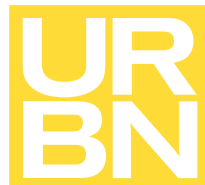
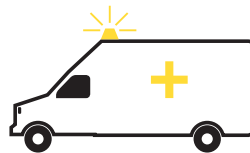
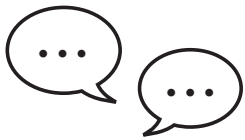


About Your Benefits



July 2017–June 2018



To Enroll




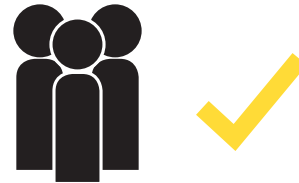
Create an Account

- Go to **portal.adp.com**
- Click “**Sign Up**”
- Enter registration code XXXXXXXXXX
- Click “**Go**” and follow the prompts

Enrolling in Benefits

- Select “**Benefits**” tab at the top of your ADP Portal page and then click “**Welcome**”
- Click on the Health & Welfare Benefits website link
- Click “**Enroll Now**”
- Input beneficiary information (required) and dependent information (if any)
- Make elections
- Click **submit**

 Print a copy of your confirmation statement



Verify Dependents

If you are adding dependents to your plans, you will need to enter your dependent information online when enrolling. You will then receive a letter and list of required documentation in the mail. Please follow the instructions outlined in the documents to verify your added dependents.

An Eligible Dependent is Defined as:

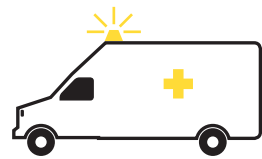
- A legal spouse.
- A child up to age 26 regardless of student status, marital status, financial dependence or residence.
- Any age mentally or physically disabled child (who became disabled prior to age 26).

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Independence

Plan Options	Base Plan	Core Plan
Higher cost at the point of service	✓	
Lower cost at the point of service		✓
Less deducted out of your paycheck	✓	
More deducted out of your paycheck		✓
Same hospital and physician network	✓	✓





Benefit Description	Base Plan		Core Plan	
	In-Network	Out-Of-Network	In-Network	Out-Of-Network
Annual Deductible	Individual: \$0 Family: \$0	Individual: \$2,500 Family: \$5,000	Individual: \$0 Family: \$0	Individual: \$500 Family: \$1,000
Out-of-Pocket Maximum	Individual: \$2,500 Family: \$5,000	Individual: \$10,000 Family: \$20,000	Individual: \$1,000 Family: \$2,000	Individual: \$3,000 Family: \$6,000
Primary Care Visits	\$20 copay	50%	\$15 copay	50%
Specialist Visits	\$40 copay	50%	\$30 copay	50%
Hospital (Inpatient & Outpatient)	75%	50%	90%	50%
Emergency Room	\$100 copay (waived if admitted)		\$100 copay (waived if admitted)	



✓ ID Card

- You will receive around the time of your benefit effective date.
- Will be sent to the address on file for you in ADP.
- If you have misplaced your ID card, call IBC at **1-800-ASK-BLUE** and request that they send you a new one.

Employee Pre-tax Bi-weekly Contributions

Coverage Levels	Base Plan	Core Plan
Employee 	\$ 49.88	\$ 63.18
Employee +1	\$ 112.75	\$ 142.66
Family 	\$ 151.98	\$ 194.11



🔍 Did You Know?

- You can find in-network providers through the IBC portal at **ibx.com > individuals > find a doctor**. Be sure to choose National Blue Card PPO as your provider.
- Out-of-network providers may bill you for the difference between the plan allowance (known as “Usual, Customary and Reasonable” or “UCR” fee) and the provider’s actual charge. It is important to note that all percentages for out-of-network services are percentages of UCR, not the provider’s actual charge.



Summary of Benefits and Coverage (SBC)

SBCs detail your medical/prescription benefits. You may view and/or print a copy by visiting the Plan Information section of your benefits page.

Prescription

Rx Questions?
call 1-844-550-2711 or visit express-scripts.com



Plan Design

- Retail generic prescriptions cost \$10.
- Maintenance generic prescriptions cost \$10 for three months, then move to \$25 a month when picking up at the pharmacy.
- Maintenance generic prescriptions cost \$25 for a three month prescription through mail order.

