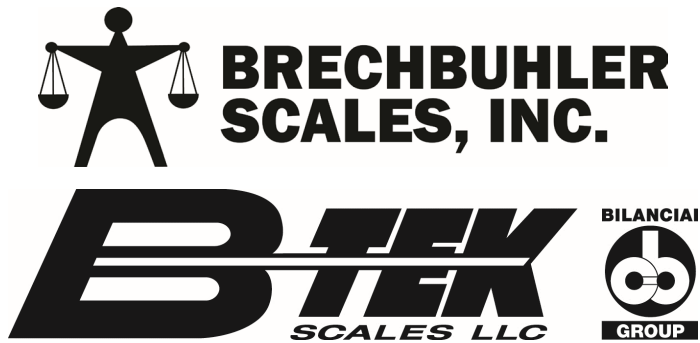


2023 EMPLOYEE BENEFITS GUIDE





Dear Employees,

Brechbuhler Scales, Inc. and B-TEK Scales, LLC. are pleased to offer a comprehensive benefits package that provides quality plans and programs for you and your family. We remain committed to providing you with the best plan options and tools to optimize your health, wellness, and financial security.

The choices you make during this time will remain in place for the entire 2023 calendar year. You must elect or waive benefits through Paycor.

To ensure you are selecting the best benefit options for you and your family, review the plan information in this guide, including the costs and coverage levels.

Comprehensive information on our plans and partners are available online at www.Oswald-Connect.com/BscalesBenefits.

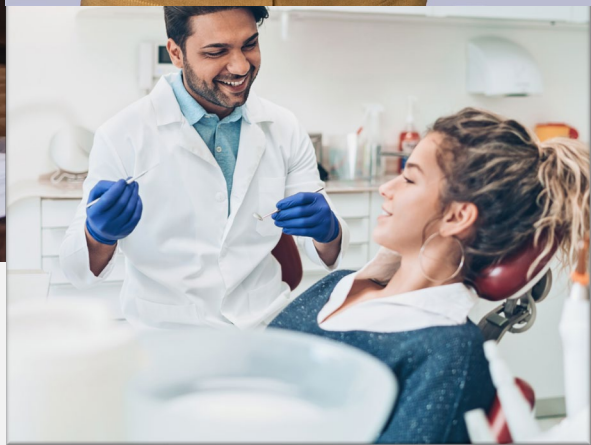
Please email ralessandro@bscales.com if you have questions or need assistance with the enrollment process.

Sincerely,

Regina Alessandro
Human Resources Manager

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Medical Insurance

Mutual Health Services Plan Options

Choose from one of two medical plans to cover yourself and your dependents. Both plans are through Mutual Health Services and include prescription coverage.

Visit www.mutualhealthservices.com to view providers
Employees in the state of Ohio will utilize the SuperMed PPO network
All employees outside of Ohio will utilize the Aetna network

Consumer Driven Health Plan (HDHP)

Qualified Plan with Health Savings Account (HSA)

With the high-deductible health plan, you will:

- Enjoy lower per pay period medical plan costs
- Have preventive services covered at 100%

PPO Plan

Traditional PPO Plan

With this traditional plan, you will:

- Have a higher per pay period medical plan cost
- Enjoy the predictability of set copay amounts
- Be subject to a lower deductible
- Have preventive services covered 100%
- Coinsurance applies once deductible is met

Medical Rates (per pay period)	Employee	Employee + Spouse	Employee + Child(ren)	Family
HDHP Plan	\$48.00	\$72.00	\$76.00	\$93.00
PPO Plan	\$92.00	\$154.00	\$173.00	\$209.00

We have a “Tobacco Free Policy” for all employees and spouses covered under our health insurance plans. Annually you are required to waive or select the Tobacco Surcharge based upon, tobacco usage for both you and your spouse (if on our insurance). Certification is done in Paycor during Open Enrollment. Failure to complete this requirement on the Paycor portal will result in automatic charge of the surcharge.

