

2016 Benefits Guide

HOLIDAY INN CLUB VACATIONS®



YOUR 2016 HOLIDAY INN CLUB VACATIONS BENEFITS

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Welcome to Your Holiday Inn Club Vacations Benefits

You are very important to us as a valued member of the Holiday Inn Club Vacations family. But it's more than about your work. It's about staying healthy and balanced in all parts of your life. That's why we are making a solid investment in you, by offering a variety of benefits to help you reach your goals – in your career and your life.

This Benefits Guide is a summary of the plans and programs available to you. Be sure to read this carefully, as your benefits can change from year to year. If you have any questions or if you need any additional information about your benefits, call HR Link, your one stop for Human Resources.

IMPORTANT MEDICARE MESSAGE

If you (and/or your dependent) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. See Addendum B in Legal Notices for more details.

CONTACT INFORMATION

LEGAL NOTICES

About this Guide

This year, in an effort to save on costs and paper use, we're moving away from our traditional printed materials to this electronic guide. This interactive guide is designed to give you clear, easy-to-read, and convenient benefits information. You can:

- Use the buttons above or links on the left to learn about the topic areas you're interested in.
- Search the guide using the search tool below.
- Easily print a page — or the entire guide — if you prefer a printed version.

The information in this guide is presented for illustrative purposes only. The text contained in this guide was taken from various plan documents and/or benefit information. While every effort was taken to accurately report your benefits, discrepancies, or errors are always possible. In case of a discrepancy between the guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this guide, contact Human Resources.



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Before you begin structuring your personal benefits package, make sure you are eligible for the programs this benefit guide describes.

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You are generally eligible for the Holiday Inn Club Vacations benefits if you are a full-time employee, regularly scheduled to work 30 or more hours per week. For the 401(k) Savings & Investment Plan, you are eligible if you are age 18 or older and have at least three months of service.

Your Dependents

When you enroll for benefits, you can also enroll your eligible dependents. Eligible dependents include:

- Legal Spouse
- Natural, adopted, foster or step child(ren)
- Child(ren) for whom court appointed or legal guardianship has been awarded
- Handicapped child(ren) of any age (if determined to meet plan requirements)

Eligible dependent children may be covered until:

- Medical: end of the month they turn age 26
- Dental: end of the month they turn age 26
- Vision: end of the month they turn age 26
- Supplemental Life: end of the month they turn age 21 or age 25 if a student



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You can enroll for benefits when you are first eligible, during Open Enrollment, or during the year if you experience a qualifying event. If you are currently enrolled in any benefits and want to keep your current elections, no action is required. If you would like to make changes to your elections, now is the time!

Enrolling for the First Time — As a New Hire

As a new hire, coverage begins on your 90th day of employment as a regular, full-time employee. To enroll for the first time, you must complete the online enrollment through Ultipro within 90 days of the date you are hired to enroll/waive the employer sponsored benefits. Be sure to fill out the information carefully and correctly. If you fail to meet the deadline, you will not be able to enroll until the next **Open Enrollment period unless you experience a qualifying event.**

Enrolling During Annual Open Enrollment

During the Open Enrollment period, you will have the opportunity to waive, enroll in or make changes to your benefit elections without a qualifying event. You may also drop or add eligible dependents for benefits during the Open Enrollment period.

Once you have made your elections you will not be able to change them until the next Open Enrollment period, unless you experience a qualifying event. The benefit decisions you make during the Open Enrollment period are effective January 1 through December 31.



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Enrolling During the Year — Qualifying Event

Your coverage will remain in effect for the entire plan year for which you enroll. However, if your benefit needs change — for example, if you get married or divorced — you are allowed to make changes to your coverage as long as you make your change within 30 days after the event and the change is consistent with your qualifying event. Qualifying events include:

- Birth or adoption of a child
- Marriage or divorce
- Death of spouse or a dependent
- Change of dependent status
- Change in employment status (employee, spouse or dependent)
- Change in residence due to an employment transfer
- Loss in other group coverage

It is your responsibility to notify Human Resources within 30 days of the qualifying event.



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Your Benefits

From employer paid to supplemental/voluntary benefits, Holiday Inn Club Vacations offers a variety of benefit plans to meet your individual or family needs.

The following pages summarize the benefit plans available to you from January 1 through December 31, 2016. The benefits described in this section of the benefits guide include:

- **Medical coverage**
 - CHDP-13 Plan (HSA eligible)
 - CHDP Plan (HSA eligible)
 - 4500 HMO Plan
 - 3250 HMO Plan
- **Dental coverage**
 - Dental Plan
 - Dental Plus Plan
- **Vision coverage**
- **Life and Accidental Death & Dismemberment (AD&D) Insurance**
 - Basic coverage
 - Supplemental coverage
- **Disability Insurance**
 - Short Term Disability
 - Long Term Disability
- **401(k) Retirement Plan**
- **Personal Development**



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Medical Benefits — Blue Cross Blue Shield

Choosing the health insurance plan that is right for you and your family is a big decision. Be sure to know what benefits the plans offer and their costs. There is no one-size-fits-all plan that works for everyone. We provide **four** medical plans through Blue Cross Blue Shield to meet the varying needs of our employees. Two are CDHP's (Consumer Driver Health Plans) and the other two are HMOs.

Commonly Used Health Insurance Terms

- Your **Copay** is how much you pay each time you go to the doctor or fill prescription drugs.
- **In-Network** is when you get your care *within* a group of doctors, hospitals and healthcare providers chosen by BCBS. Your out-of-pocket costs are usually lower when you get care in-network.
- **Out-of-Network** is when you get your care from any doctor *outside* of the BCBS network. Deductibles and copays are usually higher when you do this.
- **Out-of-Pocket** costs are what you pay when getting care. These include deductibles; copays, office or facility charges; and other fees charged for your care.
- The **Deductible** is the amount of healthcare costs *you will pay out of your pocket before the insurance starts paying for covered services*. Some plans, like the HMO, have deductibles for certain services. Other plans, like the CDHP, have a deductible for all services except preventive care.
- With **Embedded Deductibles**, each covered family member only needs to meet his or her own deductible (not the entire family deductible), before receiving plan benefits.
- **Mandatory Generic** is when you request a brand name drug when a generic equivalent is available, you will pay the generic copay PLUS the cost difference between the brand and generic drug. Dispense as written (DAW) may be allowed. With DAW you will not be charged a cost difference.

