

Benefits Guide 2018

Enroll for benefits online at SnackHip.com



**Snyder's
Lance** 
Snacking is our passion™



Decide & Enroll

For enrollment instructions, deadlines, and information on what happens if you don't complete your enrollment, see [pages 18-19](#).

You have access to great benefits!

Start here to find the best coverage for your family.

Welcome to the Snyder's-Lance Benefits Plan!

We understand that your health, wellbeing and financial security are essential to feeling and doing your best. To help you achieve your goals and support your family, we offer all benefits-eligible employees access to a diverse mix of insurance products and resources.

Read this guide, explore the online Benefits Center, and ask questions to learn about the plans and ensure you take full advantage of your options. See *Benefit Contacts* on the [back cover](#) to get directly in touch with our benefit plan providers.

Once you've explored all of your options, you're ready to enroll. Choose your benefits carefully – you won't be able to make changes except for during the annual Open Enrollment period without a qualified life event (read more about this in *Making Mid-Year Changes* on [page 4](#)).

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Overview

Plan Year

At Snyder's-Lance, the benefit plan year runs from January 1 through December 31.

Eligibility

To be eligible for coverage under the Snyder's-Lance, Inc. Benefit Plans, you must be a regular, full-time employee consistently scheduled to work at least 30 hours per week. Your benefits begin on the first of the month following 30 days of continuous, active employment.

For benefits that provide dependent coverage, your eligible dependents include your:

Spouse	A person to whom you are legally married under state law and with whom you have a certificate of marriage.
Children	Your children up to age 26. This includes your natural children, adopted children, stepchildren or children for whom you have a Qualified Medical Child Support Order. With prior certification, "child" may also include an adult child of any age if disabled and dependent on you for support.
Grandchildren	Your adopted grandchildren or grandchildren for whom you have legal guardianship.



Be sure to only cover dependents who meet the eligibility definitions above. Snyder's-Lance reserves the right to request documentation to verify eligibility (such as birth certificates, marriage licenses, or legal guardianship papers). If documents are not provided when requested, unverified dependents may be removed from coverage.

Paying for Your Benefits

To ensure you have and can afford important insurance coverage, Snyder's-Lance pays the full cost of some benefits and shares in the cost of others. In some cases, you pay the full cost. Some of your elections will be deducted from your paycheck on a pre-tax basis which means you will not pay Social Security taxes, federal income taxes, and, in most cases, state income tax.

Snyder's-Lance pays the full cost	You and Snyder's-Lance share in the cost	You pay the full cost	
		With pre-tax dollars	With after-tax dollars
<ul style="list-style-type: none"> ✓ Basic Life and AD&D ✓ Disability ✓ EAP ✓ Wellness 	<ul style="list-style-type: none"> ✓ Medical and Rx ✓ Health Savings Account ✓ 401(k) Plan ✓ Stock Purchase Plan 	<ul style="list-style-type: none"> ✓ Dental ✓ Vision ✓ Healthcare FSA ✓ Dependent Care FSA 	<ul style="list-style-type: none"> ✓ Supplemental Life ✓ Voluntary AD&D

Making Mid-Year Changes

After you enroll, your medical, dental, vision, FSA, supplemental life insurance, and voluntary AD&D benefit elections are locked in and cannot be changed for the remainder of the plan year without a qualified life event. You can make changes for the upcoming plan year during the annual Open Enrollment period.

Elective contributions to your Health Savings Account, 401(k) Retirement Savings Plan, or Employee Stock Purchase Plan typically can be changed throughout the year. *Some restrictions apply.*

Qualified Life Events

Qualified Life Events are situations where there is a significant change to your family or coverage, like the birth or adoption of a child, a marriage or divorce, or the loss or gain of access to insurance coverage elsewhere. In cases where a Qualified Life Event occurs, you may apply to make certain changes to your benefit elections without waiting for the next annual Open Enrollment period.

Benefit changes must be consistent with your life event. For example, if you have a baby, you may add the baby to your medical coverage. You cannot, however, drop dental coverage for other family members at this time. Also, you cannot change your plan option mid-year; for example, you cannot change from the Blue Options HSA plan to the Blue Options PPO plan, or vice-versa.



How to Apply for a Mid-Year Change

Requests for changes due to Qualified Life Events must be made within 31 days of the event.

You must request changes to each affected benefit plan online at [SnackHip.com](https://www.SnackHip.com), and submit supporting documentation to Human Resources **within 31 days** of the life event. If you do not elect your changes online and submit acceptable supporting documentation within the 31-day deadline, your window to make changes will close and your request will be denied.



Some examples of qualified life events include:

Life Event	Documentation Required
Marriage	Marriage certificate
Divorce or legal separation	Divorce decree or legal separation agreement
Spouse starting or ending employment	Letter from employer
Spouse losing other coverage	Certificate of creditable coverage
Birth or adoption of a child	Birth certificate or adoption certificate
Death of a spouse or child	Death certificate
Court order requiring you to cover a child	Court order

Documentation must be a copy or scan of an official document and include the impacted member's name and the date of the event. In most cases, the effective date of the change is the actual "event date." Coverage typically terminates on the date you are no longer eligible for coverage. For example, coverage for a newborn will take effect on the date of birth, and coverage will end for an ex-spouse on the day a divorce is finalized.