Tobacco Surcharge	
Employee Only	\$17.00 per pay
Employee & Spouse	\$34.00 per pay

Medical Plan Summary

2023 Plan Options:

Traditional PPO Plan

Designed for those who prefer the predictability of set payments for doctor appointments and other medical services.

Services	In-Network	Out-of-Network
Deductible	\$1,000 individual / \$2,000 family	\$2,000 individual / \$4,000 family
Annual Out-of-Pocket Maximum	\$3,000 individual / \$5,250 family	\$7,000 individual / \$12,000 family
Coinsurance	15% after Deductible	40% after Deductible
Primary Care Visits	\$25 Copay	40% after Deductible
Preventive Care	Covered at 100%	40% after Deductible
Specialist Visits	\$35 Copay	40% after Deductible
Emergency Room	\$200 Copay, deductible, then 15% Copay waived if admitted	
Urgent Care	\$50 Copay	

Rx Retail (34-day supply)

Generic	Greater of \$10 or 15%	Not Covered
Preferred Brand	Greater of \$20 or 25%	Not Covered
Non-Preferred Brand	Greater of \$30 or 25%	Not Covered

Rx Mail Order (90-day supply)

Generic	Greater of \$25 or 15%	Not Covered
Preferred Brand	Greater of \$50 or 25%	Not Covered
Non-Preferred Brand	Greater of \$75 or 25%	Not Covered



Website:
www.mutualhealthservices.com

Medical Plan Summary

2023 Plan Options:

Consumer Choice Health Plan (HDHP)

Allows you to minimize the premium you pay from your paycheck while saving for the future with pre-tax contributions to a Health Savings Account.

Services	In-Network	Out-of-Network
Deductible	\$2,500 individual / \$5,000 family	\$5,000 individual / \$10,000 family
Annual Out-of-Pocket Maximum	\$2,500 individual / \$5,000 family (includes deductible)	\$5,000 individual / \$10,000 family (includes deductible +UCR)
Coinsurance	100% after Deductible	100% after Deductible
Primary Care Visits	100% after Deductible	100% after Deductible
Preventive Care	Covered at 100%	100% after Deductible
Specialist Visits	100% after Deductible	100% after Deductible
Emergency Room	100% after Deductible	
Urgent Care	100% after Deductible	
Rx Retail (34-day supply)		
Generic	100% after Deductible Utilize Card with Discounts – pay when purchase	Not Covered
Preferred Brand		
Non-Preferred Brand		
Rx Mail Order (90-day supply)		
Generic	100% after Deductible Utilize Card with Discounts – pay when purchase	Not Covered
Preferred Brand		
Non-Preferred Brand		



Health Savings Account (HSA)



What is an HSA?

Health Savings Accounts (HSA) are a tax-advantaged medical savings account available to those who enroll in the Consumer Driven Health Plan (CDHP). The funds you invest are not subject to most taxes. The growth of the invested amount is not taxed and when the funds are distributed, no tax penalties are incurred when applied to qualifying expenses. The funds you contribute to your HSA are yours to keep and can be used not only for medical expenses, but for retirement expenses as well.

Great Benefits For You

Convenience - Paying for expenses from your HSA is as easy as using a debit card.

Choice - Pay for qualified expenses from your HSA or save your HSA money and pay out-of-pocket.

Control - You decide how the money is spent and you have the freedom to keep it if you change jobs or retire.

Contribution Limits	2023
Single	\$3,850
Family	\$7,750
Catch-up (55+)	\$1,000

Triple-Tax Savings

Tax-Free Deposits - Even if you don't itemize deductions, you don't pay federal income tax on contributions.

Tax-Free Savings - You keep any money you don't spend and it grows tax-free. No use-it-or-lose-it.

Tax-Free Withdrawals - There's never tax on withdraws to pay for qualified expenses.

