THE CHOICE IS YOURS

2022-2023

BENEFIT ENROLLMENT GUIDE

YOUR 2022-2023 BENEFIT CHOICES

a partnership for good health

Fanatics

welcome

Fanatics offers comprehensive, high-quality health and wellbeing plans to both maximize the value you receive from each of our benefit programs and meet your unique needs. This guide outlines our benefit options to help you select coverage that is best for you and your family.

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WHO CAN ENROLL?

Full-time Employees: If you are an active, full-time employee regularly working 30 or more hours per week.

Eligible Dependents: Eligible dependents are defined as your legal spouse, domestic partner, dependent children up to age 26, and eligible disabled children of any age as long as they meet certain requirements.

Dependent Eligibility

Any employee who has dependents covered under the Fanatics health care plans may be required to attest dependent eligibility and provide supporting documentation. Open enrollment is your opportunity to remove any ineligible dependents or add eligible dependents to the health care plan.

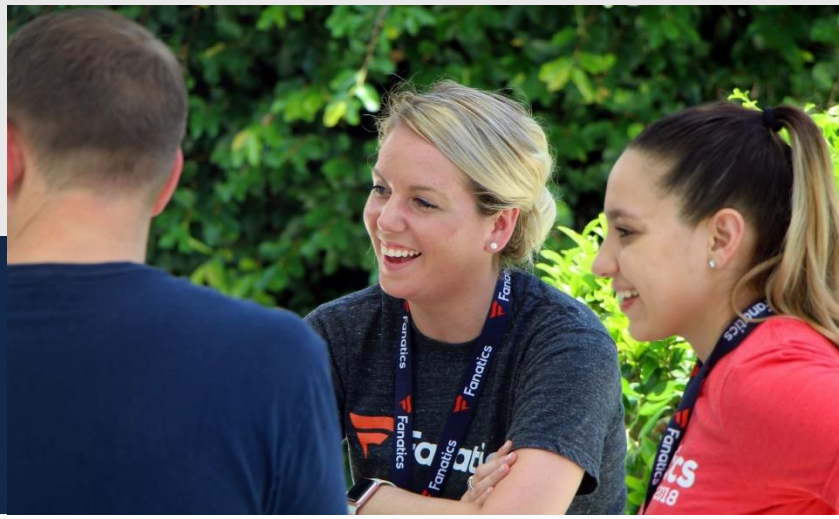
ENROLLMENT PERIODS

New Employees: As a new employee of Fanatics, you become eligible for benefits on the first of the month following or coinciding with your date of hire. Our benefit plan year runs from July through June.

Open Enrollment: As a benefits eligible employee, you can enroll in or make changes to your benefit plans during our annual open enrollment period.

Qualifying Life Events (QLE): When you experience a qualifying life event, you have 31 days to make benefit changes related to your event. Log in to your benefits account by going to UltiPro, then Manage My Benefits. *Examples of QLEs* – marriage, divorce, death, birth/adoption of a child, access to other coverage that impacts eligibility for coverage (i.e., spouse gains/loses coverage, spouse change in employment status.), significant cost or coverage changes, or your dependent no longer qualifies as an eligible dependent.

Reminder: You must notify and submit any applicable forms and/or documentation to the Human Resources Department within 31 days of the event via Business Solver or by emailing healthandwellbeing@fanatics.com. Your request will be reviewed and determined whether the change is permissible. Benefit changes must be consistent with the QLE.



More information

You can find more information about your benefit plans, by visiting **https://benefitsatfanatics.com**

medical plans

Fanatics provides valuable benefits that help you and your family stay healthy and pay for care in the event of illness or injury. Our benefits program offers several plan options with a range of coverage levels and costs, so you can choose the plan that is best for you and your family. The information below is a summary of your medical coverage.

KEY FEATURES

- Comprehensive, affordable coverage for a wide range of health care services.
- Flexibility with providers.
- In-network preventive care, with services covered at 100%, including annual physicals, recommended immunizations, well-woman and well-child exams, flu shots, and routine cancer screenings.
- You will save money when you stay in-network.
- Financial protection through annual out-of-pocket maximums that limit the amount you'll pay each year.
- Choice of coverage levels: Employee Only, Employee and Spouse, Employee and Child(ren), and Family.

