

# Spectrum Brands

WE MAKE LIVING **BETTER** AT HOME™



2026 Puerto Rico Employee Benefits

# A MESSAGE FROM THE SPECTRUM BRANDS' BENEFITS TEAM

Welcome to your 2026 benefits guide. This guide highlights important benefits information available to you.

Spectrum Brands remains dedicated to building and investing in health and wellness programs that benefit you and your family. With you in mind, we continue to offer competitive programs and services to help you maintain a healthy lifestyle. Over the last several years, Spectrum Brands has maintained minimal cost increases to your benefit costs while continuing to provide consistent and competitive benefit offerings.

Open Enrollment is your annual opportunity to review and make changes to your benefits based on your personal and family needs for the upcoming year. This year's open enrollment is passive, meaning no action is needed if you want to continue your current benefit elections.

For more information, please visit [My Benefits Life](#) to view materials for the 2026 Open Enrollment.

To receive assistance with your open enrollment questions, contact the Spectrum Brands' Benefits Team by:

- Email at [benefits@spectrumbrands.com](mailto:benefits@spectrumbrands.com)
- Phone at (800) 881-2562

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**Need Help?** If you have any questions, contact the Spectrum Brands' Benefits Team at [benefits@spectrumbrands.com](mailto:benefits@spectrumbrands.com) or (800) 881-2562.

**This guide is an overview** and does not provide a complete description of all benefit provisions. For more detailed information, please refer to your plan benefit booklets or summary plan descriptions (SPDs). The plan benefit booklets determine how all benefits are paid.



## WHAT'S NEW IN 2026

Please note a few enhancements and modifications to the Spectrum Brands benefits offerings:

### **Medical Plan Changes:**

Beginning January 1, 2026, contributions have changed. Refer to page 7 for details.

### **Vision Plan Upgrade**

In an effort to provide you with the best benefits, Spectrum Brands has increased the vision allowance for frames from \$175 to \$200 to give you more coverage at no cost increase.

### **New! Life/Disability/FMLA Carrier Change:**

Spectrum Brands will be terminating coverage with Reliance Standard and moving to New York Life for life and disability coverages. Refer to page 16 for additional plan design changes. New York Life will also handle Voluntary Benefits and coverage with Voya will be terminated.

### **New! Tobacco Cessation Program Update:**

Effective January 1, 2026, Spectrum Brands will be transitioning Tobacco Cessation assistance to UBreathe, administered by CuraLinc.

### **New! Introducing My Benefits Life**

Spectrum Brands is launching a new benefits website that gives employees and their dependents 24/7 access to all their benefits information. This website makes accessing your benefits information easy, with plan information, open enrollment details, tips for new hires, perks, time off, and more.

### **Review your personal information and beneficiaries**

While enrolling, we encourage you to take a moment and ensure that your personal information is accurate and correct. Check your address, phone, email and update if necessary. Also, review your beneficiaries for life insurance, HSA, and retirement plans to ensure they are up to date.

# WHO'S ELIGIBLE FOR BENEFITS



## Spouse/Domestic Partner Carve-Out

If your spouse/domestic partner has access to another qualified group health plan, they are not eligible for the medical plan with Spectrum Brands.

## Domestic partner notice

Please note that domestic partner coverage can differ from spouse coverage when Medicare eligibility is a factor.

Medicare is the primary payer for domestic partners with large employer group health plan coverage if a domestic partner can get Medicare due to their age and has group health plan coverage through their partner's current employer.

## Employees

You are eligible if you are a regular full-time employee scheduled to work 30 or more hours per week.

## Eligible dependents

- Spouse or domestic partner (if they are not eligible under another medical plan)
- Biological, adopted, or step-children up to end of the month they turn age 26 (Domestic partner's child(ren) are eligible)
- Children age 26 or older who are incapable of self-support due to a mental or physical condition that existed prior to age 26 and who were eligible for coverage as dependents prior to age 26
- Children named in a qualified medical child support order (QMCSO)
- Children for whom the employee assumes legal guardianship

For additional coverage information, please refer to the Spectrum Brands' SPD.

If you add a dependent, you will be required to provide documentation certifying the eligibility of your dependents. Call the Dependent Verification Center at (800) 725-5810 or visit [spectrumbrands.benefitsnow.com](http://spectrumbrands.benefitsnow.com) and click on Documentation Required for your dependents under To-Do's. You have 30 days from enrollment to verify your dependent(s) eligibility.

