

ENROLLMENT GUIDE

Hawaii Employees
2024-2025



ZARA

WELCOME TO OPEN ENROLLMENT 2024
OPEN ENROLLMENT IS SEPTEMBER 3 - 17, 2024.

**ZARA USA is proud to provide a high quality
benefits package to enhance your life.**

Our comprehensive and competitive benefits program is an important component of your total compensation package. This guide provides valuable information to help you better manage your health and your financial security. During this open enrollment, you have the opportunity to review your coverage needs, consider the benefit plans available to you and select benefits that will provide the most value to you.

While we encourage all employees to review and confirm their benefits in ADP, if you do not actively enroll in benefits, your current elections will continue.

For a smooth enrollment process, you should have your dependent(s) name, date(s) of birth and Social Security Numbers readily available.

IMPORTANT: Outside of this open enrollment period, you may only make benefit changes if you experience a qualified life event (e.g. birth of a child, marriage, divorce, loss of spouse health coverage, etc.).

For assistance in a language other than English, please refer to the contact list on the last page of this guide and request to speak with a representative in your preferred language. Keep in mind that not all languages are available.

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USING YOUR BENEFITS



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ELIGIBILITY

Who Is Eligible to Participate?

You are eligible to participate in the medical, vision and voluntary benefits programs if you are scheduled to work 20 or more hours per week, whether paid hourly or by a yearly salary. Employees working 30 hours or more per week are eligible to participate in our dental and basic life insurance benefits.

New Hire Waiting Periods

Coverage will be effective on the 1st of the month following four weeks of employment.

Which Family Members Can Be Covered?

When you enroll yourself in the benefits program, you may also cover your eligible dependents. Please review your dependent's eligibility to ensure they meet the requirements to be covered under ZARA USA's benefit plans.

Eligible dependents may include your:

- Legal Spouse ("Spouse" means the person recognized as a covered employee's husband or wife under the laws of the state where the covered employee was married.)
- Domestic Partner*
- Dependent children covered up to the end of the birth month in which they turn 26 regardless of student status for medical, dental and vision.

*Please note that premium payments towards domestic partners and/or dependent children of a domestic partner will be processed on a post-tax basis.



QUALIFIED LIFE EVENTS

After your initial enrollment period, you may only make changes to your benefit elections during the annual enrollment period, unless you have a qualified family status change as defined by the IRS. If a qualified change in status occurs, you are permitted to make changes consistent with the event.

Qualified Life Events, as defined by the IRS, may include:

- Marriage or divorce
- Gain or loss of an eligible dependent for reasons such as birth of a child, adoption, court order, disability, death, marriage or reaching the dependent child age limit.
- Changes in your Spouse's employment status that affect dependent child benefit eligibility.

If you experience a qualifying life event, it is your responsibility to make the necessary changes to your plan on www.myadp.com within 30 days of the event date.



ENROLLMENT INSTRUCTIONS

IMPORTANT: To enroll your dependent(s) in medical, dental and/or vision benefits, you must submit dependent verification documents.

Evidence needs to be submitted through the ADP Dependent Verification System (MyADP) by the deadline. Dependents will not have coverage until we receive the required information.

NOTE: If you start your elections but do not complete the enrollment process, your changes will not be submitted.

To enroll in benefits, go to: www.myadp.com

First Time Users

- First Time users click on *"Register Here"* to register.
- Enter Registration code: **INDITEXUSA-zara1234**
- Follow the instructions to establish a new user ID and secure password.
- From the dashboard, choose *"Benefits"* then *"Enrollments"* to continue to enroll.

Return Users

- Enter your Username and Password
- From the Dashboard, select Benefits
- From the Annual Enrollment tile, click *"Enroll Now"* to begin your elections.

Please note that your elections are not completed until you select "Confirm Elections" and receive a confirmation email from ADP.

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MEDICAL

Our medical and vision plans are bundled together. UHA is our coverage provider. To verify that a doctor or facility is in the UHA network, visit www.UHAhealth.com and select "Find a Provider" or call member services at **808-532-4000**. Outlined to the right is our medical plan overview.

Great News!

There are no deductible, out-of-pocket maximum or copay changes to our benefit plans for the 2024-2025 plan year.