Plan Features	PPO High | Option 1	PPO Low | Option 2	HDHP | Option 3	Florida EPO | Option 4	Kaiser HMO
Your Medical Costs					
Calendar Year Deductible (Individual/Family)					
In-network	$500/$1,500	$1,500/$4,500	$2,000/$4,000*	$1,000/$3,000	$500/$1,000
Out-of-network	$1,800/$5,400	$4,500/$13,500	$4,000/$8,000*	Not covered	Not covered
Coinsurance (Coins)					
In-network	0%	20%	20%	20%	20%
Out-of-network	50%	50%	50%	Not covered	Not covered
Calendar Year Out-of-Pocket Maximum (Individual/Family)					
In-network	$3,500/$7,000	$4,500/$9,000	$5,000/$10,000**	$4,000/$9,000	$3,000/$6,000
Out-of-network	$7,000/$14,000	$9,000/$18,000	$10,000/$20,000**	Not covered	Not covered
Preventive Care					
In-network	100% covered	100% covered	100% covered	100% covered	100% covered
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Primary Care (PCP) Visit					
In-network	$30 copay	$30 copay	Deductible, then 20% coins	$25 copay	$20 copay
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Specialist Visit					
In-network	$60 copay	$55 copay	Deductible, then 20% coins	$60 copay	$40 copay
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Virtual Visit					
In-network	$10 copay / $30 copay Teladoc: PCP / Specialist	$10 copay / $30 copay Teladoc: PCP / Specialist	Deductible, then 20% coins Your Teladoc cost share will depend on the service	$10 copay / $25 copay Teladoc: PCP / Specialist	$0 copay Telehealth Visit
Lab & X-ray					
In-network	Your cost share will depend on your provider and where the service is performed	Your cost share will depend on your provider and where the service is performed	Deductible, then 20% coins	Your cost share will depend on your provider and where the service is performed	$10 copay
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Emergency Room Visit					
In- or out-of-network	$350 copay (waived if admitted)	$350 copay (waived if admitted)	Deductible, then 20% coins	$350 copay (waived if admitted)	Deductible, then 20% coins
Urgent Care Visit					
In-network	$30 copay	$30 copay	Deductible, then 20% coins	$25 copay	$20 copay
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Outpatient Hospital Services					
In-network	Deductible + $300 copay	Deductible, then 50% coins	Deductible, then 20% coins	Deductible + $300 copay	Deductible, then 20% coins
Out-of-network	Deductible, then 50% coins	Deductible, then 50% coins	Deductible, then 50% coins	Not covered	Not covered
Inpatient Hospital Services					
In-network	Deductible + $700 copay	Deductible, then 20% coins	Deductible, then 20% coins	Deductible + $400/day (5 days max)	Deductible, then 20% coins
Out-of-network	Deductible, then 50% coins	Deductible + $500 copay, then 50% coins	Deductible, then 50% coins	Not covered	Not covered

*With the HDHP, the family deductible is an aggregate, or "true family," deductible. This means that coinsurance for any person covered under a family plan begins only after the entire family deductible has been met.

**With the HDHP, family coverage has an embedded out-of-pocket maximum. This means the plan begins to pay 100% for any covered family member when that person meets the individual out-of-pocket maximum of $6,650 in-network. The plan will pay 100% for all covered family members once the family out-of-pocket maximum ($10,000 in-network/$20,000 out-of-network) has been met, even if certain family members have not met the individual out-of-pocket maximum.

medical benefit definitions

Calendar Year Deductible: Your calendar year deductible is the amount of money you must first pay out-of-pocket before your plan begins paying for services covered by coinsurance. Some services, such as office visits, require copays and do not apply to the deductible. After you meet your deductible, the plan pays for a percentage of eligible expenses (coinsurance) until you meet your out of pocket maximum. If you receive services from an out-of-network provider, the plan pays a lower percentage of coinsurance. Your calendar year deductible resets in January, at the beginning of the calendar year. Refer to your health care plan summaries for more information.