You pay costs on a pre-tax basis each paycheck

Medical and Prescription Drug

For 2018, you can choose between two medical plan options offered through Blue Cross Blue Shield of North Carolina (BCBSNC): the **Blue Options HSA** and the **Blue Options PPO**. Both plans include prescription drug coverage. The chart below shows what you might pay for covered services in each of the plans.

	Blue Options HSA		Blue Options PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Individual Deductible	\$1,600	\$1,600	\$1,000	\$2,000
	The amount you pay each year before the plan begins to pay benefits.			
Family Deductible*	\$3,200	\$3,200	\$2,000	\$4,000
	The amount you pay for your family each year before the plan begins to pay benefits.			
Individual Out-of-Pocket Maximum	\$3,200	\$6,400	\$3,400	\$6,800
	The maximum amount that you would have to pay (out of your pocket) in a single year for covered services.			
Family Out-of-Pocket Maximum	\$6,400	\$12,800	\$6,800	\$13,600
	The maximum amount that you would have to pay (out of your pocket) in a single year for covered services.			
Preventive Care	Covered at 100%	40% after deductible	Covered at 100%	40% after deductible
Primary Care Office Visit	20% after deductible	40% after deductible	\$25 copay	40% after deductible
Specialist Office Visit	20% after deductible	40% after deductible	\$40 copay	40% after deductible
Urgent Care Center	20% after deductible	40% after deductible	\$40 copay	40% after deductible
Inpatient Hospital Admission	20% after deductible	40% after deductible	\$250 copay plus 20% after deductible	40% after deductible
Emergency Room	20% after deductible	20% after deductible	\$200 (waived if admitted)	\$200 (waived if admitted)
Retail Pharmacy Benefits (Up to 30-day supply)				
Tier 1 (Generic)	20% after deductible	Out-of-network pharmacy expenses are not covered by the plan.	\$10 copay	Out-of-network pharmacy expenses are not covered by the plan.
Tier 2 (Preferred)	20% after deductible		\$40 copay	
Tier 3 (Brand)	20% after deductible		\$70 copay	
Tier 4 (Specialty)	20% after deductible		25% up to \$150 maximum	
Mail Order Pharmacy Benefits (Up to 90-day supply)				
Tier 1 (Generic)	20% after deductible	Out-of-network pharmacy expenses are not covered by the plan.	\$20 copay	Out-of-network pharmacy expenses are not covered by the plan.
Tier 2 (Preferred)	20% after deductible		\$80 copay	
Tier 3 (Brand)	20% after deductible		\$140 copay	
Tier 4 (Specialty)	Not allowed		Not allowed	

* Note: If you enroll in the Blue Options HSA medical plan at Employee + Spouse, Employee + Child(ren) or the Employee Family levels, your family unit shares one collective Family Deductible that must be met before the plan shares in the cost of non-preventive care. This differs from the Blue Options PPO where each individual has their own deductible.



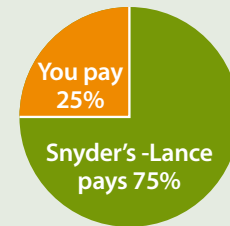
Visit BlueConnectNC.com or call 1-877-275-9787 for a list of in-network providers.

Medical Payroll Deductions

Coverage Level	Blue Options HSA	Blue Options PPO
Weekly		
Employee Only	\$18.21	\$33.03
Employee + Spouse	\$46.90	\$74.35
Employee + Child(ren)	\$42.25	\$69.49
Employee + Family	\$65.73	\$104.09
Bi-Weekly		
Employee Only	\$36.42	\$66.06
Employee + Spouse	\$93.80	\$148.70
Employee + Child(ren)	\$84.50	\$138.98
Employee + Family	\$131.46	\$208.18

DID YOU KNOW?

On average, what you pay in payroll deductions and what providers bill you for is only about 25% of the total cost of medical care. Snyder's-Lance pays the rest—about 75%—as part of our commitment to our employees and their families.



Surcharges

There are three medical plan surcharges you should understand before enrolling:

Employee Tobacco Use Surcharge



This **\$25 per week surcharge** will apply if you enroll in the medical plan and have used tobacco products within the last 6 months. Note that if you are enrolled or defaulted in a Snyder's-Lance medical plan and do not certify your tobacco status online each year during the annual Open Enrollment period, you will be considered a tobacco user and this surcharge will apply for the entire plan year.

Spouse Tobacco Use Surcharge



This **\$25 per week surcharge** will apply if you enroll in the medical plan and cover your spouse who has used tobacco products within the last 6 months. Note that if your spouse is enrolled in a Snyder's-Lance medical plan and you do not certify his/her tobacco status online during the annual Open Enrollment period, he/she will be considered a tobacco user and this surcharge will apply for the entire plan year.

Spousal Surcharge



This **\$40 per week surcharge** will apply if you enroll in the medical plan and cover your spouse who is eligible for coverage through his/her employer, whether or not they enroll in their employer's coverage. You must certify online during your initial enrollment period and each year during the annual Open Enrollment period whether or not your spouse has access to coverage under another employer-sponsored medical plan.

What Are Tobacco Products?