KeyBank 

Website: [Account Origination \(key.com\)](https://www.key.com)

Examples of Qualified Medical Expenses

Acupuncture	Doctor's fees	Oxygen/oxygen equipment
Alcoholism treatment	Drug addiction recovery	Prescription drugs
Ambulance	Dyslexia language training	Psychiatric care
Artificial limbs	Eyeglasses and examination fees	Therapy treatments (prescribed)
Braces	Hearing aid and batteries	Transportation (for medical care)
Childbirth preparation classes (mother)	Home modifications for handicapped	Vision correction surgery (e.g., LASIK)
Chiropractors	Insulin	Vitamins (if prescribed)
Contact lenses	Laboratory fees	Wheelchairs
Crutches	Maternity expenses	X-rays
Dental fees	Nursing homes	
Dentures	Optometrists	
Diagnostic fees	Orthodontia	
	Orthopedic shoes	

The above is a brief summary; refer to IRS Publication 502 for confirmation of eligible expenses

Flexible Spending Account (FSA)



What is an FSA?

Flexible Spending Accounts (FSA) provide you with an important tax advantage that can help you pay health care expenses on a pretax basis. By anticipating your family's health care and dependent care costs, you can actually lower your taxable income and that means you get to keep more of what you earn.

There are two types of FSA's that allow you to make deductions to pay for qualified medical expenses. The Health Care FSA allows any qualified medical expense, and the Limited Purpose FSA allows ONLY dental and vision expenses. If you are enrolling in the HSA-qualified medical plan, the Limited Purpose FSA is the only option you have available since other qualified medical expenses can be paid for by using your HSA.

Available Pre-Tax Spending Accounts:	If you enroll in the Traditional PPO	If you enroll in the Consumer Driven Health Plan
Flexible Spending Account (FSA)	Medical FSA Plan: Up to \$2,750 annually	Limited Purpose (Dental & Vision) FSA Plan: Up to \$1,500 annually
Dependent Care FSA	Up to \$5,000 annually	

Important points to remember:

- You may elect to contribute the maximum amount even if your spouse is also contributing to an FSA at his or her workplace.
- The Limited Purpose FSA reimburses you ONLY for qualified dental and vision expenses not covered by insurance, like co-pays and deductibles.
- The Health Care FSA allows any qualified medical expense to be reimbursed.



Website:
www.mutualhealthservices.com

After you enroll, you can't change the amount you contribute for the year, because your election stays in effect during the entire plan year (January 1 through December 31). However, if you have a "Qualified Life Event" you may change the amount of your contribution, but the change must be consistent with the event.

The following "Qualified Life Events" may permit you to change your FSA election outside of open enrollment: a change in your legal marital status; a change in the number of tax dependents; termination or commencement of employment by you, your spouse or dependent; a change in employment status that results in gaining or losing eligibility for health coverage; and, Medicare or Medicaid entitlement for you, your spouse or dependent.

Dental

Your network is: DentalGuard Preferred

Option 1 or 2: Low Plan or High Plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are based on a percentile of the prevailing fee data for the dentist's zip code.

