Benefits at Cox

CARE AND WELL-BEING AS UNIQUE AS YOUR HEALTH

TABITHA LICHTENBERG (COX ENTERPRISES) BENEFITS AT COX



2021 Health and Wellness Benefits Overview

Our values say it all. We exist today because those who came before us were dedicated to the same mission we serve now—to empower people today to build a better future for the next generation. That commitment shaped our response as we navigated tremendous change in the past year. Our first priority is always our people.

Read on for more information about your comprehensive package of health and wellness offerings. Trust that we continue to explore how to adjust and expand these benefits in real-time to serve you and your loved ones. You can always learn more at **InSideCox.com**.

Work with ALEX! Choosing your medical plan and other benefits can be overwhelming. To help you make the most informed decisions, we offer an intuitive benefits decision-making tool, ALEX (not our CEO). Think of ALEX as your personal benefits counselor. Not only will it help you choose a health plan with confidence, ALEX will help you choose the life insurance and long-term disability coverage you need in order to protect yourself and your loved ones. You can also work with ALEX to evaluate how much to set aside in Flexible Spending and Health Savings accounts. Visit **InSideCox.com** to access ALEX and start learning.

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2021 Benefits at a Glance

			LOW	MEDIUM	HIGH (HDHP)*
		Employee (EE) EE+Spouse/	\$500	\$1,000	\$2,000
	Total Annual	Domestic Partner (DP)	\$1,000	\$2,000	\$3,000
	Deductible	EE+Child	\$1,000	\$2,000	\$3,000
		EE+Children	\$1,500	\$3,000	\$4,000
		Family	\$1,500	\$3,000	\$4,000
		EE	\$3,000	\$3,500	\$4,000
	Out-of-Pocket	EE+Spouse/DP	\$6,000	\$7,000	\$6,000
	Maximum In-Network	EE+Child	\$6,000	\$7,000	\$6,000
		EE+Children	\$9,000	\$10,500	\$8,000
MEDICAL		Family	\$9,000	\$10,500	\$8,000
		EE	\$5,500	\$6,000	\$8,000
	Out-of-Pocket	EE+Spouse/DP	\$11,000	\$12,000	\$12,000
	Out-of-Pocket Maximum Out-of-Network	EE+Child	\$11,000	\$12,000	\$12,000
		EE+Children	\$16,500	\$18,000	\$16,000
		Family	\$16,500	\$18,000	\$16,000
		Family	\$16,500 LOW OR MEDIUM	\$18,000	\$16,000 HIGH (HDHP)*
	Office Visits	Family Primary Care			
	Office Visits & Emergency Room (In- Network)		LOW OR MEDIUM	tible	HIGH (HDHP)* 20% coinsurance,
	& Emergency Room (In-	Primary Care	LOW OR MEDIUM	tible	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance,
	& Emergency Room (In-	Primary Care Specialist	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible	tible	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible
	& Emergency Room (In- Network)	Primary Care Specialist	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible	tible tible % coinsurance	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible
	& Emergency Room (In- Network)	Primary Care Specialist	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible Visit with a doctor via	tible tible % coinsurance	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible
	& Emergency Room (In- Network)	Primary Care Specialist	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible Visit with a doctor via LOW OR MEDIUM RETAIL	ttible ttible % coinsurance phone or video for the same cost MAIL ORDER OR CVS RETAIL	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible start deductible HIGH (HDHP)* RETAIL OR
	& Emergency Room (In- Network) Teladoc	Primary Care Specialist	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible Visit with a doctor via LOW OR MEDIUM RETAIL (up to 30-day supply)	ttible ttible % coinsurance phone or video for the same cost MAIL ORDER OR CVS RETAIL (up to 90-day supply)	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible start deductible HIGH (HDHP)* RETAIL OR MAIL ORDER 10% coinsurance, after deduction
PRESCRIPTION DRUGS	& Emergency Room (In- Network) Teladoc Generic	Primary Care Specialist ER	LOW OR MEDIUM \$30 copay, no deduct \$50 copay, no deduct \$150 copay, then 209 after deductible Visit with a doctor via LOW OR MEDIUM RETAIL (up to 30-day supply) \$10 copay 20% coinsurance,	ttible ttible % coinsurance phone or video for the same cost MAIL ORDER OR CVS RETAIL (up to 90-day supply) \$25 copay	HIGH (HDHP)* 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible 20% coinsurance, after deductible as in-network visits HIGH (HDHP)* RETAIL OR MAIL ORDER 10% coinsurance, after deductible 20% coinsurance, after deductible

Fle	Healthcare Flexible Spending Account (FSA)	Contribute up to (cannot be electe offers an HSA)
	alth Savings count (HSA)	 Contribute up to Cox makes a on of coverage you Must be enrolled
Cai Spe	pendent re Flexible ending count (FSA)	Contribute up to
	nedule asic)	You pay for servio
	mprehensive	You meet the dec
VISION		Coverage for ann
OTHER	e Insurance	Basic and Supple
	ng-Term ability (LTD)	Choose from two
ADDITIONAL BENEFITS		Accident InsuraCritical Illness
WELLNESS OFFERINGS		• Care@Work • Headspace • Milk Stork

*True family deductibles and out-of-pocket maximums apply. See medical plan details for more information.