Prescription Drugs	Retail	Mail Order
Generic	\$10	\$25
Preferred	\$30	\$75
Non-Preferred	\$50	\$125
Dispensing Limit	Up to 34 days	Up to 90 days
Non-Network Pharmacy	Plan pays 50% of allowable charge	



Maintenance Drugs

Maintenance drugs, beginning with the 4th refill, must be filled through the Express Scripts mail order program. If you choose to fill a maintenance drug at a retail pharmacy more than 3 times, you will be charged the Mail Order copay. When you choose the Express Scripts mail order program, you will receive a 3-month supply at 2.5 times the retail copay, thereby saving you money.



✓ ID Card

- You will receive around the time of your benefit effective date.
- Will be sent to the address on file for you in ADP.
- If you misplaced your ID card, call Express Scripts at **1-844-550-2711** and request that they send you a new one.

🔍 Did You Know?

- When you enroll in either of URBN's medical plans, you are automatically enrolled in prescription coverage at no extra cost.
- Oral contraceptives will never cost over \$10 a month.



Express Scripts Mail Order Program

- You can contact a registered pharmacist 24 hours a day, 7 days a week with any questions.
- Order refills online, by mail, or by phone – anytime day or night. To order online, register at express-scripts.com. Refills are usually delivered within 3 to 5 days after your order is received.

Telemedicine

Need a Doctor?
call 1-877-764-6605 or visit mdlive.com/ibx

MDLIVE®

Contacting an MDLIVE Doctor

There are three convenient ways to reach an MDLIVE doctor:



Phone



Webcam & Internet



Email

🔍 Did You Know?

- Your copay for each visit is only \$10 vs. \$20/\$15 for an in person primary care visit.
- Network includes pediatricians.
- Must be enrolled in medical to utilize Telemedicine.
- Due to statutory regulations, MDLIVE is not available in Arkansas and only video consultation is allowed in Idaho.

Commonly Treated Conditions

General Health		Mental Health
• Acne	• Insect Bites	• Anxiety & Depression
• Allergies	• Joint Aches & Pains	• Child Behavior Issues
• Asthma	• Nausea & Vomiting	• Post Traumatic Stress Disorder
• Bronchitis	• Pink Eye	• Sleep Disorders
• Cold & Flu	• Rashes	• Marital & Relationship Issues
• Constipation & Diarrhea	• Sinus Infection	• Smoking Addiction
• Fever	• Sore Throat	• Mood Swings
• Gout	• Sports Injury	• Substance Abuse
• Headache	• Sunburn	• Eating Disorders
• Infections	• Urinary Tract Infection	• Obsessive Compulsive Disorder



Plan Options	Basic Plan	Plus Plan
\$1,000 annual allotment to use on coverage	✓	
\$2,500 annual allotment to use on coverage		✓
Lower annual deductible		✓
Orthodontia for dependent kids up to age 19	✓	
Adult Orthodontia and no age limit for kids		✓

Benefit Description	Basic Plan		Plus Plan	
	In-Network	Out-Of-Network	In-Network	Out-Of-Network
Annual Deductible*	Individual: \$50 Family: \$150	Individual: \$100 Family: \$300	Individual: \$25 Family: \$75	Individual: \$50 Family: \$150
Annual Benefit Maximum	\$1,000/person (combined in & out-of-network)		\$2,500/person (combined in & out-of-network)	
Type A - Preventative	90%**	80%***	100%**	100%***
Type B - Basic Restorative	80%**	70%***	80%**	80%***
Type C - Major Restorative	50%**	40%***	60%**	60%***
Type D - Orthodontia	50%**	50%***	50%**	50%***
	Orthodontia only available to children under 19		Orthodontia available to children under 19 <u>and</u> adults	
Orthodontia Lifetime Maximum	\$1,000/person (combined in & out-of-network)		\$2,000/person (combined in & out-of-network)	

*Annual Deductible only applies to Basic and Major Services.
 **Refers to the covered percentage of the PDP fee. This is the amount participating network dentists have agreed to accept as payment in full.
 *** Refers to the covered percentage of what is considered a Reasonable and Customary (R&C) charge for dentists in that same geographic area.



✓ ID Card

- You will receive around the time of your benefit effective date.
- ID Cards are not required to receive service.
- To use your dental coverage, you can print out a paper card through the MetLife website or just tell your in-network provider what your social security number is.

🔍 Did You Know?

- If your Dentist asks, the group number for both plans is **100762**.
- You can find in-network providers at metlife.com/mybenefits.
- Dental plan runs on the calendar year, not the URBN plan year (July–June).