UHA 3000 PLAN

| Medical Plan Highlights | IN-NETWORK | OUT-OF-NETWORK |
|---|--------------------|---|
| Calendar Year Deductible (Indiv. / Family) | \$200 / \$600 | \$200 / \$600 |
| Coinsurance: Paid by Carrier | 80% | 80% |
| Primary Care Physician (PCP) / Specialist Copay | \$12 Copay | \$12 Copay plus difference between actual charge and allowed charge |
| Adult Preventive Care Office Visit | No Copay | No Copay |
| Calendar Year Out-of-Pocket Max (including Deductible) | \$2,200 / \$6,600 | \$2,200 / \$6,600 |
| Inpatient Hospital | Ded + 20% | Ded + 20% |
| Outpatient Surgery | Ded + 20% | Ded + 20% |
| Emergency Room | Ded + 20% | Ded + 20% |
| Maximum Lifetime | | Unlimited |
| Rx Deductible | | None |
| Rx Out-of-Pocket Max | | \$5,400 per person / \$8,300 family |
| Rx Retail (30 Day Supply) Generic/Brand/Non Formulary | \$10 / \$20 / \$40 | 30% Coinsurance |
| Rx Mail Order (90 Day Supply) Generic/Brand/Non Formulary | \$15 / \$30 / \$60 | Not Covered |
| Out-of-Network UCR Level | N/A | Fee Schedule |
| Dependent Age Limit | | To Age 26 |

NOTE: This chart does not describe all covered services. Please review the plan summaries for complete coverage information.

Employee Medical & Vision Contributions (24 times per plan year)

| UHA | UHA 3000 PLAN | |
|--------------|---------------|----------|
| | EMPLOYEE | EMPLOYER |
| Employee | \$0.00 | \$193.41 |
| Employee + 1 | \$104.46 | \$282.35 |
| Family | \$208.92 | \$371.31 |



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VISION

UHA Vision 100 Plan

- **Eye Examination:** Plan pays 100% of the eligible charge for one eye examination and refraction per member, per calendar year
- **Appliances:** Up to \$175 for the 2024 calendar year towards the purchase of eyeglasses, contact lenses, frames, lenses, or any combination thereof
- **LASIK Benefit:** Our vision plan includes benefits for LASIK. The allowance is up to \$350 per eye, per lifetime, for a total benefit of \$700 for LASIK surgery as approved by the Food and Drug Administration for members aged 18 and older.

Vision Care Providers

Members have the choice of going to a participating or non-participating UHA vision provider who must be a licensed Ophthalmologist (M.D.) or Optometrist (O.D.)

Limitations And Exclusions

The following services are not covered:

- Contact lens fitting
- Repair or replacements of frame parts and accessories
- Sunglasses
- Prescription inserts for diving masks
- Nonprescription industrial safety goggles
- Tinting of glasses

How To File A Vision Claim For Services From A Non-Participating Provider

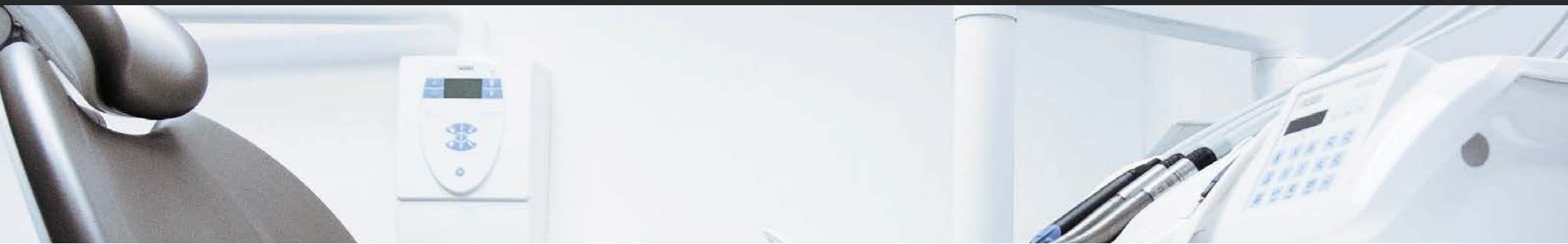
- Present your UHA member identification card to the provider of services
- Send your receipt or invoice and copy of your UHA medical card

Via Mail: 700 Bishop Street, Suite 300
Honolulu, HI 96813

Via Fax: **866-572-4393**

- All claims must be filed within one year from the date of service; claims filed after one year will not be paid

If you have any questions about your vision plan benefits, please contact UHA Customer Services at **808-532-4000**, or **800-458-4600** from the neighbor islands.