## When you can enroll

New employees must enroll within 30 days of becoming eligible. **Benefits begin on your date of hire.**

Existing employees can enroll during the annual open enrollment period.

**If you miss the enrollment deadline, you'll need to wait until the next open enrollment period, unless you experience a qualifying life event.**

# CHANGING YOUR BENEFITS

## Life happens

A change in your life may allow you to update your benefit choices. Watch the video for a quick take on your options.

[Click to play video](#)

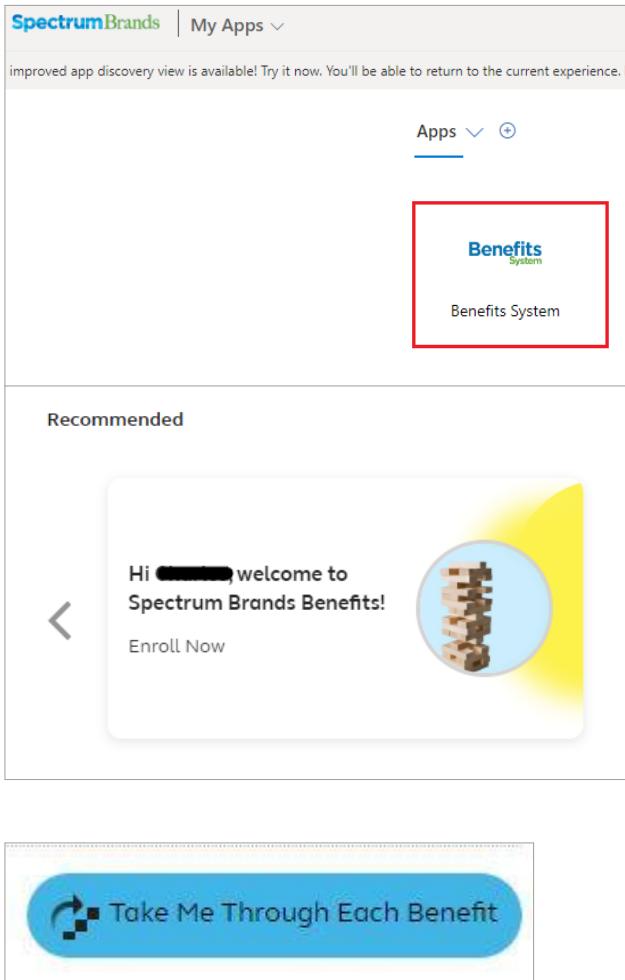


Outside of open enrollment, you may be able to enroll or make changes to your benefit elections if you have a life event change including:

- Change in legal marital status
- Change in number of dependents or dependent eligibility status
- Change in employment status that affects eligibility for you, your spouse/domestic partner, or dependent child(ren)
- Change in residence that affects access to network providers
- Change in your health coverage or your spouse's/domestic partner's coverage due to your spouse's/domestic partner's employment
- Change in your or a dependent's eligibility for Medicare or Medicaid
- Court order requiring coverage for your child
- "Special enrollment event" under the Health Insurance Portability and Accountability Act (HIPAA), including a new dependent by marriage, birth or adoption, or loss of coverage under another health insurance plan
- Event allowed under the Children's Health Insurance Program (CHIP) Reauthorization Act (you have 60 days to request enrollment due to events allowed under CHIP).

You must submit any changes within 30 days of the event.

# HOW TO ENROLL



The screenshot shows the 'My Apps' section of the Spectrum Brands Benefits System. At the top, there is a message: 'Improved app discovery view is available! Try it now. You'll be able to return to the current experience.' Below this, there is a 'Apps' dropdown and a red box highlighting the 'Benefits System' app. The 'Benefits System' app has a blue icon and the text 'Benefits System'. Below the apps, there is a 'Recommended' section with a message: 'Hi [REDACTED], welcome to Spectrum Brands Benefits!' and a 'Enroll Now' button. At the bottom of the screenshot, there is a blue button with a circular arrow icon and the text 'Take Me Through Each Benefit'.

## Passive Open Enrollment for 2026

For those employees who do not wish to make any changes to their current elections, your benefit selections will roll-over to the 2026 plan year automatically.

