cancer outcomes. This program is designed to help save lives, supporting employees with personalized cancer support, treatment recommendations, and an insurance benefit if diagnosed with a covered cancer.



Financial Health

**Available to**

Full-time and part-time associates

401(k) Retirement Plans

Adams Hometown Markets is pleased to offer 401(k) retirement plans through Fidelity that allow associates to set aside money to save for retirement.

Eligibility

Associates 21 years or older who are eligible to contribute the first of the month following 90 days of service.

Associates can contribute to a pre-tax 401(k) or a Roth 401(k). Associates can also make after-tax elections under the plan.

Company Match

We offer matching contributions to your plan at \$0.24 for every dollar contributed up to 6% of your annual income.

Auto Enrollment

Associates are automatically enrolled in the pre-tax plan at a 3% salary deferral. This is to encourage active participation in the retirement plan. You can contribute more or less by logging into **netbenefits.com** before the first of the month after your first 90 days and picking the amount you want to contribute.

Auto Increase

There is an automatic increase feature on the plan that raises your contribution percentage by 1 percent each year, up to 6%. If you wish to opt-out or keep contributions the same, you must log in to **netbenefits.com** or call Fidelity to make this adjustment.



Create your account on **netbenefits.com** with Fidelity and download the app. This will ensure you receive a notification when you are eligible to enroll and will give you access to your contributions, investments, loans, and other helpful webinars and information on financial well-being.



➔ An Important Note About Loans

In general, money put into a retirement account should remain untouched as it should be reserved for the long term. However, in financial circumstances where there are no other options, loans may be an option from your retirement savings plan.

A loan lets you borrow money from your account and pay it back to yourself over time with interest. Here are a few important reminders about loans to remember:

- **Pay close attention to the term of the loan and the payback requirements.**

If you miss a payment or can't pay the loan for any reason, it will be considered defaulted, and you will owe taxes and a 10% penalty.

- **Avoid more than one loan at a time. Pay your loan off on time and in full.**

Continue to save for retirement even with loan deductions.

- **You must pay even if out on a leave of absence.** While you won't be penalized for nonpayment while on a "leave" status, Fidelity will recalculate your weekly payment to account for any missed payment once you are back at work. This may mean a higher paycheck deduction in some cases.

To learn more, visit [fidelity.com](https://www.fidelity.com).

Employee Discounts

Plum Benefits

Access discounts and special offers on food and grocery, entertainment, theme parks, attractions, travel, and many other ways to save. To learn more, visit plumbenefits.com or call 1.877.686.7758 and provide the company code "Bozzutos".

Employee Discount

Teammates are granted a 10% discount at all Adams Hometown Markets locations.



Paid Time Off

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Available to

Full-time associates

Full time teammates will earn Paid Time Off based on the PTO policy below. With the exception of the first 6 months, all earned hours will be pre-loaded during the first week of January for all teammates. Adams Hometown Market restricts PTO usage during black out weeks as outlined by the PTO calendar sent out each year. PTO requests during black out weeks for special circumstances will be considered upon requests submitted in writing to the Vice President of Operations for approval. PTO will be scheduled by seniority by the first week of February each year. PTO not scheduled during this period will be approved on a first come, first served basis. Any PTO not used by the second week of December will be forfeited.

Floating and Observed Holidays

Associates scheduled to work on an observed holiday will earn a floating holiday if they:

- Work the scheduled shift prior to the holiday shift
- Work the scheduled holiday shift
- Work the scheduled shift after the holiday. **The following observed holidays are New Year's Day, Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day (Rhode Island also observes Victory Day, Columbus/ Indigenous Peoples' Day, Juneteenth, and Veterans Day).**

Bereavement

The death of a loved one is a trying time. Bereavement leave is granted based on the relationship to the deceased:

- **Spouse, Child, or Stepchild:** Five (5) working days
- **Father, Mother, Brother, Sister, Mother-in-Law, Father-in-Law, Stepparent:** Three (3) working days
- **Grandparent:** One (1) working day

Jury Duty

Employees who are called to serve on jury duty will be granted time off with full pay for the duration of their required service. We recognize the importance of fulfilling this civic responsibility and want to ensure that employees can participate without financial concern. Employees should provide a copy of their jury summons to their supervisor as soon as possible and keep them informed of the anticipated length of service.