SAVE MONEY ON HEALTH CARE EXPENSES

No one wants to spend any more than necessary on health care. Here are some ways to be a smart health care consumer and save money.

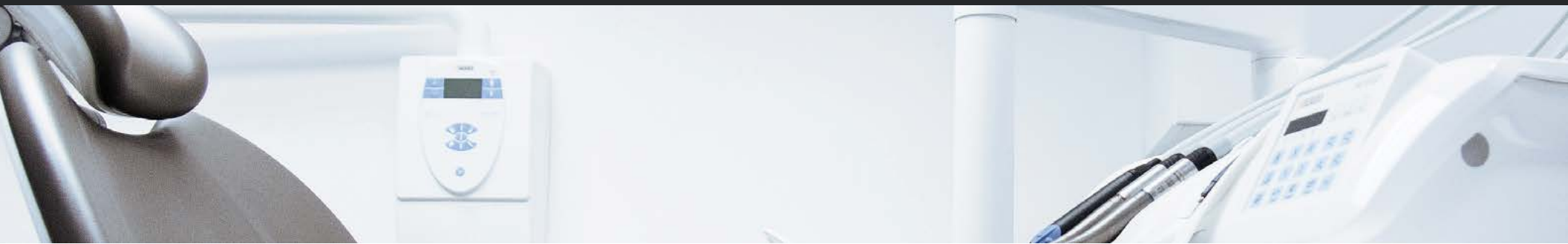
Stay in your network. Seeing a doctor in your network will almost always cost you less. Use in-network convenience care clinics. For minor illnesses and injuries, convenience care clinics located in pharmacies, grocery stores and other retail stores provide quick, affordable care.

Use the emergency room only for true emergencies. For non-life-threatening emergencies, visit an urgent care center instead of the emergency room. You'll get treated more quickly and pay less.

Ask for generic drugs. You can save up to 80% compared to brand-name drugs.

Limit hospital visits. Many procedures like MRIs and colonoscopies cost less when done at independent outpatient centers instead of a hospital. Outpatient surgery is also less expensive than hospitalization.

Get regular preventive care. Getting checkups, immunizations and other health screenings can help detect health problems early when they are less expensive to treat.



TALKING WITH YOUR DOCTOR ABOUT HEALTH CARE COSTS

If you need help navigating your benefits, contact one of the below resources:

- **UHA Member Services:** Call the number on the back of your ID card **1-808-532-4000**, or **1-800-458-4600** from the neighbor islands.
- **Health Advocate:** **866-799-2731**
- **Benefits Help Desk:** **877-373-6535** or **benefitshelpdesk@epicbrokers.com**
- **ZARA Benefits Team:** **benefits@us.inditex.com**

Remember: Certain services may require precertification or prior approval from the health plan provider to qualify services for payment. Typically, in-network providers will obtain the required precertification and approval. For out-of-network services, it is the member's responsibility to handle the precertification process.

You may contact Cigna member services first to determine if precertification is necessary and if the provider is out-of-network.

Don't be afraid to ask about the costs and benefits of different treatment options and make choices that are right for you.

When your doctor recommends tests – To make sure you don't spend time and money on unnecessary tests, ask your doctor why the test is needed and where you can have it done at the lowest cost.

If your doctor recommends surgery or hospitalization – Ask if there are other treatment options that don't require surgery or if the procedure can be done on an outpatient basis. If you do need surgery, make sure the hospital, the surgeon and any other specialists your doctor refers you to are in the network.

When your doctor writes you a prescription – Ask if there are less expensive generic drugs or even over-the-counter medications that might work for you. Ask if you can improve your condition without drugs by changing your eating habits or getting more exercise.



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DENTAL

Employees working a minimum of 30 hours per week may enroll in either of our Cigna dental plans: the High PPO or the Premier PPO. The Premier PPO offers a higher Calendar Year maximum, a greater orthodontia maximum, lower cost share on endodontics, periodontics, oral surgery and coverage for implants.

