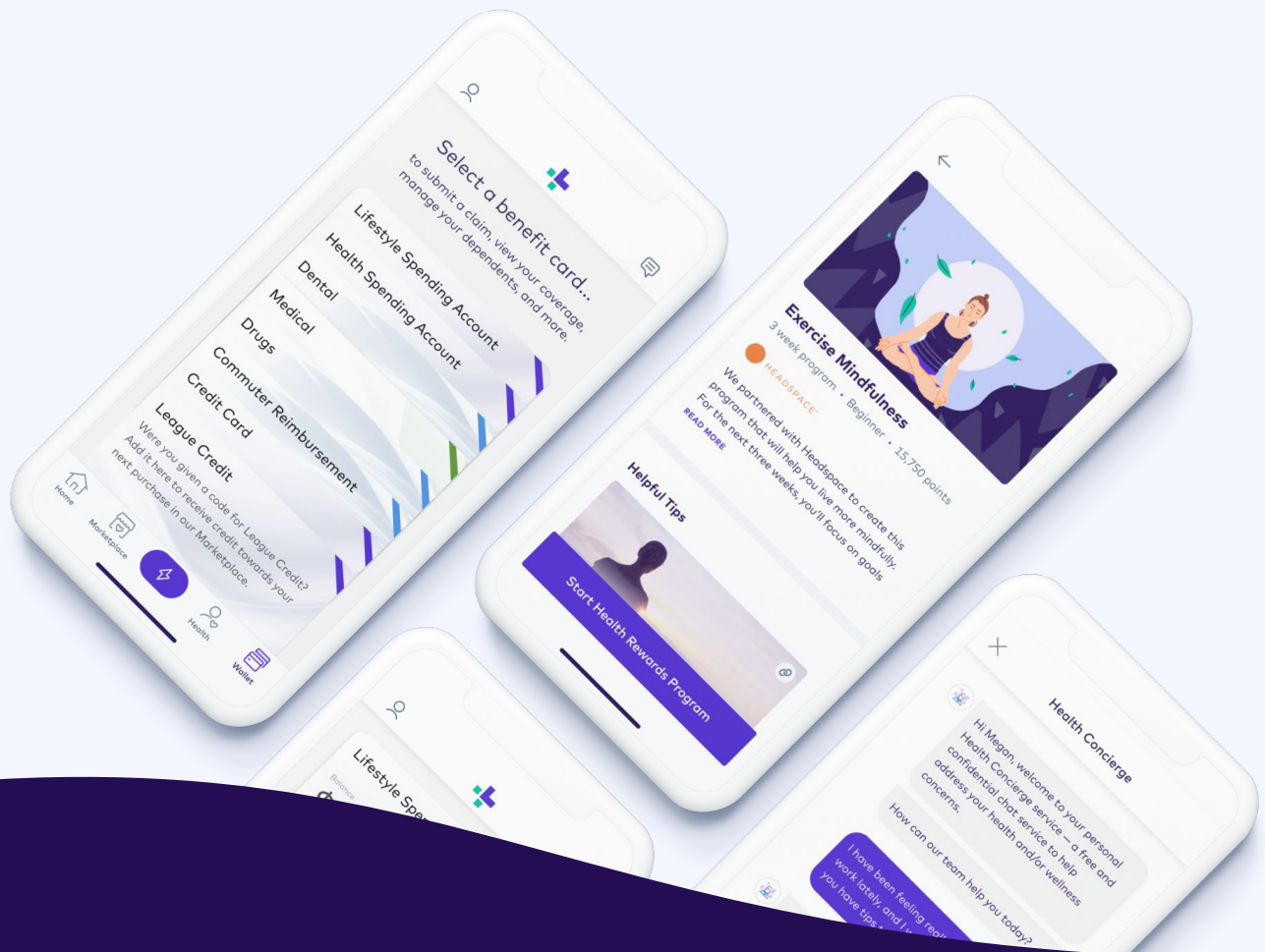




LUSH FRESH
HANDMADE
COSMETICS



2023–2024 Benefits Guide

Full-Time US Employees

Table of Contents

Your 2023-2024 Benefits Guide	3
How to Enroll	5
Medical	8
Dental	14
Vision	16
Tax-Advantaged Accounts	18
Basic Life and AD&D	22
Short and Long Term Disability	23
Voluntary Life	24
Critical Illness	25
Hospital Indemnity	26
Accident Insurance	27
Employee Assistance Program	28
Pet Insurance Program	29
Contact Information	30
Glossary	31
Benefits Compliance	32
Puerto Rico Benefits	33

Welcome to Your Benefits Guide!



At Lush we offer our employees a competitive and comprehensive benefits program to recognize how important you are to the company. This benefits guide summarizes our program in a quick and easy-to-understand way. Please review your plan documents for more details.



New and Rehire Enrollment

Welcome to our team! As a new employee, or a rehire, you are eligible for coverage on the first day of the month coincident with, or following, your date of hire. However, you must enroll in benefits within 30 days of your date of hire.



Annual Enrollment

Annual enrollment is your yearly opportunity to review your current benefits and make benefit changes for the upcoming plan year. During annual enrollment, you can add, change, or decline coverage. In addition, you can add and/or drop dependents during this time.



Changing Your Benefits

Once you make your elections, you will not be able to make changes until next year's annual enrollment unless you experience a qualifying life event. Examples of qualifying events include the following.

- **Change of legal marital status**
(e.g., marriage, divorce, death of spouse, legal separation)
- **Change in number of dependents**
(e.g., birth, adoption, death of dependent, ineligibility due to age)
- **Change in employment or job status**

Please note, you must make changes to your benefits within 31 days of your qualifying event. If you do not make changes during this time, you may have to wait until next year's annual enrollment, or a qualifying life event, to make your change. Proof of the qualifying event is required within 31 days of the event. Learn more about [qualifying life events](#).

Benefits Eligibility

Covering Yourself

You may enroll in the benefits program if you are a regular full-time employee.

Covering Your Family Members

Eligible dependents generally include your legally married spouse or domestic partner and children up to age 26. Some age limitations may apply to certain insurance programs. Children may include natural, adopted, step-children, or children by court-appointed legal guardianship.

Please be prepared to share dependent eligibility information during enrollment including date of birth and Social Security Number. Other documentation is required depending on your benefit elections or qualifying life event.

Domestic Partners

Lush is required by law to apply different taxation to employee benefits when a member covers a domestic partner (DP) or child of a domestic partner for Medical, Dental or Vision plans.

The value of any employer-paid coverage for a domestic partner is taxable under federal tax code and will appear as **imputed income** on your paycheck.

Additionally, the value of the employee contribution used to cover a domestic partner or DP's children must be paid with **post-tax** dollars.

For 2023, employees who have a domestic partner will be presented with enrollment options such as

- Employee + Domestic Partner
- Employee + Domestic Partner + DPs children

Additionally employees covering domestic partners will be required to complete an affidavit, post enrollment, confirming the relationship satisfies the Cigna requirements for domestic partner coverage.

