

Welcome!

SIMPLE & STRAIGHTFORWARD ENROLLMENT

At **Mister Car Wash***, we are proud of the comprehensive benefit choices we offer to meet your unique needs, and to support the well-being of the people who make our company successful – **YOU!**

This is your time to make benefit choices for the coming plan year.

1



2



3



4



Read this guide for an overview of your 2024 Mister benefits program. **Enroll** by logging on to Dayforce during your benefits eligibility period.

Select the benefits that best support you, your family, and coverage level.

Questions?

Call the HR Helpline at 844-529-7392 or email us at hrhelp@mistercarwash.com

Who can I enroll? -

You



Full-time team members and team members who have been active for 6 months and average 30 hours a week.

Spouse



If you are legally married

Child(ren)



Up to the age of 26, plus disabled dependent children of any age

You'll need their social security numbers and dates of birth when you enroll,

so be sure to collect that important info before getting started. You'll also need to think about beneficiaries - who you want to receive money from life insurance and other plans you enroll in.

Once you enroll, you cannot change your selections until one of the following occurs:

Annual Open Enrollment and/or Qualifying Life Event including (but not limited to) marriage, divorce, birth/adoption, or loss of coverage.

BENEFITS OVERVIEW

SELECT PLANS



Quality health coverage is one of the most valuable benefits you enjoy as a Mister® employee. Your benefits program offers plans to help keep you and your family healthy and provides support to help you find the right care.

Let's get started! Benefits are optional, you are able to enroll in one benefit or all.

WELCOME TO MISTER BENEFITS

Introduction to how to enroll and who can enroll in the benefit programs offered by Mister. See page 2

BENEFITS OVERVIEW

What benefit programs are offered, and where to find detailed information in this guide. See page 3



1 MEDICAL PLANS

Mister offers two medical insurance plans. Both plans use the United Heathcare provider network. **See page 4**

- **PPO Plan:** a preferred provider co-payment plan that features a higher cost per paycheck and a lower deductible.
- **HDHP Plan:** a high deductible healthcare plan that features a lower cost per paycheck and higher deductible.



HEALTH SAVINGS ACCOUNT

When you enroll in the HDHP Plan, Mister will make an annual contribution (deposited quarterly) to your health savings account, even if you don't contribute. Use these funds for any other out-of-pocket medical expenses, including prescription, dental, and vision. **See page 5**



3 DENTAL

Mister offers two dental plan options: Delta Dental High and Delta Dental Low. See page 8



4 VISION

Vision coverage is administered by EyeMed. See page 9



5 LIFE + DISABILITY

Mister pays the full cost for benefits to help ensure financial security for you and your family. We also provide access to voluntary coverage to supplement your company-provided benefits. **See page 10-11**

BENEFITS SUMMARY

Review benefit programs offered and who to contact with additional questions. See page 12

2 PLANS TO CHOOSE FROM

MEDICAL



Check out what each plan looks like and what you pay when you choose a Premium Designated Provider or choose an in-network facility provider.

	PPO Plan		HDHP Plan	
Rates ¹	Slightly Higher Per Paycheck		Slightly Lower Per Paycheck	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Employee Only	\$57.50	\$77.50	\$30.00	\$50.00
Employee + Spouse	\$183.00	\$203.00	\$134.50	\$154.50
Employee + Child(ren)	\$167.00	\$187.00	\$121.50	\$141.50
Employee + Family	\$255.00	\$275.00	\$165.50	\$185.50
Deductible ²	Single	Family	Single	Family
	\$1,400	\$2,800³	\$2,000	\$4,0004
Out-of-Pocket Maximum	Single	Family	Single	Family
Out-01-1 Ocket Maximum	\$6,000	\$12,000³	\$6,000	\$12,0004
Medical Plans	Premium Designated Provider	In-Network	Premium Designated Provider	In-Network
Cost for Care	Сор	ays	After De	ductible
Office Visit (PCP / Specialist)	\$20/\$30	\$40/\$50	10%	20%
CirrusMD	\$	0	\$	0
Urgent Care	\$50 (deductible waived)		20%	
Inpatient / Outpatient Procedures	20% after	deductible	20%	
Emergency Room Care	\$300 copay (waived if admitted)		20%	
Prescription Drugs	Up to 30 d	lay supply	Up to 30 d	lay supply
Preventative	\$0 copay		\$10 c	орау
Generic	\$10 copay		20% after	deductible
Preferred Brand	\$35 copay		20% after	deductible
Non-preferred Brand	\$60 copay		20% after	deductible
Mail Order Required after 2 retail fills (up to 90 day supply)	Preferred Brand \$87 copay, Non-preferred Brand \$150 copay		Preventative all others: 20%	