1. To start the enrollment process, log in to [MyApps](https://myapps.microsoft.com) (myapps.microsoft.com) and click on **Benefits System**.
2. Click the blue **Enroll Now** button. Verify your personal information.
3. Ready to enroll? Once you've reached the Summary of Your Benefit Elections page, click the blue **Take Me Through Each Benefit** button to start selecting your 2026 benefits.
4. Review your elections and submit.
5. Don't forget to enter or review your beneficiary information by hovering over your name in the top right corner of the screen and clicking on Beneficiaries.
6. You will receive a confirmation statement of your 2026 benefit elections at your home shortly after enrolling.

## Connect to your benefits on the go when you need them most.

- **Enroll in benefits.** Conveniently select the best coverage for you right from your tablet or smartphone.
- **Find benefits information.** Easy access to all your health and welfare benefits information.

Download the  
**Alight Mobile App**  
Visit [alight.com/app](https://alight.com/app)



**Need Help?** If you have any questions, contact the Spectrum Brands' Benefits Team at [benefits@spectrumbrands.com](mailto:benefits@spectrumbrands.com) or (800) 881-2562.

# MEDICAL AND DENTAL PLANS

You pay the deductible and copayment (\$). The coinsurance (%) shows what you pay after the deductible has been met.

BASIC SERVICES	
Office Visits Generalist/specialist/sub-specialist	\$5/\$10/\$10 Copay
General Hospitalization	\$50 Copay
X-rays, Labs, Diagnostic Tests	25% Coinsurance
Lithotripsy & Cardiovascular Procedures	25% Coinsurance
Emergency Room	\$50/\$25 Copay
MAJOR MEDICAL	
Major Medical Care	20% Coinsurance
Requires pre-certification for services outside of Puerto Rico	
PHARMACY	
30 DAY SUPPLY	
Level 1: Generic	\$5 Copay
Level 2: Preferred Brand	\$10 Copay
Level 3: No Preferred Brand	\$15 Copay
Level 4: Specialty	20% Coinsurance w/ \$100 maximum
Includes Step Therapy Program for new members. If plan member prefers brand name drug, they will be responsible for generic drug copay and the difference between the cost of the brand and generic drug.	
FLEX 90 AND MAIL ORDER PROGRAMS WITH A 90 DAY SUPPLY	
Level 1: Generic	\$10 Copay
Level 2: Preferred Brand	\$20 Copay
Level 3: No Preferred Brand	\$30 Copay
Level 4: Specialty	90-day supply is not allowed
DENTAL	
Basic, Preventive & Diagnostic Care	100% Coverage
Composite Posterior Teeth and Oral Surgery	30% Coinsurance
Space Maintainers	20% Coinsurance
Prosthesis	50% Coinsurance
Removable Partial Prosthesis	57% Coinsurance
Lifetime Orthodontic Benefit per person	100% Coverage with \$1,000 Maximum
Periodontal Services per year	100% Coverage with \$1,000 Maximum

Coverage Level	Employee Bi-Weekly Contribution (24 deductions)	Employee Weekly Contribution (52 deductions)
Employee Only	\$61.03	\$28.17
Employee + 1	\$111.13	\$51.29
Employee + Family	\$142.92	\$65.96

# VISION PLAN

Spectrum Brands vision coverage is through VSP. Your vision checkup is fully covered after your Exam copay. The out-of-network amounts listed reflect how much you could be reimbursed. The following chart includes highlights of the plan.

Spectrum Brands Vision Plan – VSP Advantage Network		
Vision Care Services*		
	In-Network	Out-of-Network
<b>Exam</b>	\$15 copay	Up to \$45
<b>Contact lens fit &amp; follow-up</b>	Up to \$60 copay	N/A
<b>Frames (Up to plan allowance, then 20% off for in-network)</b>		
Retail Frame Allowance	\$200 Allowance	Up to \$50
Featured Frame Brand Allowance	\$250 Allowance	Up to \$50
<b>Standard Lenses</b>		
Single	\$25 Copay	Up to \$30
Bifocal	\$25 Copay	Up to \$50
Trifocal	\$25 Copay	Up to \$60
<b>Contacts (Elective)</b>	\$200 Allowance	Up to \$100
<b>Contacts (Medically Necessary)</b>	\$25 Copay	Up to \$210
<b>Frequency</b>		
Exam		Calendar Year
Lenses or Contact Lenses		Calendar Year
Frames		Every Other Calendar Year

\*This chart is a summary of benefits. Plan provisions are governed by the Plan Document or specific contractual agreement.