Our Benefit Offerings



Medical

Cigna



Dental

Cigna



Vision

Cigna



Tax-Advantaged Accounts

HSA Bank, Wex



Life, AD&D, Disability

New York Life



Critical Illness, Hospital Care, Accident Insurance

Cigna



Employee Assistance Program

Health Advocate



Pet Insurance

Nationwide



How to Enroll

Make elections through **League** when you receive your invite in your email. You must **acknowledge, confirm, and click Submit** (not just save) your elections. Review your confirmation statement and keep for your records. Remember, this is your only time during the year that you can make changes to your benefits unless you experience a qualifying life event so print and review your benefits confirmation statement for accuracy.

How to Enroll

Your Enrollment Steps

1

STEP ONE

Register with League

- Watch your inbox for an invite from League
- Follow the link to register with League
- Register with League in a few easy steps

2

STEP TWO

Make benefit elections

- Read through your plans and options
- Follow the step-by-step instructions to make your elections
- Chat live with Customer Care if you have questions or need help

3

STEP THREE

Fill out and submit forms

- Download the necessary forms
- Read, fill out, and sign the forms
- Upload the signed forms and submit

4

STEP FOUR

Use your benefits

- Download the League app
- Open your personalized Digital Wallet
- Tap a benefits card
- Check coverage, learn about benefits and link to your carrier portal



Remember: this is the only time during the year that you can make changes to your benefits unless you experience a qualifying life event. Make sure you print and look over your benefits confirmation statement for accuracy.

Get to know Cigna

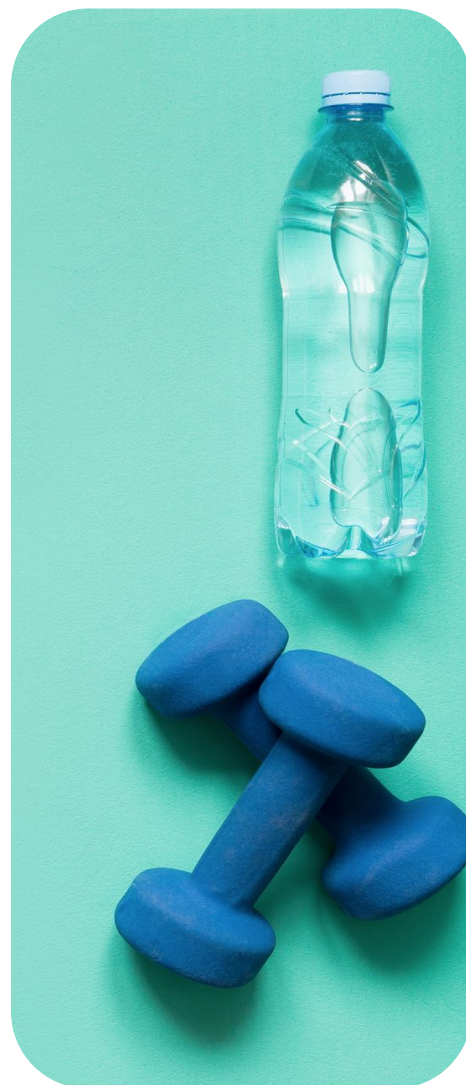
Our Medical, Dental, and Vision plans allow you to receive coverage through the Cigna network.



Cigna Member Site

Visit www.mycigna.com to take advantage of all the helpful tools and resources available including the following:

- ✓ **Personalized dashboard**
The information that matters most to you is right up front when you log in.
- ✓ **ID cards always accessible**
View, print, and send ID cards from any page.
- ✓ **Click-to-chat**
Have an online chat with a Cigna rep to get answers to your questions fast.
- ✓ **A better way to search for providers and costs**
Find quality, in-network providers and compare costs based on your needs.
- ✓ **Coverage details in plain language**
Plan details are simple, clear, and easy to understand.
- ✓ **Added layer of security to help protect your health information**
A primary email address is required. Plus, there's a two-step login process.



Medical Provider Network



[Find Cigna Open Access Plus Providers](#)

Vision Provider Network



[Find a Cigna PPO Vision Provider](#)

Dental Provider Network



[Find a Cigna PPO Dental Provider](#)



Cigna Pre-Enrollment Support Line is live now at 888-806-5042

How do medical plans work?



Preventive Care

To help you stay healthy, the plans cover preventive care services at 100% when you use the plan's in-network providers.



Annual Deductible

You pay 100% of the cost of medical services—excluding preventive care, and services where the deductible does not apply—until you meet the annual deductible. Copays do not count toward meeting your annual deductible.



Coinsurance

Once you meet the annual deductible, there is cost-sharing between you and the plan called coinsurance. Even though you can use any provider, using in-network providers get you the lowest out-of-pocket cost. In-network providers have agreed to a lower fee base for services.



Out-of-Pocket Maximum

You continue to share in the cost for your medical expenses until you reach the out-of-pocket maximum. This is the maximum amount you will pay for medical services during any plan year. This protects you against significant medical expenses. The amount of your annual deductible, copays, and coinsurance count toward your out-of-pocket maximum.



Medical



Lush offers a robust medical insurance program to our employees. We partner with Cigna to offer this coverage.

Plan Highlights

You have the option of choosing one of three plans. Our plans offer coverage for most healthcare services. When you receive care in-network, you benefit from our negotiated discounts with Cigna.

Telehealth

When you can't get to your doctor, Cigna Telehealth Connection is here for you. MDLIVE offers reliable 24/7 health care by phone or video. Access board-certified doctors anytime, anywhere, including weekends, nights, and holidays.



MDLIVE for Cigna

888.726.3171

MDLIVEforCigna.com



Medical

Decision

1

Elect medical plan

- Lavender
- Rose
- Neroli
- Waive coverage



New to Lush in 2023 - Infertility Treatment

Infertility treatment has been added to all medical plans beginning 7/1. Covered services include: lab and radiology test, counseling, surgical treatment, includes artificial insemination, in-vitro fertilization, GIFT, ZIFT, etc. Lifetime Maximum of \$10,000.

Option 1

Lavender

This plan works in conjunction with a Health Savings Account (HSA). You receive employer HSA contributions on a quarterly basis for you to spend towards qualified out-of-pocket healthcare expenses. For most individuals and families, this plan has the lowest financial out of pocket costs because of Lush's HSA contribution.

Option 2

Rose

Similar to the Lavender Plan, the Rose plan also works with an HSA however it has a lower individual and family deductible. Lush does not contribute to your HSA if you elect this plan. This plan may suit those unsure of their comfort level with the deductible. This plan has a mid range of financial out of pocket costs.

Option 3

Neroli

The Neroli plan has the lowest deductible and the highest employer contribution. This plan is a rich PPO plan where you have low out of pocket costs like copays for most services. This plan does not work with an HSA, therefore you do not qualify for the Lush contribution.