Employee Pre-tax Bi-weekly Contributions

Coverage Levels	Base Plan	Plus Plan
Employee	\$ 6.46	\$ 14.66
Employee +1	\$ 12.55	\$ 28.34
Family	\$ 20.06	\$ 45.59

Benefits—What's Covered?

Type A - Preventive

- Prophylaxis (cleanings)
- Oral Examinations
- Child Fluoride Applications
- X-rays

Type B - Basic Restorative

- Sealants
- Space Maintainers
- Fillings
- Simple Extractions

Type C - Major Restorative

- Crowns/Inlays/Onlays
- Endodontics
- General Anesthesia
- Oral Surgery
- Periodontics
- Bridges
- Dentures

Type D - Orthodontia

- Braces
- Retainers
- Expanders



Plan Options	Vision Plan	Vision Plan Plus
Vision exam and eyewear coverage	✓	✓
Increased allowance for frames and contacts		✓
\$20 copay for anti-reflective coating		✓
\$20 copay for contact lens exam (in lieu of glasses)		✓

Benefit Description	Vision Plan		Vision Plan Plus	
	In-Network	Out-Of-Network	In-Network	Out-Of-Network
Benefits Available Exam Lenses Frames Contact Lenses (in lieu of glasses)	Every 12 months		Every 12 months	
Eye Examination	\$10 copay	\$45 allowance	\$10 copay	\$45 allowance
Prescription Glasses	\$20 copay	See lens & frames below	\$20 copay	See lens & frames below
Frames	Up to \$150 allowance, +20% off any amount over your allowance	\$70 allowance	Up to \$250 allowance, +20% off any amount over your allowance	\$70 allowance
Lenses Single Vision Lined Bifocal Lined Trifocal	Covered in full Covered in full Covered in full	\$30 allowance \$50 allowance \$65 allowance	Covered in full Covered in full Covered in full	\$30 allowance \$50 allowance \$65 allowance
Anti-Reflective Coating	Discount Only	N/A	\$20 copay	N/A
Contact Lenses (in lieu of glasses) Includes Exam & Fitting	Up to \$150 allowance, up to \$60 copay for exam (fitting & evaluation)	\$105 allowance	Up to \$250 allowance, \$20 copay for exam (fitting & evaluation)	\$105 allowance

Important Plan Note: Providers in the VSP "Choice" network are considered to be in-network.



⊘ ID Card

- You will **not** receive an ID card from VSP.
- To use your vision coverage, you can print out a paper card through the VSP website or tell your in-network provider your social security number.

🔍 Did You Know?

- You can find in-network providers through the VSP website at vsp.com by clicking "Find a Doctor."
- If you go out of network, you must pay 100% of the cost up front, but you can submit for reimbursement through VSP.
- You can receive the following discounts through VSP
 - 20% off additional glasses and sunglasses, including lens options, from any VSP provider within 12 months of your last well-eye exam.
 - Average of 15% off Laser Vision Correction regular price or 5% off the promotional price; discounts are only available from contracted facilities.
- For additional special offers, visit vsp.com/special_offers.

Employee Pre-tax Bi-weekly Contributions

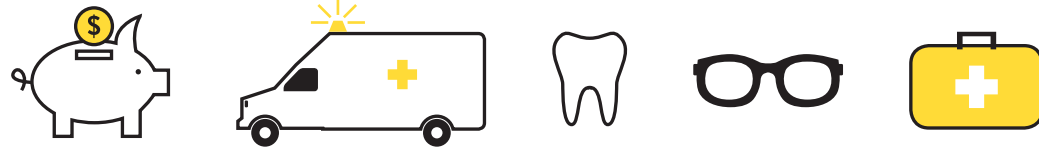
Coverage Levels	Plan	Plan Plus
Employee	\$ 2.16	\$ 5.00
Employee +1	\$ 4.32	\$ 10.00
Family	\$ 6.97	\$ 16.10

Flexible Spending Accounts (FSA)

FSA Questions?
call Payflex at 1-844-PAYFLEX or visit payflex.com

PAYFLEX®

Health FSA



What is a Health FSA?

A Health FSA allows you to set aside money on a pre-tax basis for health expenses for you and your dependents.

- Eligible expenses include deductibles, coinsurance, copayments, dental expenses, and vision care. You may view a full listing of eligible expenses at payflex.com > individuals > common expenses.
- The minimum annual election is \$100; the maximum annual election is \$2,500 per plan year.

Determining Your Annual Election

Use the tools on payflex.com to determine your out-of-pocket health expenses and annual election.