LOW PLAN

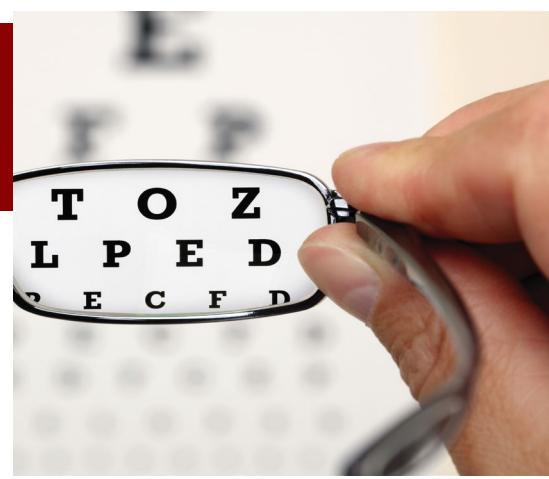
HIGH PLAN

Services	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible Single	\$0	\$50	\$50	\$50
Deductible Family	Limit 3 per family		Limit 3 per family	
Preventive Care • Cleanings, Oral Exams, X-rays	100%	100%	100%	100%
Basic Care • Anesthesia, Fillings, Repairs on Crowns & Bridges	80%	50%	100%	80%
Major Care • Root Canal, Crowns, Dental Implants, Dentures, & Bridges	50%	25%	60%	50%
Orthodontia	Not Covered		50%	
Annual Max Benefit	\$1,000	\$1,000	\$1,500	\$1,000
Lifetime Orthodontia Max	Not Applicable		\$1,000	

Dental Rates (per pay period)	Employee	Employee + Spouse	Employee + Child(ren)	Family
Dental Low Plan	\$12.87	\$24.42	\$29.74	\$45.35
Dental High Plan	\$17.25	\$32.77	\$43.17	\$65.27



Vision



Your network is: Davis Vision

When you elect Vision coverage through Guardian you have:

- Access to the one of the largest panels of eye care professionals
- A nominal \$10 copay for an in-network routine exam
- Potential payment for out-of-network benefits
- Coverage for frames, lenses and contacts

Services	In-Network	Out-of-Network
Exams	\$10 Copay	Amount over \$50
Materials	\$25 Copay	Amount over \$48
• Single Vision Lenses	\$25 Copay	Amounts over \$67
• Bifocal Lenses	\$25 Copay	Amounts over \$86
• Trifocal Lenses	\$25 Copay	
Frames	80% of amount over \$130	Amount over \$48
Contact Lenses	85% of amount over \$130	Amount over \$105
Lasik Surgery	Up to 25% off charge or 5% off promotional price	No discount

Service Frequencies	
Exams	Every Calendar Year
Materials	Every Calendar Year
Frames	Every 2 Calendar Years

Vision Rates (per pay period)	Employee	Employee + Spouse	Employee + Child(ren)	Family
Vision Plan	\$2.96	\$5.88	\$6.16	\$9.22

Employer-Sponsored Plans

Additional benefits included with your full-time employment

Basic Life Insurance

We know you want to protect your loved ones in case of life's uncertainties. Brechbuhler Scales Inc. offers Basic Term Life Insurance and Accidental Death & Dismemberment (AD&D) coverage at no cost to you!

Basic Term Life Insurance gives you:

- Coverage of 1x your base salary (up to \$30,000)
- AD&D coverage as part of your life insurance
- The ability to convert to an individual policy if you leave the company
- Possible waiver of premiums if you become disabled
- Possible accelerated death benefit if you are diagnosed with a terminal disease

Don't forget to designate a beneficiary for employee life insurance.

Short-Term Disability (STD)

Basic STD coverage:

All full-time employees, averaging a minimum of 30 hours a week, are eligible for short-term disability benefits. This benefit may be used in the event of becoming disabled by sickness or injury, and under the regular care of a licensed physician for more than 7 calendar days. Being disabled means that you are unable to perform the duties of your occupation or job.

Company-paid short-term disability is paid directly by the Employer to the Employee through payroll at a rate of \$30 per regular workday for up to 90 days (12 weeks).

To receive short-term disability benefits, the employee must notify Human Resources in writing. If the disability lasts longer than 5 days, the employee will be required to provide a Certification of Health Care Provider form to be completed, which the same form that is completed for FMLA leave.

Long Term Disability (LTD)

Basic LTD coverage:

Brechbuhler Scales Inc. offer LTD coverage equal to 60% of your salary up to \$2,000/month. There is no cost to you. You are eligible for LTD benefits after 91 days upon approval of continued disability. Benefits may continue until your recovery, retirement, or age 65, standard ADEA.