Note: Puerto Rico employees please refer to the back of this guide for a summary of your medical coverage.



Plan option 1 of 3

Lavender Plan- HSA \$2,500

This plan works in conjunction with a Health Savings Account (HSA). In addition to your own contributions, you receive employer HSA contributions on a quarterly basis for you to spend towards qualified out-of-pocket healthcare expenses. For most individuals and families, this plan has the lowest maximum exposure.

Plan Details

	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$2,500	\$4,000
Family	\$5,000	\$8,000
Out-of-Pocket Maximum		
Individual	\$5,000	\$8,000
Family	\$10,000 \$5,000 max per individual in family	\$16,000 \$8,000 max per individual in family
Visits		
Coinsurance	20% after deductible	40% after deductible
Preventative Care	Covered 100%	40% after deductible
Primary Care Visit	20% after deductible	40% after deductible
Specialist Visit	20% after deductible	40% after deductible
Telehealth	20% after deductible	Not Covered
Outpatient Mental Health	20% after deductible	40% after deductible
Urgent Care	20% after deductible	40% after deductible
Emergency Room	20% after deductible	

Monthly Plan Cost

Coverage Tier	Premium Rates	Employee Rates
Employee	\$ 635.75	\$ 112.43
Employee + Spouse/ Domestic Partner	\$ 1,089.08	\$ 192.60
Employee + Child(ren)	\$ 998.40	\$ 176.57
Employee + Family	\$ 1,270.40	\$ 224.67

Why pick a plan with a Health Savings Account?



- ✓ Employee owned and tax-advantaged
- ✓ LUSH Contributes
- ✓ Flexibility to cover qualified out-of pocket healthcare expenses
- ✓ Accumulates year-over-year

Want more information?



Check out the full summary of your benefits and coverage

View →



Blog Post

Check out our quick guide on HSAs

Plan option 2 of 3

Rose Plan- HSA \$2,000

Similar to the Lavender HSA plan, the Rose plan is also eligible for an HSA. This plan has a lower individual and family deductible. This plan has a mid range of financial out of pocket costs. Lush does not contribute funds to your HSA if you elect this plan. This plan may suit those unsure of their comfort level with the deductible. But the HSA will be funded by employees with pre tax dollars.

Plan Details

	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$2,000	\$3,000
Family	\$4,000	\$6,000
Out-of-Pocket Maximum		
Individual	\$4,000	\$10,000
Family	\$8,000 \$4,000 max per individual in family	\$24,000 \$10,000 max per individual in family
Visits		
Coinsurance	20% after deductible	50% after deductible
Preventative Care	Covered 100%	50% after deductible
Primary Care Visit	\$35 copay	50% after deductible
Specialist Visit	\$50 copay	50% after deductible
Telehealth	\$5 copay	Not Covered
Outpatient Mental Health	\$35 copay	50% after deductible
Urgent Care	\$50 copay	50% after deductible
Emergency Room	\$300 copay after deductible	

Monthly Plan Cost

Coverage Tier	Premium Rates	Employee Rates
Employee	\$ 708.93	\$ 156.72
Employee + Spouse/ Domestic Partner	\$ 1,233.26	\$ 272.63
Employee + Child(ren)	\$ 1,128.40	\$ 249.45
Employee + Family	\$ 1,443.00	\$ 318.99

HSA Reminders



- HSAs are employee-owned and funded by you, up to the IRS maximums
- If you leave Lush, the full account balance is yours to keep for future use
- You can use the funds for any eligible medical expense defined by the IRS: including medical, dental, vision, prescriptions, alternative treatments and massage

Want more information?



Check out the full summary of your benefits and coverage

View →

Plan option 3 of 3

Neroli Plan- PPO \$500

This Open Access Plus Plan has the lowest out of pocket costs via copays for most services. But you do not qualify for Lush's Employer HSA contribution.

Plan Details

	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$500	\$500
Family	\$1,000	\$1,000
Out-of-Pocket Maximum		
Individual	\$3,500	\$10,250
Family	\$7,000	\$20,500
Visits		
Coinsurance	20% after deductible	40% after deductible
Preventative Care	Covered 100%	40% after deductible
Primary Care Visit	\$40 copay	40% after deductible
Specialist Visit	\$60 copay	40% after deductible
Telehealth	\$5 copay	Not Covered
Outpatient Mental Health	\$25 copay	40% after deductible
Urgent Care	\$100 Copay / visit, deductible does not apply	40% after deductible
Emergency Room	\$250 Copay / visit plus 20% coinsurance, deductible does not apply	

Monthly Plan Cost

Coverage Tier	Premium Rates	Employee Rates
Employee	\$ 754.54	\$ 200.16
Employee + Spouse/ Domestic Partner	\$ 1,324.46	\$ 351.34
Employee + Child(ren)	\$ 1,210.48	\$ 321.11
Employee + Family	\$ 1,552.43	\$ 411.82

Want more information?



Check out the full summary of your benefits and coverage

View →

Prescription Drug Details

The participating pharmacy network includes large drug store chains, as well as many independent pharmacies. Your cost for prescription drugs varies depending on the type of drug used to fill your prescription.

	Option 1 Lavender		Option 2 Rose		Option 3 Neroli	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Prescription Drugs	Generic/Preferred Brand/Non-Preferred Brand					
Retail (up to a 30-day supply)	20% coinsurance after deductible	40% coinsurance after deductible	\$20/ \$40/ \$60 copay after deductible	50% coinsurance after deductible	\$15/ \$30/ \$45 copay, deductible does not apply	40% coinsurance, deductible does not apply
Retail (up to a 90-day supply)	20% coinsurance after deductible	40% coinsurance after deductible	\$40/ \$80/ \$120 copay after deductible	50% coinsurance after deductible	\$30/ \$60/ \$90 copay, deductible does not apply	40% coinsurance, deductible does not apply
Mail Order (up to a 90-day supply)	20% coinsurance after deductible	Not Covered	\$40/ \$80/ \$120 copay after deductible	Not Covered	\$30/ \$60/ \$90 copay, deductible does not apply	Not Covered

Important Tips for Managing Your Prescriptions

- Retail drugs for a 30-day supply may be obtained In-Network at a wide range of pharmacies across the nation although prescriptions for a 90-day supply (such as maintenance drugs) will be available at select network pharmacies.
- Cigna 90 Now Program: You can choose to fill your medications in a 30- or 90-day supply. If you choose to fill a 30-day prescription, it can be filled at any network retail pharmacy or Cigna Home Delivery. If you choose to fill a 90-day prescription, it must be filled at a 90-day network retail pharmacy or Cigna Home Delivery to be covered by the plan.
- If you receive a supply of 34 days or less at home delivery, the home delivery pharmacy cost share will be adjusted to reflect a 30-day supply.
- When patient requests brand drug, patient pays the generic cost share plus the cost difference between the brand and generic drugs up to the cost of the brand drug (unless the physician indicates "Dispense As Written" DAW).
- Exclusive specialty home delivery: Specialty medications must be filled through home delivery; otherwise you pay the entire cost of the prescription upon your first fill. Some exceptions may apply.
- Your pharmacy benefits share an annual deductible and out-of-pocket maximum with the medical/behavioral benefits. The applicable cost share for covered drugs applies after the combined deductible has been met unless otherwise noted.

