

OPEN ENROLLMENT



LiveWell
with PTC® Benefits

PTC's 2016 Open Enrollment October 26–November 13

We understand the importance of benefits to you and your family. That's why we strive to offer you high-quality plans with convenience to accommodate your busy lifestyle.

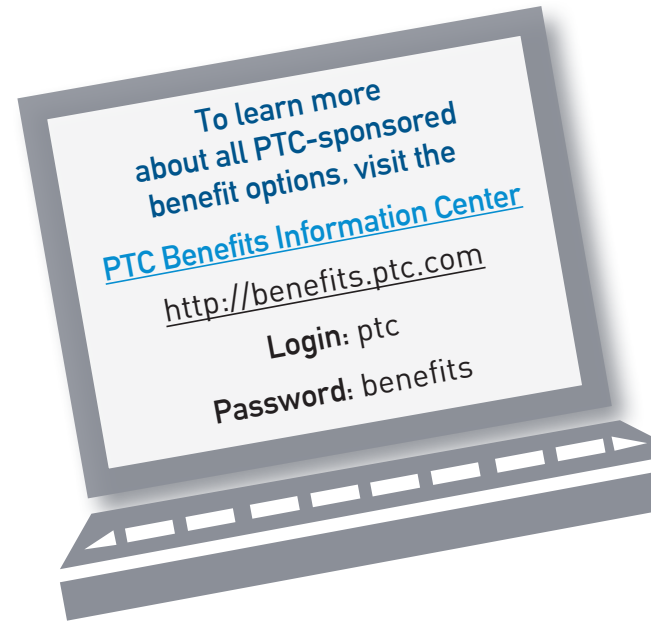
Medical Options: You will continue to have the choice of three Cigna plans. There will be some modifications to 2016 medical plans and contributions, including changes to annual deductibles. For example, the deductible in the Cigna Choice Fund (CDHP) has decreased. Please be sure to review all the medical plan choices and costs on **pages 2 and 3**.

Other Benefit Options: All other benefit plans and employee contributions remain unchanged except for a minimal contribution increase to the VSP Vision plan. Refer to **page 4**.

Free \$\$! Employees can **EARN \$100** upon entering your biometric numbers and completing the online Cigna Health Assessment. Additionally, all employees are eligible for a **FREE** confidential biometric screening that provides you with vital health information. Refer to **page 3**.

Enhanced Services with Cigna: Beginning in January 2016, Cigna will also be the new insurance provider for PTC's life insurance, disability, and employee assistance program. There is no action required by employees. Additional information including program enhancements will be emailed to you in January. To ensure you have 2016 benefits coverage, employees are **REQUIRED TO ENROLL** during the Open Enrollment period. Take this opportunity to tailor your benefit coverage to the specific needs of you and your family.

LiveWell – A plan for today, with an outlook for tomorrow. PTC offers you a complete benefits program that helps you manage **Your Health, Your Wealth** and **Your Well-Being** at all stages in life.



Action Required Between October 26 through November 13

- ✓ For 2016 coverage, enrollment is **REQUIRED** in: Medical, Dental, Vision, Metlaw, Flexible Spending, and Health Savings Accounts
- ✓ Federal law **REQUIRES** that you enter Social Security numbers for all dependents
- ✓ Optional: Add, drop, or make changes to supplemental life, accident, or critical illness insurance

www.benefitenroll.com

User ID: Your PTC email address (e.g. absmith@ptc.com)

Default Password: Last 4 digits of your Social Security number

Cigna Extras!

MDLive Telemedicine

Cigna Members can access board certified doctors by phone or web (24/7) for non-emergency medical issues. Refer to benefit summaries under the "Medical" section on the PTC [Benefits Information Center](#) for associated cost. Contact MDLive a Cigna partner, at 1-888-726-3171.

Cigna Fitness Reimbursement

Cigna members are eligible for a fitness reimbursement of \$100 per member per calendar year, up to a combined family maximum of \$300 per calendar year. Visit the "Find out more" section under the Medical option on the PTC [Benefits Information Center](#) to access the reimbursement form.

Medical Options

PTC continues to offer a choice of three Cigna medical plans that cover a broad range of services and all share the same Open Access/Carelink network. All plans provide the convenience of not having to seek referrals from your primary care physician.

Cigna Choice Fund is a high deductible health plan that covers 100% in-network preventative care (e.g. wellness exams, immunizations, and preventative generic prescriptions), while protecting you from the high cost of a serious illness or injury. This plan has the lowest bi-weekly employee contributions of the three plans and is the only plan that allows you to enroll in the **Health Savings Account**.

The **Health Savings Account (HSA)** is a tax-advantaged medical savings account that can be used to pay for out-of-pocket costs for health care. The HSA is only available to those employees who enroll in the Cigna Choice Fund. For employees who set up an HSA account, PTC will make a contribution based on family size on a prorated, bi-weekly basis via payroll directly into your HSA.