To verify that a dentist is in the Cigna Total DPPO network, visit www.mycigna.com. You may search for network dentists before your benefits become active by visiting www.cigna.com by selecting "Find a Doctor, Dentist or Facility" and following prompts to search by type of dentist or by dentist name. When asked to select a plan, choose "DPPO/EPO > Total Cigna DPPO"

Cigna does not issue dental ID cards. Members don't need an ID card to receive care from network

dentists. Simply make your appointment and provide identification to the office staff. They can verify your coverage with Cigna. You can also access a digital ID card after your benefits are effective and you have activated your www.mycigna.com account.

Dental Work in Progress

If you are currently receiving general dentistry treatment:

If you enroll in the plan for the first time during Open Enrollment, your Cigna dental plan may not cover charges for services that are already in progress. Treatments that may be considered "in progress" are those that started while you were covered under another dental plan but not finalized before your Cigna dental plan becomes effective.

Examples of these services are root canal therapy, crowns, partials, dentures, bridges. If you started a treatment/service under another carrier that has not been completed once your ZARA benefits are effective, the claim should first be filed with the other carrier.

If you are currently receiving Orthodontic treatment:

You could qualify for "orthodontia in progress" coverage if your teeth are being actively moved (by bands or appliances, such as braces) when your coverage starts.

Your benefit amount is determined by your plan's coinsurance level for orthodontia and the months of active treatment you have left when your plan starts.

Your plan contributes to your costs until the lifetime orthodontia maximum has been met or until active treatment is done (whichever comes first.).

For more detailed information, please review the work in progress flyers located in the benefits library on www.zarabenefits.com.



GREAT NEWS! There are no changes to our dental benefit plans for the 2024-2025 plan year!

| Dental Plan Highlights | HIGH PPO | | PREMIER PPO | |
|---|-------------------|-------------------|--------------|-----------------|
| | IN-NETWORK | OUT-OF-NETWORK | IN-NETWORK | OUT-OF-NETWORK |
| Calendar Year Deductible (Single / Family) Waived for Preventive | \$50 / \$150 | \$100 / \$300 | \$50 / \$150 | \$100 / \$300 |
| Coinsurance (Coins.): Paid by Carrier | | | | |
| Diagnostic / Preventive (cleanings 2x per year; x-rays) | 100% | 100% | 100% | 100% |
| Basic (simple extractions; fillings*) | 80% | 80% | 80% | 80% |
| Endodontics (root canal therapy) / Periodontics (gum services) | 80% | 80% | 80% | 80% |
| Major (crowns; inlays; onlays) / Implants | 50% / Not Covered | 50% / Not Covered | 50% / 50% | 50% / 50% |
| Orthodontia (Child Only) | 50% | | 50% | |
| Orthodontia Lifetime Maximum | \$1,000 | | \$1,500 | |
| Calendar Year Maximum | \$1,500 | | \$2,500 | |
| Out-of-Network UCR Level | N/A | 80th Percentile | N/A | 80th Percentile |
| Dependent Age Limit | To Age 26 | | | |

* Silver fillings are covered under the plan. Composite fillings are covered for front teeth only.

Note: This chart does not describe all covered services. Please review the plan summaries for complete coverage information.