4 | AT A GLANCE

o \$2,750 on a pre-tax basis to pay for eligible healthcare expenses ted if enrolled in the High-Deductible Health Plan (HDHP), which

to \$7,200 on a pre-tax basis to pay for eligible healthcare expenses ne-time annual contribution to your account based on the level ou select ed in the HDHP

\$5,000 on a pre-tax basis to pay for eligible dependent care expenses

vices based on a fixed-fee schedule

eductible, then the plan pays for 50%-80% of covered services

inual eye exams, contacts and glasses

lemental Life Insurance for you and your dependents

vo income replacement options: 60% or 66.67%

rance

 Hospital Indemnity • Home & Auto

• Identity Theft Protection

- Pet Insurance
- Know Your Numbers Openfit
 - Wondr Health
- Livongo
- Resources for Living

Medical Plans

Choose from three plans to meet the needs of you and your family. Regardless of the plan you choose, preventive care is covered at 100% for all Cox Medical Plan members (employees and their spouses, domestic partners and dependent children) when using an in-network provider. Now more than ever, it's critical that you are proactive about your health.

		EMPLOYEE	EMPLOYEE + SPOUSE/DP	EMPLOYEE + CHILD	EMPLOYEE + CHILDREN	FAMILY
Low	BIWEEKLY PREMIUM	\$43.96	\$137.52	\$90.94	\$90.94	\$186.11
Deductible Meet your	DEDUCTIBLE*	\$500	\$1,000	\$1,000	\$1,500	\$1,500
deductible faster; requires higher biweekly premiums	OUT-OF-POCKET MAX**	\$3,000	\$6,000	\$6,000	\$9,000	\$9,000

*The individual deductible is \$500 per person up to three people or \$1,500.

** You only need to meet your \$3,000 individual out-of-pocket maximum before the plan pays your covered expenses at 100% (even if your family maximum hasn't been met). You pay a total family maximum (for up to three family members or \$9,000).

		EMPLOYEE	EMPLOYEE + SPOUSE/DP	EMPLOYEE + CHILD	EMPLOYEE + CHILDREN	FAMILY
Medium	BIWEEKLY PREMIUM	\$15.16	\$77.19	\$33.65	\$33.65	\$109.74
Deductible Offers a midrange	DEDUCTIBLE*	\$1,000	\$2,000	\$2,000	\$3,000	\$3,000
deductible and premium cost	OUT-OF-POCKET MAX**	\$3,500	\$7,000	\$7,000	\$10,500	\$10,500

*The individual deductible is \$1,000 per person up to three people or \$3,000.

** You only need to meet your individual \$3,500 out-of-pocket maximum before the plan pays your covered expenses at 100% (even if your family maximum hasn't been met). You pay a total family maximum (for up to three family members or \$10,500).

		EMPLOYEE	EMPLOYEE + SPOUSE/DP	EMPLOYEE + CHILD	EMPLOYEE + CHILDREN	FAMILY
High	BIWEEKLY PREMIUM	\$6.52	\$39.94	\$14.20	\$14.20	\$57.89
Deductible You pay full price for	DEDUCTIBLE*	\$2,000	\$3,000	\$3,000	\$4,000	\$4,000
non-preventive care and prescriptions until you meet your	OUT-OF-POCKET MAX**	\$4,000	\$6,000	\$6,000	\$8,000	\$8,000
deductible. Pair with a Health Savings Account (HSA) for maximum savings.	COX CONTRIBUTION TO HSA	\$500	\$750	\$750	\$750	\$1,000

*Keep in mind that the HDHP has true family deductibles, meaning that you must meet the deductible listed for your level of coverage before the plan pays coinsurance for anyone in your family. For example, if you cover both you and your spouse, you must meet the \$3,000 deductible before the plan starts paying coinsurance for either you or your spouse.

** You'll want to note that the HDHP has true family out-of-pocket maximums. You must meet the maximum costs listed for your level of coverage before the plan pays 100% of covered network services for anyone in your family. For example, if you cover both you and your spouse, you must meet the \$6,000 maximum before the plan pays 100% of covered network services for either you or your spouse.

Medical Coverage and Costs

Remember using a network provider for these services will always save you money. Find a provider within the Choice POS II network, at **Aetna.com**.