The 2016 HSA annual funding is:

| | |
|--|---------|
| Employee Only | \$500 |
| Employee and Spouse or 1 to 2 Children | \$750 |
| Employee and 2 or more dependents | \$1,250 |

Cigna Open Access Plus/Carelink Plan provides both in-network and out-of-network coverage however out of pocket costs are lower when choosing an in-network provider. For example, when coinsurance applies and you stay in-network, the plan covers 90% of the cost and you pay 10%. Additionally, this plan includes copays and a deductible.

Cigna Open Access Plus In-Network/Carelink Plan allows you to choose care only from Cigna's in-network providers. This plan now has a deductible. Co-pays apply to physician visits and certain medical services with the exception of preventative care visits. Additionally, a standard diagnostic vision exam is included with this plan.

The chart below provides 2016 member costs and on the next page the key differences between each health plan.

2016 Medical Bi-Weekly Payroll Contributions

| MEDICAL OPTIONS | Employee Only | Employee & Spouse | Employee & 1-2 Children | Employee & 2-3 Dependents | Employee & 4+ Dependents |
|--|---------------|-------------------|-------------------------|---------------------------|--------------------------|
| Cigna Choice Fund | \$40.00 | \$ 90.00 | \$ 87.00 | \$135.00 | \$140.00 |
| CIGNA Open Access Plus/ CareLink Plan | \$65.00 | \$135.00 | \$129.00 | \$198.00 | \$206.00 |
| CIGNA Open Access Plus In-Network/CareLink Plan | \$79.00 | \$180.00 | \$170.00 | \$258.00 | \$267.00 |

Stay Tuned

Cigna is expected to combine with Anthem to form a premier global health service company in mid-2016. This combination will bring together the complementary strengths of both organizations. PTC will communicate any additional news as needed.

2016 Cigna Medical Plan Comparison Chart

For an even more personalized comparison, access the online tool to estimate your health costs or find a doctor. Compare all three Cigna health plans side-by-side at myCignaPlans.com* (username: ptc2016; password:Cigna) or call the Cigna Hotline at 1.800.401.4041.

*The myCignaPlans.com link will not be available until October 26

| BENEFIT | Cigna Choice Fund | | Open Access Plus | | Open Access Plus-In Network |
|--|--------------------------------------|----------------|---------------------------|----------------|-------------------------------|
| | In-Network | Out-of-Network | In-Network | Out-of-Network | In-Network Only |
| Employer Fund to HSA by tier | \$500/\$750/\$1,250 | | N/A | | N/A |
| Deductible | | | | | |
| Individual | \$2,000 | \$2,000 | \$450 | \$900 | \$300 |
| Family | \$4,000 | \$4,000 | \$1,350 | \$2,700 | \$900 |
| Preventive Care | 100% | 70% after Ded. | \$25 Co-pay | 70% after Ded. | 100% |
| PCP Office Visits | 90% after Ded. | 70% after Ded. | \$25 Co-pay | 70% after Ded. | \$30 Co-pay |
| Specialist Office Visits | 90% after Ded. | 70% after Ded. | \$40 Co-pay | 70% after Ded. | \$50 Co-pay |
| Imaging, X-rays, Lab Tests | 90% after Ded. | 70% after Ded. | 100% | 70% after Ded. | 100% after Deductible |
| Emergency Room | 90% after Ded. | 90% after Ded. | \$125 Co-pay | \$125 Co-pay | \$150 Co-pay |
| Inpatient Hospitalization/ Surgical Day Care – Hospital | 90% after Ded. | 70% after Ded. | 90% after Ded. | 70% after Ded. | 100% after Deductible |
| Outpatient Facility/ Surgical Day Care | 90% after Ded. | 70% after Ded. | 90% after Ded. | 70% after Ded. | 100% after Deductible |
| Prescription Drugs | Subject to Deductible | | Not Subject to Deductible | | Not Subject to Deductible |
| 30-Day Supply | \$15/\$35/\$65 | 70% after Ded. | \$15/\$35/\$65 | 70% after Ded. | \$15/\$35/\$65 |
| 90-Day Supply | \$25/\$70/\$135 | 70% after Ded. | \$25/\$70/\$135 | 70% after Ded. | \$25/\$70/\$135 |
| Out-of-Pocket Maximum | Ded., Rx, all copays and Coinsurance | | Ded., ER, and Coinsurance | | Ded., All copays including RX |
| Individual | \$4,500 | \$5,000 | \$1,500 | \$3,000 | \$5,000 |
| Family | \$9,000* | \$10,000 | \$4,250 | \$8,000 | \$10,000 |

*Note: Each individual within a family will be capped at \$6,850

Free \$\$!-Health Assessment

Employees can **EARN \$100** by taking an online Cigna Health Assessment AND entering your biometrics into the assessment. The health assessment opportunity will take place from October 19 through November 20.