Trans Health Services Details

Your Cigna medical plan provides coverage for medically necessary treatment of gender affirmation services (see plan document for costs and details of coverage). Cigna also provides education, care navigation and support with referrals or finding community resources. Please see the linked Cigna flyer for more information regarding this benefit.

Cigna Trans Health Programs

- **Medical Plan Coverage:** your medical plan provides coverage for medically necessary gender affirmation services (may include: gender-affirming surgery and procedures, hormone therapy, behavioral counseling).
- **Care Navigation:** Cigna advocates and case managers can help you navigate your health care.
 - In order to request a specialized case manager from Cigna: call Cigna customer service (800-244-6224) and ask for a case manager proficient in gender affirmation services/transgender benefits
- **Education:** at Cigna.com, type “transgender” into the search bar to find:
 - LGBTQ health
 - Current Issues in Trans Healthcare
 - Gender Identity and Trans concerns
 - Tips on talking to family members
- **Support:** Cigna can help you work through any issues including providing community resources and referrals to in-network healthcare providers



[View Cigna Flyer](#)
[View Neroli Medical Summary](#)
[View Lavender Medical Summary](#)
[View Rose Medical Summary](#)

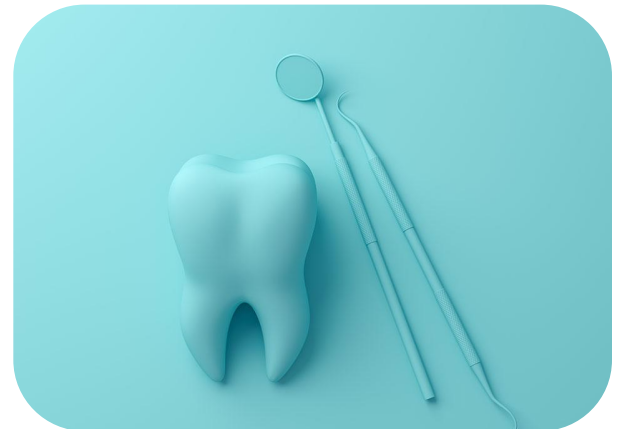
Core Dental Plan Highlights

Good dental health is about more than a great smile. Our Dental plan encourages preventive and diagnostic dental care, and provides coverage for basic and major dental care.

With the Dental Preferred Provider Organization plan (DPPO) you can see any licensed dentist or specialist. You will get the best coverage by choosing an in-network provider, but have the freedom to see an out-of-network provider if you choose.

Examples of What's Covered

- ✓ **Diagnostic & Preventive**
Exams, cleanings, fluoride (to age 19), x-rays, and sealants
- ✓ **Basic Restorative**
Fillings, periodontics, repairs, and oral surgery
- ✓ **Major Restorative**
Crowns, inlays/onlays, dentures, and prosthesis over implant



Dental

Decision

2

Elect Dental Coverage

- Core
- Buy Up
- Waive Coverage

Core Dental Plan Details

	In-Network	Out-of-Network
Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Annual Maximum Benefit		
Annual Max	\$1,250	\$1,250
Services		
Diagnostic & Preventive	0% coinsurance, deductible does not apply	0% coinsurance, deductible does not apply
Basic Restorative	20% coinsurance after deductible	20% coinsurance after deductible
Major Restorative	50% coinsurance after deductible	50% coinsurance after deductible
Orthodontia		
Orthodontia	None	

Plan Costs

Monthly Contributions		
Core Dental Plan	Lush Contribution	Employee Contribution
Employee	\$ 26.46	\$0.00
Employee + Spouse/ Domestic Partner	\$43.99	\$0.00
Employee + Child(ren)	\$43.58	\$0.00
Employee + Family	\$56.42	\$0.00

[View Benefit Summary](#)

[Find a Cigna PPO Dental Provider](#)

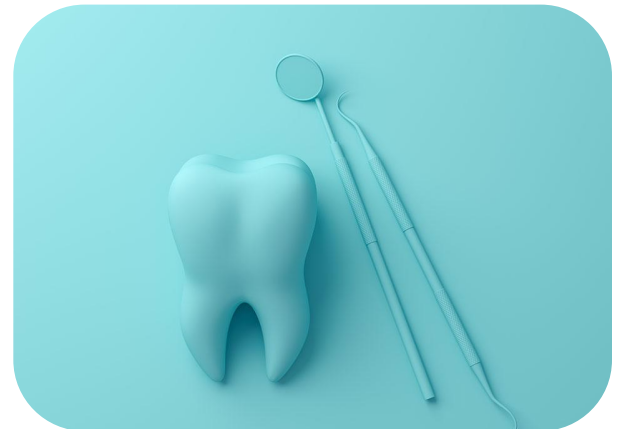
Buy-Up Plan Highlights

Good dental health is about more than a great smile. Our Dental plan encourages preventive and diagnostic dental care and provides coverage for basic and major dental care as well as orthodontia services.

With the Dental Preferred Provider Organization plan (DPPO) you can see any licensed dentist or specialist. You will get the best coverage by choosing an in-network provider, but have the freedom to see an out-of-network provider if you choose.

Examples of What's Covered

- ✓ **Diagnostic & Preventive**
Exams, cleanings, fluoride (to age 19), x-rays, and sealants
- ✓ **Basic Restorative**
Fillings, periodontics, repairs, and oral surgery
- ✓ **Major Restorative**
Crowns, inlays/onlays, dentures, and prosthesis over implant
- ✓ **Orthodontia**



Dental

Decision **2**

Elect Dental Coverage

- Core
- Buy-Up
- Waive Coverage

Buy-Up Dental Plan Details

	In-Network	Out-of-Network
Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Annual Maximum Benefit		
Annual Max	\$2,000	\$2,000
Services		
Diagnostic & Preventive	0% coinsurance, deductible does not apply	0% coinsurance, deductible does not apply
Basic Restorative	20% coinsurance after deductible	20% coinsurance after deductible
Major Restorative	50% coinsurance after deductible	50% coinsurance after deductible
Additional Coverage		
Implants	50% coinsurance after deductible	50% coinsurance after deductible
Orthodontia (Children)	50% coinsurance Deductible does not apply \$2,000 Lifetime Max	

Plan Costs

Total Monthly Premium		
Buy Up Dental Plan	Lush Contribution	Employee Contribution
Employee	\$26.46	\$2.83
Employee + Spouse/ Domestic Partner	\$43.99	\$9.50
Employee + Child(ren)	\$43.58	\$5.08
Employee + Family	\$56.42	\$6.77

[View Benefit Summary](#)

[Find a Cigna PPO Dental Provider](#)

Exam Only Vision Plan Highlights

Lush partners with Cigna to offer vision coverage. With the Vision Preferred Provider Organization plan (PPO) through Cigna, you and your family members have access to quality vision care. The exam only plan is paid for 100% by Lush. This plan only covers an eye exam once every calendar year. Cigna offers a large specialty network of optometrists, ophthalmologists and nationally recognized eye care retailers so you'll have plenty of choices.