For purposes of surcharges, tobacco products include cigarettes, cigars, pipes, all forms of smokeless tobacco (chewing tobacco, snuff, dip, or any other product that contains tobacco), clove cigarettes and any other smoking devices that use tobacco, such as hookahs. E-cigarettes, which contain nicotine, are also included.

Ready to Quit?

You can do it! Sign up for our free Tobacco Cessation program. See [page 17](#) for details.



Comparing the Medical Plan Options

How the plans are the SAME

Blue Options HSA



Blue Options PPO

BOTH PLANS HAVE:

- ✓ Blue Cross and Blue Shield of NC (BCBSNC) Blue Options provider network.
- ✓ 100% coverage for in-network preventive care.
- ✓ Coinsurance amounts for most services (after you meet your deductible).
- ✓ Prescription Drug coverage through retail or mail order.
- ✓ 100% coverage on covered services after you have reached your annual out-of-pocket maximum.
- ✓ Coverage out-of-network, though you will likely pay more.
- ✓ An annual out-of-pocket maximum that limits the amount you have to pay in a year.

How the plans are DIFFERENT

Blue Options HSA



Blue Options PPO

You pay less in payroll deductions for the Blue Options HSA plan coverage but may pay more when you use your benefits.

You pay more in payroll deductions for the Blue Options PPO plan coverage but may pay less when you use your benefits.

This plan does not have copays. Instead, you pay the full cost of non-preventive office visits and prescriptions until the plan deductible is met. After the annual deductible is met, the plan pays a percentage of the negotiated rates and you are responsible for the remainder (your coinsurance).

This plan has copays for office visits and prescriptions. For major services, like tests and surgeries not covered by a copay, the plan has a lower annual deductible. After the annual deductible is met, the plan pays a percentage of the negotiated rates and you are responsible for the remainder (your coinsurance).

To help with the out-of-pocket costs, the Blue Options HSA plan allows you to open a Health Savings Account (HSA)—a bank account that can be used to set aside tax-free dollars to pay for eligible health care expenses. You and the company can both contribute, up to IRS limits, and the money left in your account at the end of the year rolls over into the next year and earns interest, year after year.

The PPO plan does not allow you to contribute and potentially save money in a pre-tax HSA. Instead, you may contribute to an annual Flexible Spending Account (FSA) to help pay for medical expenses. **Use it or lose it**—You'll lose any money left in your FSA at the end of the plan year, so plan carefully. FSAs do not earn interest.



Preventive Drug Coverage under the Blue Options HSA Plan

The Blue Options HSA plan covers specific preventive medications at 100% if you have certain conditions, such as hypertension, high cholesterol, diabetes, asthma or osteoporosis. To see the full list of approved preventive care medications, visit [bcbsnc.com/content/snyderslance](https://www.bcbsnc.com/content/snyderslance). For non-preventive medications, you must meet the annual deductible before the the Blue Options HSA plan begins sharing the cost.

Health Savings Account

If you enroll in the **Blue Options HSA** medical plan, you may be eligible for a Health Savings Account (HSA), administered by Fidelity, that allows you to set aside money on a pre-tax basis for health care. It is intended to help you save for current and/or future expenses. When you use your HSA funds to cover deductibles and coinsurance for qualified health care expenses, you pay no federal or Social Security taxes and, in most cases, no state taxes. If you don't use all the money in your HSA by the end of the year, it stays in your account and earns interest. Your HSA funds, including Snyder's-Lance contributions, are always yours to keep—even if you later change medical plans or leave the company.

To qualify for an HSA, you:

- ✔ Must be enrolled in Blue Options HSA medical plan;
- ✔ Must have a valid Social Security Number;
- ✔ Can't be enrolled in Medicare or another health insurance plan, with certain exceptions;
- ✔ Can't participate in a healthcare flexible spending account (FSA) or Health Reimbursement Account (HRA), including one through your spouse's/ domestic partner's employer;
- ✔ Can't be claimed as a dependent on someone else's tax return;
- ✔ Can't be a recipient of Veterans Affairs benefits within the past three months (unless for preventive care or a service-related disability).

2018 Contribution Limits

Blue Options HSA coverage for	Snyder's-Lance contributes up to*	You may contribute up to
Employee Only	\$500 (\$9.62 per week)	\$2,950
Employee + Spouse, Employee + Child(ren), or Family	\$1,000 (\$19.23 per week)	\$5,850

Note: If you are age 55 or older, you can contribute an additional \$1,000 in catch-up contributions.

**Company contributions are provided on a pro-rated basis each pay period to eligible employees. You must enroll in the Blue Options HSA medical plan and open an HSA with Fidelity Investments to make and/or receive contributions.*

How to Open the HSA

If you are eligible to open an HSA (see list above), visit netbenefits.com and login to your Fidelity NetBenefits account. From the home page, follow the instructions to open your HSA.

Once your HSA is open, you will receive a debit card from Fidelity, the HSA administrator, for use in paying eligible healthcare expenses.

Triple Tax Benefits



Pay no taxes on the money you (or Snyder's-Lance) put in



Pay no taxes on the interest or investment returns you earn



Pay no taxes on the money you use for eligible health care expenses

Pay for Expenses with Your Fidelity HSA Debit Card

You can use the Fidelity HSA debit card to pay for qualified medical expenses. Just swipe your HSA debit card at the time of your doctor or dentist appointments or for qualified items at the pharmacy or other retailer.