Website:

www.guardianlife.com

Supplemental Benefit Options

Additional benefits available for purchase

Voluntary Life Insurance

If you purchase Supplemental Life Insurance for yourself, your spouse and dependents, you get:

- Group discounted rates
- You may purchase additional, supplemental coverage to increase your existing employer-paid Basic Life coverage with options of \$50,000, \$100,000 or \$150,000.
- Spouse coverage in the amount of \$25,000 or \$50,000
- Child coverage in the amount of \$5,000

Preferred rates apply to premium for non-tobacco usage and/or health history. Standard rates apply to premium for tobacco usage and/or health history.

Spouse coverage premium is based on employee age

Employee		< 30	30- 34	35-39	40-44	45-49	50-54	55-59	60-64	65-69†
\$50,000	Preferred	\$1.55	\$1.55	\$2.05	\$3.13	\$4.98	\$7.60	\$12.78	\$21.50	\$34.50
	Standard	\$2.53	\$2.95	\$4.05	\$6.45	\$10.30	\$15.23	\$24.15	\$39.88	\$58.85
\$100,000	Preferred	\$3.10	\$3.10	\$4.10	\$6.25	\$9.95	\$15.20	\$25.55	\$43.00	\$69.00
	Standard	\$5.05	\$5.90	\$8.10	\$12.90	\$20.60	\$30.45	\$48.30	\$79.75	\$117.70
\$150,000	Preferred	\$4.65	\$4.65	\$6.15	\$9.38	\$14.93	\$22.80	\$38.33	\$64.50	\$103.50
	Standard	\$7.58	\$8.85	\$12.15	\$19.35	\$30.90	\$45.68	\$72.45	\$119.63	\$176.55

Spouse		< 30	30- 34	35-39	40-44	45-49	50-54	55-59	60-64	65-69†
\$25,000	Preferred	\$.78	\$.78	\$1.03	\$1.56	\$2.49	\$3.80	\$6.39	\$10.75	\$17.25
	Standard	\$1.26	\$1.48	\$2.03	\$3.23	\$5.15	\$7.61	\$12.08	\$19.94	\$29.43
\$50,000	Preferred	\$1.55	\$1.55	\$2.05	\$3.13	\$4.98	\$7.60	\$12.78	\$21.50	\$34.50
	Standard	\$2.53	\$2.95	\$4.05	\$6.45	\$10.30	\$15.23	\$24.15	\$39.88	\$58.85

Child	< 30	30- 34	35-39	40-44	45-49	50-54	55-59	60-64	65-69†
\$5,000	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42

If you've previously waived coverage or would like to increase your coverage at open enrollment, you will need to complete evidence of insurability.

Don't forget to designate a beneficiary for your voluntary life insurance.



Supplemental Benefit Options

Additional benefits available for purchase

Voluntary Short-Term Disability

Additional short term disability coverage is available for purchase in the following increments:

Low Plan - Option 1 provides 30% of your salary up to \$1,500/week.

High Plan - Option 2 provides 60% of salary up to \$1,500/week.

Maximum payment period you can receive disability is 12 weeks and it begins after Day 8 of accident or illness.

Cost varies based on age, option, and salary. Rates included within Paycor

Hospital Indemnity Coverage

Covers costs associated with hospital stays in the event of illness or injury, allowing you to focus on recovery.

Two benefit options:

Option 1 pays \$500 per admission, limited to 1 admission per insured.