Exam Only Vision Plan Details

Benefit	Frequency	In-Network	Out-of-Network
Eye Exam	Once every 12 months	\$10 copay	Up to \$60-reimbursement
Materials	N/A	Not Covered	N/A
Vision Lenses	N/A	Not Covered	N/A
Frames	N/A	Not Covered	N/A
Elective Contact Lenses	N/A	Not Covered	N/A
Necessary Contact Lenses	N/A	Not Covered	N/A

Monthly Premiums

Coverage Tier	Employee Cost
Employee	\$0.00
Employee + Spouse/ Domestic Partner	\$0.00
Employee + Child(ren)	\$0.00
Employee + Family	\$0.00

Vision

Decision **3**

Elect or waive vision coverage

Healthy Rewards



Vision Network Savings Program

When you see a [Cigna Vision Network Savings Program](#) Eye Care Professional, you can save **20% (or more)** on frames and/or lenses, including lens options, with a valid prescription.

This savings does not apply to contact lens materials. See your Cigna Vision Network Eye Care Professional for details.

Save on Lasik

With the [Cigna Healthy Rewards®* discount program](#), you can enjoy savings on laser vision correction. You and your dependents get reduced rates with any participating U.S. laser network provider.

[View Benefit Summary](#)

[Find a Cigna PPO Vision Provider](#)

Buy-Up Vision Plan Highlights

Lush partners with Cigna to offer vision coverage. Cigna offers a large specialty network of optometrists, ophthalmologists and nationally recognized eye care retailers so you'll have plenty of choices. With the Buy Up Vision plan through Cigna, you and your family members have access to quality vision care with additional benefits not covered under the exam only plan.

Buy-Up Vision Plan Details

Benefit	Frequency	In-Network	Out-of-Network
Eye Exam	Once every 12 months	\$10 copay	Up to \$45 reimbursement
Materials	Once every 12 months	\$10 copay	N/A
Single Vision Lenses	Once every 12 months	Covered in full after materials copay	Up to \$40 reimbursement
Lined Bifocal Lenses	Once every 12 months	Covered in full after materials copay	Up to \$65 reimbursement
Lined Trifocal Lenses	Once every 12 months	Covered in full after materials copay	Up to \$75 reimbursement
Progressive Eyeglass Lenses	Once every 12 months	Covered in full after materials copay	Up to \$75 reimbursement
Lenticular Lenses	Once every 12 months	Covered in full after materials copay	Up to \$100 reimbursement
Frames	Once every 24 months	Covered up to \$130 after materials copay	Up to \$78 reimbursement
Elective Contact Lenses	Once every 12 months	Covered up to \$130	Up to \$115 reimbursement
Necessary Contact Lenses	Once every 12 months	Covered in full	Up to \$250 reimbursement

Coverage Tier	Employee Cost
Employee	\$4.26
Employee + Spouse/ Domestic Partner	\$7.98
Employee + Child(ren)	\$7.23
Employee + Family	\$9.46

Vision

Decision 3

Enroll or waive vision coverage

Healthy Rewards



Vision Network Savings Program

When you see a [Cigna Vision Network Savings Program](#) Eye Care Professional, you can save **20% (or more)** on additional frames and/or lenses, including lens options, with a valid prescription.

This savings does not apply to contact lens materials. See your Cigna Vision Network Eye Care Professional for details.

Save on Lasik

With the [Cigna Healthy Rewards®* discount program](#), you can enjoy savings on laser vision correction. You and your dependents get reduced rates with any participating U.S. laser network provider.

View Benefit Summary

Find a Cigna PPO Vision Provider



Heads up!

You may only use your benefits to purchase frames OR contact lenses per benefit year, not both!

Tax-Advantaged Accounts

Lush offers employees the opportunity to contribute to tax-advantaged accounts to assist with out-of-pocket costs. HSA Bank is our HSA vendor and Wex is our vendor for DCFSA accounts.

Account Highlights

Tax-advantaged accounts can be used to pay for qualified out-of-pocket health care, dental care, vision care, dependent care and commuting expenses.

Why Contribute to a Tax-Advantaged Account?

Pre-tax contributions made to an HSA, DCFSA or CRA are meant to help you meet certain health, dependent care, and commuter expenses that may not be covered by your insurance plan.

- ✓ **If you enroll in either the Lavender or Rose Plan, you can contribute to a Health Savings Account.**
- ✓ **Lush contributes to your HSA account if you enroll into the Lavender plan.**
- ✓ The IRS HSA limit for 2023 is \$3,850 for Individual and \$7,750 for family.
- ✓ For the HSA, there is a catch-up contribution, available to those over age 55, of an additional \$1,000/year.
- ✓ **If you have eligible dependents, you can contribute to a Dependent Care Flexible Spending Account.** Eligibility requirements are outlined on page 20
- ✓ **If you are expecting expenses related to transit or parking, you can contribute to a Commuter Reimbursement Account.** Eligibility requirements are outlined on page 21

Tax-Advantaged Accounts

Decision

4

Contribute to a tax-advantaged account

- Health Savings Account (HSA)
- Dependent Care Flexible Spending Account (DCFSA)
- Commuter Reimbursement Account (CRA)

Health Savings Account (HSA)

What is an HSA?

A health savings account (HSA) is an individually owned, tax-advantaged savings account which works in conjunction with the health plan coverage for the Lavender plan and the Rose plan. HSA dollars can be used to pay for many qualified out-of-pocket medical, prescription, dental, and vision expenses.

Am I eligible?

If you enroll in either the Lavender plan or Rose plan you may participate in the HSA to set aside pre-tax dollars to pay for qualified out-of-pocket expenses.

How much does the company contribute?

Lush contributes the following to the HSA accounts:

- Lavender Plan
 - \$1,000 for Employee
 - \$1,500 for Employee + Dependent(s)
- Rose Plan
 - Lush does not contribute to the Rose plan HSA
 - Employees are eligible to contribute their own pre-tax contribution

What if I don't spend the money I contribute?

HSA Bank funds will roll over each year. Funds left in your account carry over from year to year and your HSA balance grows over time with each pay period contribution.