To determine your Health FSA bi-weekly deductions, divide your total annual election amount by the number of pay periods in the plan year (26). *If you are eligible after the start of the FSA plan year, divide your total election by the number of pay periods remaining in the plan year.*

Receiving Reimbursement

FSA

You may receive automatic reimbursement on qualified Health FSA expenses by using the PayFlex Card™, or you may submit claims. Visit payflex.com for more reimbursement information.

Important FSA Dates

- You may incur claims throughout the plan year, which runs July 1, 2017 to June 30, 2018.
- You are afforded an additional 90 days from the end of the plan year (until September 28th) to submit any claims that you have incurred.

After the Claim Deadline

- You are able to roll over up to \$500 in unused FSA Health funds into the next plan year.
- After **September 28th 2019**, any funds in excess of \$500 that remain in your Health FSA will be forfeited in accordance with IRS regulations.

Health FSA Reminders

- ⚠ Annual re-enrollment is required for Health FSA plan.
- ⚠ All expenses must be for incurred expenses, not for future expenses. Expenses cannot have been previously reimbursed and must not be reimbursable by insurance or any other source.

- To obtain a new FSA card, you may log onto payflex.com or call 1-844-PAYFLEX

PAYFLEX®

Dependent Care FSA



What is a Dependent Care FSA?

A Dependent Care FSA allows you to set aside money on a pre-tax basis for day care expenses for your child, disabled parent, or disabled spouse.

- Eligible expenses include payments to day care, preschool costs, after school care and elder care. You may view a full listing of eligible expenses at payflex.com > individuals > common expenses.
- The minimum annual election is \$100; the maximum annual election is \$5,000 per calendar year (\$5,000 is the maximum amount both you & your spouse, combined, may contribute to a Dependent Care FSA in accordance with IRS regulations).

Determining Your Annual Election

Use the tools on payflex.com to determine your dependent care expenses and annual election.

To determine your Dependent Care FSA bi-weekly deductions, divide your total annual election amount by the number of pay periods in the plan year (26). *If you are eligible after the start of the FSA plan year, divide your total election by the number of pay periods remaining in the plan year.*

Receiving Reimbursement



The PayFlex Card™ **cannot** be used for Dependent Care FSA expenses. You will need to submit claims for reimbursement. Visit payflex.com to learn about dependent care claim submission options.

Important FSA Dates

- You may incur claims throughout the plan year, which runs July 1, 2017 to June 30, 2018.
- You are afforded an additional 90 days from the end of the plan year (until September 28th) to submit any claims that you have incurred.

Use It or Lose It!

- After **September 28th**, any funds that remain in your Dependent Care FSA will be forfeited in accordance with IRS regulations.
- Rollover of Dependent Care FSA funds is **not** permitted.

Dependent Care FSA Reminders

- The Dependent Care FSA is for day care expenses. If your dependents incur eligible health expenses, this should be included in your Health FSA election.
- ⚠ Annual re-enrollment is required for the Dependent Care FSA plan.
- ⚠ Dependent care expenses must be for services received, not for future services.
- You will only receive reimbursement for dependent care expenses that allow you and your spouse to actively work, seek employment or attend school on a full-time basis.
- Reimbursement for dependent care expenses cannot exceed your account balance.

Life Insurance

mylibertyconnection.com



Basic Life and Accidental Death & Dismemberment Insurance

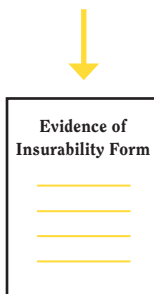
- ✓ 100% URBN paid
- ✓ No election required
- ✓ Basic Life & AD&D = 1x salary up to \$100,000

Voluntary Life Insurance

- 100% paid for by you
- **Employee Voluntary Life Benefit**
- Coverage is available in \$10,000 increments, up to \$500,000
- **Spouse Voluntary Life Benefit**
- If you elect coverage for yourself, you may purchase coverage for your spouse in \$10,000 increments up to 50% of your coverage amount
- **Child Voluntary Life Benefit**
- Coverage may be purchased in amounts of \$5,000 or \$10,000

Voluntary Life - Initial Eligibility

- If you are a newly eligible employee you may elect up to \$150,000 for yourself and up to \$10,000 for your spouse without having to complete an Evidence of Insurability form (EOI)



Voluntary Life - Open Enrollment 2017

- **Employee:** Can elect increments of \$10,000 up to \$50,000, not to exceed \$150,000, without an Evidence of Insurability form
- Over \$50,000 = EOI
- Over \$150,000 = EOI
- **Spouse:** Any election requires EOI
- **Child:** Never requires EOI

Visit the Plan Information/Common Forms & Plan Information section of portal.adp.com for an Evidence of Insurability form.