Step 1: Free Biometric Screening: All employees are eligible to complete a confidential biometric screening to obtain your essential health information such as height, body mass index (BMI), blood pressure, cholesterol, and glucose levels. You will receive an email containing details for this free screening. If you know your numbers already, skip right to step 2.

Step 2: Online Health Assessment for Cigna Members: This confidential online assessment is a quick and easy way to determine the current state of your overall health. After completing the assessment, you'll receive a wellness scorecard with recommendations to help you get started on a path to better health and **EARN \$100**. Login or register at myCigna.com and select "Take my Health Assessment."

Note: New Cigna members can complete the online assessment in January. The Cigna \$100 incentive will be paid through PTC payroll and subject to tax withholding. To protect your privacy, no individual responses to the Health Assessment will be shared with PTC.

Other Benefit Options

Dental Plans: Both the Delta Dental PPO High Plan and Low Plan offers dental coverage with in- and out-of-network doctors, but you will receive higher benefits if you choose Delta in-network providers (as shown below). Both plans allow you to rollover a portion of your unused annual benefit maximum.

| SERVICES (IN-NETWORK) | PPO LOW | PPO HIGH |
|---|---------------------------------------|---|
| Deductible (applies to basic & major services) | \$75/individual, \$225/family | \$50/individual, \$150/family |
| Annual benefit maximum (per individual) | \$750 | \$1,500 |
| Preventive/Basic/Major | 100%/60%/40% | 100%/80%/50% |
| Orthodontia | Child – 50% \$750 lifetime maximum | Child & adult – 50% \$1,500 lifetime maximum |

Check the [Benefits Information Center](#) for more details for out-of-network coverage.

Vision Service Plan (VSP) offers vision coverage with in- and out-of-network providers. Benefits will be higher if you use VSP in-network providers, which includes exam (\$10 copay), lenses (\$25 copay), up to \$175 towards frames, and up to \$150 for contact lenses.

Metlaw Legal Plan offers advice with a participating attorney on many personal legal matters. The cost is 8.42 (post-tax) per pay period.

Accident Insurance pays cash benefits to YOU to cover expenses associated with conditions and treatments from an accident, such as injuries, hospital/emergency room care, and physical therapy.

Flexible Spending Accounts (FSA): The Health Care FSA has an annual maximum of \$2,550 (and up to \$500 rollover of annual unused funds) for eligible health care-related expenses. The Dependent Care FSA has an annual maximum of \$5,000 for expenses such as daycare or nursing care for a disabled dependent.

Critical Illness Insurance pays YOU up to \$15,000 (or up to \$5,000 for an enrolled spouse) when you are diagnosed with a heart attack, stroke, invasive cancer, or other covered critical illnesses. Employee enrollment includes automatic coverage for children at 25% of the employee benefit amount. Rates are age-based and are shown below.

| Critical Illness Bi-Weekly Non-Tobacco Rates | | |
|--|-----------|---------|
| Age | Employee* | Spouse* |
| Under 25 | 3.92 | 1.80 |
| 25-29 | 4.27 | 1.92 |
| 30-34 | 5.86 | 2.45 |
| 35-39 | 7.73 | 3.07 |
| 40-44 | 10.71 | 4.06 |
| 45-49 | 14.45 | 5.31 |
| 50-54 | 18.81 | 6.76 |
| 55-59 | 24.49 | 8.66 |
| 60-64 | 31.20 | 10.89 |
| 65-69 | 35.01 | 12.16 |
| 70+ | 62.15 | 21.21 |

* Note: Different rates apply to smokers.

2016 Bi-Weekly Payroll Contributions

| BENEFIT OPTIONS | Employee Only | Employee & Spouse | Employee & 1-2 Children | Employee & 2-3 Dependents | Employee & 4+ Dependents |
|---------------------------|---------------|-------------------|-------------------------|---------------------------|--------------------------|
| Dental | | | | | |
| Delta Dental Low Plan | \$ 6.00 | \$ 12.00 | \$ 11.00 | \$ 17.00 | \$ 19.00 |
| Delta Dental High Plan | \$ 8.00 | \$ 19.00 | \$ 18.00 | \$ 26.00 | \$ 27.00 |
| Vision – VSP | \$ 3.96 | \$ 6.06 | \$ 6.49 | \$ 10.38 | \$ 10.38 |
| Accident Insurance | \$7.52 | \$ 12.16 | \$ 14.04 | \$ 18.68 | \$ 18.68 |

Note: This brochure includes a brief summary of PTC's employee benefit plans and programs. Additional details and required legislative information is available at the PTC [Benefits Information Center](#). If there is a conflict between the wording in this brochure and the official plan documents, the plan documents will always govern. PTC reserves the right to change or discontinue benefit plans at any time.