Copayment / Coinsurance: A copayment (copay) is the fixed dollar amount you pay for certain in-network services. In some cases, you may be responsible for coinsurance after a copay is made. Coinsurance is the percentage of covered expenses shared by the employee and the plan. In some cases, coinsurance is paid after the insured meets a deductible. For example, if the plan pays 80% of an in network covered charge, you pay 20%.

Out of Pocket Maximum: Plans feature an out-of-pocket maximum, which limits the amount of coinsurance you will pay for eligible health care expenses. Once you reach that maximum, the plan begins to pay 100% of eligible expenses. There may be separate in- and out-of-network annual out-of-pocket maximums. Copays, deductibles and coinsurance accumulate towards your out of pocket maximum.

TAKE ADVANTAGE OF PREVENTIVE CARE BENEFITS

Good preventive care can help you stay healthy and detect any "silent" problems early, when they are most likely treatable. Most in-network preventive services are covered in full, so there's no excuse to skip it.

- ✓ Have a routine physical exam each year. You will build a relationship with your doctor and can reduce your risk for many serious conditions. In addition to your annual physical exam, examples of preventive care include immunizations, mammograms, pap smears, pelvic exams, PSA exams, and colonoscopies.
- ✓ Get regular dental cleanings. Numerous studies show a link between regular dental cleanings and disease prevention — including lower risks of heart disease, diabetes, and stroke.
- ✓ See your eye doctor at least once every two years. If you have certain health risks, such as diabetes or high blood pressure, your doctor may recommend more frequent eye exams.

KAISER HMO

The Kaiser HMO plan is available to California employees only. It provides coverage only when you receive care from providers within the HMO network. Your primary care provider (PCP) will coordinate your care to help manage costs.

If you are newly enrolling in this plan, you will receive an ID card in the mail shortly after enrolling. You can also print your ID card information from the Kaiser website kaiserpermanente.org or download the Kaiser Permanente mobile app to view a digital ID card.

With an HMO, you're required to select a primary care provider (PCP) who will manage your care and provide referrals if you need to see a specialist.

BCBS | MY HEALTH TOOLKIT

My Health Toolkit is an online resource for tools and information to help you better manage treatment, financial decisions and wellness. Whether you need to locate an in-network doctor or research the cost of a surgery, it has resources to help. To enroll go to www.MyHealthToolkitFL.com and then:

- Click the "Register Now" button.
- Enter the number on your membership card and your date of birth. If you don't have your membership card, enter the policyholder's Social Security number.
- Follow the instructions to Create Your Profile.

pharmacy benefits

When you enroll in the PPO (Option 1), PPO (Option 2), HDHP (Option 3), or Florida EPO (Option 4) plan, you automatically receive pharmacy benefits through OptumRx. OptumRx has a wide variety of pharmacies in its network, including both national and locally run pharmacies. If you enroll in the Kaiser HMO plan, your pharmacy coverage will be provided through Kaiser.

The cost of your prescription drugs depends on the tier of the medication:

Tier 1 — Generic medications contain the same active ingredients as their brand-name equivalents and meet the same federal standards for safety, but typically cost significantly less.

Tier 2 — Preferred brand-name prescription drugs are favored by a prescription plan based on effectiveness and cost.

Tier 3 — Nonpreferred brand-name prescription drugs are not on a prescription plan's favored list (or formulary) based on effectiveness and cost. Nonpreferred drugs still may be covered but may require prior authorization and cost more.

Call customer service at 855-312-7412, log onto optumrx.com, or download the OptumRx app.

Plan Features	PPO High | Option 1	PPO Low | Option 2	HDHP | Option 3	Florida EPO | Option 4	Kaiser HMO
Retail Prescriptions (30-day supply)					
Tier 1	$10 copay	$10 copay	Deductible, then 20% coinsurance	$10 copay	$10 copay
Tier 2	$50 copay	$50 copay	Deductible, then 20% coinsurance	$50 copay	$30 copay
Tier 3	$80 copay	$80 copay	Deductible, then 20% coinsurance	$80 copay	N/A
Mail Order Prescriptions (90-day supply)					
Tier 1	$25 copay	$25 copay	Deductible, then 20% coinsurance	$25 copay	$20 copay
Tier 2	$125 copay	$125 copay	Deductible, then 20% coinsurance	$125 copay	$60 copay
Tier 3	$200 copay	$200 copay	Deductible, then 20% coinsurance	$200 copay	N/A