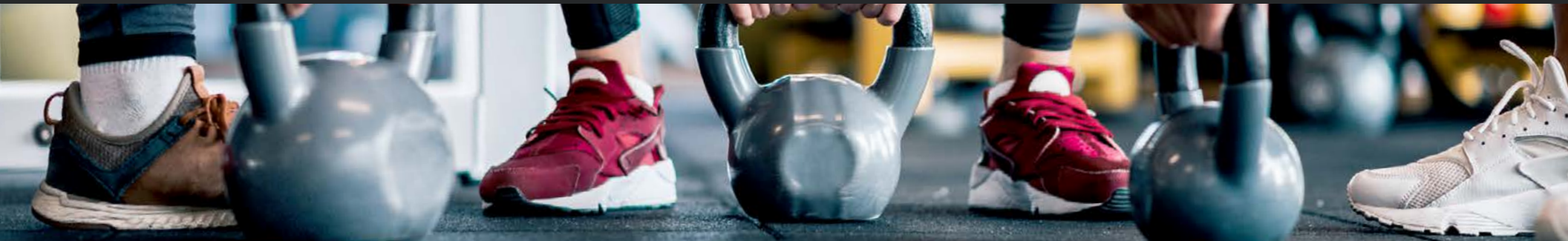
WellnessPlus® Progressive Maximum

The Cigna dental plan includes a progressive calendar year maximum. In year 1, the maximum is \$1,500 for the High plan or \$2,500 for the Premier plan. Members can progress to a higher calendar year maximum the next plan year by utilizing class 1 preventive services during the previous year. The maximum will increase \$100 each year up to an \$1,800 maximum on the High plan or a \$2,800 maximum on the Premier plan. Additional information can be found in the document library on www.zarabenefits.com.

Employee Dental Contributions (24 times per plan year)

Please review contributions carefully.
Contribution changes will take effect on October 1, 2024.

| CIGNA | HIGH PPO | | PREMIER PPO | |
|------------------------------|----------|----------|-------------|----------|
| | EMPLOYEE | EMPLOYER | EMPLOYEE | EMPLOYER |
| Employee | \$6.91 | \$8.31 | \$11.36 | \$6.83 |
| Employee + Spouse | \$18.66 | \$11.20 | \$28.37 | \$7.30 |
| Employee + Child(ren) | \$19.83 | \$11.92 | \$30.16 | \$7.76 |
| Family | \$25.60 | \$15.37 | \$38.91 | \$10.03 |



WELLNESS & SUPPORT PROGRAMS

All ZARA employees may participate in this program.

Start Making Your Life Easier

To register
visit <https://clients.brighthouse.com/zara>

You will need to enter your First Name, Last Name, Work Email, Employee ID, Country, and Zip Code to begin the registration process. After your initial registration you may log in to the Bright Horizons site using the personal username and password you created when registering.

Download the App: Search "back-up care" in the **App Store** or **Google Play**

Please note if you are utilizing the Back-Up Care mobile application you will also need the below credentials:

Employer Username: Zara
Password: Benefits4You

Bright Horizons Back-Up Care

Trying to make work and family fit? Our Bright Horizons benefit can provide the support your family needs. Bright Horizons Enhanced Family Supports™ offers discounts on top child care, tutoring, elder care, summer camp, and STEM learning providers for your family. Services include:

- Back-up child care in high-quality centers or your own home
- In-home back-up care for adult and elder loved ones, even if they live in another state
- Health and safety policies that set the standard for the industry
- Easy booking online
- On-the-go reservations through our mobile app

The Bright Horizons program also includes premium access to Sittercity. A premium Sittercity membership enables you to quickly find babysitters, housekeepers, pet care, and more, and includes unlimited basic background checks at no cost.

To access these tools and resources, go to your Bright Horizons benefit page and navigate to the

"Find Sitters" or Sittercity tile. This will bring you to ZARA's Sittercity homepage, where you will create a username and password to gain access and begin your search.

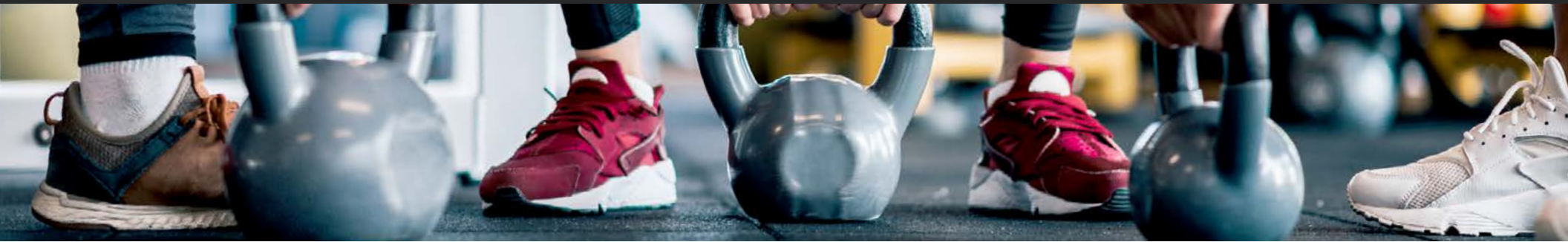
Cost of care varies based on geographic region, type, number of children or pets, and age of care recipients. Keep in mind that the use of Sittercity does not impact your back-up care use allowance.