	LOW OR MEDIUM		нібн	
	YOUR COST (IN-NETWORK)	YOUR COST (OUT-OF- NETWORK)**	YOUR COST (IN-NETWORK)	YOUR COST (OUT-OF- NETWORK)**
PRIMARY CARE VISIT	\$30 copay, no deductible*	40% coinsurance, after deductible	20% coinsurance, after deductible*	40% coinsurance, after deductible
SPECIALIST VISIT	\$50 copay, no deductible*	40% coinsurance, after deductible	20% coinsurance, after deductible*	40% coinsurance, after deductible
PREVENTIVE CARE	No charge	40% coinsurance, after deductible	No charge	40% coinsurance, after deductible
URGENT CARE	\$50 copay, no deductible	40% coinsurance, after deductible	20% coinsurance, after deductible	40% coinsurance, after deductible
EMERGENCY ROOM	\$150 copay, plus 20% coinsurance after deductible	\$150 copay, plus 20% coinsurance after deductible	20% coinsurance, after deductible	40% coinsurance, after deductible
OTHER SERVICES (E.G., DIAGNOSTIC TESTS, IMAGING, HOSPITALIZATION, ETC.)	20% coinsurance, after deductible	40% coinsurance, after deductible	20% coinsurance, after deductible	40% coinsurance, after deductible

*Cost is the same if you use a Teladoc physician.

** Reasonable and Customary (R&C) charges for out-of-network services are based on the 80th percentile of what providers in a given location charge for a service.



PREVENTIVE CARE

We know that it can be hard to stop and focus on your own health. It doesn't always seem important when you're feeling well, or even when you're just overwhelmed by life. But maintaining your health with regular preventive care is important — now more than ever. That's why the Cox Medical Plans, regardless of which one you choose, cover preventive care at 100%. You won't pay anything for your annual exams, flu shots or other preventive care recommended by your physician when using an in-network provider. Please use these benefits to live a long and healthy life. We like having you around.

Pharmacy Benefits

With all three medical plans, you have access to a prescription drug plan that offers convenient mail order (90-day supply) and retail pharmacy (30-day supply) options. CVS Caremark® administers the pharmacy plan and provides convenient access to a network of 60,000+ pharmacies nationwide (including Walgreens, Walmart, Publix, Kroger, etc.). Visit Caremark.com for the full list of participating locations.

Remember that your out-of-pocket prescription expenses count toward your deductible. Plus, if you are enrolled in a Healthcare Flexible Spending Account (FSA) or Health Savings Account (HSA), you can use those pre-tax dollars toward these gualifying expenses.

				нібн
		RETAIL (UP TO 30-DAY SUPPLY)	MAIL ORDER OR CVS RETAIL (UP TO 90-DAY SUPPLY)	RETAIL OR MAIL ORDER
	GENERIC	\$10 copay	\$25 copay	10% coinsurance, after deductible
	PREFERRED BRAND	20% coinsurance, after deductible	\$90 copay	20% coinsurance, after deductible
PRESCRIPTION DRUGS	NON-PREFERRED BRAND	30% coinsurance, after deductible	\$125 copay	30% coinsurance, after deductible
	SPECIALTY	20% coinsurance, after deductible (up to \$250 per Rx)	20% coinsurance, after deductible (up to \$250 per Rx)	30% coinsurance, after deductible

Health Savings Account (HSA) - Your Tax-Saving Companion to the HDHP

The HDHP is the only plan to also offer an HSA so you can put aside pre-tax dollars for qualifying medical expenses. Cox will even contribute to your account when you enroll in the HSA*. Those funds can be used to pay for out-of-pocket medical expenses or saved and/or invested for retirement. The money is yours to keep, and the account is portable. You can adjust your contributions anytime during the year. Want to know more about how the HDHP works? See it in action at InSideCox.com.

	YOUR MAXIMUM CONTRIBUTION	COX ANNUAL CONTRIBUTION	MAXIMUM ALLOWED CONTRIBUTION**
EMPLOYEE ONLY	\$3,100	\$500	\$3,600
EMPLOYEE + SPOUSE	\$6,450	\$750	\$7,200
EMPLOYEE + CHILD(REN)	\$6,450	\$750	\$7,200
FAMILY	\$6,200	\$1,000	\$7,200

*HSA funds cannot be used for Domestic Partner expenses.

**The Cox contribution is prorated based on when you enroll in the HSA.

Flexible Spending Account (FSA) and Health Savings Account (HSA)

Lower your tax liability by setting aside pre-tax dollars in an FSA; or, if you're enrolling in the High-Deductible Health Plan (HDHP), pair it with an HSA to pay for qualifying expenses for you and your eligible dependents. Learn more and find tools for maximizing your spending account at ConnectYourCare.com/Cox.