medical and pharmacy rates

Medical | Pharmacy Rates	PPO High | Option 1	PPO Low | Option 2	HDHP | Option 3	Florida EPO | Option 4	Kaiser HMO
2022-2023 Weekly Payroll Deductions					
Employee Only	$46.60	$22.87	$24.73	$25.08	$23.69
Employee + Spouse	$134.97	$83.85	$87.63	$87.78	$85.99
Employee + Child(ren)	$122.12	$72.42	$80.57	$83.40	$71.14
Family	$199.25	$118.16	$131.45	$136.07	$120.00
2022-2023 Bi-Weekly Payroll Deductions					
Employee Only	$93.20	$45.74	$49.47	$50.16	$47.38
Employee + Spouse	$269.95	$167.70	$175.27	$175.57	$171.99
Employee + Child(ren)	$244.24	$144.83	$161.13	$166.80	$142.28
Family	$398.51	$236.31	$262.91	$272.13	$240.00

Medical Plan Costs

You and Fanatics share the cost of your medical benefits — Fanatics pays a generous portion of the total cost and you pay the remainder. The amount you pay is deducted from your paycheck. Your specific cost is determined by the plan you choose and the coverage level you select.

supplemental health programs

accident insurance

Designed to help protect you from unexpected financial stress if you or a covered family member has an accidental injury. Accident insurance supplements your primary medical plan by providing cash benefits. You can use this money to help pay for medical expenses not paid by your medical plan (such as your deductible or coinsurance for emergency care, hospital stays, and physician treatment) or for anything else (such as transportation and lodging needs).

KEY FEATURES

- Choice of two benefit levels.
- Cash benefits paid directly to you based on the payment schedule in the plan you select.
- Actual benefit amounts depend on the type of injury(ies) you have and the medical services you need.

critical illness insurance

When a serious illness strikes, such as a heart attack or cancer, critical illness insurance through provides financial support to help you through your difficult time. If you are diagnosed with a covered condition, you receive a lump-sum benefit payment that you can use however it's needed most. This money can help cover out-of-pocket expenses for your treatment that are not covered by your medical plan or other expenses, such as housekeeping services, special transportation, and day care.

KEY FEATURES

- Choice of two benefit levels — $15,000 or $30,000.
- Coverage available for your spouse or eligible dependents at 50% of your coverage amount.
- Cash benefits paid directly to you up to the benefit level you've chosen, based on the payment schedule in your plan. Benefit payment of $50 for getting your annual wellness exam.

hospital indemnity insurance

Even with your primary medical coverage, you still may be responsible for copays, deductibles, and other out-of-pocket costs if you're admitted to the hospital. A hospital indemnity plan through provides supplemental payments that you can use to cover expenses your medical plan doesn't cover.

KEY FEATURES

- Cash benefits paid directly to you if you require a hospital stay, ambulance service, surgery, and certain inpatient or outpatient treatments.
- Specific benefit amounts based on the payment schedule in your plan for covered hospital services and durations, regardless of the actual cost of the services.

wellness programs

To help you on your journey to well-being, Fanatics partnered with the following vendors:

Wellbeats: A premier app based on-demand fitness provider, delivering fitness classes, workout plans and fitness assessments to users anytime, anywhere on their mobile devices. Wellbeats offers 29 channels and hundreds of virtual fitness classes with something for every age, stage and ability. Fanatics provides this benefit to our employees at no cost. For more information about Wellbeats, please contact your HR Business Partner or visit www.wellbeats.com.

Gympass: Our employees have unlimited access to 45,000 gyms and fitness studios in more than 6,000 cities. Membership fees are paid through payroll deduction and once an employee joins, they can access fitness facilities in their tier of membership in any Gympass partner facility anywhere in the country. For more information about Gympass, and the cost of each tier per pay period, please contact your HR Business Partner or visit www.gympass.com.