Flexible Spending Accounts

Flexible Spending Accounts (FSAs), administered by Health Equity, help you save money on taxes by paying for eligible out-of-pocket healthcare and dependent care expenses with pre-tax dollars. You choose the amount you want to contribute each paycheck and it is deposited directly into your FSA. You must elect these accounts each year. You cannot change your contribution rate during the year unless you experience a qualified life event like marriage or the birth of a child. So make sure you plan ahead! See *Making Mid-Year Changes* on [page 4](#).

Healthcare FSA

Even though your benefits cover many of your healthcare expenses, you may need to pay some costs out-of-pocket. You can contribute from \$260 to \$2,600 each year to the Healthcare FSA to pay for copays, deductibles and coinsurance related to your or your dependents' out-of-pocket medical, dental and vision care or prescription drug costs. The full amount you elect to contribute to your Healthcare FSA is available in your account on the first day of the plan year. Your contributions will be deducted from your paycheck evenly over the calendar year.

Eligible expenses include: Your out-of-pocket costs for doctor visit copays, prescription drugs, prescription eyeglasses, dental copays and deductibles, braces, contacts, hearing aids and much more.

Limited Purpose Healthcare FSA

If you choose the Blue Options HSA for medical coverage and open an HSA, IRS regulations prohibit you from participating in a Healthcare FSA. However, you can participate in a Limited Purpose Healthcare FSA, where your contributions are still tax-free, but your reimbursements are limited to eligible out-of-pocket dental and vision expenses only. You can contribute from \$260 to \$2,600 each year. For medical expenses, including deductibles and coinsurance, you can use your HSA.

Eligible expenses include: Your out-of-pocket costs for dental work, vision exam costs, and prescription eyeglasses.

Dependent Care FSA

The Dependent Care FSA offers you a tax-free way to pay yourself back for eligible dependent care expenses throughout the year. You can contribute between \$260 and \$5,000 each year to the Dependent Care FSA to pay for dependent daycare expenses on a pre-tax basis if both you and your spouse work, your spouse goes to school full-time or your spouse isn't able to care for him or herself. The IRS sets the maximum contribution, which is \$5,000 per family, per year.

Eligible expenses include: Daycare, summer day camp, after school programs, and preschool expenses for children 12 years old and younger or disabled dependents of any age. Sleep-away or overnight camps are not covered. You may also use this account to pay for adult daycare services for an elderly parent who is your tax dependent.



A Convenient Way to Pay for Health Care Expenses

Once enrolled in the Healthcare FSA, you will automatically receive an FSA Debit Card. The card makes it easy to use funds in your Healthcare FSA—and you don't pay any fees to use the card. You can use your debit card to pay eligible expenses at most healthcare providers that display the Visa® logo. Debit cards are for Healthcare FSAs only—*not for Dependent Care FSA expenses.*

If you decide not to use the debit card you may easily submit your claims on [healthequity.com](https://www.healthequity.com). Another easy way to receive reimbursement is through direct deposit. Visit [healthequity.com](https://www.healthequity.com) for more information.



To learn more about the FSAs visit [healthequity.com](https://www.healthequity.com).

(Continued from page 9)

Grace Period to Submit FSA Claims

Use it or lose it! Any money left in your flexible spending accounts at the end of the year will be forfeited under IRS rules. That's why it's so important that you plan your expenses carefully and conservatively and not put more money in your FSA than you think you'll spend within a year on things like copayments, coinsurance, drugs, and other allowed healthcare costs. For 2018, you have until **March 15, 2019** to incur eligible claims, and you can submit claims for reimbursement until **April 30, 2019**. Any balance in your 2018 account after April 30, 2019 will be forfeited.

Can I contribute to both an HSA and an FSA in the same year?

Yes. If you elect to contribute to both an HSA and a Healthcare FSA, your Healthcare FSA will be designated as a Limited Purpose FSA—which means you can use the FSA funds for only eligible dental and vision expenses. You can use your HSA for eligible medical expenses.

Dental

MetLife's PPO Dental plan gives you the freedom to choose any dentist. However, when you use in-network dentists and specialists, it means they have agreed to provide dental care for a discounted fee and the plan will pay a higher level of coverage. If you choose to go to a dentist who is not in the network, you pay more for services. Below is a summary of your two plan options.


	PDP Low	PDP High
Individual Deductible	\$75	\$50
Family Deductible	\$225	\$150
Annual Maximum Benefit*	\$1,000 per person	\$2,000 per person
The plan pays...		
Preventive Services	100%, no deductible	100%, no deductible
Basic Services (includes fillings and oral surgery)	50% after deductible	80% after deductible
Major Services (includes crowns, bridges and implants)	50% after deductible	50% after deductible
Orthodontia	Not covered	50% up to \$2,000 per person/lifetime**

* The annual maximum benefit is the most the plan will pay for Basic and Major services in a single year.

** The orthodontia lifetime maximum includes any orthodontia benefits you have received under any plan (even if the coverage was not with Snyder's-Lance or MetLife).