Please be sure to visit the **document library** for additional information on this benefit.

Please note that this information is subject to change for the 2025 Calendar year.



Click here to access
PLAN SUMMARIES



WELLNESS & SUPPORT PROGRAMS

All ZARA employees may participate in this program.



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Health Advocate

Zara has partnered with Health Advocate to offer you personalized support to improve your health and well-being, **all at no cost to you!**

We know our health care system can be pretty tricky to navigate and it helps to have a service to advocate on your behalf when health care claims/issues become too complex to solve on your own.

A Personal Health Advocate understands the intricacies of the health care system and how to navigate through it. He or she will help you should you have medical questions, or need assistance in locating the right healthcare resource. Advocates are registered nurses (backed by a staff of medical directors and administrative experts) who will assist you with healthcare related issues, such as:

- Finding the appropriate medical providers for your health needs.
- Finding resources for second opinions.

- Coordinating benefits between dental, medical, worker's compensation and disability carriers.
- Assuring correct application of provider network status.
- Managing health services for elderly parents.
- Assistance negotiating reductions in out-of-network fees above reasonable and customary amounts and more.

How to Access Health Advocate Services:

If at any time you or an immediate member of your family (including parents and parents-in-law) has a question or needs assistance, please contact Health Advocate. Simply identify yourself as a ZARA employee.

Toll-Free: 866-799-2731

E-mail: answers@healthadvocate.com

Web: HealthAdvocate.com/members



Please note that this information is subject to change for the 2025 Calendar year.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

Connecting to the EAP Online:

For 24-hour, confidential access to your EAP benefits and tools to help you enhance your work, health and life, simply visit www.resourcesforliving.com.

User Name: **INDTX** | Password: **eap**

Employees have access to our Employee Assistance Program called Aetna Resources For Living. They offer a wide range of counseling, work/life and community resources designed to help people cope with the challenges of today's complex work and personal environments.

You may be struggling with stress at work, seeking financial or legal advice, or coping with the death of a loved one. Maybe you just want to strengthen your relationships with your family.

Your benefit offers assistance and support for all these concerns and more:

- Stress, grief and loss
- Relationship problems
- Workplace conflicts
- Legal & financial planning
- Child and elder care

How Does It Work?

Accessing Aetna Resources For Living is easy. Simply call their toll-free number **888-238-6232**. A specialist will help you (confidentially) identify the nature of your problem and the appropriate resources to address it.

You are eligible for up to three counseling sessions per issue per year with licensed professionals at no cost to you! Sessions are available face-to-face, by phone or through televideo.

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USA 401(K) RETIREMENT PROGRAM

The 401(k) plan at Zara USA enables eligible employees to save and invest for retirement through salary contributions, complemented by Zara's matching contributions.

To participate in the 401(k) plan, you must:

- **Be at least 21 years old,**
- **Complete one year of service, and,**
- **Have worked at least 1000 hours of service.**

Your entry date will be the first day of the payroll period following the date you satisfy the eligibility requirements.

Automatic Enrollment:

Your 401(k) Plan managed by Mercer Wise is set up with an automatic enrollment feature. If you do nothing, the automatic enrollment period is 30 days. You will receive an email or mailing 30 days prior to your auto-enrollment date. This notice will inform you when the automatic 3% before-tax contributions will begin from your paychecks and give you the option to elect to withhold a different percentage or opt out if you choose.

Matching Contributions:

After completing 1 year and 1000 hours of service, the company will match 50% of elective deferrals that do not exceed 6% of your compensation. Ensure your contribution rate is 6% or more to receive the full match. You need to remain with the company for a minimum of 3 years to be fully vested and retain 100% of your employer matching contributions.

Helpful Tips:

- **Review the benefits and details** of your 401(k) plan.

How To Enroll

Visit our 401(k) plan website at **mercerwise.com** to enroll and to learn more about your retirement plan and some great account features like Automatic Increase and automatic rebalancing of your investments.