Weight Watchers: You can take advantage of the WW digital weight loss tools and programs to help you develop healthy habits and a healthy mindset. Fanatics provides this benefit at no cost to you. Free access to WW's digital program, which includes an easy-to-use mobile app and website. To join or learn more, visit www.weightwatchers.com/us/wwhs or call 866-204-2885. When prompted online, enter our Employer ID: 15535180. Please contact healthandwellbeing@fanatics.com for additional questions.

OPTUM EMPLOYEE ASSISTANCE PROGRAM (EAP)

When faced with a challenge in your life — no matter how big or small — our Employee Assistance and Work/Life Support Program is here for you. This confidential program is available at no cost to you to help you and your family find solutions and restore your peace of mind. Support is available 24/7 by calling 866-248-4096 or logging in to the Optum website and using access code: fanatics

additional EAP features for employees

- The **Sanvello** app is available as part of our EAP that offers techniques to help dial down the symptoms of stress, anxiety and depression. Escape to Sanvello whenever you need to track your daily mood and progress until you feel better. Just visit liveandworkwell.com to download the Sanvello app. Enter with the company access code: fanatics and select the Sanvello tile under 'popular tools'.
- You can reach out to a licensed, in-network EAP provider, 24/7 through **Talkspace**. To get started, call your Optum EAP at 866-248-4096 to obtain an authorization code prior to registering (first visit only), choose a provider, and message anywhere, anytime. Once you're registered, you can download the Talkspace app on your mobile phone.

dental plans

Healthy teeth and gums are important to your overall wellness. That is why it is important to have regular dental checkups and maintain good oral hygiene. Learn about the dental plans available to help you maintain your oral health. As an employee of Fanatics, you have the option to enroll in one of our dental plans through MetLife.

KEY FEATURES

- Free in-network preventive care with no deductible.
- Affordable coverage that helps you manage the cost of dental treatment from both in- and out-of-network providers.
- Wide network of providers that have agreed to negotiated rates, which helps you save money.

MetLife Dental	DPPO Value		DPPO Premium	
	In-Network	Out-of-Network*	In-Network	Out-of-Network*
Calendar Year Deductible (waived for Preventive Services In-Network)	$50 individual $150 family	$100 individual $300 family	$50 individual $150 family	$50 individual $150 family
Calendar Year Maximum Benefit	$1,000		$2,500	
Services				
Diagnostic & Preventive	You pay $0	You pay 20%	You pay $0	You pay $0
Basic (e.g., fillings and extractions)	You pay 20%, plan pays 80%	You pay 30%, plan pays 70%	You pay 20%, plan pays 80%	You pay 20%, plan pays 80%
Major services (e.g., dentures, crowns, bridges)	You pay 50%, plan pays 50%	You pay 60%, plan pays 40%	You pay 50%, plan pays 50%	You pay 50%, plan pays 50%
Adult/Child Orthodontia (child up to age 26)	Not covered		You pay 50%, plan pays 50%	You pay 50%, plan pays 50
Adult/Child Orthodontia Lifetime Maximum	Not covered		$1,500	

*Note: If you visit an out-of-network provider, you are responsible for charges above usual, customary, and reasonable (UCR) limits.

Dental Rates	DPPO Value		DPPO Premium	
2022-2023 Payroll Deductions	Weekly	Bi-Weekly	Weekly	Bi-Weekly
Employee Only	$1.46	$2.93	$3.53	$7.06
Employee + Spouse	$5.29	$10.59	$8.49	$16.99
Employee + Child(ren)	$6.38	$12.76	$11.17	$22.33
Family	$8.59	$17.18	$14.70	$29.41

vision plan

Fanatics partners with EyeMed to provide our employees the option for voluntary vision benefits. Having vision coverage allows you to save money on eligible eye care expenses, such as periodic eye exams, eyeglasses, contact lenses, and more for you and your covered dependents.

Everything is right there in one spot. Check claims and benefits, see special offers and find an eye doctor — search for one with the hours, location and brands you want. Create a member account at eyemed.com today. For maximum mobility, try the EyeMed Members App.