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Find a Network Provider

To locate a participating provider go to www.bcbs.com. Enter OLR under 'Already a Member' and your city and state under 'Location'.

You are also able to search by specialty.



Find a Doctor or Hospital

Search by Keyword | [Search by Specialty](#)

▲

OR

Search by:

Name, specialty, procedures, more...

Location:



The Affordable Care Act (ACA) has given Americans new ways to get health insurance. There are now special "marketplaces" or "exchanges" to buy healthcare insurance directly.

Holiday Inn Club Vacations offers different kinds of affordable healthcare plans. All of these plans meet ACA requirements. This means, in most cases, eligible full-time employees will not be able to get a government subsidy if they decide to enroll in marketplace coverage.

Before choosing a healthcare plan, go to www.healthcare.gov to learn more about the best options for you and your family.



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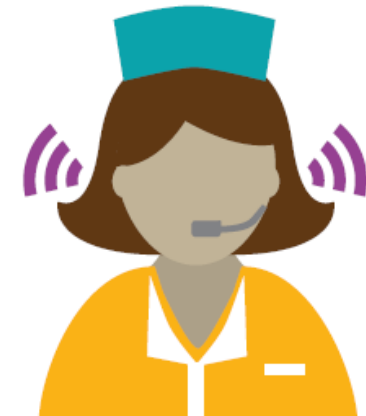
Reach out to the 24/7 Essential Advocate

Dial the toll-free number 1.888.521.2583

Call Essential Advocate any time of the day, any day of the week. A care coordinator will connect you with a registered nurse or other expert who can provide information, support or health pointers. For example, you can get help with:

- Concerns about medications and side effects
- Finding a doctor, specialist or urgent care
- Scheduling an appointment with your doctor
- Comparing costs before scheduling medical treatment
- Preparing for surgery and taking steps for a healthy recovery
- Locating helpful programs and resources in your community

Essential Advocate is a free service and information can be received in English or Spanish.





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Medical Plans At-a-Glance - Consumer Driven Health Plans (CDHPs)

	CDHP-13		CDHP	
	Network	Non-Network	Network	Non-Network
Coinsurance	80%	60%	100%	80%
Deductible	Embedded		Embedded	
Individual	\$2,000	\$4,000	\$2,000	\$4,000
Family	\$4,000	\$8,000	\$4,000	\$8,000
Annual Out-of-Pocket (OOP) Maximum (including deductible)				
Individual	\$4,000*	Unlimited	\$4,000*	Unlimited
Family	\$8,000*	Unlimited	\$8,000*	Unlimited
Preventive Care	You pay \$0	You pay \$0	You pay \$0	You pay \$0
Office Visits PCP/Specialist	You pay 20% after deductible	You pay 40% after deductible	Deductible applies	You pay 20% after deductible
Hospital – Inpatient/Outpatient	You pay 20% after deductible	You pay 40% after deductible	Deductible applies	You pay 20% after deductible
Outpatient Diagnostic Services (Labs, X-rays)	You pay 20% after deductible	You pay 40% after deductible	Deductible applies	You pay 20% after deductible
Complex Diagnostic Imaging	You pay 20% after deductible	You pay 40% after deductible	Deductible applies	You pay 20% after deductible
Urgent Care	You pay 20% after deductible	You pay 20% after deductible	Deductible applies	Deductible applies
Emergency Room	You pay 20% after deductible	You pay 20% after In-Network deductible	Deductible applies	In-Network deductible applies

* Rx Copays and coinsurance apply after deductible is met and do toward the OOP expenses.

[Continued >](#)



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Medical Plans At-a-Glance - HMO Plans

	4500 HMO		3250 HMO	
	Network	Non-Network	Network	Non-Network
Coinsurance	70%		80%	
Deductible	Embedded		Embedded	
Individual	\$1,250	N/A	\$750	N/A
Family	\$2,500	N/A	\$1,500	N/A
Annual Out-of-Pocket (OOP) Maximum (including deductible)				
Individual	\$4,500	No Out-of-Network benefits except emergency services	\$3,250	No Out-of-Network benefits except emergency services
Family	\$9,000		\$6,500	
Preventive Care	You pay \$0		You pay \$0	
Office Visits PCP/Specialist	\$20 / \$40		\$20 / \$40	
Hospital – Inpatient/Outpatient	You pay 30% after deductible		You pay 20% after deductible	
Outpatient Diagnostic Services (Labs, X-rays)	\$0		\$0	
Complex Diagnostic Imaging	You pay 30% after deductible		You pay 20% after deductible	
Urgent Care	\$50		\$50	
Emergency Room	\$500	\$500	\$500	\$500



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Prescription Drugs

The medical plans includes comprehensive prescription drug coverage. There are four levels of prescriptions drugs:

- **Tier 1:** Generic* drugs
- **Tier 2:** Preferred Brand-Name* drugs
- **Tier 3:** Non-Preferred Brand Name* drugs
- **Tier 4:** Specialty drugs on the Prescription Drug List require special dosing or administration and are more expensive than most medications

Mandatory generic applies to prescription drug coverage on all medical plans. This means that when you request a brand name drug when a generic equivalent is available, you will pay the generic copay PLUS the cost difference between the brand and generic drug.

Example:

Brand Name Cost:	\$100	Generic Copay:	\$15
Generic Cost:	\$20	Brand vs. Generic Cost Difference:	+\$80
Difference in Cost:	\$80	Member's Total Cost for Brand Name Drug:	\$95

Retail Prescription Drugs: These prescription drugs are dispensed on a 30-day supply.

Home Delivery / Mail Order Prescription Drugs: These prescription drugs are generally dispensed on a 90-day supply.

**Designated as per generally accepted industry sources and adopted by the insurance company.*

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	CDHP-13	CDHP	4500	3250
Deductible	Combined with medical deductible	Combined with medical deductible	\$0	\$0
Tier 1	deductible, \$10	deductible, \$10	\$10	\$10
Tier 2	deductible, \$35	deductible, \$35	\$35	\$35
Tier 3	deductible, \$60	deductible, \$60	\$60	\$60
Tier 4	deductible, \$100	deductible, \$100	\$100	\$100

The prescription drug programs offered through Florida Blue have a mandatory generic drug policy. This means if there is a generic drug option and you (and any dependents you are covering) choose the preferred brand (Tier 2) or non-preferred brand (Tier 3) name drug, you will pay the copayment plus the difference in the cost between the generic drug and the preferred brand or non-preferred brand drug.