<b>Additional Vision Benefits</b> Create an account at <a href="http://vsp.com">vsp.com</a>	<b>TruHearing</b> Hearing aid discount program – up to 60%. Must mention VSP. Call (877) 396-7194
	<b>Eyeconic</b> Online shopping for contacts, glasses, and sunglasses – Applies your vision benefit through the website

## Contact Information:

**VSP**

- (800) 877-7195
- [www.vsp.com](http://www.vsp.com)

**You do not need an ID card to access your vision benefits.**

Employee Contribution	Weekly (52 deductions)	Bi-Weekly (24 deductions)
Employee	\$1.62	\$3.50
Employee + Spouse	\$3.23	\$7.00
Employee + Child(ren)	\$3.49	\$7.56
Family	\$5.58	\$12.09

# LIFE AND AD&D INSURANCE

Basic life insurance pays your beneficiary a lump sum benefit if you pass away. Accidental death & dismemberment (AD&D) coverage provides a benefit to you if you suffer from loss of a limb, speech, sight, or hearing, or to your beneficiary if you have a fatal accident. This insurance is administered by New York Life.



## Basic Life & AD&D Insurance

### Basic Life & AD&D Insurance – Paid in full by Spectrum Brands

Benefit Amount	1x your annual salary to a maximum of \$500,000.
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## Learn More about Life Insurance

More benefit details and rates can be found on the [Basic Life Summary Sheet](#) and the [Voluntary Life Summary Sheet](#)

## A Note About Taxes

Company-provided life insurance coverage over \$50,000 is considered a taxable benefit. The value of the benefit over \$50,000 will be reported as taxable income on your annual W-2 form.

## UPDATE YOUR BENEFICIARIES

It's important to designate and update your life insurance beneficiaries. Update your beneficiaries in the Alight enrollment system.

## Voluntary Life & AD&D Insurance

Voluntary life insurance allows you to purchase additional life insurance to protect your family's financial security. Coverage is available for your spouse and/or child(ren) if you purchase coverage for yourself. Voluntary AD&D is elected separately and is not subject to Evidence of Insurability.

Voluntary Life & AD&D Insurance – Paid in full by Employee	
<b>Employee</b>	Elect from \$10,000 to \$500,000 in \$10,000 increments. Guaranteed issue of \$150,000.*
<b>Spouse</b>	Elect from \$5,000 to \$500,000 in \$5,000 increments. Cannot exceed 100% of the employee's voluntary life election. Guaranteed issue of \$100,000.*
<b>Child(ren)</b>	Elect from \$10,000 up to \$20,000, in \$2,000 increments. Guaranteed issue of \$10,000.

\*Amounts over Guaranteed issue are subject to evidence of insurability

## Incremental Coverage Increase

This year during Open Enrollment, you may increase your voluntary life insurance coverage up to the Guarantee Issue Amount without completing Evidence of insurability. Going forward, you can increase your voluntary coverage amount by one increment of coverage without providing evidence of insurability up to the guaranteed issue amount during open enrollment only. For Qualifying Life events, you can elect up to the Guarantee Issue amount without completing Evidence of Insurability.

## What Is Evidence of Insurability?

This is the additional information about your health status you will need to provide to the insurer to qualify for the coverage you elected that is over and above the guaranteed issue amount.

## What Is Guaranteed Issue?

This is the maximum amount of coverage you can elect without needing to provide evidence of insurability.

# SHORT-TERM DISABILITY (STD) INSURANCE



## Learn More about Short-Term Disability Insurance

More benefit details can be found on the [Short-Term Disability Highlight sheet](#)

## STD Benefits

Short-term disability (STD) insurance replaces part of your income for non-occupational, limited duration issues such as:

- Pregnancy issues and childbirth recovery
- Prolonged illness or injury
- Surgery and recovery time

Eligible employees are automatically enrolled in the Short-Term Disability insurance plan following 60 days of continuous employment.

Spectrum Brands pays the cost of this coverage.