Important Plan Note: The amount that you will pay for Employee and Spouse Voluntary Life coverage is based on age.

Disability

Disability Questions?
call 1-877-906-2289 or visit mylibertyconnection.com



Short-Term Disability Insurance¹

- ✓ 100% URBN paid
- ✓ No election required
- ✓ Coverage provides a weekly benefit that equals 60% of your base weekly salary to a maximum of \$1,000

STD - due to accident or injury

After an unpaid elimination period of 14 consecutive days, benefits are payable for 11 weeks for a maximum disability duration of 13 weeks per disability



STD - due to pregnancy and delivery

- Vaginal delivery:
- 2 weeks unpaid
- 4 weeks paid
- 6 weeks total
- Cesarean delivery:
- 2 weeks unpaid
- 6 weeks paid
- 8 weeks total



Long-Term Disability Insurance¹

- ✓ 100% URBN paid
- ✓ No election required
- ✓ Coverage provides a monthly benefit that equals 60% of your base monthly salary to a maximum of \$3,000

¹Employees whose annual base salary is such that 60% of their base salary exceeds \$1,000 a week, may purchase additional coverage through a buy-up STD and LTD plan option. If you are eligible for these benefits, they will be available to you on the ADP portal, along with further information regarding the benefit amount and cost.

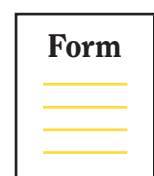
Filing a Short-Term Disability Claim



1-877-906-2289



mylibertyconnection.com



portal.adp.com

Ancillary Benefits

mylibertyconnection.com



Employee Assistance Program (EAP)

- EAP services and resources are available to you and your family members 24 hours a day, 7 days a week and are strictly confidential. Some of the services available through the EAP are listed below.
- To take advantage of the services available through the EAP, you can call **1-877-695-2789** (1-877-MYLBRTY) or visit **mylibertyconnection.com** (Password: MLASSIST).



Services	Financial
5 face-to-face sessions 24/7 telephonic assistance <ul style="list-style-type: none"> Personal/Marital/Family Alcohol/Drug abuse Stress/Anger Death and Dying Online Services	Toll free information line <ul style="list-style-type: none"> Credit Debt Request educational material Financial advice sessions <ul style="list-style-type: none"> Scheduled phone counseling session and financial worksheet review

Travel Assistance Program

Travel Assistance provides 24/7/365 access to pre-travel, personal, and emergency help with situations that may arise during travel. Services are available to you while on business or personal travel **more than 100 miles** from home and for **less than 90 consecutive travel days**. Dependents traveling with you are also covered.

Services provided include:

- Worldwide Destination Intelligence
- Travel Assistance Services
- Medical Assistance Services
- Medical Evacuation & Repatriation Services
- Security and Political Evacuation Services

For more information see the United Health-care Global Program document posted in the Plan Information/Common Forms & Plan Information section of your benefits page.

Legal	Family
Assistance from attorneys <ul style="list-style-type: none"> One free 30 minute telephonic or face-to-face session 25% employee discount on additional services Assistance with: <ul style="list-style-type: none"> Document preparation Divorce/separation Real estate Civil matters 	Access to information: <ul style="list-style-type: none"> Child care Adoption Elder care Education Telephonic assistance <ul style="list-style-type: none"> One free 30 minute telephonic session Web access: <ul style="list-style-type: none"> Available 24/7

Voluntary Benefits

Voluntary Benefit Questions?
call VOYA at 1-888-287-4162



Accident Insurance

What is Accident Insurance?

Accident insurance pays you benefits for specific injuries and events resulting from a covered accident. You can use this money however you like, for example:

- Deductibles
- Child care
- Housecleaning, groceries or utilities

Benefits for services related to a covered accident include (but are not limited to):

- Hospital care:** surgery, hospital admission
- Follow up care:** medical equipment, physical therapy
- Common injuries:** burns, fractures
- Emergency care benefits

Who is eligible for coverage?

- Full-time employees
- Your spouse under the age of 70
- Your children to the age of 26

How much does accident insurance cost?