Medications required as part of preventive care services are covered at 100% with no copayment or deductible.

Detailed information is available at www.healthcare.gov.



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Health Savings Account (HSA)

If you enroll in the CDHP-13 or CDHP (Consumer Driven Health Plans), you may be eligible to open and contribute to a Health Savings Account (HSA). An HSA is an account, which you may fund with tax-exempt dollars, to help pay for eligible medical expenses not covered by the plan, including deductibles, coinsurance and/or copays. **Unused funds will roll over annually!**

HSA Eligible vs. Ineligible Expenses

Eligible Expenses

- Copays, deductibles and coinsurance
- Vision
- Dental
- Rx Prescriptions
- Acupuncture
- Physical Therapy
- Chiropractic care
- Laser eye surgery
- Prescribed over-the-counter items

Ineligible Expenses

- Over-the-counter items (unless prescribed by a doctor)
- Nutritional supplements, such as multi-vitamins (unless prescribed by a doctor)
- Personal use items, such as toothbrushes, toothpaste, etc.
- Cosmetic surgery
- Health club membership fees

ADDED PERK!

Holiday Inn Club Vacations also contributes \$9.62 each week for your HSA, up to \$500 a year.



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Health Savings Account (HSA)

Who is eligible for an HSA? Anyone who is:

- Covered by a High Deductible Health Plan (HDHP)/ Consumer Driven Health Plan (CDHP)
- Not covered under another medical plan that is not a HDHP/CDHP
- Not enrolled in Medicare
- Not eligible to be claimed on another person's tax return
- Not receiving Veteran Administration (VA) or TRICARE benefits

Why should I elect an HSA? Health Savings Accounts allow:

- Tax-free contributions by the employee
- Tax-free growth of interest or investment earnings
- Accumulation of unused funds and portability between employers
- Flexible use – consumers choose whether or when to use the account for health expenses, now or after employment

THE MAXIMUM CONTRIBUTION AMOUNT TO AN HSA FROM ALL SOURCES

	2016
Self-Only Coverage	\$3,350
Family Coverage	\$6,750
For Individuals ages 55+, additional "catch-up" \$1,000	

DON'T MISS OUT!

Don't miss out on the employer contribution! Open an HSA account through Optum Bank.

www.optumbank.com or call

(866) 234-8913, Group# 60684



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Healthy Futures Program

Being healthy is a lifestyle choice, but healthcare insurance can be costly. That is why Holiday Inn Club Vacations offers a wellness discount to all BCBS participants who complete the Healthy Futures Program. Below is an example of the discounted rates.

Single Coverage	2016 Rate	Wellness Discount Rate
CDHP 13	\$19.25	\$16.25
CDHP	\$24.95	\$21.95
4500	\$31.35	\$28.35
3250	\$42.35	\$39.35

Employees in all other coverage tiers will also receive a \$3.00 weekly discount. This includes *employee + children, employee + spouse or employee + family coverage.*

Simply complete these program activities within the 2016 calendar year:

1. Have an annual well visit with your primary care physician and make sure to get your biometric numbers
2. Complete a confidential, online Health Assessment
3. Complete a Tobacco-Free wellness pledge

Once you provide the required documentation, you will see your weekly insurance premiums go down. Call HR Link for details.

In addition to the wellness discount, we offer a variety of programs to keep you active and healthy. From fitness classes, access to resort gyms, free flu shots and health screenings, Weight Watcher classes, and more. Programs vary by resort location so make sure to check in with your local HR representative to find out more.



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Dental Benefits - Cigna

Taking care of your teeth is an important part of staying healthy. And as dental care costs keep going up, a dental plan can help you save money. That's why we offer two broad plans for eligible employees. Both cover 100% of preventive care and you can see dentists in or out of the Cigna network. The main differences are:

- The basic **Dental plan** costs less, but has a higher deductible, a lower amount covered for the year and no orthodontic (i.e. braces) coverage. If your dental needs are low, this is an opportunity to save by purchasing only the coverage you need.
- The **Dental Plus** plan costs more, but has a higher annual benefit, orthodontic coverage for the whole family and the deductible is lower. If you have major work coming up or a family member needs orthodontic care (i.e. braces), this will likely be the better choice.



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Dental Benefits At-a-Glance

Plan pays up to the fee schedule for in-network care, and up to the Usual and Customary Rates for out-of-network care.

Plan Feature	Dental	Dental Plus
Calendar Year Deductible (Individual / Family)	\$50 / \$150	\$25 / \$75
Calendar Year Maximum (per person)	\$1,000	\$2,000
Preventive Care (Oral Exam, Cleanings, Routine X-Rays, Sealants – up to age 14)	Plan pays 100%	Plan pays 100%
Basic Care (Fillings, Oral Surgery, Major & Minor Periodontics, Endodontics)	Plan pays 80% after deductible	Plan pays 80% after deductible
Major Care (Inlays/Onlays/Crowns, Dentures, Bridges)	Plan pays 50% after deductible	Plan pays 50% after deductible
Orthodontia (covers both adult and children)	Not Covered	Plan pays 50%, up to \$2,000 per lifetime
Reimbursement Levels In-Network Benefits Out-of-Network Benefits	Based on Discounted Fees / Negotiated with the Provider Based on Usual and Customary Allowances	

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Vision Benefits - VSP

Millions of people use corrective eyewear today. If you are one of them, you already know how important regular checkups are and how expensive glasses can be. The VSP Vision Care plan can help keep your eyes as healthy as possible. The vision plan is simple to use, you do not need an ID card.

It covers yearly exams and corrective eyewear for a small copay when you use the VSP provider network. You can also go outside its network and still receive a flat dollar amount toward covered services.