Rollover

Contact League for instructions on how to transition funds. In the event you separate from the company, the money in your account belongs to you. You can continue to use the account for qualifying out-of-pocket expenses.

2023 Maximum Annual Contribution:

\$3,850 for individuals

\$7,750 for individuals with dependent coverage



Maximum Annual Catch-Up Contribution for those 55+:

\$1,000

Sample Eligible Expenses:

- Glasses or contact lenses
- Fertility treatments
- Acupuncture
- Hearing aids
- Insulin or substitutes
- Crutches or wheelchairs
- Prescriptions





Dependent Care Flexible Spending Accounts

Administered by Wex



Dependent Care Flexible Spending Account (DCFSA)

What is a DCFSA?

A Dependent Care Flexible Spending Account (DCFSA) is a pre-tax benefit that can be used to pay for eligible expenses, such as day care, preschool, or after-school care for a qualified individual.

Am I eligible?

You may enroll and contribute to a Dependent Care FSA to receive reimbursement for the cost of care of a qualifying person. A qualifying person is someone who lives with you for more than half the year and is either:

- Your dependent child under the age of 13
- Your spouse or dependent who is physically or mentally unable to care for themselves

If you are married, you and/or your spouse must meet one of the requirements below:

1. Are employed
2. Are actively looking for work,
3. Are a full-time student
4. Your spouse is physically or mentally incapable of self-care

Grace Period & Run-Out Period

The Lush plan runs on a plan year from July 1st through June 30th. There is a 2.5 month **grace period**, following the end of the plan, that runs through September 15th of each year. This extends the period during which claims may be incurred and still be eligible under the current plan year.

Additionally, there is a 90-day **run out period** that follows June 30th, during which claims may be submitted for expenses that were incurred during the plan year.

In the event you separate from Lush, your flexible spending account will terminate at the end of the month in which you separate (end date) and you will have 90 days from the end date to submit claims incurred on or before the end date. Claims submitted after the deadline will not be reimbursed.



Maximum Contribution:

2023: \$5,000



Sample Eligible Expenses:

- Licensed nursery schools
- Qualified childcare centers
- Adult day care facilities
- After school programs
- Preschool tuition





Commuter Reimbursement Account (CRA)

Administered by Wex



Commuter Reimbursement Account (CRA)

What is a CRA?

A Commuter Reimbursement Account is a pre-tax benefit account used to pay for public transit or parking as a part of your daily commute from home to your place of work.

Am I eligible?

Yes! Any benefit-eligible employee may set aside pre-tax dollars to pay for qualified parking and transit expenses. Lush encourages alternative methods of commuting and provides for transit benefits at all store locations.

Can I make changes to my contribution amount?

You can increase, decrease, start or stop contributions at any time.

Rollover

Unused funds will automatically roll over into your account for another plan year as long as you remain an employee of Lush.



2023 Maximum Contribution:

Transit: \$300 per month

Parking: \$300 per month

Sample Eligible Expenses:

- Subway tokens
- Bus passes
- Commuter rail tickets
- Parking structure fees



Learn More:

[List of IRS qualified expenses](#)

Life, AD&D, Short Term and Long Term Disability, Voluntary Life



Plan Highlights

Life Insurance is an important source of financial protection for your family in the event you pass away. The Lush benefit program aims to make sure you and your loved ones are covered. Life insurance is provided through New York Life. The Life and AD&D policies have a conversion provision should you leave the company.

Lush automatically provides employees with Life, Accidental Death & Dismemberment, Short-term Disability and Long-Term Disability Insurance at no cost to you!



Life Insurance and Accidental Death and Dismemberment

This benefit is an employer-paid life insurance plan, which covers employees for one times their base annual salary (to a maximum of \$150,000). If an employee's annual salary is not an even multiple of \$1,000, Lush provides coverage rounded up to the nearest thousand to a maximum of \$150,000. Life benefits are doubled if the death is accidental in nature.

Short-term Disability Insurance (Core STD)

This benefit is employer-paid insurance and provides short term income protection for those who become disabled from a covered accident, sickness or pregnancy, with coverage commencing on the 7th day of the disability caused by accident or sickness.

Long-term Disability Insurance (Core LTD)

This benefit is employer-paid insurance for employees suffering from a debilitating illness, with coverage commencing 180 days from the date of the disability. The maximum benefit period is up to age 65.

Voluntary Life Insurance

Employees may elect to purchase additional insurance protection for selves, spouses and/or children. The premium is fully employee paid and the guarantee issue amount is \$150,000 at initial eligibility.



Decision **5**

Life, AD&D, Short Term and Long Term Disability

- Elect or increase Voluntary Life for yourself and your dependents
- Elect Core or Buy-Up STD or LTD

Important things to consider

Evidence of Insurability (EOI)

There is no EOI for Basic Life/AD&D

If you are **newly eligible** and have not previously waived coverage, you can elect Voluntary Life Insurance up to the guarantee issue amount without submitting an EOI. If you elect a coverage amount above the guarantee issue, you will need to submit an EOI.

At **open enrollment**, you are required to submit an EOI if you have previously waived Voluntary Life Insurance, or if you elect coverage above the guarantee issue amount.

Taxes

Lush covers the full premium for basic STD and LTD. Your paycheck will reflect a 'gross up' of the value of that premium. This is for your benefit because if and when you receive disability benefits, the payments will be tax free to you.

Plan Highlights

Disability coverage supplements your income in the event you need to be away from work for a period of time due to an illness or injury. Lush automatically provides short- and long-term disability coverage to full-time employees. However you do have the option to buy up additional STD and/or LTD coverage.

Decision **6**

Short Term & Long Term Disability

- Enroll in Buy-Up STD coverage
- Enroll in Buy-Up LTD coverage

Short-Term Disability

	Basic STD	Buy Up STD
Cost Sharing	100% Employer-Paid	100% Employee-Paid
Benefit Percentage	60% of weekly salary	66.67% of weekly salary
Maximum Benefit	\$1,000 per week	\$2,000 per week
Maximum Benefit Duration	26 Weeks	26 Weeks
Elimination Period – Accident or Illness	7 Days	7 Days
Benefit Duration Period	7 calendar days	7 calendar days
Eligibility Waiting Period	No waiting period	No waiting period
Monthly Rates	N/A - Lush pays 100% of Basic STD	\$0.562 per \$10 of covered benefit

View STD Plan Highlights

Heads up! If you are a full-time employee and are electing Buy-Up STD or LTD coverage for the first time (and are not in your new hire eligibility period) an EOI is required.