PTO Accrual and Eligibility Full-Time

Years of Service	Hourly PTO	Salaried PTO
Jan. 1 after DOH	40 hours	45 hours
After 2 years	96 hours	108 hours
After 8 years	136 hours	153 hours
After 12 years	176 hours	198 hours
After 25 years	216 hours	243 hours

Overview of Sick Time

Adams Sick Time Entitlements:

	Accrual Rate	Maximum Hours/Year	Carryover Limit	Waiting Period
CT	1 hour/ 30 hours worked	Up to 40 hours	Up to 40 hours	120 days
MA				90 days after 1st workday
NY		Up to 56 hours	No carryover limit	No waiting period
PA	1 hour/ 40 hours worked	Up to 32 hours	Up to 32 hours	120 days
ME*				
RI	1 hour/ 35 hours worked	Up to 40 hours	Up to 40 hours	Set by employer

*(Earned Paid Leave Program)



Eligibility and amount of time varies based on whether associates are salaried or hourly full-time.

Refer to the Adams Handbook for more specific details on PTO pay and buyout guidelines.



Leave of Absence

There are many circumstances in life that may require associates to miss time from work. Leave may be continuous, intermittent, or a reduced schedule. Leave can be requested for many reasons including:

- Birth of a baby, adoption of a child, or initiating foster care
- Recovery from illness, surgery, work injury, or recurring health conditions
- Caring for an ill family member or managing unexpected challenges at home
- Jury duty, bereavement (see page 32)

You may be paid while on leave by applying for Connecticut (CT) paid leave and short- or long-term disability if applicable. You may also use your PTO but are not required to do so.

Accommodations

If an employee is disabled or becomes disabled (meaning they have a mental or physical impairment substantially limiting one or more of the major life activities) and require a reasonable accommodation, they should notify their manager.

A reasonable accommodation is a change or adjustment to the work environment that will make the workplace readily accessible to and usable by you to help you perform essential job functions. This can include a modified work schedule or duties, equipment, or another worksite adjustment.

A completed ADA Medical Assessment form will be required for any requests.

Leave Accommodations

Leave as an accommodation is handled as part of the leave process. If employees do not qualify for Family and Medical Leave (FMLA) or state leave or exhaust entitlement and have not been cleared to return, the absence may be reviewed as a request for a reasonable accommodation.

→ How to Request a Leave of Absence

- We prefer you call 30 days in advance of any known absences or leaves or as soon as practicable if the leave is not foreseeable.
- The Benefits Team will provide you with the required paperwork, as needed, to support your leave and will walk you through the process.
- The Benefits Team will change your status to "leave" when you're out and "active" when you return. You are responsible for notifying Benefits about your start and end dates. Scan QR code to put in an ESC ticket.



Adams Hometown Markets abides by federal and state law requirements. There may be state paid leave and disability policies that apply to you depending on the state - while regulations are constantly changing see below for state leave info for CT, MA, NY, and Rhode Island. For further questions or if you are unsure of the benefits available to you, contact the benefits department.

- Visit the [CT state website](#) to learn more about CT paid leave
- Visit the [MA PFL website](#) to learn and apply for MA paid leave
- Visit the [NY state website](#) to learn and apply for NY family leave
- Visit the [RI state website](#) to learn and apply for RI family leave

When no leave applies, personal leave requests and arrangements are made with your manager.

Contacts

Company	Web Services	Phone
Aetna Medical ♦	aetna.com	Navigator Help Desk: 1.800.225.3375
		Concierge Service: 1.866.335.1411
		Pharmacy Member Services: 1.877.238.6200
CVS Virtual Primary Care ♦	cvs.com/virtual-care	
Aetna Dental ♦	aetna.com	1.877.238.6200
Aetna Voluntary ♦	myaetnasupplemental.com	1. 888.772.9682
Inspira ♦	inspirafinancial.com	1.888.678.8242
Fidelity Investments ♦	NetBenefits: nb.fidelity.com	1.800.603.4015
Quest Diagnostics	my.questforhealth.com	1.855.6.BE.WELL (1.855.623.9355)
	■ Registration Key: Bozzutos2027	
The Hartford ♦	account.thehartford.com/customer/login	1.888.301.5615
Employee Assistance Program (EAP)	resourcesforliving.com	1.888.238.6232
	■ Username: Bozzutos ■ Password: EAP	
Senior Advisors (Medicare)	senior-advisors.com	908.272.1970
Chubb Ancillary Insurance	workplacesolutions.chubb.com	833.542.2013
Benefits All In	benefitsallin.com/employees	513.609.4193

♦ Download apps for these resources from the App Store for Apple or Google Play for Android.

→ Need Help?

Start a ticket with the Employee Support Center (ESC) to get HR or benefits answers and resources 24 hours a day, seven days a week.

Email the benefits team directly at
benefitsconnection@bozzutos.com

- **203.250.5143**
- **<https://esc.adamshtm.com/hc/en-us>**
- **support@bozzutos.zendesk.com**