Coverage Levels	Low Plan	High Plan
Employee	\$ 3.66	\$ 5.26
Employee +1	\$ 6.09	\$ 8.76
+ children	\$ 7.18	\$ 10.33
Family	\$ 9.62	\$ 13.84

Critical Illness Insurance

What is Critical Illness Insurance?

Critical illness insurance pays a lump-sum benefit if you are diagnosed with a covered disease or condition. You can use this money however you like, for example:

- To help pay for expenses not covered by your medical plan
- Lost wages
- Child care
- Travel
- Home health care costs
- Any of your regular household expenses

If you enroll in critical illness insurance coverage, you have access to the Wellness Benefit which provides an annual dollar amount if you complete a health screening test. The Wellness Benefit provides a cash reimbursement as shown below.

You	Spouse	Child
\$100	\$100	50% (up to \$200)

Who is eligible for coverage?

- Full-time employees
- Your spouse under the age of 70
- Your children to the age of 26

How much coverage is available?

Coverage Levels	Low Plan	High Plan
Employee	\$ 15,000	\$ 30,000
Spouse	\$ 5,000	\$ 10,000
Child	\$ 2,500	\$ 5,000

Wellness Benefits



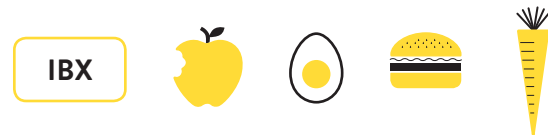
Health Advocate

Health Advocate provides a range of services designed to help you and your family navigate the healthcare system. Their team of personal advocates and nurses are available for you to use on your first day of hire at no cost to you.

Health Advocate can help you:

- Find in-network doctors
- Set up appointments
- Assist in the transferring of medical records
- Resolve claims issues and/or questions
- Understand diagnosis, medications, treatments, etc.
- Learn about your benefits
- Get second opinions
- Speak with a physician or nurse

Call **1-866-695-8622** or visit healthadvocate.com to access Health Advocate's confidential services.



Nutrition Counseling Plan

Complimentary nutrition and wellness counseling is available to you and your enrolled dependents. The nutrition counseling plan through Independence Blue Cross covers up to 6 visits per year with a participating dietician, physician, or nutrition counselor at no cost to you. To get started, visit ibx.com > **individuals>member resources>wellness and member perks** to find a network provider and schedule your nutrition counseling appointment.



Healthy Lifestyles Solutions

This program provides reimbursements and discounts for different health based services. For more go to ibx.com > **individuals>member resources>wellness and member perks**.

Approved services include:

- Weight-loss programs/gym memberships
- Smoking cessation
- Alternative health services



Baby Blueprints®

Staying healthy during your pregnancy may reduce the risk of complications, premature babies, and low birth weight. As soon as you learn that you are expecting, you may enroll in the Baby Blueprints® program at no cost. The program includes educational materials and access to obstetric nurses who provide case management for high-risk pre-natal conditions. For more information call **1-800-ASK-BLUE** or visit ibxpress.com.

What's New



Commuter Spending Account (CSA)

A CSA is a pre-tax benefit account used to pay for public transit including train, subway, light rail, bus or parking expenses.

Determining Your Election Amount

- **Transit:** Up to \$255 a month
- **Parking:** Up to \$255 a month
- No "use it or lose it" for as long as you're employed by URBN!

Did You Know?

- If you enroll in the CSA, you will use your Wage Works Commuter Card like a preloaded debit card.¹
- You decide how much money to load onto your card each month via adportal.com.
- You may be able to use your WageWorks Commuter Card to pay for uberPOOL rides!²

¹ Not all mass transit operators accept the WageWorks Commuter Card
² The WageWorks card can only be used for uberPOOL, which qualifies as mass transit.
 Not available in all states.



Legal – MetLaw

MetLaw covers you and your dependents for a monthly charge of \$14.50.

What is covered?

- Estate Planning
- Real Estate Matters
- Family Law
- Document Preparation
- Immigration Assistance
- Defense of Civil Lawsuits
- Money Matters
- Elder Law
- Traffic Offenses
- Juvenile Matters
- Consumer Protection
- Personal Property Protection

For more information visit info.legalplans.com and enter access code **Legal20**, or call MetLaw at **1-800-821-6400**.



Pet Insurance

My Pet ProtectionSM and **My Pet Protection with WellnessSM** from Nationwide help you provide your pets with the best care possible. Coverage is as follows:

- **Deductible:** \$250
- **Reimbursement:** 90%
- **Maximum:** \$7,500

Did You Know?