Option 2 pays \$2,000 per admission, limited to 1 admission per insured

- Benefits under this plan are payable for a covered sickness. Treatment of an injury due to an accident is excluded.
- Hospital Admission & Hospital ICU Admission benefits are not payable on the same day.
- Premium will be waived if you are hospitalized for more than 30 days.
- Coverage is portable and premiums will not increase as you age

Costs per pay outlined below:

Option 1 – Low Plan	<50	50-59	60-64	65-69
Employee	\$2.33	\$3.05	\$4.50	\$5.96
Employee + Spouse	\$4.86	\$6.09	\$9.00	\$11.92
Employee + Child(ren)	\$3.53	\$4.25	\$5.70	\$7.16
Family	\$6.06	\$7.29	\$10.20	\$13.12
Option 2 – High Plan	<50	50-59	60-64	65-69
Employee	\$6.73	\$9.60	\$15.41	\$21.26
Employee + Spouse	\$14.25	\$19.19	\$30.82	\$42.53
Employee + Child(ren)	\$10.56	\$13.43	\$19.24	\$25.09
Family	\$18.08	\$23.02	\$34.66	\$46.35



Website:

www.guardianlife.com

Supplemental Benefit Options

Additional benefits available for purchase



Accident Coverage

Provides an extra layer of protection that gives you a cash payment to help cover out-of-pocket expenses when you suffer an unexpected, qualifying accident.

- Plan is portable and your rate will never change
- Accident coverage for on & off the job occurrences
- Wellness benefit included

Please see coverage certificate for more information regarding payable events

Cost per pay outlined below:

Options	Employee	Employee + Spouse	Employee + Child(ren)	Family
Value Plan	\$7.62	\$12.38	\$12.60	\$17.35
Advantage Plan	\$9.93	\$15.91	\$16.00	\$21.98
Premier Plan	\$12.30	\$19.51	19.35	\$26.56

 Guardian®

Website:

www.guardianlife.com

Critical Illness Coverage

Provides an additional payment to cover medical & household expenses in the event of a serious illness.

- Coverage is portable and payments are made directly to you.
- Premiums will not increase as you age & child cost is included with employee election
- Spousal benefit cannot exceed 50% of the employee's elected amount
- Annual \$50 wellness benefit included

The policy will provide payments for the first and second time you're diagnosed with specific covered illnesses. Please see coverage certificate for more information

Cost per pay outlined below:

Employee	<30	30-39	40-49	50-59	60-69	70+
\$5,000	\$2.89	\$3.56	\$5.67	\$9.43	\$13.90	\$25.91
\$10,000	\$4.96	\$6.28	\$10.45	\$17.83	\$26.62	\$50.41
Spouse	<30	30-39	40-49	50-59	60-69	70+
\$2,500	\$1.85	\$2.19	\$3.28	\$5.23	\$7.53	\$13.66
\$5,000	\$2.89	\$3.56	\$5.67	\$9.43	\$13.90	\$25.91

401K Retirement



The journey to retirement should be rewarding as every day after. Brechbuhler Scales Inc. offers a 401K through Empower Retirement where they help you plan for the future in the now world.

401K Retirement: Empower Retirement

Eligibility	<ul style="list-style-type: none">• All new employees are automatically enrolled at 6% the 1st of the month following 30 days of employment• You can continue 1% automatic annual increase, up to 10% (or opt out on automatic increases).• The company contribution is 3% of your pay
2021 IRS Limits	401K Deferral: \$19,500
	401K Catch-Up Contributions (50+): \$6,500



Website: www.empower-retirement.com

Find A Dentist:

Visit

<https://www.guardiananytime.com/fpapp/search>

Click on “PPO DentalGuard Preferred” & search the Network

Find A Vision Provider:

Visit

<https://www.guardiananytime.com/fpapp/vision>

Click on “Davis Vision” & search the Network

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays,

8:00 AM to 8:30 PM, EST. Refer to your member ID (social security number) and your plan number: **00519542**

WillPrep

Protect the ones you love with a range of dedicated services designed to help you provide for your family. WillPrep Services includes a range of different resources that make it easier for you to prepare a will.

These range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details.

How to Access

Visit: ibhwillprep.com

User ID: WillPrep

Password: GLIC09

For more information or support, you can reach out by phoning (877) 433-6789.