- **Stay on track** and maximize the benefits of your retirement plan.
- **Designate an account beneficiary.** Complete this step online or call a Mercer Wise representative for assistance.
- **Elect automatic account features** like Automatic Increase to help make savings and portfolio management easier.
- **Consider consolidating** your retirement accounts into your Zara USA & Related Companies 401(k) Plan account.

Questions and Support:

If you have any questions about your Zara USA & Related Companies 401(k) Plan, please visit **mercerwise.com** or feel free to call a Mercer Wise representative at **833-637-2379** (833-MER-CERW) (Weekdays 8 am to 10 pm ET and Saturdays 9 am to 5:30 pm ET).

Navigating The Mercer Wise Website

Review additional flyers on **zarabenefits.com** to learn how to navigate the Mercer Wise website and access retirement planning tools.



TRANSPORTATION

Save money on your work-related transportation costs by setting aside pre-tax dollars in our transit and parking spending accounts. For 2024, you may choose to set aside up to \$315 pre-tax per month for mass transit expenses and up to \$315 pre-tax per month for parking expenses.

On the first pay period of the month, the appropriate amount will be deducted pre-tax from your paycheck and credited to your parking and transit accounts.

You may change the amount you are contributing or stop your contributions at any time during the year.

Transit expenses include ferry, subway, train and bus travel. Parking expenses include parking at a station to take another mode of transportation to work or parking at your workplace.

Expenses that are not covered include mileage, tolls, parking at your residence and airport parking.

Questions concerning your Parking and Transit benefits?

You may visit the BRI website at www.BenefitResource.com, or contact Participant Services at **800-473-9595** or ParticipantServices@BenefitResource.com.

Log into BRiWeb

BRiWeb is your secure participant login for managing your accounts, viewing balances and submitting claims for eligible parking expenses. To log in, go to www.BenefitResource.com, click on *Participants* in the secure login section and enter:

Company Code: zarausa

Login ID selected and provided by Zara

Initial Password: 5-digit home zip code

Follow the prompts to select a new Login ID and Password. A confirmation code will be sent to your email or through a text message.



LIFE & DISABILITY INSURANCE

Basic Life/AD&D Insurance

ZARA USA is proud to offer Basic Life/AD&D Insurance to our benefits offerings.

Life insurance can help bring you peace of mind that you will be able to provide for your loved ones if you should pass away. These life insurance benefits also include an Accidental Death & Dismemberment (AD&D) component, which pays benefits if you lose your sight, limbs, hearing, speech or life as a result of an accident.

All active, full-time employees are to be provided with 1 time your annual base salary, up to \$100,000, in Basic Life/AD&D insurance.

This benefit is paid 100% by ZARA USA.

Please remember to designate your beneficiary(ies) for this great benefit!

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VOLUNTARY LIFE, DISABILITY & ACCIDENT INSURANCE

ZARA USA partners with both The Hartford and Aetna to provide benefits that help you protect your paycheck and your family. You have the option to enroll in these policies online during your initial enrollment period. Employees working a minimum of 20 hours per week are eligible for these Voluntary benefits.

The Hartford Group Term Life Insurance

Group Term Life helps provide financial protection in the event that something were to happen to you. Term life is a simple and inexpensive form of life insurance, which builds no cash value. Rates change with age.

Employees may purchase coverage on their own life in \$10,000 increments up to a maximum of \$250,000 (not to exceed 5x your salary). The guarantee issue (GI) amount is \$150,000. During this open enrollment employees currently enrolled in coverage may increase their election by one increment of \$10,000 up to the GI without needing EOI. Those who are not enrolled require Evidence of Insurability (EOI) for any amount of coverage elected.

Employees may also purchase coverage for their spouse in increments of \$5,000 to a maximum of \$100,000 (not to exceed 50% of the employee's election). The guarantee issue (GI) amount is

\$30,000 and premiums are based on the employee's age. During this open enrollment employees with spouses currently enrolled in coverage may increase their election by one increment of \$5,000 up to the GI without needing EOI. Those who are not enrolled require EOI for any amount of voluntary spouse life insurance elected. Child life insurance is available in \$5,000 or \$10,000 (not to exceed 50% of the employee's election). During open enrollment no EOI is required. The full child life benefit can be elected with no medical questions.