EyeMed	In-Network	Out-of-Network
Exam (every 12 months)	$10 copay	$30 reimbursement
Frames (every 12 months)	$150 allowance, then you pay balance at a 20% discount	$65 reimbursement
Lenses (every 12 months)		
Single vision	$25 copay	$25 reimbursement
Bifocal	$25 copay	$40 reimbursement
Trifocal	$25 copay	$60 reimbursement
Lenticular	$25 copay	$60 reimbursement
Single vision	$25 copay	$25 reimbursement
Contact Lenses (instead of glasses, every 12 months)		
Disposable Lenses	$120 allowance	$96 reimbursement
Medically Necessary Lenses	Covered in full	$200 reimbursement
2022-2023 Payroll Deductions	Weekly	Bi-Weekly
Employee Only	$1.23	$2.46
Employee + Spouse	$2.34	$4.68
Employee + Child(ren)	$2.46	$4.92
Family	$3.62	$7.23

flexible spending accounts

Fanatics partners with Optum Financial to administer our flexible spending account and health savings account benefits. If you enroll in either the health care spending account or health savings account, you will receive a debit card to use for your eligible expense.

Flexible Spending Accounts (FSA)

FSAs allow you to set aside pre-tax dollars from your paycheck to pay for certain health care and dependent care expenses.

Health Care FSA: The annual Health Care FSA maximum is $2,850 and is available on the first day of the FSA plan year. Your total FSA contribution amount is deducted from your paycheck in equal amounts throughout the plan year. Expenses for the 2022-2023 Health Care FSA must be incurred between July 1, 2022 and June 30, 2023, and all claims must be substantiated by September 30, 2023.

Dependent Care FSA: The Dependent Care FSA offers you the opportunity to use pre-tax dollars towards qualified childcare or elder care expenses for your dependents. The maximum amount your overall family may contribute to the Dependent Care FSA is $5,000 per plan year. Only the funds that are contributed are available, the full amount is not available on the first day of the plan year. Expenses for the 2022-2023 Dependent Care FSA must be incurred between July 1, 2022 and September 15, 2023, and all claims must be substantiated by September 30, 2023.

Important FSA Reminders: Make sure you save your explanation of benefits (EOBs) and receipts. You may be required to submit additional information on your expense for substantiation.

health savings account

You can make pre-tax deductions from your paycheck into your health savings account (HSA), allowing you to save money by using tax-free dollars to pay for eligible medical, prescription, dental, and vision expenses. The total amount that can be contributed to your HSA each year is limited by the IRS. You cannot have a health care FSA and HSA at the same time. Eligible HSA account holders have the opportunity to invest funds in your HSA once you've reached a minimum threshold of $1,000.

To be eligible to participant in a HSA, you must:

- Be enrolled in BCBS HDHP medical plan.
- Not be enrolled in Medicare or Tricare.
- Cannot be a dependent on another's tax return.

Healthcare FSA	Dependent Care FSA	Health Savings Account (HSA)
Medical Enrollment: BCBS PPO Option 1 or 2, Florida EPO and Kaiser plans or not enrolled in Fanatics heath plan.	Medical enrollment does not matter.	**Medical Enrollment:** BCBS HDHP.
2022 Maximum Contribution: $2,850 Contributions are made by the employee and available on first day of the plan year.	**2022 Maximum Contribution:** $5,000 Contributions are made by the employee and only the funds contributed throughout the plan year are available to use.	**2022 Maximum Contribution (tax-free):** $3,650 Single / $7,300 Family Catch up contributions of $1,000 if you're over the age of 55. Contributions are made by the employee and Fanatics contributes $500 (single coverage) / $1,000 (non-single coverage) annually that is yours to keep.
Carryover Limit: $100 - $570 Unused funds over the carryover limit at the end of the plan year are forfeited. Account ownership is with Fanatics.	All unused funds will be forfeited at the end of the plan year's grace period (September 15th). Account ownership is with Fanatics.	All funds are owned by the employee and rollover each year. If you meet a certain threshold, you can start to invest your HSA funds.
You can pay for eligible medical, dental, and vision expenses.	You can pay for qualified child care or elder care expenses for your dependents.	You can pay for eligible medical, dental, and vision expenses.

income protection

Your benefits include programs to help ensure financial security for you and your family during an unexpected event.