Dental Payroll Deductions

Coverage Level	PDP Low	PDP High
Weekly		
Employee Only	\$4.69	\$8.42
Employee + Spouse	\$9.70	\$17.46
Employee + Child(ren)	\$11.13	\$16.24
Employee + Family	\$17.89	\$27.39
Bi Weekly		
Employee Only	\$9.37	\$16.85
Employee + Spouse	\$19.39	\$34.92
Employee + Child(ren)	\$22.27	\$32.48
Employee + Family	\$35.77	\$54.79

 Visit metlife.com/dental to find an in-network dentist. When prompted, select the *PDP Plus* network. MetLife does not provide an ID card—all you need to do is tell your dental provider that you have MetLife dental coverage.

You pay costs on a pre-tax basis each paycheck

Vision

The vision plan, administered through VSP, provides coverage for routine eye exams, glasses and contact lenses. No ID card is needed, and you have no claim forms to complete if you see a VSP doctor or retail chain affiliate. VSP also offers discounts on laser vision correction and additional glasses and sunglasses. Below is a summary of your two plan options.

	Signature Low		Signature High	
	In-Network	Out-of-Network*	In-Network	Out-of-Network*
Eye exam every calendar year	100% after \$15 copay	Up to \$50	100% after \$15 copay	Up to \$50
Eyeglasses	Covered every other calendar year:		Covered every calendar year:	
Frames	100% after \$30 copay	Up to \$70	100% after \$30 copay	Up to \$70
Lenses**	100% after \$30 copay	Up to...	100% after \$30 copay	Up to...
Single vision		\$50		\$50
Lined bifocal		\$75		\$75
Lined trifocal		\$100		\$100
Contacts in place of glasses	Covered every other calendar year:		Covered every calendar year:	
Conventional or disposable	Up to \$130	Up to \$105	Up to \$160	Up to \$160

*\$15 exam or \$30 prescription glasses copay is required before allowance is applied.

**Progressive lenses are covered with an in-network copay.


Vision Payroll Deductions

Coverage Level	Signature Low	Signature High
Weekly		
Employee Only	\$1.46	\$2.63
Employee + Spouse	\$2.08	\$3.19
Employee + Child(ren)	\$2.51	\$3.84
Employee + Family	\$4.00	\$7.20
Bi Weekly		
Employee Only	\$2.92	\$5.27
Employee + Spouse	\$4.16	\$6.38
Employee + Child(ren)	\$5.01	\$7.68
Employee + Family	\$8.01	\$14.40



TruHearing Program

VSP offers hearing aid discounts through their TruHearing program. Learn more at vsp.com/truhearing.

 Visit vsp.com or call **1-800-877-7195** for a list of in-network providers. VSP does not provide an ID card—all you need to do is tell your eye doctor that you have VSP vision coverage.

Basic Life Insurance and AD&D

Snyder's-Lance provides all benefits-eligible employees basic life and accidental death and dismemberment (AD&D) coverage equal to one and a half times annual base pay, up to a maximum of \$500,000.

For example: If you earn \$30,000 a year, your life/AD&D coverage is equal to \$45,000. This coverage is through Cigna.

Basic Life Age Reduction Schedule

If you are age 65 or older on January 1, 2018, your amount of employer-provided basic life and AD&D coverage is reduced as follows:

- Age 65 but less than 70: 67% of full benefit
- Age 70 or older: 50% of full benefit

Basic Life Imputed Income

While the company provides basic life insurance to you at no cost, the IRS requires that you pay tax on the value of this fringe benefit when it exceeds \$50k of value. If your basic life policy is valued at more than \$50,000, you may see a pair of GTL earnings and deduction codes on your pay statement to facilitate the taxation of the benefit.

Supplemental Life

You pay costs on a post-tax basis each paycheck

You can purchase additional life insurance for yourself and your dependents at competitive group rates. This coverage is offered through Cigna. See [page 13](#) for rates.

Employee Life Insurance

You can elect additional coverage for yourself in increments of \$25,000 to maximum of \$500,000. Evidence of insurability is required if you:

- Elect a coverage amount over \$250,000 upon initial eligibility
- Enroll for coverage after your initial eligibility
- Increase coverage after your initial eligibility

Spouse Life Insurance

You can elect spouse life insurance only if you also purchase supplemental life for yourself. This benefit is available in increments of \$25,000 to a maximum of \$100,000. Evidence of insurability is required if you:

- Elect a coverage amount over \$25,000 for spouse upon spouse's initial eligibility
- Enroll spouse for coverage after your spouse's initial eligibility
- Increase spouse coverage after your spouse's initial eligibility

Child Life Insurance

Child life insurance is available for you to purchase only if you also purchase supplemental life for yourself. This benefit provides \$10,000 in coverage for each eligible child for one flat rate, regardless of the number of children you cover. Evidence of Insurability is not required.