Better Network Choices



VSP Doctors



Out of Network National Assignment of Benefits (AOB) Arrangements





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Vision Benefits At-a-Glance

Vision Plan Feature	VSP Provider	Non VSP Provider
Routine Eye Exams (once every 12 months)	\$10 copay	Up to \$45 Allowance
Lenses (once every 12 months)		
Single Lenses	\$15 copay	Up to \$45 Allowance
Lined Bifocal Lenses	\$15 copay	Up to \$65 Allowance
Lined Trifocal Lenses	\$15 copay	Up to \$85 Allowance
Frames (every 24 months)	Up to \$130 Allowance + 20% discount off amount over allowance	Up to \$70 Allowance
Elective Contact Lenses*	Up to \$130 Allowance**	Up to \$105 Allowance
Necessary Contact Lenses	\$15 copay	Up to \$210 Allowance
Laser Vision Correction (LASIK)	15% off regular price or 5% off promotional price from VSP contracted facilities	Not covered

* In lieu of glasses

** The lens exam (fitting/evaluation) is deducted from the contact lenses allowance



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Life Insurance — Mutual of Omaha

Holiday Inn Club Vacations provides all eligible employees with Basic Life / Accidental Death & Dismemberment Insurance at no cost to you. You may choose to purchase additional supplemental life benefits at low group rates.

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

All full-time regular employees are automatically enrolled in Basic Life/Accidental Death & Dismemberment (AD&D) Insurance. Make sure to keep your beneficiary information up to date in Ultipro.

- Coverage begins on the 90th day of employment
- Provides a \$15,000 life insurance/accidental death benefit

As you grow older, the amount of life/AD&D insurance will reduce according to the following schedule:

At the age of 70 → Original amount of insurance will reduce to 50%

Worldwide Travel Assistance for You and Your Family

Your basic life insurance policy includes Travel Assistance which is also provided by Mutual of Omaha. Travel Assistance can help you avoid unexpected bumps in the road and it covers you, your spouse and dependent children on any single trip up to 90 days in length, and more than 100 miles from home. For more details about worldwide Travel Assistance please see your Human Resources department.



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Supplemental Life/AD&D
Insurance

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Evidence of Insurability (EOI)

Annual Increase

Disability Coverage

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Supplemental Life/Accidental Death & Dismemberment Insurance – Mutual of Omaha

You may choose to purchase additional life insurance through Mutual of Omaha. In order to purchase life insurance for your dependents, you must purchase coverage for yourself. To be eligible for coverage you must be actively at work, you and your dependents must be able to perform normal activities and not be confined (at home, in a hospital, or in any other care facility). You receive an equal amount of AD&D coverage when you purchase supplemental life.

The supplemental life insurance coverage limit minimums, maximums and guarantee issue (GI) amounts are as follows:

SUPPLEMENTAL LIFE INSURANCE BENEFIT DESCRIPTION	
Employee	<ul style="list-style-type: none"> • Maximum Benefit: Up to 7 x annual salary not to exceed \$500,000 (\$5,000 increments) • Minimum Benefit: \$5,000 • Guarantee Issue: Up to 7 x annual salary not to exceed \$150,000
Spouse	<ul style="list-style-type: none"> • Maximum Benefit: Up to 100% of employee's benefit amount not to exceed \$250,000 (\$5,000 increments) • Minimum Benefit: \$5,000 • Guarantee Issue: 100% of employee's benefit amount not to exceed \$25,000
Child(ren) (14 days old to age 21 / age 25)	<ul style="list-style-type: none"> • Maximum Benefit: Up to 100% of employee's benefit amount not to exceed \$10,000 (\$2,500 increments) • Minimum Benefit: \$2,500 • Guarantee Issue: \$10,000



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Evidence of Insurability (EOI)

Newly eligible employees can elect to receive up to the Guarantee Issue (GI) in supplemental life insurance without providing Evidence of Insurability (EOI). An EOI is also called "proof of good health" and certifies that you are generally healthy at the time of purchasing coverage. If you would like to elect a benefit amount over the GI you will need to complete and submit an EOI (for the amount over the GI).

If you chose not to enroll in this coverage in the past, you can still elect a benefit amount but you will first be required to submit an EOI for any benefit amount. Benefit coverage and payroll deductions will not take effect until EOI is approved by Mutual of Omaha.

If you purchase coverage over the GI, waived coverage in the past, or if you want to purchase or increase coverage any time in the future, you will need to provide an EOI for all coverage amounts. [Click here to download the form.](#)

Annual Increase for Employees Only

You may annually elect to increase the amount of your insurance in two \$5,000 increments (up to \$10,000) without providing an Evidence of Insurability (EOI). To be eligible, you must be insured under the policy at the time of request and actively employed. The election cannot be made more than once a year and is subject to the following conditions:

- Insurance is subject to the Guarantee Issue (GI) limit and plan maximums

Contact HR Link if you would like to make any changes.



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- Disability Coverage
 - Voluntary Short Term Disability**
 - Long Term Disability
 - Additional Benefits
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Voluntary Short Term Disability – Mutual of Omaha

You can purchase Voluntary Short Term Disability (STD) coverage for protection if you become disabled and cannot work due to a non-work related accident or illness.

STD SCHEDULE OF BENEFITS	
Benefits Begin	15 th day after the onset of the accident or illness
Benefit Duration / Payable	180 days (6 months)
Percentage of Income Replaced	60%
Maximum Weekly Benefit	\$1,500
Pre-Existing Condition Limitation	Disabilities that occur during the first 6 months of coverage due to a pre-existing condition that occurred during the 3 months prior to coverage are excluded.



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Long Term Disability – Mutual of Omaha

Exempt (salaried) employees are automatically provided company paid Long Term Disability, which begins 30 days of continuous active employment. The monthly maximum benefit is \$15,000.

This plan pays a portion of your income if you become disabled. You have to wait 180 days after you become disabled before the benefit begins paying you. That's why it's important to consider purchasing Short Term Disability insurance, too. It can cover you until the Long Term Disability benefits begin.

There are two options in this plan:

- **Gross Up:** You automatically pay taxes quarterly only on the premiums that we pay on your behalf. So, if you become disabled, benefits will be received tax-free.
- **Non-Gross Up:** You choose not to pay taxes now on the premiums we pay for you. But, if you become disabled, you will pay taxes on the money you receive. This may be a lot higher than the Gross Up tax option.