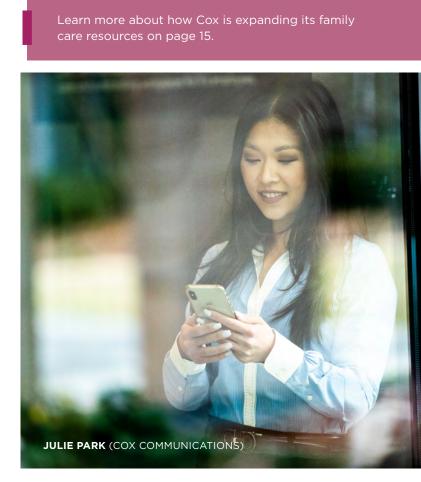
HEALTHCARE FSA Contribute up to \$2,750 annually to pay for eligible healthcare expenses, including big-ticket items like braces or more routine copays. For 2021 only, you can roll over all unused funds into your 2022 Healthcare FSA account. Keep in mind, you don't have to be enrolled in the Cox Medical Plan to participate; however, you are not able to enroll in a Healthcare FSA if you are enrolled in the HDHP. That's what your HSA is for.

DEPENDENT CARE FSA Contribute up to \$5,000 annually to pay for before or afterschool care, day care or other qualified expenses for children under age 13. You can even use it for costs associated with caring for an elderly parent. For 2021 only, you can roll over all unused funds into your 2022 Dependent Care FSA.

HSA An HSA can only be chosen when also selecting the HDHP. Set aside up to \$7,200, including your contribution and the Cox contribution, to pay for qualifying medical expenses. Remember, Cox contributes to your HSA to get you started, but you must open an account to get that money. Don't leave it behind.

Your FSA/HSA Debit Card

CONNECTYOURCARE (CYC): You can access your Healthcare FSA or HSA funds through a convenient debit/payment card attached to your account. Just swipe the card to pay for qualifying expenses at your doctor's office or pharmacy counter. Be sure to save your receipts for your tax records in case the IRS or CYC requests additional documentation.





Dental Plan Options

Your dental health is just as important as your overall physical health. Cox offers two Aetna PPO/PDN dental network options. The **SCHEDULE (BASIC) PLAN** pays the cost of eligible expenses based on the set fee schedule found in the Healthcare Summary Plan Description (SPD). If your dentist charges more than the plan schedule allows, you pay the difference. The plan is designed to cover your basic dental needs. The **COMPREHENSIVE PLAN** pays a percentage of most recognized charges after you meet your deductible.

PLAN FEATURE	SCHEDULE (BASIC)	COMPREHENSIVE
Annual deductible (same for both plans)	\$50 per person \$150 per family	\$50 per person \$150 per family
PLAN MAXIMUM	THE PLAN PAYS	THE PLAN PAYS
Annual maximum benefit	\$1,000 per person	\$1,500 per person
Orthodontia lifetime maximum	\$1,500 per person	\$1,500 per person
COVERED SERVICES	THE PLAN PAYS	THE PLAN PAYS
Preventive and diagnostic care	Fixed fee, no deductible	100% of R&C*, no deductible
General and restorative care	Fixed fee, after deductible	80% of R&C*, after deductible
Prosthodontic care	Fixed fee, after deductible	60% of R&C*, after deductible
Orthodontic services	50% of R&C*, no deductible	50% of R&C*, no deductible

Please note: In most cases, oral surgery (e.g., removal of impacted wisdom teeth) is considered a form of medical surgery and is covered under the Cox Medical Plan, not the dental plan.

*Based on R&C (Reasonable & Customary) charges.

Dental Biweekly Premiums

	SCHEDULE (BASIC)	COMPREHENSIVE
EMPLOYEE	\$0.50	\$15.50
EMPLOYEE + SPOUSE/DP	\$1.00	\$21.00
EMPLOYEE + CHILD(REN)	\$1.00	\$21.00
FAMILY	\$2.00	\$25.75

Vision Plan

In addition to helping you see better at work and play, routine eye exams can detect serious health conditions, such as glaucoma, cataracts, diabetes and even cancer. Eye exams are especially important for kids, as they can detect problems that affect learning and development. Cox offers vision coverage through the Vision Service Plan (VSP) Choice Network.

EVERY CALEN	EVERY CALENDAR YEAR		SWC
EYE EXAM	\$10 copay at doctor's office	EMPLOYEE	\$3.75
GLASSES	s \$20 copay for lenses and frames; up to \$150 allowance for frames	EMPLOYEE + SPOUSE/DP	\$5.00
	Up to \$150 allowance for contact	EMPLOYEE + CHILD(REN)	\$6.00
CONTACTS	lens exams and contacts	FAMILY	\$9.25



MICHELLE DUCAYET (COX ENTERPRISES) AND WALKING BUDDY SONARAK IENG (COX COMMUNICATIONS)

Employee and Dependent Life Insurance

COMPREHENSIVE COVERAGE FOR YOU AND YOUR LOVED ONES.

To give peace of mind when it's needed the most, we offer basic and supplemental life insurance options for you and your loved ones through MetLife. Visit InSideCox.com for even more information.