Supplemental Life Rates

For You and Your Spouse

Age as of 1/1/18	Monthly Rate per \$1,000 of Coverage			
	Employee		Spouse	
	Non-Tobacco User	Tobacco User	Non-Tobacco User	Tobacco User
Under 30	\$0.06	\$0.11	\$0.08	\$0.16
30 to 34	\$0.08	\$0.13	\$0.09	\$0.18
35 to 39	\$0.09	\$0.17	\$0.12	\$0.24
40 to 44	\$0.12	\$0.25	\$0.18	\$0.36
45 to 49	\$0.19	\$0.39	\$0.28	\$0.56
50 to 54	\$0.28	\$0.57	\$0.41	\$0.82
55 to 59	\$0.43	\$0.97	\$0.69	\$1.38
60 to 64	\$0.66	\$1.25	\$1.00	\$2.00
65 to 69	\$1.27	\$2.00	\$1.66	\$3.32
70 to 74	\$2.06	\$3.25	\$2.61	\$5.22
75 to 79	\$3.34	\$5.25	\$4.40	\$8.80
80+	\$5.41	\$8.50	\$7.50	\$15.00

Calculate your Payroll Deduction

① Write in the amount of coverage you would like to purchase:		\$
② Multiply by the rate from the chart above	x	\$
③ Divide by 1,000	÷ 1,000	\$
④ Multiply by 12	x 12	\$
⑤ Divide by 52 if paid weekly	÷ 52	\$
	OR	
Divide by 26 if paid biweekly	÷ 26	\$

For Your Child

Payroll Deduction for \$10,000 Child Life Benefit	
Weekly	\$0.35
Bi-weekly	\$0.69



Naming a Beneficiary

It's important to designate a beneficiary for your life insurance benefits and to keep that information up-to-date. Even if you waive elective coverage, you must designate a beneficiary for the company-provided basic plans. You can designate a beneficiary online at the Benefits Center by clicking the Designate a Beneficiary quick link on the home page.

Conversion and Portability

If you leave the company, you have the option of taking your basic and/or supplemental life insurance with you through the conversion and portability features offered through Cigna. Contact Cigna at **1-800-423-1282**.

Evidence of Insurability

Evidence of Insurability (EOI), or proof of good health, is required if you elect supplemental life insurance as a newly eligible employee for an amount over \$250,000 for employee coverage or over \$25,000 for spouse coverage. EOI is also required if you elect to increase coverage after your initial eligibility. If an EOI form is required, one will be sent to you after you enroll.

You pay costs on a post-tax basis each paycheck

Snyder's-Lance provides coverage at no cost to you

Voluntary AD&D

Voluntary AD&D Insurance, offered through Zurich, pays benefits if an accident leads to serious injury (for example, loss of limb, hearing or vision loss, paralysis) or death. You can purchase coverage for yourself or for your family, in increments of \$25,000 to a maximum of \$500,000. If you choose family coverage, your spouse is insured for 50% of your covered amount and your children are insured for 10% of your covered amount.

Age Reduction Schedule

Your benefit amount will be reduced beginning at age 70. Reductions are effective at the end of the calendar year in which you reach one of these age milestones. Spouse coverage ends when he/she reaches age 70.

Age	Reduced Coverage
70	65% of benefit
75	45% of benefit
80	30% of benefit
85	15% of benefit

Calculate Your Payroll Deduction

You pay a rate based on the amount of coverage and whether you choose Individual or Family AD&D coverage. Fill in the amount (how much coverage you want) and your rate multiplier (whether individual or family coverage is elected) to determine your per-paycheck costs.

① Write in the amount of coverage:		\$
② Multiply by 0.0175 (individual) or by 0.02625 (family)	x	\$
③ Divide by 1,000	÷ 1,000	\$
④ Multiply by 12	x 12	\$
⑤ Divide by 52 if paid weekly	÷ 52	\$
	OR	
Divide by 26 if paid biweekly	÷ 26	\$

Disability

If you are ill or have a non-work related injury and are unable to work, Snyder's-Lance has benefits to protect you and minimize your financial worries. Snyder's-Lance provides short-term disability (STD) and long-term disability (LTD) coverage at no cost to eligible employees.

Short-Term Disability

Short-term disability coverage replaces 60% to 100% of your pay, depending on your position. Once approved, STD begins to pay benefits right away if you have a non-work injury or after seven days for illness, and continues for up to 26 weeks.

Long-Term Disability

Long-term disability coverage, provided through Cigna, replaces 60% of your earnings up to a \$15,000 per month* benefit. Once approved, LTD starts the later of when your STD benefits end or 180 days.

**LTD coverage coordinates with other disability income replacement benefits, such as Social Security, Workers' Compensation, retirement benefits and military benefits.*

Why Is Disability Coverage Important?

Extended medical issues (either a result of non-work accident or illness), and the bills and lost income that follow, are the source of many cases of financial hardship in this country. According to the Social Security Administration, just over one in four of today's 20-year-olds is likely to become disabled for some length of time before reaching age 67. That's why Snyder's-Lance makes income protection a key part of your benefits package.



To request a disability or other company leave of absence, contact Cigna at **1-888-842-4462**. Be sure to also notify your manager and Human Resources Representative.



Financial Benefits

Retirement Savings Plan

The 401(k) Retirement Savings Plan gives you the convenience of saving through automatic payroll deductions as well as valuable tax advantages. If you have not enrolled within 30 days of your hire date, you are automatically enrolled into the plan with a pre-tax contribution rate of 4% of your salary and are also enrolled in the Automatic Increase Program, which increases the amount you defer by 1% on an annual basis, up to a maximum of 12%. You may increase, decrease or stop contributions at any time. You may choose to contribute on a pre-tax or ROTH (post-tax) basis. To help your savings grow, Snyder's-Lance matches 100% of the first 4% and 50% of the next 1% of the eligible compensation that you contribute.