- This benefit applies to any vet you take your pet to.
- You can get additional benefits for emergency boarding, lost pet advertising, and more.
- Vethelpline is a free help hotline available to you 24 hours a day, 7 days a week.
- Pre-existing conditions are not covered.

What's Covered	Without Wellness	With Wellness
Accidents & Injuries	✓	✓
Illnesses	✓	✓
Hereditary Conditions	✓	✓
Surgeries & Hospitalizations	✓	✓
X-rays, MRIs and Scans	✓	✓
Medications	✓	✓
Wellness Exams		✓
Preventative Dental Cleaning		✓
Vaccinations		✓
Spay/Neuter		✓
Flea & Tick Prevention		✓
Heartworm Testing		✓
Routine Blood Tests		✓

Visit petsinsurance.com/urbanoutfitters or call **1-877-738-7874** to enroll.

Qualifying Life Event

Report a QLE
visit portal.adp.com

Qualifying Life Event (QLE)

In accordance with IRS regulations, benefit elections you make during Open Enrollment are binding through the duration of the plan year (July 1, 2017 – June 30, 2018). The only exception to this rule occurs if you experience a Qualifying Life Event.




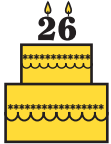



S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	Mark Your Calendar!				

- You have 30 days from the date of the event to declare your qualifying life event and make your benefit elections (60 days for QLEs associated with CHIP and Medicaid; 90 days for QLEs associated with birth or adoption).
- New elections will be retroactive to the date of the QLE. Once you have declared your QLE, you will receive audit information requesting sufficient proof items via email and a hard copy letter. The information you provide will be used to audit dependents added.

To declare your Qualifying Life Event

- Log onto your enefits page through portal.adp.com, then click on “Declare Life Event”
- Select an event from the drop-down list, enter a valid event date, make your elections, and then select “Submit”

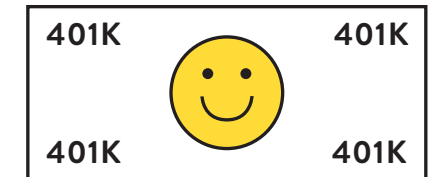
Questions about reporting your QLE? Please contact the Benefits Department at benefitsdepartment@urbn.com

Common Qualifying Life Events include:		
 Marriage	 Birth or Adoption ¹	 Divorce
 Gain or loss of other coverage	 Death of a spouse or dependent	 Receipt of a qualified medical support order
 Gain or loss of eligibility for Medicaid, a state Children’s Health Insurance Program (CHIP) or a premium assistance subsidy under either of these programs ²		

¹90-day election period
²60-day election period

401(k)

401(k) Questions?
contact Fidelity at 1-800-835-5097 or visit 401k.com



401(k) Retirement Plan

Enrolling in the Plan:

- You may enroll in the plan once you have completed 3 months of service.

Determining your election:

- You can contribute up to 25% of your salary pre-tax. If you are age 50 or above, you can make an additional catch-up contribution.
 - All savings and earnings grow tax-free until withdrawn, allowing you to take full advantage of compound growth.
- ## Consolidate Your Savings
- Rollovers into the plan are accepted immediately upon hire.
 - Call Fidelity at 1-800-835-5097 for assistance.

¹ URBN Match

You Contribute	URBN Contributes
1%	0.25%
2%	0.50%
3%	0.75%
4%	1.00%
5%	1.25%
6%	1.50%

URBN Match

- URBN matches 25% of your contributions up to 6% after you reach one year of service.¹
- Your contributions are immediately vested, but the match is subject to a vesting schedule. Each year that you remain with URBN, you gain an additional 20% ownership of match contributions, becoming 100% vested after 5 years.²

Withdraw Your Savings

- Roll your account over to a 401(k) with your new employer.
- Roll your account over to an IRA (Individual Retirement Account).
- Take a cash distribution. In this situation, a mandatory 20% tax will be withheld, and an additional 10% tax penalty may apply.

² URBN Match Vesting

Years of Service at URBN	URBN Match Vesting
1	20%
2	40%
3	60%
4	80%
5	100%

When Benefits End

Medical, Prescription, Dental, and Vision

When does my coverage end?

- Coverage ends the date your employment terminates.

What options are available to me once my coverage is terminated?

- Continuation of health insurance coverage is available under the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA). COBRA will allow you to continue your current medical, prescription, dental, and vision benefits for up to 18 months.
- Another way to obtain health coverage is through the Marketplace. More details about this option are available in the COBRA packet you will receive.