Long-Term Disability

	Basic LTD	Buy Up LTD
Cost Sharing	100% Employer-Paid	100% Employee-Paid
Benefit	Pays a benefit of 60% of your Basic Monthly Earnings to a maximum of \$12,000 per month, less offsets for other income	Pays a benefit of 66.67% of your Basic Monthly Earnings to a maximum of \$15,000 per month, less offsets for other income
Maximum Monthly Benefit	\$12,000	\$15,000
Eligibility	All eligible employees working at least 30 hours per week	All eligible employees working at least 30 hours per week
Elimination Period	180 Days	180 Days
Monthly Rates	N/A - Lush pays 100% of Basic LTD	\$0.16 per \$100 of covered benefit

View LTD Plan Highlights

Voluntary Term Life Insurance

Decision

76

Voluntary Life Insurance

- Enroll in Voluntary Life Insurance
- Waive coverage

	New York Life
Cost Sharing	100% Employee-Paid
Eligibility	All eligible employees working at least 20 hours per week
Employee Coverage Benefit	Employees can elect 5x annual earnings up to \$500,000. Increments of \$5,000. Guarantee issue \$150,000 at initial eligibility
Spouse Coverage Benefit	Spouse coverage cannot exceed Employee coverage. Spouse can elect up to \$500,000. Increments of \$5,000 Guarantee issue \$30,000 at initial eligibility
Dependent Children	An eligible employee's unmarried financially dependent children to age 26
Dependent Children Benefit	\$10,000 benefit for children. Units of \$1,000 from birth to 26 years old.

[View Benefit Summary](#)

Evidence of Insurability: EOI may be required to qualify for coverage. See page 22.

Per Month Rates per \$1,000 of Coverage - Employee And Spouse	
Employee Age Brackets	Premium Rates
<25	\$0.060
25 - 29	\$0.060
30 - 34	\$0.080
35 - 39	\$0.110
40 - 44	\$0.160
45 - 49	\$0.250
50 - 54	\$0.360
55 - 59	\$0.500
60 - 64	\$0.660
65 - 69	\$1.270
70 - 74	\$2.060
75+	\$5.252
Child Life Rate	\$0.10 / \$1,000



Critical Illness

(Specified Disease)



Plan Highlights

Critical Illness can pay money directly to you when you're diagnosed with certain serious illnesses. If you are diagnosed with an illness that is covered by this insurance, you can receive a benefit payment in one lump sum. You can use the money however you want. The money can help you pay out-of-pocket medical expenses, like copays and deductibles. You can use this coverage more than once. Even after you receive a payout for one illness, you're still covered for the remaining conditions. If you have a different condition later, you can receive another benefit.

Critical Illness

Decision

8

- Enroll in Critical Illness
- Waive Coverage
- Determine amount and who to cover

View Benefit Summary



Please note this is not a complete list of all covered services. For the comprehensive list, please reference the benefit summary above.

Who can get Coverage?

Employee	\$20,000 or \$30,000 of coverage for eligible employees.
Spouse	May enroll in up to 100% of employee coverage. (Employee must be enrolled for Spouse to enroll)
Child(ren) Birth to age 26	Automatically covered at 100% of employee coverage at NO COST.
Rates	Age Banded, 100% employee paid, view Benefit Summary for rate table.

What is Covered

Cost Sharing	Employee Paid
Eligibility	All eligible employees working at least 20 hours per week. You are eligible to enroll yourself, spouse and child
Conditions	Heart Attack, Stroke, Organ Failure, End Stage Kidney, Coronary Artery Disease (50%), Angioplasty, Stent
Cancer Conditions	Invasive Cancer (including Breast Cancer), Non Invasive Cancer, Skin Cancer
Progressive Conditions	ALS, Dementia, Alzheimer's, MS, Parkinson's Disease





Plan Highlights

If you've ever been in the hospital, you know that it may be difficult to focus on your recovery. You'd rather be in your own bed, eating your own food, and your family might be spending a ton of money to stay at a hotel near you. The last thing you want to think about is the bill you will receive after your insurance company covers its portion of your hospital stay.

Since out-of-pocket costs including deductibles and coinsurance can build quickly, the bills that result from a hospital stay can be overwhelming for anyone – with or without Medical Insurance. Hospital Indemnity Insurance can help to ease the sticker-shock by paying a benefit directly to you (not to the hospital, or to an insurance company) if you or a covered family member has to stay in the hospital.

Hospital Indemnity *Decision*

9

- Enroll in Hospital Indemnity Plan
- Waive Coverage

[View Plan Information Here](#)



Lush will be offering employer-paid coverage for those enrolled into the Lavender HSA plan under the employee only tier. Buy-up option is available for those with dependents under all medical plan options.

Coverage:		
	Benefit Amount	Details
Hospital Admission	\$1,500	No elimination period. Limited to 1 day, 1 benefit(s) every 365 days
Hospital Stay	\$100 per day	No elimination period. Limited to 30 days, 1 benefit(s) every 365 days.
Monthly Rates		
Employee	\$11.67	
Employee + Spouse	\$20.45	
Employee + Children	\$20.64	
Employee + Family	\$27.66	

Benefit – Specific Conditions, Exclusions & Limitations

Hospital Admission: Must be admitted as an Inpatient due to a Covered Injury or Covered Illness. Excludes: treatment in an emergency room, provided on an outpatient basis, or for re-admission for the same Covered Injury or Covered Illness (including chronic conditions).

Hospital Stay: Must be admitted as an Inpatient and confined to the Hospital, due to a Covered Injury or Covered Illness, at the direction and under the care of a physician. If also eligible for the ICU Stay Benefit, only 1 benefit will be paid for the same Covered Injury or Covered Illness, whichever is greater.



Accident Insurance

(Injuries and Hospitalization)



Plan Highlights

Accident Insurance can pay you money for covered accidental injuries and their treatment. Accident Insurance pays a set benefit amount based on the type of treatment you need. It covers accidents that occur on and off the job. And it includes a range of incidents, from common injuries to more serious events.

Accident Insurance can help you with out-of-pocket expenses that your medical plan doesn't cover, like copays and deductibles. You're guaranteed base coverage, without answering health questions.

Covered Injuries Examples

- ✓ X-Rays
- ✓ Hospitalization
- ✓ Emergency Room Treatment



Heads up!

This is not an exhaustive list, please see your certificate booklet for specific benefits.

Accident Insurance

Decision

10

- Enroll in Accident
- Waive Coverage
- Determine amount and who to cover

Accident Benefits

• Eligibility

All employees working 20 hours per week or more. Spouse and Children are also eligible.

• Sickness Hospital Confinement Benefit

The optional benefit pays a set benefit amount based on the type of injury and treatment you need. It includes coverage both on and off the job.

Rates Per Month		
Tier Level	Plan 1	Plan 2
Employee	\$8.47	\$12.71
Employee + Spouse	\$14.00	\$21.00
Employee + Child(ren)	\$15.24	\$22.86
Employee + Family	\$20.77	\$31.15

[View Benefit Summary](#)

Employee Assistance Program

HealthAdvocate

Lush partners with Health Advocate to provide an employee assistance program (EAP). It is a confidential program to provide well-being support at no additional cost to employees.