If you do not wish to elect the Gross Up option, you must complete a [waiver form](#) or you will be automatically enrolled in the Gross Up option. You can change to the Non-Gross Up during the open enrollment period by signing a waiver form.



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Voluntary Long Term Disability – Mutual of Omaha

Eligible non-exempt (hourly) employees can buy voluntary Long Term Disability insurance. This plan pays a portion of your income if you become disabled from an injury or illness. If you have previously declined Long Term Disability coverage and wish to enroll, you will need to complete an Evidence of Insurability (EOI) form before coverage is approved. Payroll deductions will begin once coverage is approved by Mutual of Omaha.

LTD SCHEDULE OF BENEFITS	
Benefits Begin	181 st day after the onset of the accident or illness
Benefit Duration / Payable	2 years (Own Occupation) RBD to SSNRA (Any Occupation)
Percentage of Income Replaced	60%
Maximum Monthly Benefit	\$5,000
Pre-Existing Condition Limitation	Disabilities that occur during the first 12 months of coverage due to a pre-existing condition that occurred during the 12 months prior to coverage are excluded.



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Employee Assistance Program (EAP)

Life can be a handful. And sometimes, you may feel there's no way to solve your problem on your own. We want you to be healthy, feel safe and cared for at work and at home. The New Directions' Employee Assistance Program (EAP) offers free, confidential support when life gets complicated. This benefit is available to all employees.

EAP Services Include:

- Up to 3, face-to-face counseling sessions per issue
- Consultation with licensed clinicians by telephone
- Referrals to legal and financial services
- Child and elder care referrals
- Legal and financial needs – free 30 minute consultation

EAP services are available 24 hours a day, 7 days a week:

- Toll-free by phone at (800) 624-5544
- Online at www.ndbh.com



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Paid Time off (PTO)

PTO can help you find a healthy balance between work and home. It can be taken as vacation, sick time or personal time – *it's your choice*. Eligible employees earn PTO based on how long they have been on the job, management level and whether they are full-time or part-time.

Holidays

We observe eight paid holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Day, plus two Floating Holidays that are up to you! Holiday pay is available to salaried employees from day one of the job. Hourly employees who meet eligibility requirements get holiday pay after 90 days.

Jury Duty Paid Leave

We encourage all employees to be involved in their communities and fulfill their civic duties. This includes reporting to jury duty when required. Eligible full-time or part-time employees will be paid normally for time spent on jury duty during their schedule working hours.

Bereavement Leave

Losing a loved one is very hard for both employees and their families. We know how difficult it can be. For that reason, we grant up to three (3) working Bereavement Leave days with pay for all eligible full-time and part-time employees.



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401(k) Plan – Wellsfargo

What Does Your Future Hold?

One of the most important things you can do for retirement planning is start saving now! The earlier you start saving with your 401(K) Retirement Plan, the much greater impact you will have on the amount of money you will have in retirement. The company adds to your retirement savings in two ways:

Non-contributory Portion (funds automatically added by the company)

- We add money to your 401(K) – **free**. It's that simple! You are not required to put in any of your own money and you are automatically enrolled.
- You are eligible if you have worked 1,000 hours and are still employed on the last day of the year.
- The amount is decided each year by the company at its option. It usually averages 3% of your salary. To date, the company has contributed over \$30 million to the plan.

Contributory Portion (funds added by you)

- This is when you set aside money from your paycheck for your 401(K) account. It is deducted from your pay before income taxes are taken out. This means that adding to your retirement plan can actually lower the amount you pay in taxes now.
- Eligible employees can join the plan on the first day of the quarter (January, April, July or October) following their date of hire.
- Matching funds added by us – To help you save, the company will also match \$0.50 for each \$1 you add to your 401(K), up to \$300 for the calendar year. So, if you set aside \$600, we will put in \$300 more.

Important:

Don't Ignore Your Plan

Remember, you are automatically enrolled for part of the 401(K) Retirement Plan, even if you do not add money on your own.

Don't forget to visit wellsfargo.com to:

- Enroll online
- Manage your beneficiaries and account balance
- Make changes to the amount you choose to add to the account
- Set up and manage your investment portfolio for the account

Call the **Retirement Service Center** at
(866) 640-5138
if you need help or have questions.



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Personal Development



Bring more to your life and career

Developing your personal and professional skills can be an important part of your career with us. Through the Academy, we offer many free learning programs to help.

These include new employee orientation, leadership development, team building, job skills training, cultural training and personal development.

See the course catalog on the company intranet portal or ask your leader, trainer or HR partner.

Tuition Assistance Program

Expanding your horizons

Our growth continues to create many new job opportunities for team members. The Tuition Assistance Program can help you learn the skills and knowledge to move forward in your career.

The program offers regular, full-time employees who have completed one year of service to take courses related to their careers with Holiday Inn Club Vacations. This reimbursement program is available for expenses gained through approved learning institutions.

For more details regarding this program, including eligibility and application process, contact HR Link.



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Costs for Coverage

You and the Holiday Inn Club Vacations share the cost for medical, dental and vision coverage, your cost for coverage is shown on the following pages. Use the links in the left navigation to see the rates for each plan.

Medical – Blue Cross Blue Shield

Weekly Payroll Deduction Rate

	CDHP-13	CDHP	4500 HMO	3250 HMO
Employee	\$19.25	\$24.95	\$31.35	\$42.35
<i>Rate with Healthy Futures Discount</i>	\$16.25	\$21.95	\$28.35	\$39.35
Employee & Child(ren)	\$54.50	\$73.40	\$100.10	\$119.80
Employee & Spouse	\$79.30	\$97.65	\$134.50	\$158.60
Employee & Family	\$114.50	\$140.15	\$194.70	\$226.40

Healthy Futures Discount!

Employees who complete the Healthy Futures Program will save on the weekly cost of their medical insurance. Use the 'Your Benefits' link and left navigation bar 'Healthy Futures Program' to learn more.



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Dental – Cigna

Weekly Payroll Deduction Rate

	DENTAL	DENTAL PLUS
Employee	\$3.45	\$6.90
Employee & Child(ren)	\$5.85	\$11.70
Employee & Spouse	\$7.85	\$15.70
Employee & Family	\$9.90	\$19.80



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Vision – VSP

Weekly Payroll Deduction Rate

	VISION
Employee	\$1.54
Employee & Child(ren)	\$3.28
Employee & Spouse	\$3.07
Employee & Family	\$5.25



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Supplemental Life/AD&D Insurance – Mutual of Omaha

Below is the cost for the supplemental life/AD&D insurance coverage. The rates/premiums are age banded based on the **employee and spouse's own age** as of the first day of the plan year.