When can I expect my COBRA packet in the mail?

- You will receive your COBRA packet from ADP, our COBRA administrator, 3-4 weeks after your termination date to the address we have on file.
- Should you elect coverage under COBRA, you will need to return the completed enrollment form, along with payment, to ADP COBRA Services. ADP COBRA Services will then send you monthly coupon statements for you to maintain payments each month thereafter.
- If you fail to make a payment, your COBRA coverage will be terminated and you will not be allowed to re-enroll.

When will my COBRA coverage become effective if elected?

- Your COBRA coverage will become effective retroactively back to the day after your employment terminated so that you have no gap in insurance coverage.

Flexible Spending Account (FSA)

What happens to the money I contributed to my FSA once I am terminated?

- Your FSA balance is available to you until the September 28th following the plan year the election was made.

Life Insurance

What options are available to me for life insurance?

- Liberty Mutual will send you a packet of information within 3 weeks of your termination date with information on options available to you.

401(k)

What happens to my 401(k) when I am terminated?

- Fidelity will send a packet of information within 3 weeks of your termination date with information on options available to you.

Contact Information

Who can I contact for additional information?

- **COBRA (ADP): 1-800-526-2720**
- **401(k) (Fidelity): 1-800-835-5097**
- **Not Sure? benefitsdepartment@urbn.com or 215-454-4801**

Enrollment Check List ✓

So You Think You've Enrolled?

If you miss your enrollment deadline, or do not verify your dependents in the requested timeframe, your enrollment will not be complete.

Use this handy checklist to ensure that you've completed the **entire** enrollment process.

- Did you go to **portal.adp.com** and complete the enrollment process by reviewing your options and choosing to enroll or waive enrollment for each elective benefit option?
- Did you designate a beneficiary for your basic life insurance plan? Even if you are not electing benefits, it's **imperative** that you identify a beneficiary for your company-paid life insurance policy.
- Did you click "**Finish**" to submit your benefit elections online at portal.adp.com?
- Did you **print** or **save** a copy of your confirmation statement?
- If you have **enrolled dependents**, you will receive a letter and list of required documentation in the mail. Please follow the instructions outlined in the documents.
- If you are enrolling due to a Qualifying Life Event, did you declare your event online at **portal.adp.com**?

If you've answered yes to all questions on this checklist, you've successfully enrolled for your benefits!

Note the effective date of your benefits on your confirmation statement and get ready to access all of your health and wellness benefits on that date.

For more details about your coverage and all of the great perks that come along with your benefits, visit the **Plan Information/Common Forms & Plan Information** section of **portal.adp.com**.



Still Not Sure? Questions? Email BenefitsDepartment@urbn.com

Provider Contacts

Medical (IBC)	1-800-ASK-BLUE (275-2583)	ibx.com
RX (Express Scripts)	1-800-818-0093	express-scripts.com
Telemedicine (MDLive)	1-877-764-6605	mdlive.com/ibx
Dental (Metlife)	1-800-GET-MET8 (438-6388)	metlife.com/mybenefits
Vision (VSP)	1-800-877-7195	vsp.com
FSA (Payflex)	1-800-284-4885	payflex.com
Life (Liberty Mutual)		mylibertyconnection.com
Disability (Liberty Mutual)	1-888-906-2289	mylibertyconnection.com
EAP (Liberty Mutual)	1-877-MYLBRTY (695-2789)	bensingerdupont.com/MLA
Voluntary Benefits (Voya)	1-888-287-4162	
Pets (Nationwide)	1-877-738-7874	petsnationwide.com
MetLaw (Hyatt)	1-800-821-6400	info.legalplans.com
401(k) (Fidelity)	1-800-835-5097	401k.com

Access Your Benefits visit portal.adp.com
Questions? Email benefitsdepartment@urbn.com

About This Benefits Summary: The Urban Outfitters, Inc. plan year runs from July 1, 2017 through June 30, 2018. This benefits summary describes the highlights of our benefits in nontechnical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information in this benefits summary. If there is any discrepancy between the description of benefits in this summary and the official plan documents, the language of the official plan documents shall prevail. Please refer to the plan-specific documents for detailed plan information. Any of these benefits may be modified at the sole discretion of Urban Outfitters, Inc. Plan documents, amendments, and summaries of material modifications may be found online at portal.adp.com. This benefits summary may not be reproduced or redistributed in any form or by any means without express, prior permission in writing from Urban Outfitters, Inc.

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