To learn more, contact Fidelity Investments at **1-800-835-5095** or visit netbenefits.com.

Stock Purchase Plan

Consider sharing in the financial success of the company through the Employee Stock Purchase Plan (ESPP). The ESPP lets you buy shares of Snyder's-Lance, Inc. Common Stock through convenient payroll deductions. You may deduct a minimum of 1% to a maximum of 10% on an after-tax basis per payroll period. You can change your deduction amount at any time. Plus, Snyder's-Lance helps your contribution grow by matching 10% of your eligible contributions.

You can enroll in the Plan online via netbenefits.com. Click on the *Enroll* link next to *Snyder's-Lance, Inc. ESPP* and follow the prompts. You may also enroll by calling Fidelity Investments at **1-800-544-9354**.

Snyder's-Lance provides this plan at no cost to you

Health Improvement Plan

In 2018, employees enrolled in the Snyder's-Lance Medical Plan can take steps to earn a cash reward for completing two Health Improvement Plan (HIP!) wellness activities.

Take Action

Online Wellness Assessment

**Complete by:
May 31, 2018**

Complete the online Wellness Assessment at SnackHip.com between **December 1, 2017 and May 31, 2018**. This confidential survey asks questions related to your lifestyle and health in order to give you a clear picture of your current health score and suggest personalized next steps to improve your overall wellbeing.

In-Person Preventive Exam

**Complete by:
October 31, 2018**

Schedule and attend an annual preventive exam with your doctor between **January 1 and October 31, 2018**. Having regular check-ins with your doctor is a great way to set realistic health goals, detect potential illnesses early, and get answers to your individual health questions. **To ensure the visit is free and to get credit for this activity, be sure to:**

- 1 Use an in-network physician,
- 2 Specify that you want a preventive exam only (not a diagnostic/sick visit), and
- 3 Present your Snyder's-Lance, Inc. Blue Cross Blue Shield of NC medical ID card when you check in at the doctor's office.

Get Rewarded

Earn \$300 Reward

**Paid out by:
January 31, 2019**

Participants must complete both activities by the given deadlines to be eligible for the Healthy Reward payment. Reward will be paid out in a regularly scheduled payroll in January 2019.

Cash rewards are subject to applicable taxation. Participants must be active, benefits eligible employees on the payout date to be eligible for reward.



Snyder's-Lance provides coverage at no cost to you

Employee Assistance Program

The Employee Assistance Program (EAP), offered through Optum, provides you and your household with free, confidential support to help you lead a happier and more productive life at home and at work. The EAP provides free, short-term counseling as well as other important resources to help you balance the demands of everyday life, like: referral services for childcare and eldercare, and assistance with financial and legal issues.

To get started, visit liveandworkwell.com and use access code **SLANCE** or call **1-866-248-4096**.

Snyder's-Lance provides this plan at no cost to you

Tobacco Cessation Program

It pays to quit using tobacco in so many ways—in better health, improved finances and even a boost in self-esteem. Now it can also help you save money on your medical premiums! If you and/or your spouse use tobacco products, you may participate in the free tobacco cessation program. Complete five calls in accordance with program guidelines and you may be eligible to have the medical plan Tobacco User Surcharge(s) dropped. Additionally, you may be eligible to receive a refund of surcharges you have already paid during the plan year.



Visit SnackHip.com to read the full Tobacco Cessation guidelines and for the number to call to enroll!

Kick the habit & save!

Beginning December 1, 2017, call **1-800-354-1721** to enroll. Complete five calls by **May 31, 2018**, and you may qualify to have the 2018 medical plan tobacco user surcharge(s) stopped and reimbursed.

Other Programs

Offered free through Cigna

Identity Theft Assistance

Use the online tips and prevention kit to help stop identity theft before it happens. If your identity is stolen, we can help. Just call our personal case managers for step-by-step help with everything from identity theft to credit card fraud to emergency travel arrangements. Real-time support is available anytime, from anywhere in the world.



To get started, call **1-888-226-4567** and let your case manager know you're in the Cigna Identify Theft program, group #57.

Will Preparation and Estate Planning

Help protect your and your family's financial future. This simple, online will preparation tool lets you create a customized will built around your state-specific laws. You can also create other legal documents, like a living will and power of attorney document. It's easy, safe and secure.



To get started, visit CignaWillCenter.com.

Health Advocate Is Here to Help!

Need help navigating your healthcare benefits? Health Advocate is here to help answer questions, guide you to appropriate resources, and intervene on your behalf for confusing or frustrating healthcare issues. Learn more at members.healthadvocate.com and call **1-866-799-2725** anytime you need help with:

- Understanding claims and billing
- Figuring out eligibility
- Getting care authorized
- Finding the right doctor or provider
- Calculating your out-of-pocket costs



How to Enroll Online

The elections you make during your enrollment period are effective for the 2018 plan year. During your initial new hire enrollment and the annual Open Enrollment period, you may add, drop, or make changes to your benefits.