As you grow older, the amount of supplemental life/AD&D insurance will reduce according to the following schedule: At the age of 70  Original amount of insurance will reduce to 50%

If the benefit amount you would like is more than \$50,000, select the benefit amount from the top row that when multiplied by another number results in the benefit amount you want. For example, if you want \$150,000 in coverage, you obtain your weekly premium by multiplying the appropriate age rate for \$50,000 and multiply by 3. $\$50,000 \times 3 = \$150,000$



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Supplemental Life/AD&D Insurance

Weekly Payroll Deduction Rates

EMPLOYEE AND SPOUSE SUPPLEMENTAL LIFE/AD&D										
	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
0 – 29	\$0.12	\$0.23	\$0.35	\$0.46	\$0.58	\$0.69	\$0.81	\$0.92	\$1.04	\$1.15
30 – 34	\$0.14	\$0.28	\$0.42	\$0.55	\$0.69	\$0.83	\$0.97	\$1.11	\$1.25	\$1.38
35 – 39	\$0.18	\$0.37	\$0.55	\$0.74	\$0.92	\$1.11	\$1.29	\$1.48	\$1.66	\$1.85
40 – 44	\$0.28	\$0.55	\$0.83	\$1.11	\$1.38	\$1.66	\$1.94	\$2.22	\$2.49	\$2.77
45 – 49	\$0.46	\$0.92	\$1.38	\$1.85	\$2.31	\$2.77	\$3.23	\$3.69	\$4.15	\$4.62
50 – 54	\$0.70	\$1.41	\$2.11	\$2.82	\$3.52	\$4.22	\$4.93	\$5.63	\$6.33	\$7.04
55 – 59	\$1.20	\$2.40	\$3.60	\$4.80	\$6.00	\$7.20	\$8.40	\$9.60	\$10.80	\$12.00
60 – 64	\$1.74	\$3.48	\$5.23	\$6.97	\$8.71	\$10.45	\$12.20	\$13.94	\$15.68	\$17.42
65 – 69	\$2.62	\$5.24	\$7.86	\$10.48	\$13.10	\$15.72	\$18.33	\$20.95	\$23.57	\$26.19
70 +	\$3.06	\$6.12	\$9.17	\$12.23	\$15.29	\$18.35	\$21.40	\$24.46	\$27.52	\$30.58

CHILD(REN) SUPPLEMENTAL LIFE				
	\$2,500	\$5,000	\$7,500	\$10,000
	\$0.10	\$0.20	\$0.29	\$0.39

Regardless of how many children you may have.

Note: Your actual payroll deduction may vary slightly due to rounding.



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Voluntary Short Term Disability (STD)

As a full-time eligible employee, you may purchase Voluntary Short Term Disability insurance. It provides income replacement benefits if you are unable to work due to a covered injury or illness (not work related).

WEEKLY PAYROLL DEDUCTION RATE CALCULATION	
Premium Factor	0.0001797

Annual Salary x Premium Factor = your payroll deduction

(\$130,000 Maximum Annual Salary)

If your salary is more than \$130,000, use \$130,000 to calculate your premium.

Note: Your actual payroll deduction may vary slightly due to rounding.

To find out your annual salary: Weekly salary x 52 = Annual Salary

To find out your weekly benefit: Annual Salary x .60 / 52 = Weekly Benefit



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Voluntary Long Term Disability (LTD)

Eligible non-exempt (hourly) employees can purchase Voluntary Long Term Disability insurance. This plan pays a portion of your income if you become disabled from an injury or illness.

WEEKLY PAYROLL DEDUCTION RATES			
Age Band	Premium Factor	Age Band	Premium Factor
Under 19	0.0000288	40 – 44	0.0000865
20 – 24	0.0000346	45 – 49	0.0001250
25 – 29	0.0000385	50 – 54	0.0001731
30 – 34	0.0000519	55 – 59	0.0002308
35 – 39	0.0000615	60 +	0.0002500

*(\$100,000 Maximum Annual Salary)
If your salary is more than \$100,000, use \$100,000 to calculate your premium.*

To find out your annual salary:
Weekly salary x 52 = Annual Salary

To find out your weekly benefit:
Annual Salary x .60 / 12 = Weekly Benefit

Long Term Disability Calculation

To calculate the weekly cost for this coverage, complete the below calculation.

Annual Salary x Premium Factor (above) = _____ your payroll deduction

Example: \$25,000 x 0.0000615 (35 year old) = \$1.53

NOTE: Your actual payroll deduction may vary slightly due rounding.



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Enrollment

As you're preparing to enroll in your 2016 benefits, it's important that you:

- Review the information in this guide. It provides a high-level overview of the benefits available to you and your family.
- Review your current benefit choices and beneficiaries.
- Discuss your benefit needs with your family to ensure you're choosing the right coverage for your personal situation.

Beneficiaries

Do you know who is listed as your beneficiary? It's a good idea to review your beneficiary designation periodically, and make sure you have both primary and contingent beneficiary designations on file.

The qualified beneficiary shall be responsible for notifying Holiday Inn Club Vacations of an event within 60 days of the date of the described event.

Submit or update your beneficiaries via Ultipro.



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How to Enroll

To enroll login into Ultipro.

If you are participating in any of the benefit programs offered by the Holiday Club Vacations and want to keep them, **no action is required**. Your benefit elections will carry over in 2016.

If you would like to make any changes to your current elections, now is the time!

Open Enrollment starts November 2nd and ends November 15th

If you are making changes to your benefit elections, you will need to go to Ultipro to make your changes.

- Log in to Ultipro
- Hover over **Myself** on the menu bar
- Select **Open Enrollment**
- Click on the **2016 Open Enrollment link**

2016 Health Savings Account (HSA) Election

If you are currently contributing to a Health Savings Account (HSA) you will need to login to Ultipro and enter your 2016 contribution amount. HSA contributions **do not** carry over from year to year.