	BASIC LIFE	SUPPLEMENTAL LIFE	
EMPLOYEE	 1X base pay \$2 million limit Paid in full by Cox 	 Up to 7X base pay (for total coverage of up to 8X base pay including Basic Life) \$3 million limit (for total coverage of up to \$5 million including Basic Life) Statement of Health (SOH) is required in some cases* 	
SPOUSE/DP**	 Available in increments ranging from \$10,000-\$200,000 Cannot be higher than your employee life insurance amount 		
CHILDREN**	Available in increments of \$10,000, \$15,000 or \$20,000		



*A Statement of Health (SOH) is required for Supplemental Life Insurance for 5X base pay and higher, when coverage exceeds \$1 million, or when coverage is increased by more than one level. To elect Supplemental Life Insurance coverage, you must enroll in Basic Life Insurance coverage.

** Does not require SOH. To cover a spouse, domestic partner or children, you must first elect basic life insurance for yourself. Domestic partner coverage is offered on a post-tax basis.

Accidental Death & Dismemberment Coverage

When you elect employee and/or dependent life insurance, an equal amount of accidental death and dismemberment coverage is automatically included. This coverage provides additional benefits for accidental injuries, such as the loss of a limb or eyesight or death due to an accident.

Need help deciding the option that's best for you?

ALEX can help! Use the interactive decision-making tool on InSideCox.com to learn more and make an informed decision.

Long-Term Disability (LTD) Insurance

We offer two options for LTD insurance through MetLife to replace a percentage of your income if you become disabled, can no longer work and are approved for LTD. Your LTD will include access to medical and life insurance coverage for the first 29 months you are on LTD. Your premiums are post tax.

	60% OF BASE PAY	66.67% OF BASE PAY
COX PAYS	60% regardless of base pay	60% regardless of base pay; if elected, employee pays only the difference
MONTHLY MAX PAYOUT	\$10,000	\$17,500

Supplemental Insurance to Help You with **Out-of-Pocket Expenses**

An accidental injury, serious illness or a hospital stay can be upsetting and financially destabilizing if you aren't prepared. You can fill in some of the gaps and minimize your stress with these plans that act as companions to your medical coverage to give you added stability and a wider safety net.

HOW THESE PLANS DIFFER FROM YOUR PRIMARY MEDICAL PLAN

Medical plans pay doctors and hospitals directly for costs related to your care. But they don't cover 100% of the cost, leaving you to cover the remainder. They also don't cover other expenses that may spike during a health event where you or a family member is out of work, such as day care, rent and more.

- Choose from basic or enhanced coverage.
- Choose from basic or enhanced coverage.
- arm to a hospital admission. Choose from basic or enhanced coverage.

These benefits are paid directly to you and can be used however you choose: out-of-pocket medical costs, routine bills or unexpected personal expenses. Enrollment is guaranteed, and benefits are not reduced by medical or disability insurance benefits, or other sources of income.

Learn more in the Summary Plan Description (SPD) or on InSideCox.com.

• HOSPITAL INSURANCE provides a preset benefit payment for select expenses related to a hospital stay.

 CRITICAL ILLNESS INSURANCE provides a lump-sum benefit if you are diagnosed with a covered illness like cancer, Alzheimer's disease or lupus. Keep in mind that coverage for pre-existing conditions is excluded.

• ACCIDENT INSURANCE provides a preset benefit payment if an accident occurs - anything from a broken

More Benefits to Protect What Matters Most for You

We know you want to protect all the things you love, from your human and pet family members to your home, car and identity. We've got you covered. Learn more and enroll anytime at CoxAddedBenefits.com.

PET INSURANCE: COVERAGE FOR ALL THE MEMBERS OF YOUR FAMILY (

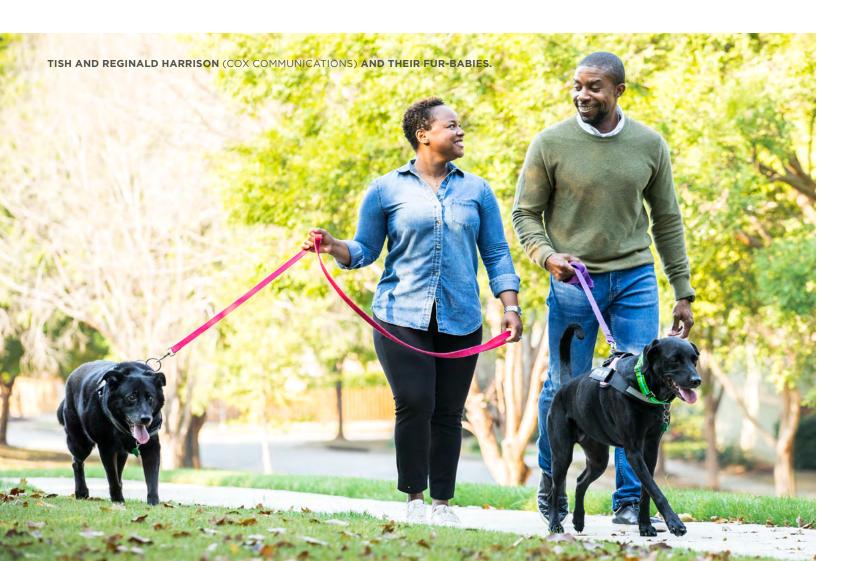
Our pets are family, too! But it can be expensive if they become sick or have an accident. As a Cox employee, you can access two different plan options from Nationwide to secure coverage for dogs, cats, birds and some exotic animals. Benefits include the freedom to use your own vet, the 24/7 vethelpline® and discounts for select medical expenses with any licensed veterinarian worldwide.