(1) Employees who certify during enrollment that they do not use tobacco products will pay less for medical insurance. If you currently use tobacco, you can qualify for the discount by completing Quantum Health's tobacco cessation program, which is available free-of-charge.

(2) For individual coverage, the individual deductible is the amount the member must pay each plan year before the plan begins paying toward covered services. If covering dependents, each individual must meet their individual deductible until the family deductible has been met. The family deductible can be partially met by multiple members but the amount must equal the full family deductible value. The same rule applies to the out-of-pocket maximum.

- (3) Copay Plan: Only the amount you pay for in-network covered expenses counts toward your in-network deductible and out-of-pocket maximum. The amount you pay for out-of-network covered expenses counts toward your out-of-network deductible and out-of-pocket maximum.
- (4) HDHP Plan: Only the amount you pay for in-network covered expenses counts toward your in-network deductible. The amount you pay for out-of-network covered expenses counts toward both your in-network and out-of-network deductibles and out-of-pocket maximums.
- (5) Prescription Drugs-Maintenance medication requires you to use home delivery. This plan only covers 2 retail fills from a pharmacy. After the allowed fills, you must move to a home deliver through OptumRX or you will pay the entire cost for your medication at your retail pharmacy.

OPTIONAL

HSA ACCOUNT

The HDHP Plan gives you more control over your health care and spending decisions. If you enroll in this plan, you pay less per paycheck for your medical coverage. You can also contribute money to a health savings account and use the funds to pay out-of-pocket expenses with pretax dollars.





Mister helps you fund your HSA

Mister will make an annual contribution (deposited quarterly) to your health savings account when you enroll in the HDHP Plan, even if you don't contribute. Use these funds for any out-of-pocket medical expenses, including prescription, dental, and vision.

Employee + Spouse or Employee + Child(ren)

\$600

Employee + Family

\$800

HSA Is All About You

The HSA offers many great advantages to help you budget for and save on your health care costs:

\$400

- You receive an HSA debit card to access your funds when you need to pay for health care expenses.
- You own it. The money remains in the account for you to spend on eligible expenses no matter where you work or how long it stays in the account, even after you retire.
- You choose how to use it. You choose how much to contribute and you can change the amount throughout the year to fit your needs. Spend as you go, allowing what's left to roll forward.
- You save three ways. Your money goes in tax-free, builds earnings tax-free, and comes out tax-free when used on eligible expenses.

IRS HSA Maximum Contributions

- Employee Only: \$4,150 (employee + company); \$5,150 age 55+
- All Other Tiers: \$8,300 (Employee + company); \$9,300 age 55+

CHOOSE YOUR PLAN!



Scan the QR code to see a step-by-step guide of the enrollment process.





MANAGING YOUR HEALTHCARE

QUANTUM HEALTH



Health care doesn't have to be confusing. To make things easier, Mister has partnered with **Quantum Health** to personalize and simplify your health care experience, get the most out of your benefits, and save you money.

Quantum Health Care Coordinators are an expert team of nurses, patient services representatives, and benefit specialists who are ready to help you through every single step of your health care journey. Think of Care Coordinators as your personal health care team—they fight hard to help you save money and make sure you get the best possible care for you and your family.