Employee Assistance Program

Guardian’s Employee Assistance Program gives you and your family members access to confidential personal support, across everything from stress management and nutrition to handling legal or financial issues.

The services available include consultations with experts, as well as access to resources and discounts designed to help you in a variety of different ways.

How to Access

Visit: ibhworklife.com

User ID: Matters

Password: wlm70101

For more information or support, you can reach out by phoning (800) 386-7055.

Mutual Health Services Mobile App

Access your health benefits on the go. The MHS Mobile app gives you real-time access to your benefits from your mobile device.

Features

- Check your benefits & review your healthcare claims
- View your member ID card information
- Monitor your deductible and out-of-pocket expenses
- Connect with a MHS representative

Get Started

You must register on MutualHealthServices.com in order to use app. To create a Mutual Health Services member account, follow the steps below:

- Go to www.MutualHealthServices.com
- Click Log In from the Customer Portal box
- Click New User Registration
- Click Register in the Registration Info box
- Select Employee or Dependent from the User Type dropdown
- Enter your Web Group number from your Mutual Health Services member ID card
- Enter the characters for the test image
- Enter your Social Security number (SSN) and click Next to complete the registration process

Once your account is created, Download the App & log in!

Cleveland Clinic Express Care® Online

Telemedicine

Express Care Online is a secure service that offers 24/7 care with no appointment needed for simple conditions such as sinus infections, cold symptoms, rashes, earaches and stomach pain.

- From your smartphone or tablet: Visit www.clevelandclinic.org/eco or download the Express Care app from the Apple App Store or Google Play
- From your computer: Visit www.clevelandclinic.org/eco

24/7 Nurseline: 1-888-912-0636

Your coverage with Medical Mutual provides access to highly-trained and experienced nurses available 24/7 to help you:

- Advise you personally, no matter the size of the concern
- Provide easy-to-understand explanations about medical tests and results
- Talk you through self-care for treating minor medical conditions at home
- Help determine if you need to visit your doctor, an urgent care clinic or the emergency room
- Use nationally accredited guidelines to assess symptoms
- Connect you with your primary care provider (PCP), specialist or in-network emergency room if necessary
- Connect you with a nursing home or alternate point of care
- Schedule next-day appointments with your PCP if needed
- Stay on the line until you feel you understand next steps

Find a Provider

Getting Started

<https://providersearch.medmutual.com/Flow/SelectTypeofCareandYear/?bypassfunnel=true&networkgroup=MHS&networkcode=MHS&effectiveYear=2020&logo=MHS>

Once on the home page, Find a Doctor-Learn More click Find a Doctor and follow these three easy steps:

- Step 1: Choose a provider type
- Step 2: Choose the location in which you will receive care
- Step 3: Select your network (SuperMed PPO Plus for Ohio residents, Aetna for all others)

Choose Your Search Criteria

This versatile tool, which replaced the Provider Lookup feature, allows you to search by what matters most to you. Narrow your search by:

- Name
- Specialty
- Gender
- Language spoken
- Hospital affiliation
- Specific practice

CONTACTS

Find the answers you need

Benefit	Provider	Website	Phone Number
Medical/Rx	Medical Health Service	www.mutualhealthservices.com	1-800-367-3762
Dental/Vision	Guardian	www.guardianlife.com	1-800-541-7846
Life	Guardian	www.guardianlife.com	1-800-627-4200
Accident	Guardian	www.guardianlife.com	1-877-393-7363
Critical Illness	Guardian	www.guardianlife.com	1-800-268-2525
STD/LTD	Guardian	www.guardianlife.com	1-800-268-2525
401K Savings Plan	Empower Retirement	www.empower-retirement.com	1-800-541-7846
General Benefit Questions	Human Resources	Regina Alessandro ralessandro@bscales.com 330-458-3048	

Visit the Benefits Hub for more information:

www.Oswald-connect.com/BscalesBenefits

- Review additional plan documents & carrier resources
- Quick access to online enrollment system