To enroll for benefits:

- 1 Sign in to your profile at SnackHip.com.
 - If you are a first time user, register for an account using your personal information (such as Birthdate & Unique ID) and our Employer/Wellness Group Number **75343**. You choose your username and password, so make it something you'll remember!
 - If you are already registered, you can get to SnackHip.com from the single-sign on application at sso.snyderslance.com.
- 2 Click on the **Benefits Center** link under the *My Benefits* menu.
- 3 From the Benefits Center homepage, choose the **2018 Enrollment Start Here!** button to begin the enrollment process.
- 4 Carefully **answer all questions** and **make selections for each benefit plan**.
 - If you enroll in a medical plan, be sure to answer the **applicable surcharge questions** (see *Medical Surcharges* on [page 6](#)).
 - Be sure each dependent you wish to cover on a plan is listed under each benefit.
- 5 Once you have enrolled in or declined each plan, click the **Submit Enrollment and View Benefits Summary** link to complete your enrollment.
- 6 Email or print a copy of your confirmation page. Save this document for your records.

After enrolling, watch your mailbox for additional required next steps.



Be Prepared

You'll need to provide a Social Security Number and birthdate for each family member you add to coverage, so be sure to have this information handy when you enroll.



Questions?

- Contact your local HR representative
- Visit the Benefits Center
- Attend a meeting at your location or a webinar if you are a remote employee

If you don't enroll during your Enrollment Period:



When you are a new employee or are newly eligible for benefits

If you are a new hire or newly eligible for benefits, you should elect your benefits in the online Benefits Center at SnackHip.com prior to your effective date for coverage. Your effective date for the benefits you elect is the first of the month following completion of 30 days of service (see *Eligibility* on [page 3](#)).

For example, if you are hired on October 5, your benefits effective date would be December 1 and you would have until November 30 to enroll for both your 2017 and 2018 benefits.

If you do not go to SnackHip.com prior to your effective date and elect or decline benefits, you will be enrolled in these default benefits for 2018:

- ✓ Employee Only coverage in the Blue Options HSA medical plan
- ✓ Basic Life and AD&D coverage for self-only
- ✓ Short Term Disability coverage
- ✓ Long Term Disability coverage

During the annual Open Enrollment period

Open Enrollment for 2018 benefits is **November 7, 2017 through November 21, 2017.**

If you are a benefits eligible employee and do not complete the annual enrollment process during Open Enrollment, your 2017 benefit elections will be rolled over to 2018 **with these exceptions:**



To participate in a Healthcare, Limited Purpose Healthcare, or Dependent Care **Flexible Spending Account**, you must make elections each year.



To contribute your own funds to a **Health Savings Account**, you must set your contribution amount each year.



Spousal Surcharge. If you cover your spouse on the medical plan, you must certify online each year whether or not he/she has access to coverage under another employer-sponsored medical plan. If you don't answer the spousal surcharge question by **November 21, 2017**, you will automatically incur a **\$40 per week** spousal surcharge for 2018.



Tobacco Surcharge(s). You must certify online whether or not you and/or your spouse have used tobacco in the last six months. If you or your covered spouse use tobacco products and are on the medical plan, you will be assessed a **\$25 per week** surcharge (**\$50 per week** if both you and your spouse use tobacco products). If you do not certify your tobacco use status by **November 21, 2017** you will automatically be assessed the surcharge(s) for the 2018 calendar year.

Changes to most benefits cannot be made outside of an Enrollment Period unless you experience a qualified life event. See *Making Mid-Year Changes* on [page 4](#) for more information.

Benefit Contacts

Benefit	Telephone Number	Web Address
Medical: BCBSNC	1-877-275-9787	blueconnectnc.com
Pre-Enrollment Resources	1-877-224-3305	bcbsnc.com/content/snyderslance
Prescription Drugs	1-877-275-9787	blueconnectnc.com
Healthy Pregnancy Program	1-855-301-2229	blueconnectnc.com
Disease Management	1-800-260-0091	blueconnectnc.com
Nurse Line	1-877-477-2424	blueconnectnc.com
Health Advocacy Services	1-866-799-2725	members.healthadvocate.com
Health Savings Account: Fidelity	1-800-544-3716	netbenefits.com
Flexible Spending Accounts: Health Equity	1-866-346-5800	my.healthequity.com
Dental: MetLife	1-800-438-6388	metlife.com/dental
Vision: VSP	1-800-877-7195	vsp.com
Disability & Leave Requests: Cigna	1-888-842-4462	my.cigna.com
401k Retirement Savings Plan: Fidelity	1-800-835-5095	netbenefits.com
Employee Stock Purchase: Fidelity	1-800-544-9354	netbenefits.com
Employee Assistance Program: Optum	1-866-248-4096	liveandworkwell.com (use code: slance)



This 2018 Benefits Guide is a Summary of Material Modifications providing key elements of the Snyder's-Lance, Inc. Benefits Program and changes to its plans effective January 1, 2018. Snyder's-Lance has made every attempt to ensure the accuracy of this information. If there is any discrepancy between this guide and the insurance contracts or other legal documents, the contracts and legal documents will always govern. Snyder's-Lance reserves the right to amend or terminate these plans at any time, for any reason, according to the amendment procedures described in the legal documents. This guide does not create any employment agreement of any kind or a guarantee of continued employment with Snyder's-Lance, Inc.