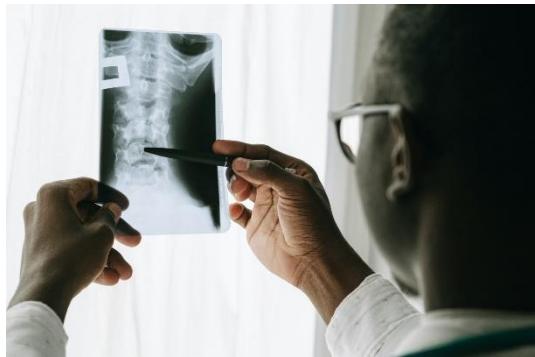
Short-Term Disability Plan	
<b>Weekly benefit amount</b>	75% of base wage up to a maximum of \$4,500.
<b>Benefits begin</b>	Immediately if disability is due to an injury, accident, or hospitalization. Otherwise, begin after 7 days for an illness without hospitalization.
<b>Maximum payment period</b>	Accident (injury): 16 weeks of benefit payments Sickness (Illness): 15 weeks of benefit payments

## Contact Information

### New York Life:

- 888-842-4462
- [www.mynylgbscom](http://www.mynylgbscom)

# LONG-TERM DISABILITY (LTD) INSURANCE



## Learn More about Long-Term Disability Insurance

More benefit details can be found on the [Long-Term Disability Highlight sheet](#)

## LTD Benefits

Long-term disability (LTD) insurance replaces part of your income for longer term issues such as:

- Debilitating illness (cancer, heart disease, etc.)
- Serious injuries (accident, etc.)
- Heart attack, stroke

Eligible employees are automatically enrolled in the Basic Long-Term Disability insurance plan following 60 days of continuous employment.

If you qualify, LTD benefits begin after STD benefits end.

Spectrum Brands pays the cost of this coverage.

Payments may be reduced by state, federal, or private disability benefits you receive while disabled.

Long-Term Disability (Basic)	
<b>Monthly benefit amount</b>	50% of your base wage to a maximum of \$15,000
<b>Benefits begin</b>	After 90 days of disability, if disability is due to an injury, accident, or hospitalization.
<b>Maximum payment period</b>	End of disability or Social Security Normal Retirement Age (SSNRA)

## Contact Information

### New York Life:

- 888-842-4462
- [www.mynylgscom](http://www.mynylgscom)

## Voluntary Long-Term Disability (Buy-up)

<b>Monthly benefit amount</b>	67% of your base wage up to a maximum of \$15,000
<b>Benefits begin</b>	After 90 days of disability, if disability is due to an injury, accident, or hospitalization.
<b>Maximum payment period</b>	End of disability or Social Security Normal Retirement Age (SSNRA)

New hires who enroll in the Voluntary Long-Term Disability (Buy-up) plan will not be required to complete an evidence of insurability (EOI) form. If you enroll in the Voluntary Long-Term Disability (Buy-up) plan after new hire enrollment, you will be required to complete an evidence of insurability (EOI) form.

# 401(k)



## 401(k) Retirement Savings Plan

Our 401(k) Retirement Savings Plan helps you save for retirement. The plan offers tax savings NOW through pre-tax contributions and/or tax savings AFTER you retire through a Roth after-tax option. Note that the employer match does not count towards the annual contribution limit.

All regular employees are eligible to join the plan upon hire. If you do not make an active election or opt out of the plan within the first 45 days of employment, you will be auto-enrolled into the plan at a 7% pre-tax contribution rate. Your default investment will be a target date fund based on your normal retirement age.

Visit Vanguard at [vanguard.com/retirementplans](https://vanguard.com/retirementplans) to manage your account, investments and contributions.

Vanguard offers a variety of quality investment options. You'll also have access to special services such as automatic account rebalancing and personal investment assistance from a licensed investment counselor.

<b>Maximum annual contribution limit</b>	<b>Currently, you can contribute up to \$23,500 per year.</b> If you're age 50 or over, save an additional \$7,500 per year. If you are age 60 – 63, the catch-up contribution limit is \$11,250.
<b>Spectrum Brands matching contributions</b>	100% of the first 3% that you contribute, plus 50% of the next 2% you contribute, each pay period. Available on any combination of pre-tax and Roth contributions you choose, up to 5%.
<b>Secure 2.0 Catch Up Contributions</b>	Beginning in 2026, participants who are age 50 years and older and who had FICA wages that exceeded \$145,000 in 2025 will be required to make their catch-up contributions on an after-tax Roth basis instead of pre-tax.

**To begin participating or to change your elections and investments, contact Vanguard: [ownyourfuture.vanguard.com](https://ownyourfuture.vanguard.com) or (800) 523-1188**

# NEW! INTRODUCING MY BENEFITS LIFE

Visit [spectrumbrands.mybenefits.life](http://spectrumbrands.mybenefits.life) or scan the code to get started.