How Quantum can help:



Insurance ID cards



Nurse Support



Questions about claims, billing, and benefits



Reduce out-of-pocket costs



Finding in-network providers

Call for support at 1-888-971-7277

Click here to visit
mymisterhealth.com

EXPLORE HEALTHCARE TOOLS

SPECIALIZED PROGRAMS



Providing flexible, comprehensive benefit choices to meet your unique needs is just one of the many ways Mister supports the health and financial well-being of our employees. Below is an overview of just a few of the health programs that give you 100% free access when you are enrolled in Mister's medical plan. Quantum will connect you to suggestions or links to programs based on your personal health care needs.

Here are some of the other resources Mister provides to help you get the best care possible:



CirrusMD

Connect to a doctor in seconds from any computer or mobile device for 24/7 care. You can easily connect with a board-certified physician to refill a prescription, ask general, urgent, and behavioral health questions for yourself and your dependents. They also provide help managing chronic conditions, like diabetes, high blood pressure, or with long-term health goals like weight management.



Hinge Health

Hinge Health helps you conquer chronic back, neck, shoulder, knee and joint pain without drugs or surgery. They also provide tools to help you prevent and recover from injuries or prepare for surgery. They do this through a convenient and engaging digital platform that includes a free tablet, wearable sensors, a personal coach and team support.



Headspace Care

Headspace Care offers on-demand, confidential mental healthcare through coaching via text-based chats, and self-guided activities free of charge. They also offer private therapy and psychiatry video sessions available as an office visit through your health plan. Both services are available day or night 365 days a year.



Prescription Drug Coverage

All medical plans include OptumRx prescription drug coverage and a specialty drug program through BriovaRx, including low-cost medications, 24/7 access to pharmacists, home delivery program, and more.



Quantum Early Steps Maternity

Help keep yourself and your baby healthy during your pregnancy and after your delivery. Sign up by the end of your first trimester to receive a \$150 paycheck credit upon completion.



Quantum Health Tobacco Cessation

Quantum Health will help you create a personal quit plan with five intensive coaching calls and a six month follow-up call. You will also have access to free over-the-counter nicotine replacement therapy (patch, lozenges, or gum).

OPTIONAL

DENTAL PLAN



Mister offers two dental plan options: Delta Dental High and Delta Dental Low. With both plans, you can choose any dentist for any service, but you will save the most when you use a dentist belonging to the Delta Dental network. After you enroll, Delta Dental will mail dental ID cards to your home address.

Rates	Delta Dental High	Delta Dental Low
Employee Only	\$12.64	\$7.71
Employee + Spouse	\$29.73	\$15.88
Employee + Child(ren)	\$30.49	\$15.59
Employee + Family	\$47.60	\$25.88

In-and-out-of-Network

Annual Deductible	\$50 individual \$150 family	\$50 individual \$150 family
Calendar Year Max	\$2000	\$1000
Preventative/Diagnostic Care	Plan pays 100%	10% after deductible
Basic Services	20% after deductible	40% after deductible
Major Services	50% after deductible	65% after deductible
Orthodontia (dependents age 8 up to age 26)	50% with a \$500 lifetime max	50% with a \$500 lifetime max

CHOOSE YOUR PLAN!



Scan the QR code to see a step-by-step guide of the enrollment process.





OPTIONAL

VISION PLAN



The vision plan, administered by EyeMed, offers a simple way to save on vision care expenses including exams, lenses, frames, contact lenses, and vision corrective procedures. Both you and your eligible dependents can receive coverage.

Rates	Employee Cost Per Paycheck		
Employee Only	\$4.04		
Employee + Spouse	\$7.62		
Employee + Child(ren)	\$8.	02	
Employee + Family	\$11.76		
	In-Network	Out-of-Network Reimbursement	
Exams (Once every 12 months)	\$0 copay	Up to \$35	
Standard Plastic Lenses (Once every 12 months)	\$0 copay	Single: Up to \$25 Bifocal: Up to \$25 Trifocal: Up to \$55	
Frames (Once every 24 months)	\$140 allowance + 20% off balance	Up to \$45	
Contact Lenses (Once every 12 months)	\$115 allowance + 15% off balance	Up to \$92	
Medically Necessary	Plans pay 100%	Up to \$200	

CHOOSE YOUR PLAN!