HOME AND AUTO INSURANCE DISCOUNTS: COMPARE COVERAGE AND GET ACCESS TO GROUP RATES

Compare group rates from your choice of top-rated insurers, including MetLife Auto & Home®, Travelers, Liberty Mutual Insurance, Safeco Insurance[®], Electric Insurance Company[®] and Progressive[®]. You could receive discounts on a variety of policies – including auto, home, boat, renters and more. You can even pay your premiums through convenient payroll deduction.

IDENTITY THEFT PROTECTION: GET ADDED PEACE OF MIND WITH MULTI-LAYER PROTECTION AND MONITORING

Provided through Allstate, this comprehensive protection helps you guard against identity and credit theft. Get alerts for credit inquiries, accounts opened in your name, compromised credentials, financial transactions and more. Enrolling your family extends that protection to anyone in your household.





Mental Health and Wellness

Managing your mental health and wellness is as important as minding your physical health, especially in challenging times. That's why we're committed to offering a wide range of benefits to help. Think of them as treatment tools in your Mental Health First-Aid Kit-from virtual therapy to resources that reduce the stress of balancing work with caring for your family. Let's explore what is in your Mental Health First-Aid Kit.

- at 888-265-1782 or at ResourcesForLiving.com (Username: Cox, Password: RFL).
- person or through telemedicine. Call Aetna at 888-553-3449 for more information.
- Visit Teladoc.com/Aetna or call 888-553-3449.
- MentalHealth for more information.
- InSideCox.com/MentalHealth.

One of these tools may be enough to help, or you may pair it with another treatment in your Mental Health First-Aid Kit. Maybe the 1-2 combo of Openfit + Headspace is what you need. Or you may need to talk to a therapist and consider a prescription medicine to treat your mental health. You've got options. Help is available.

• Resources for Living: Talk to a counselor 24/7 through the Resources for Living EAP offering. You and members of your household can work with a mental health professional for free – 8 sessions per topic, per year via phone, text, chat, video or face-to-face. After that you can continue treatment through your insurance. They are a great resource to talk about relationships, stress and anxiety. If your stress is associated with finances, you can even consult a financial coach to help. You can reach Resources for Living

• Cox Medical Plan: Your Cox Medical plan offers in-depth treatment including rehab, pharmaceutical options, medicine management or talking with a psychiatrist, psychologist or professional counselor in

• **Teladoc:** Cox Medical Plan members can talk to a mental health professional via web, phone or mobile app.

• Headspace for meditation and sleep: If your mind is going a mile a minute and you aren't sleeping well, there's no way you're living your best life. All Cox employees have a free membership to Headspace. Use it to practice breathing, slowing down and calming the frenzy in your brain. Visit **InSideCox.com**/

• Openfit for fitness and nutrition: Exercising releases endorphins, which can provide a natural mood boost and even reduce stress. All Cox employees have a free membership to Openfit. Learn more at

• Care@Work: Balancing work and family is challenging in the smoothest of times. Adding in virtual learning, working from home and quarantining is downright overwhelming. Help is available through Care@Work, offering a free premium membership to Care.com and up to 10 days of subsidized backup care to ensure the children and seniors under your care are taken care of. Read more at Family Care on InSideCox.com.

Growing Your Family Through Adoption **GET REIMBURSED FOR ELIGIBLE ADOPTION EXPENSES**

Building your family can happen any number of ways, including through domestic or international adoption. But we know adoption can be an expensive endeavor. That's why we offer Adoption Assistance - reimbursing your expenses up to \$5,000 per adoption, payable once you've successfully finished the adoption process. Looking to expand your family by more than one in the same year? We'll pay up to \$10,000 per year to offset eligible fees.

Wellness Offerings for Cox Medical Plan Members

REGISTER AT ANYTIME THROUGHOUT THE YEAR BY CONTACTING THESE PROVIDERS DIRECTLY.

MANAGE YOUR DIABETES WITH LIVONGO. This program makes living with diabetes easier by providing a 0000 connected meter, unlimited test strips and personalized coaching. It is offered at no cost to Cox Medical Plan members and their covered dependents. Visit Join.Livongo.com/Cox or call Livongo Member Support at 800-945-4355 and mention registration code Cox.

they LOSE WEIGHT BY FOCUSING ON HOW AND WHY YOU EAT WITH NATURALLY SLIM WONDR HEALTH. This free 10-week program helps you change how you eat instead of what you eat. You must apply to be accepted as there are a limited number of spots available for Cox Medical Plan members. To learn more, apply or join the wait list for the next class, visit NaturallySlim.com/Cox.