Basic Life Insurance & Accidental Death and Dismemberment (AD&D)

Fanatics provides employees with basic life insurance, accidental death and dismemberment (AD&D) at no cost to you. You will be covered for an amount equal to 1 times your base salary up to $500,000. The guaranteed issue amount is up to $500,000 for initial enrollment.

Supplemental Insurance

You have the option to purchase additional coverage for yourself, your spouse and/or your children.

Employee: $10,000 increments up to 5 times your base salary, to a maximum of $500,000 (Guaranteed Issue: $250,000).

Spouse: $5,000 increments to a maximum of $250,000 (Guaranteed Issue: $50,000).

Child(ren): $5,000 increments to a maximum of $10,000 (Guaranteed Issue: $10,000).

To purchase coverage for either your spouse or child(ren), you must enroll yourself for coverage. You pay 100% of the cost for this coverage. Please refer to the plan summaries for additional benefit information and rates. Evidence of Insurability will be required if you are currently enrolled in employee/spouse supplemental coverage and elect more than 2 units (benefit increment) and/or elect over the guaranteed issue amount during annual enrollment, previously denied coverage and/or if you enroll after your initial eligibility period.

Retirement Savings 401(k)

Fanatics encourages you to save for your future retirement by offering a 401(k) Retirement Savings Plan. You are eligible to participate in this plan the first of the month following or coinciding with your employment start date. You may contribute between 1% and 100% of your eligible pay to your plan account through payroll deduction, up to annual IRS limits. In addition, Fanatics will match a percentage of your elective contributions to the plan. You become eligible for the company matching contribution after you have completed one year of service. Fanatics matches 100% of the first 3% then 50% of the next 2%. You are always 100% vested in your contributions.

What does Guaranteed Issue Mean?
Guaranteed issue refers to the amount of insurance you may buy without the insurance company requiring you to provide evidence of insurability (EOI), or proof of your good health.

Short Term Disability

Employees are eligible to receive short-term disability (STD) benefits for a qualified non-work related illness or injury that prevents you from working. The benefit is 100% of your weekly covered earnings. Coverage ends after 13 weeks (concurrent 12 weeks for maternity) of disability (for exempt employees who have two or more years of service, coverage ends after 26 weeks).

Basic Long Term Disability

Fanatics provides basic long term disability (LTD) insurance to employees in the event you cannot work because of a long-term illness or injury. LTD benefits provide you with 50% of your monthly covered earnings, up to a $5,000 monthly maximum after 90 consecutive days of a qualified non-work related illness or injury. For exempt employees who have two or more years of service, benefits begin after 180 days.

Voluntary Long Term Disability

Employees are eligible to purchase voluntary long-term disability (LTD) insurance which pays a monthly benefit. This benefit combines with Basic Long-Term Disability to replace a total of 60% of your monthly base salary (excluding variable pay), up to a maximum of $10,000 per month for employees below the VP level and up to a maximum of $25,000 a month for VP level employees and above.

additional benefits

Regular employees of Fanatics are invited to enroll in the following additional benefits and discount programs. Please review the eligibility for each of these programs by visiting https://benefitsatfanatics.com

MetLife Legal Plan

Fanatics offers a voluntary legal plan that provides legal assistance for some of the most frequently needed personal legal matters with no waiting periods, no deductibles and no claim forms, when using a Network Attorney for a covered matter. And, for non-covered matters that are not otherwise excluded, this benefit provides four hours of network attorney time and services per year.

Identity Protection

Allstate Identity Protection provides ongoing monitoring of your identity to detect fraud and take action to restore your identity in the event of identity theft. With this coverage, you can:

- Protect yourself against the damage of identity theft or reputational injury.
- Get peace of mind from knowing your credit reports, Social Security number, credit cards, and debit cards are being continuously monitored for suspicious activity.
- Receive the help of a Privacy Advocate to resolve any identity theft issues and manage your identity restoration case from start to finish.

Care.com

When regular care for children, adults, and pets are not available, Fanatics employees can take advantage of subsidized back-up care through one of the largest networks with Care.com. Employees can also build their personal network to use providers outside of the network for children and pet back-up care needs. In addition to this service, you will have unlimited access to an online platform to help manage care, find assistance with tutoring needs, housekeeping, and many other discounts on everyday expenses.