Please remember to designate your beneficiary(ies) for this great benefit!



The Hartford Long-Term Disability Insurance

The Hartford Voluntary Long-Term Disability (LTD) coverage replaces a portion of your pay to help you meet your income needs while you're out of work. You're paid whether you become sick or are hurt on or off the job. The plan covers 60% of your salary to a maximum of \$5,000 per month. Benefits begin at 180 days after disability and end at recovery or 5 years. Pre-existing condition limitations apply.

You'll receive benefit payments each month that can help you keep up with your bills. You can also spend the money on food, child care and other necessities.

If you chose not to enroll in our Voluntary Life or LTD plans during your new hire enrollment period but wish to enroll now, Evidence of Insurability will be required in order to enroll in coverage.

Aetna Accident Plan

Are you prepared for the unexpected costs that come along with an accidental injury?

While medical plans typically cover care for an injury, they don't cover the unexpected costs that come with it. The Aetna Accident Plan can help. The plan pays cash benefits directly to you when you have a covered accident. You can use the money for expenses like coinsurance, deductibles or everyday expenses.

You have the choice to enroll in one of our two Accident plan offerings. Coverage is available for yourself and you eligible dependents. Please visit zarabenefits.com for a summary of benefits.



PET INSURANCE

You can purchase pet insurance through Nationwide to help with the cost of a wide range of pet-related health care expenses. Bring your pet to any veterinarian you want, and simply submit your claim for reimbursement. After you satisfy a \$250 annual deductible, you get a percentage back!

Nationwide – Monthly Premiums

Monthly premiums are determined by state of residence and species (cat/dog). These are set rates regardless of the age or breed of your pet. Plans also include a Free Vet Helpline that provides “24/7” expert pet advice from a licensed Veterinarian.

Nationwide also offers plans for avian and exotic pets!

For more information on Pet Insurance, visit <https://benefits.petinsurance.com/zara> or call **877-738-7874**.



ADDITIONAL ZARA PERKS

In addition to our Health and Welfare benefits, Zara has relationships with vendors to offer discounts and perks to our employees. Below are just a few perks currently available ranging from discounts on products, services, memberships, travel, events **AND MUCH MORE!**

- AT&T: up to 15% discount on qualifying AT&T services.
- Employee Discount Card
- Working Advantage: up to 60% on ticketed events and online shopping.

- Exclusive discounts on hotels, sports, concerts, theater, movie tickets and theme park tickets nationwide.
- T-Mobile: Discount on services, products, accessories and much more!

Scan the Benefits QR code in your store's break room for a current list of available discounts and perks!

QUESTIONS?

If you need help navigating your benefits, you may contact:

- **UHA Member Services at 808-532-4000, or 800-458-4600 from the neighbor islands**
- **Cigna Pre-Enrollment at 800-401-4041**
Available 24 hours a day, 7 days a week.
- **Health Advocate at 866-799-2731**
Available 24 hours a day, 7 days a week.
- **The EPIC Benefits Help Desk at 877-373-6535, benefitshelpdesk@epicbrokers.com**
The staff is available from 8am–8pm EST, Monday through Friday. After hours, you can leave a voice mail message—your call will be returned within 24 hours (or returned on Monday, if received over the weekend).
- **The ZARA Benefits Team at benefits@us.inditex.com**



These resources are designed to be your personal benefits answer and support for a wide range of benefits and insurance issues. They are staffed by dedicated professionals who will work with you personally until your question is answered or benefits issue is resolved. All inquiries and personal data are completely confidential.

Zara USA has made every attempt to ensure the accuracy of the information described in this enrollment guide. This guide is not an official plan document and does not provide a complete description of your benefit plans. Any discrepancy between this guide and the insurance contracts, summary plan descriptions (SPDs) or any other legal documents that govern the plans of benefits described in this enrollment guide will be resolved according to those documents. Any examples, such as infographics provided in this guide are purely illustrative in nature, and actual plan costs and coverage will differ based on coverage selected. Zara USA reserves the right to amend or discontinue the benefits described in this enrollment guide in the future, as well as change how eligible employees and Zara USA share plan costs at any time. This enrollment guide creates neither an employment agreement of any kind nor a guarantee of continued employment with Zara USA.