TALK TO A REGISTERED NURSE USING THE INFORMED HEALTH LINE. Have a guick guestion? Unsure if you should see a doctor? Talk to a nurse for free by calling 888-553-3449.

RECEIVE PERSONALIZED SUPPORT AND ANSWERS FOR MORE COMPLEX MEDICAL CONCERNS. For serious health concerns, work with specially trained nurses and medical professionals who can offer personal support and expert answers. Call 888-553-3449.

GET THE MOST FROM YOUR MEDICAL PLAN COVERAGE WITH AETNA HEALTH CONCIERGE. Cox Medical Plan experts can answer questions about your coverage, offer proactive suggestions and connect you to additional resources and specialists. Call 888-553-3449.

SEND MOM'S MILK HOME TO BABY THROUGH MILK STORK. Traveling moms can pump according to their regular nursing schedule, then carry milk in a custom tote or schedule a FedEx pickup for overnight delivery using a special cooler. This free service is available to employees and their covered spouses (even if they don't work for Cox) when they travel for work.. To learn more, visit MilkStork.com/Cox, email info@milkstork.com or call 877-242-1306.

Access Telemedicine Services with Teladoc

To safely and quickly get medical care remotely, Teladoc services are available to Cox Medical Plan members for free through Dec. 31, 2021. Speak to a licensed doctor by web, phone or mobile app in under 10 minutes. Talk to a doctor about common conditions like pink eye, the flu, allergies, skin conditions, anxiety and depression. They can even send prescriptions to your pharmacy of choice. Visit Teladoc.com/Aetna or call 888-553-3449.

Cox Employee Relief Fund (CERF)

The Cox Employee Relief Fund (CERF) is a 501(c)3 charitable organization that supports Cox employees and their families. Initially founded to help with the devastating impact of Hurricane Katrina, CERF has evolved to serve employees when they need it most. The fund now provides financial assistance to employees needing help when they are impacted by a natural disaster, illness or injury or loss of a family member and their savings, traditional insurance or federal aid fall short.

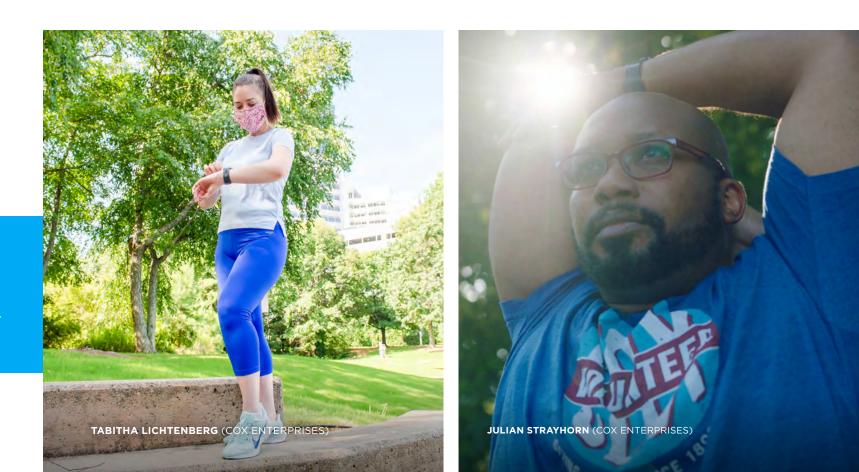
Did you know you can support CERF when you shop on Amazon through their AmazonSmile giving back program? Learn more and donate today at CoxRelief.com.

KNOW YOUR NUMBERS

Earn Up to \$400

Through Know Your Numbers, you and your spouse/domestic partner who is also a Cox Medical Plan member can participate in an annual health screening to earn up to \$400 in a payroll credit. The free screening takes less than 10 minutes and measures multiple health factors. Best of all, you can do it from the privacy and safety of your home with a self-collection card mailed directly to you. Your results can help you make informed decisions about your health. All screening results are confidential.

Participate between Jan. 1-Nov. 30, 2021 to earn the payroll credit in 2021. Learn more, including important deadlines, at InSideCox.com/KYN.





Planning for your Financial Future

COX 401(K) PLAN To help you save for retirement, we offer a 401(k) with enhanced match' if you who were hired or rehired after March 31, 2017**.

- Employees scheduled to work at least 20 hours per week will be eligible after 90 days of employment.
- If you take no action to opt-out or enroll in the first 90 days, you will be automatically enrolled at a pre-tax contribution rate of 6% with 1% annual increases.
- You can choose to contribute between 1% and 75%" of your eligible pay on a pre-tax or Roth basis, up to the annual allowed IRS maximum.
- Cox will match your contributions, dollar for dollar, up to 6% of your eligible pay. You are immediately 100% vested in the company match and your contributions.
- Cox will contribute an additional 2% of your eligible pay into your 401(k) account, regardless of whether you elect to contribute. You are vested in the 2% contribution after working at least 1,000 hours in three calendar years.