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REGARDLESS OF MEDICAL PLAN

LIFE + DISABILITY



Mister pays the full cost for benefits to help ensure financial security for you and your family and to assist you with work-life issues. We also provide access to voluntary coverage to supplement your company-provided benefits.



Short-Term Disability

The loss of income due to illness or disability can cause serious financial hardship for your family. Mister provides Short-Term Disability (STD) insurance to all benefit-eligible employees automatically.

At no cost to you, STD insurance helps replace a portion of your income so you can continue paying your bills and meeting your financial obligations during difficult times. Benefits will be reduced by other income, including state-mandated STD plans.

Benefits	Elimination Period	Benefit Duration
60% of based weekly pay up to \$1,000	14 days	Up to 11 weeks



Basic Life and AD&D Benefits

Mister provides you Basic Life and Accidental Death and Dismemberment (AD&D) insurance so you can protect those you love from unexpected circumstances. There is no cost to you for this coverage. Your benefit amount will be one times your annual earnings up to a maximum of \$100,000 for employee life insurance as well as employee AD&D.

VOLUNTARY

LIFE + DISABILITY

If you want additional protection, you can purchase Voluntary Life and/ or AD&D insurance for yourself, your spouse, and your dependent children through Lincoln. You must purchase voluntary coverage for yourself in order to purchase coverage for your spouse or dependents.



Employee Voluntary Life

25,000 increments up to \$150,000 Guarantee issue: \$150,000

Employee Voluntary AD&D

10,000 increments up to 10 times your annual compensation or \$500,000, whichever is less

Dependent Children

Birth to 6 months: \$500, 6 months to 26 years: 10% of the employee's election up to \$10,000 Guarantee issue: All amounts

Spouse Life

Dependent Spouse \$5,000 increments up to \$75,000 and cannot be greater than 50% of the employee benefit

Guarantee issue: \$25,000

Family AD&D

Spouse Coverage with Children 40%, Spouse Coverage without Children 50% of the Employees Voluntary AD&D amount, to a maximum of \$250,000



You may need to complete an Evidence of Insurability (EOI) medical questionnaire for supplemental life insurance amounts. If so, one will be provided to you. Voluntary Life rates depend on age and level of coverage. Rates will appear when enrolling via Dayforce.

While every effort has been made to ensure accuracy of this benefits summary, the plan documents and contracts will prevail in case of discrepancy between this guide and the plan documents and contracts. In addition, Mister reserves the right to modify or terminate any benefit plans at any time.

CHOOSE YOUR PLAN!



Scan the QR code to see a step-by-step guide of the enrollment process.





OVERVIEW OF COSTS

SUMMARY

Below is a summary of all the costs in one place to help you decide what's best for you!



Medical

Rates ¹	Slightly Higher Per Paycheck		Slightly Lower Per Paycheck	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Employee Only	\$57.50	\$77.50	\$30.00	\$50.00
Employee + Spouse	\$183.00	\$203.00	\$134.50	\$154.50
Employee + Child(ren)	\$167.00	\$187.00	\$121.50	\$141.50
Employee + Family	\$255.00	\$275.00	\$165.50	\$185.50

Dental

Rates	Delta Dental High	Delta Dental Low
Employee Only	\$12.64	\$7.71
Employee + Spouse	\$29.73	\$15.88
Employee + Child(ren)	\$30.49	\$15.59
Employee + Family	\$47.60	\$25.88

Vision

Rates	Employee Cost Per Paycheck
Employee Only	\$4.04
Employee + Spouse	\$7.62
Employee + Child(ren)	\$8.02
Employee + Family	\$11.76

QUESTIONS?

General Team Member
Mister's HR Services
844-529-7392
HRhelp@mistercarwash.com

Health Benefits

Quantum Care Coordinators

888-971-7277 mymisterhealth.com Leave of Absence/
Short-term Disability/EAP
Lincoln

877-321-1034

my lincoln portal.com

401(k)

MercerWise Retirement

1-833-637-2379 mercerwise.com Need more information?

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