- Log in to Ultipro
- Hover over **Myself** on the menu bar
- Go to **Life Events**
- Select **I want to contribute to my 2016 HSA**



YOUR 2016 HOLIDAY INN CLUB VACATIONS BENEFITS

Contact Information

HR Link

Ext. 6400
Direct: 407-395-6400
Toll-Free: 855-HRLINKS

Benefits Portal

Olr.benergy.com
User ID: olrbenefits
Password: benefits

Web Portal

Intranet.olcc.lan

Enrollment Portal

Ultipro

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Contact Information

If you have questions about any of the benefits described in this guide, you may contact HR Link or the carrier(s) below with your benefit question(s).

Benefit / Carrier	Phone	Website
Medical – Blue Cross Blue Shield Group # 60684 (HMO) or 60685 (CDHP)		www.bcbs.com
Dental – Cigna Group # 3337320	800-244-6224	www.mycigna.com
Vision - VSP VSP Signature Network Group # 30010946	800-877-7195	www.vsp.com
Life/AD&D – Mutual of Omaha Group # G000AQPZ	800-877-8805	www.mutualofomaha.com
Disability – Mutual of Omaha Group # G000AQPZ	800-877-5176	www.mutualofomaha.com
Health Savings Account (HSA) Optum Bank	866-234-8913	www.optumbank.com
Employee Assistance Program (EAP) New Direction Behavioral Health	800-624-5544	www.ndbh.com
401(k) Retirement Plan Wells Fargo	866-640-5138	www.retirement.wellsfargo.com



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Legal Notices

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Legal Notices

Federal law requires that Holiday Inn Club Vacations provide you with certain notices about your rights regarding health care plan eligibility, enrollment and coverage.

[Click here to download a copy of the 2016 Legal Notices.](#)

The information in this guide is presented for illustrative purposes only. The text contained in this guide was taken from various plan documents and/or benefit information. While every effort was taken to accurately report your benefits, discrepancies, or errors are always possible. In case of a discrepancy between the guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this guide, contact Human Resources.

All Summary Plan Documents (SPD) are posted electronically on the Benefits Portal. If you would like a written copy, you may request one from HR Link.

Individual Mandate

Overview

Beginning in 2014, the Affordable Care Act included a mandate for most individuals to have health insurance or potentially pay a penalty for noncompliance. Individuals are required to maintain minimum essential coverage for themselves and their dependents. Some individuals are exempt from the mandate or the penalty, while others may be given financial assistance to help them pay for the cost of health insurance.

What type of coverage satisfies the individual mandate?

“Minimum essential coverage”

What is minimum essential coverage?

Minimum essential coverage is defined as:

- Coverage under certain government-sponsored plans
- Employer-sponsored plans, with respect to any employee
- Plans in the individual market,
- Grandfathered health plans; and
- Any other health benefits coverage, such as a state health benefits risk pool, as recognized by the HHS Secretary.

Minimum essential coverage does not include health insurance coverage consisting of excepted benefits, such as dental-only coverage.

How does “Minimum Essential Coverage” differ from “Essential Health Benefits”?

Essential health benefits were required to be offered by certain plans starting in 2014 as a component of the essential health benefit package. They are also the benefits that are subject to the annual and lifetime dollar limit requirements.

This is different than minimum essential coverage, which refers to the coverage needed to avoid the individual mandate penalty. Coverage does not have to include essential benefits to be minimum essential coverage.

What is the penalty for noncompliance?

The penalty is determined by calculating the greater amount of either a flat dollar amount or set percentage of income. Beginning in 2017, penalties will increase based on the cost of living.

Year	Pay whichever is greater			
	Flat dollar amount		OR	Percentage of income (over tax filing threshold)
	Per Adult	Per Child (under age 18)		
2015	\$325 (maximum of \$975 per family)	\$162.50		2.0%
2016	\$695 (maximum of \$2,085 per family)	\$347.50		2.5%

Who is exempt from the mandate?

Individuals who have a religious exemption, those not lawfully present in the United States, and incarcerated individuals are exempt from the minimum essential coverage requirement.

Are there other exceptions to when the penalty may apply?

Yes. A penalty will not be assessed on individuals who:

- cannot afford coverage based on formulas contained in the law,
- have income below the federal income tax filing threshold,
- are members of Indian tribes,
- were uninsured for short coverage gaps of less than three months;
- have received a hardship waiver from the Secretary, or are residing outside of the United States, or are bona fide residents of any possession of the United States.



Beginning in 2014, there is a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment based health coverage offered by your employer.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. The initial open enrollment for health insurance coverage through the Marketplace ended on March 31, 2014. You can get coverage through the Marketplace for 2014 if you qualify for a special enrollment period or are applying for Medicaid or the Children's Health Insurance Program (CHIP). The Marketplace's next open enrollment period begins on Nov. 15, 2014, for coverage starting as early as Jan. 1, 2015.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.¹

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution -as well as your employee contribution to employer-offered coverage- is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact your Human Resources department.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

¹ An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.

Annual Notices

Women's Health & Cancer Rights Act of 1998

Did you know that your medical plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy (including lymph edema)? For more information regarding this benefit, contact customer service at the number listed on the back of your medical ID card.

Patient Protection Model Disclosure

Florida Blue generally requires the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. Until you make this designation, Florida Blue designates one for you. For children, you may designate a pediatrician as the primary care provider. You do not need prior authorization from Florida Blue or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, go to the Florida Blue website, www.floridablue.com.

The Newborns' and Mothers' Health Protection Act (the Newborns' Act)

Group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

Your Right to Receive a Notice of Privacy Practices

Holiday Inn Club Vacations is subject to the HIPAA privacy rules. In compliance with these rules, it maintains a Notice of Privacy Practices. You have the right to request a copy of its Notice of Privacy Practices by contacting the medical insurance company. (See telephone number on your medical ID card).

Addendum A – Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The list of States are current as of July 31, 2015. Contact your State for more information on eligibility.