Employee Assistance Program (EAP) Details

Eligibility: All full-time and part-time employees and their dependents. Casual and Seasonal employees are not eligible for this benefit.



Program Benefits

Whether your needs are big or small, your Employee Assistance Program (EAP) is there for you. It can help you and your family find solutions and restore your peace of mind. Contact EAP for help with:

- Stress; anxiety; depression; family and relationship issues; grief and loss; substance abuse; gambling, domestic violence; parenting; child development; positive discipline; safety; special needs issues
- Child care issues including personalized referrals to local in-home or daycare centers with confirmed vacancies
- Eldercare issues including referrals to nursing homes, assisted living facilities, independent living facilities, home health care, hospice, respite care, geriatric care managers, senior centers, adult day care centers, community services and resources
- Financial planning/debt management consultation and online financial wellness program
- Legal service consultation - up to thirty minutes per legal issue, plus access to online legal library with information and templates for family planning, naturalization & immigration, wills & estates and advanced directives



View Benefit Summary

Connect Via Phone

You can call **1-866-799-2485** 24/7/365 to speak with a master's level counselor or schedule an appointment

Connect Via Website

Log on to www.members.healthadvocate.com

Employer ID: Lush

Confidentiality

There are strict standards of confidentiality in place to protect your privacy. Treatment information is not shared with anyone without your written permission.

EAP specialists will confidentially discuss challenges you and your family may be facing and provide you with consultation, information, action plans, and resources within your community.

Lush partners with Nationwide to provide a Voluntary Pet Program. It is a discount program and is available at any time throughout the year.

Pet Insurance Details



Eligibility: All employees and their dependent(s)

Program Benefits

My Pet Protection® is offered exclusively to employees and gives your pet superior protection at an unbeatable price.



Features

- Up to 70% back on vet bills
- Exclusive to employees, not available to the general public
- Same price for pets of all ages
- Average savings of 30% over similar plans from other pet insurers
- Wellness plan option that includes spay/neuter, vaccinations and more
- Vet Help Line: Unlimited, 24/7 access to a veterinary professional



Connect Via Phone

Call **877-738-7874** and mention that you're an employee of LUSH Cosmetics, Inc. to receive preferred pricing



Connect Via Website (link in the League wallet)

Log on to <http://www.petinsurance.com/lushusa>

Employer ID: Lush Cosmetics, Inc.

[Find more information on Nationwide's website here](#)

Contact Information

<i>Benefit</i>	<i>Carrier</i>	<i>Phone</i>	<i>Website</i>
Cigna Pre-Enrollment	Cigna	1-888-806-5042	www.mycigna.com
Medical/Rx	Cigna	1-800-CIGNA24	www.mycigna.com
Dental	Cigna	1-800-CIGNA24	www.mycigna.com
Vision	Cigna	1-800-CIGNA24	www.mycigna.com
Life	New York Life	1-888-842-4462	www.newyorklife.com
Disability	New York Life	1-888-842-4462	www.newyorklife.com
Health Savings Account (HSA)	Cigna (HSA Bank)	1-800-CIGNA24	www.mycigna.com
Flexible Spending Account (FSA)	Wex	1-866-799-2485	www.wexinc.com
Employee Assistance Program	Health Advocate	1-899-799-2485	www.members.healthadvocate.com
Pet Insurance Program	Nationwide	1-877-738-7874	www.petinsurance.com/lushusa



Download the League Mobile App to your phone to have all your benefits information at your fingertips!

Glossary

Deductible	The dollar amount you pay for most services each plan year before the plan will pay benefits.
Coinsurance	The percentage of your medical costs you have to pay for most covered services. You begin paying the coinsurance after you have met your plan deductible.
Copay	The flat dollar amount you pay for certain services, such as office visits and prescription drugs, when you go to an in-network provider.
Out-of-Pocket Limit	The maximum share of expenses you have to pay each plan year before the plan begins paying at 100%. The out-of-pocket limit includes copays, the deductible, and coinsurance.
Open Access Plan	A network of doctors and health care facilities that have agreed to provide services to plan members at discounted rates.
Preventative Care	Preventative Care includes services that include cancer screenings, immunizations, colonoscopy, mammograms, and other care defined by the American Medical Association
Maximum Employee Exposure	Your Maximum Employee Exposure is the worst case scenario within a given calendar year if you have a major illness or injury. This would be the most you would pay out-of-pocket.
Health Savings Account (HSA)	A type of savings account that lets you set aside money on a pre-tax basis to pay for qualified medical expenses, deductibles, copayments, coinsurance, and some other expenses, which may lower your overall health care costs. This is paired with a high-deductible health plan and provides tax advantages and the money is yours year after year.
Flexible Spending Account (FSA)	A Flexible Spending Account is an account you put money into that you use to pay for certain dependent care costs. You don't pay taxes on this money. With this account you must use the money for the year or you will lose it.



Check out our **full insurance glossary** for definitions to all the tricky insurance lingo you might be confused about!



Benefits and Compliance Documents

All benefit-eligible employees under the Lush Cosmetics Employee Benefits Plan, are entitled to receive certain plan documents and disclosures which are hyperlinked below. Please read through these documents carefully as they include important benefits information. You should also retain copies of these documents for your records. For individuals who elected to waive coverage, some of this information will not apply to you.

[Medicare Part D Creditable Coverage Notice](#)

[PPACA & ERISA Notices Packet](#)

[Exchange Notice](#)

You have the right to request and obtain a hard copy of these documents at no charge. Contact Lush Cosmetics Corporate Benefits at benefits@lush.com to request a paper version or ask any questions regarding these documents.



Lush offers a robust medical insurance program to our employees. We partner with MCS to offer this coverage.

Plan Highlights

New to 2023, we have partnered with MCS to provide a \$0 deductible plan to all Puerto Rico employees. Our plans offer coverage for most healthcare services.

**MCS Support Line is live now at
866.627.4327**



In-Network	
Calendar Year Deductible	
Individual	\$0
Family	\$0
Out-of-Pocket Maximum	
Individual	\$6,350
Family	\$12,700
Visits	
Preventative Care	Covered 100%
Primary Care Visit	\$0 Copay, after deductible has been met
Specialist Visit	\$10 Copay per visit
Outpatient Mental Health	\$10 Copay per visit
Urgent Care	\$25 Copay per visit
Emergency Room	Accident: \$0 Copay Sickness: \$75 Copay per visit

Prescription Drug Coverage	
	Generic/Preferred Brand/Non-Preferred Brand
Retail (up to a 30-day supply)	\$5/ \$20/ \$40 copay, deductible does not apply
Retail (up to a 90-day supply)	\$13/ \$50/ \$100 copay, 15% coinsurance min on preferred & non-preferred Brand
Mail Order (up to a 90-day supply)	\$13/ \$50/ \$100 copay, 15% coinsurance min on preferred & non-preferred Brand

Want more information?



Check out the full summary of your benefits and coverage

View →