*Not all locations participate in the enhanced match.

** For those hired or rehired on or before March 31, 2017, please visit InSideCox.com for more information on the retirement plans offered. ***Some employees may be restricted to a 6% contribution. You will be notified if this provision applies to you.

PROFESSIONAL ADVICE To help you plan ahead and meet short-term and long-term goals, we offer access to financial planning experts and robust retirement plans with various investment options.

Through Resources for Living (RFL), you can access a professional financial consultant for free, for 30 minutes per topic. Gain expert advice for creating a budget and managing debt, avoiding foreclosure, preparing to purchase a home and saving for a down payment, setting goals and deciding on investment strategies and planning for college expenses.

Get started by contacting RFL at 888-265-1782 or at ResourcesForLiving.com (Username: Cox, Password: RFL).

CoxTotalComp

Your annual salary is only one part of your total compensation package. It also includes your medical benefits and your Cox 401(k) Plan. Learn more about your personal compensation at CoxTotalComp on InSideCox.com

There you'll view the total value of your comprehensive pay, health and retirement benefits.

Helpful Resources

INSIDECOX.COM	Find information about Cox's benefit plans by navigating to Health & Money	InSideCox.com
VANGUARD (COX 401(K) PLAN)	Enroll in your 401(k), Roth 401(k) or ask a question	Vanguard.com/ retirementplans 800-523-1188 Plan number: 090535

AETNA (MEDICAL, DENTAL AND SUPPLEMENTAL HEALTH BENEFITS)	 Teladoc Aetna Health Concierge - get personal help with questions and claim issues Informed Health® Line - 24/7 nurse line Aetna Care Advocate - personal support for more serious health concerns Aetna One Choice - one-on-one support to help guide you toward your health goals Supplemental health benefits (Critical Illness, Accident Insurance and Hospital Indemnity) questions and claim issues 	Aetna.com 888-553-3449
	 Locate an in-network provider Review and download claims information Print ID cards View available Aetna member discounts 	Aetna.com Aetna App
COX EMPLOYEE RELIEF FUND (CERF)	Apply for assistance, make a donation or ask a question	CoxRelief.com
CVS CAREMARK® (PRESCRIPTION DRUGS)	Locate in-network pharmaciesPrescription drug informationDrug cost comparison tool	Caremark.com 844-254-6829 Caremark App
	 Specialty pharmacy information 	CVSspecialty.com 800-237-2767
CONNECTYOURCARE (FSAs & HSA)	 Flexible Spending Account questions and claims Health Savings Account questions and claims Debit card questions 	ConnectYourCare.com/Cox 844-881-4589
VSP (VISION)	Find vision care providers in the VSP networkLearn about your eye care	VSP.com 800-877-7195
RESOURCES FOR LIVING	 BetterHelp counseling through phone, chat, text or video Face-to-face counseling Referrals for childcare, elder care Legal and financial resources 	ResourcesForLiving.com Username: Cox Password: RFL 888-265-1782
MERCER (ADDED BENEFITS)	Support and questions for pet insurance, identity theft protection and home and auto insurance	CoxAddedBenefits.com 855-601-1782
METLIFE (LONG-TERM DISABILITY AND LIFE INSURANCE)	Long-Term DisabilityLife Insurance	844-MET-4-COX (844-638-4269)
QUEST DIAGNOSTICS (KNOW YOUR NUMBERS)	Support for registration and scheduling screenings	My.QuestForHealth.com Registration key is Cox 855-623-9355



Important Notices

HIPAA PRIVACY NOTICE

Cox's health plans are subject to the privacy and security requirements of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). A notice describing the plan's permitted uses and disclosures of your health information will be made available to you when you first became covered under the plan. You can find a full copy of the notice at InSideCox.com. You may request a paper copy free of charge by emailing InSideCoxbenefits@coxinc.com.

IRS FORM 1095-C

Every full-time employee will receive an IRS Form 1095-C. It will be received about the same time you receive your W-2 and the form will help you to complete your income tax return for the prior year. The IRS will use the information on this form to determine whether or not you and your family members had healthcare coverage and whether you are entitled to any subsidy for buying health insurance through one of the Exchanges.

The benefits offered by Cox Enterprises, Inc. are governed by the applicable plan document and summary plan descriptions for each benefit (collectively, "governing documents"). If there is a conflict between the governing documents and this benefits guide for 2021, the governing documents will generally control. Notwithstanding anything to the contrary, these enrollment materials identify specific changes in the plan for 2021. Those changes may not be reflected in the most recent summary plan description with an effective date prior to 2021. You should keep a copy of these materials with your SPD until you have received a summary plan description for the 2021 plan year.

For Questions or More Information

Cox Enterprises InSideCox.com | CEIHRServices@coxinc.com Cox Communications P: 877-290-myHR (6947) | F: 877-873-9140 | coxone.cox.com/myHR Cox Automotive P: 855-449-0010 | F: 678-645-9098 | ESC@coxautoinc.com