ALABAMA – Medicaid	GEORGIA – Medicaid
Website: www.myalhipp.com Phone: 1-855-692-5447	Website: http://dch.georgia.gov/ - Click on Programs, then Medicaid, then Health Insurance Premium Payment (HIPP) Phone: 404-656-4507
ALASKA – Medicaid	INDIANA – Medicaid
Website: http://health.hss.state.ak.us/dpa/programs/medicaid/ Phone (Outside of Anchorage): 1-888-318-8890 Phone: 907-269-6529	Website: http://www.in.gov/fssa Phone: 1-800-889-9949
COLORADO – Medicaid	IOWA – Medicaid
Medicaid Website: http://www.colorado.gov/hcpf Medicaid Customer Contact Center: 1-800-221-3943	Website: www.dhs.state.ia.us/hipp/ Phone: 1-888-346-9562
FLORIDA – Medicaid	KANSAS – Medicaid
Website: https://www.flmedicaidprecovery.com/ Phone: 1-877-357-3268	Website: http://www.kdheks.gov/hcf/ Phone: 1-800-792-4884

Addendum A – Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP) - CONTINUATION

<p>KENTUCKY – Medicaid</p> <p>Website: http://chfs.ky.gov/dms/default.htm Phone: 1-800-635-2570</p>	<p>OKLAHOMA – Medicaid and CHIP</p> <p>Website: http://www.insureoklahoma.org Phone: 1-888-365-3742</p>
<p>LOUISIANA – Medicaid</p> <p>Website: http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1-888-695-2447</p>	<p>OREGON – Medicaid</p> <p>Website: http://www.oregonhealthykids.gov http://www.hijosaludablesoregon.gov Phone: 1-800-699-9075</p>
<p>MAINE – Medicaid</p> <p>Website: http://www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 1-800-977-6740 TTY 1-800-977-6741</p>	<p>PENNSYLVANIA – Medicaid</p> <p>Website: http://www.dhs.state.pa.us/hipp Phone: 1-800-692-7462</p>
<p>MASSACHUSETTS – Medicaid and CHIP</p> <p>Website: http://www.mass.gov/MassHealth Phone: 1-800-462-1120</p>	<p>RHODE ISLAND – Medicaid</p> <p>Website: http://www.eohhs.ri.gov Phone: 401-462-5300</p>
<p>MINNESOTA – Medicaid</p> <p>Website: http://www.dhs.state.mn.us/id_006254 Click on Health Care, then Medical Assistance Phone: 1-800-657-3739</p>	<p>SOUTH CAROLINA – Medicaid</p> <p>Website: http://www.scdhhs.gov Phone: 1-888-549-0820</p>
<p>MISSOURI – Medicaid</p> <p>Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005</p>	<p>SOUTH DAKOTA – Medicaid</p> <p>Website: http://dss.sd.gov Phone: 1-888-828-0059</p>
<p>MONTANA – Medicaid</p> <p>Website: http://medicaid.mt.gov/member Phone: 1-800-694-3084</p>	<p>TEXAS – Medicaid</p> <p>Website: http://gethipptexas.com/ Phone: 1-800-440-0493</p>
<p>NEBRASKA – Medicaid</p> <p>Website: www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633</p>	<p>UTAH – Medicaid and CHIP</p> <p>Website: Medicaid: http://health.utah.gov/medicaid CHIP: http://health.utah.gov/chip Phone: 1-866-435-7414</p>
<p>NEVADA – Medicaid</p> <p>Medicaid Website: http://dwss.nv.gov/ Medicaid Phone: 1-800-992-0900</p>	<p>VERMONT – Medicaid</p> <p>Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427</p>
<p>NEW HAMPSHIRE – Medicaid</p> <p>Website: http://www.dhhs.nh.gov/oii/documents/hippapp.pdf Phone: 603-271-5218</p>	<p>VIRGINIA – Medicaid and CHIP</p> <p>Website: http://www.coverva.org/programs_premium_assistance.cfm Medicaid: Phone: 1-800-432-5924 CHIP Website: http://www.coverva.org/programs_premium_assistance.cfm CHIP Phone: 1-855-242-8282</p>
<p>NEW JERSEY – Medicaid and CHIP</p> <p>Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710</p>	<p>WASHINGTON – Medicaid</p> <p>Website: http://www.hca.wa.gov/medicaid/premiumpymt/pages/index.aspx Phone: 1-800-562-3022 ext.15473</p>
<p>NEW YORK – Medicaid</p> <p>Website: http://www.nyhealth.gov/health_care/medicaid/ Phone: 1-800-541-2831</p>	<p>WEST VIRGINIA – Medicaid</p> <p>Website: http://dhr.wv.gov/bms/Medicaid%20Expansion/pages/default.aspx Phone: 1-877-598-5820, HMS Third Party Liability</p>
<p>NORTH CAROLINA – Medicaid</p> <p>Website: http://www.ncdhhs.gov/dma Phone: 919-855-4100</p>	<p>WISCONSIN – Medicaid and CHIP</p> <p>Website: https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002</p>
<p>NORTH DAKOTA – Medicaid</p> <p>Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-800-755-2604</p>	<p>WYOMING – Medicaid</p> <p>Website: https://wyequalitycare.acs-inc.com/ Phone: 307-777-7531</p>

To see if any other states have added a premium assistance program since July 31, 2015, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

Addendum B - Medicare Part D Notice of Creditable Coverage

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Important Notice from Holiday Inn Club Vacations About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Holiday Inn Club Vacations and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Holiday Inn Club Vacations has determined that the prescription drug coverage offered through Blue Cross Blue Shield is or are, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current coverage will not be affected. If you do decide to join a Medicare drug plan and drop your current coverage, be aware that you and your dependents will be able to reenroll in our program during the next open enrollment period.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Holiday Inn Club Vacations and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice Or Your Current Prescription Drug Coverage...

Contact the person listed below for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Holiday Inn Club Vacations changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Date:	January 1, 2016
Name of Entity/Sender:	Holiday Inn Club Vacations
Contact--Position/Office:	Erin Booth
Address:	8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747
Phone Number:	407-395-6400



Orange Lake Resort
Long Term Disability (LTD)
Gross Up Waiver Form

Waive LTD Gross Up Option

I am waiving the Gross Up option for the LTD plan. I understand in the event I qualify and receive LTD payments, I will be responsible for paying the taxes on the benefits I receive for the duration of the claim.

I also understand that once my election is made, I will not be able to change it during the plan year. I will have an option to change it during open enrollment each year.

Employee Signature

Date

Employee Name	Social Security Number
---------------	------------------------