Purchasing Power® Plan

Fanatics offers you access to this financing program so you can make purchases through easy payroll deduction. Shop through an online marketplace where you can buy products from more than 7,000 brand names. Make manageable payments through payroll deduction with no interest, finance charges, or credit checks. You can also spread payments across six or 12 months.

Pet Insurance

My Pet Protection® from Nationwide provides coverage to help you cover the costs of veterinary care for your furry family member. With this coverage, you can:

- Protect against the financial impact of veterinary care.
- Take your pet to any veterinarian worldwide.
- Receive coverage for accidents, injuries, common illnesses, and more.

Auto and Renter's Insurance

Through Fanatics' partnership with Farmers (GroupSelect) Insurance, you have access to a number of insurance programs at discounted group rates, including auto, motorcycle, boat, RV, renter's, condo, and mobile home. Not all programs are available in all states. Eligible employees may be eligible for a discounted rate and the convenience of having premiums deducted from your paycheck on an after-tax basis.

Commuter Benefits

To ease the cost of your commute to work, the Fanatics Commuter Benefit Plan lets you set aside tax-free dollars from your paycheck to help pay for qualified commuting costs, including parking and transit expenses.

contacts

Benefit Program	Carrier/Vendor	Contact Information	Contact Phone Number
Benefits Call Center	Business Solver	Monday – Friday 8am – 8pm ET	888-907-1434
Medical	BCBS	www.myhealthtoolkitfl.com	833-212-0851
Kaiser (HMO)	Kaiser	kaiserpermanente.org	800-464-4000
Telehealth	Teladoc	www.myhealthtoolkitfl.com	866-789-8155
Pharmacy	OptumRx	www.optumrx.com	855-312-7412
Dental	MetLife	www.metlife.com	800-438-6388
Vision	EyeMed	www.eyemed.com	866-439-3633
Supplemental plans (Accident, Critical Illness, and Hospital Indemnity)	Cigna	www.cigna.com	800-754-3207
Basic Life/AD&D, Supplemental Life	Lincoln Financial Group	www.mylincolnportal.com	866-502-2944
Short Term Disability & Family Medical Leave Act (FMLA)	Lincoln Financial Group	www.mylincolnportal.com	866-502-2944
Long Term Disability	Lincoln Financial Group	www.mylincolnportal.com	866-502-2944
FSA, HSA, and Commuter	Optum Financial	www.optumfinancial.com	877-292-4040
Employee Assistance Program	Optum EAP	www.liveandworkwell.com/content/en/public.htm Access code: fanatics	866-248-4096
Retirement Savings 401(k) Plan	Fidelity	www.nb.fidelity.com/public/nb/401k/home	800-835-5095
Identity Protection	Allstate	www.myaip.com	800-789-2720
Legal Plan	MetLife	www.legalplans.com Access code: forlaw4	800-821-6400
Auto & Renters Insurance	Farmers GroupSelect	www.farmers.com	800-422-4272
Purchasing Power® Plan	Purchasing Power	https://www.purchasingpower.com/?domain=fanatics	888-923-6236
Back-up Care	Care.com	www.fanatics.care.com	855-781-1303
My Pet Protection	Nationwide	www.benefits.petinsurance.com/fanatic-retail-groups-fulfillment-inc	877-738-7874
Wellness Discounts	Gympass	www.gympass.com	866-642-7917
	Weight Watchers	www.weightwatchers.com/us/wwhs	866-204-2885
	Wellbeats	www.wellbeats.com	855-520-7500

This guide is intended to describe the eligibility requirements, enrollment procedures, plan highlights, and coverage effective dates for the benefits offered by Fanatics. It is not a legal plan document and does not imply a guarantee of employment or continuation of benefits. While every effort has been made to ensure accuracy of this benefits guide, the plan documents and contracts will prevail in case of discrepancy between this guide and the plan documents and contracts. In addition, the company reserves the right to modify or terminate any benefit plans at any time. Please retain this guide for reference and contact Human Resources for additional questions.