## Benefits – whenever, wherever

Spectrum Brands is introducing a new benefits website that gives employees and their dependents 24/7 access to all their benefits information.

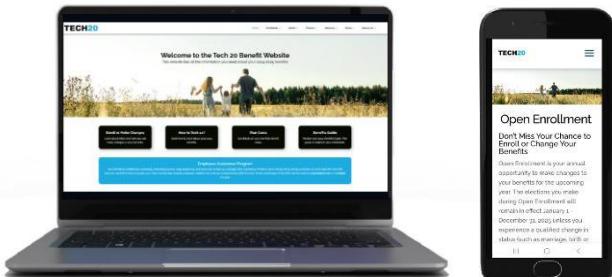
Spectrum Brands' Benefit Website makes communicating benefits information easy, with benefit plan information, open enrollment details, tips for new hires, perks, time off, and more.

### Members get immediate access to:

- Eligibility information
- Information on current benefit offerings
- Plan details, plan summaries, documents and more
- Provider contacts and web links
- Open Enrollment information

### Site Features:

- No app to download
- Comprehensive content on all your benefit plans
- Easy access – no login to remember



Spectrum Brands

[Home](#) [Enrollment](#) [Health & Welfare](#) [Finance](#) [Wellness](#) [Extras](#) [Resources](#)



### Welcome to Your Benefits Website

All the information you need to choose and use your benefits.

# EMPLOYEE ASSISTANCE PROGRAM (EAP)



## CONTACT THE EAP (888) 881-LINC (5462)

[supportlinc.com](http://supportlinc.com)  
Company Code: spb

### Getting Started is Easy

1. Visit [supportlinc.com](http://supportlinc.com)

2. Create a new account using  
**company code: spb**

To access services, call SupportLinc at (888) 881-5462 to help navigate your needs and personally arrange services to meet your end goal.



Download the  
mobile app

## EAP resources for you and your household members at no cost

SupportLinc is a free, confidential, resource that helps you and your dependents 24/7 with life challenges. Every one of us experiences demands of our time and energy, both on and off the job. While striving to be successful at work, we also want to develop as a parent, grandparent, friend or partner; take better care of ourselves; solve legal and financial challenges, become more efficient; pursue personal interests and hobbies; maintain health family, social and work relationships; and learn how to balance it all.

Features include:

- **In-the-moment support.** Reach a licensed clinician by phone 24/7/365 when you call for assistance to help resolve work-related pressures, depression, stress, anxiety, grief, relationship problems, substance use or other emotional health concerns.
- **Short-term counseling** eight no-cost in-person or virtual (video) counseling sessions
- **Coaching** get five sessions with a Coach to boost your emotional fitness, learn healthy habits, establish new routines, build your resilience and more.
- **Work-life benefits** expert consultations for financial and legal issues and referrals for everyday needs such as child or elder care, pet care, home improvement, auto repair, education and housing needs.
- **Web portal and mobile app**
- **Text therapy**
- **Self-guided digital therapy**
- **Digital group support**
- **Mental Health Navigator**
- **And more!**

All requests for information or assistance are free and completely confidential. You can contact SupportLinc 24/7/365. Access support whenever needed, wherever it is most convenient for you.



# WELLNESS PROGRAM



## Member Support: Personify Health

- (888) 671-9395
- [join.personifyhealth.com/spectrumbrands](https://join.personifyhealth.com/spectrumbrands)

**Download the app:** Scan the code or visit the link:  
[app.personifyhealth.com](https://app.personifyhealth.com)

## Enhance your well-being at no cost!

Spectrum Brands strives to create a culture that supports well-being.

Wellness is a daily commitment to improving your body, mind and spirit. The Personify Health platform contains many tools that can help create a healthier you.

You can check out daily wellbeing tips, track Healthy Habits, take small steps with Journeys digital coaching, join your friends and coworkers in fun challenges, and so much more. And it's all available in one easy-to-use app so you always have what you need on the go. Connect devices, apps and activity trackers you already use to sync and automatically track health data like steps, sleep and mindful minutes.

All employees are eligible to join.

## Great Perks with Personify Health

With Personify Health you will be eligible for gift cards up to \$325 in gym membership reimbursements and up to \$185 for being active on the Personify Health platform.

Personify Health is committed to help you make small, everyday changes for your well-being and focus on the areas you want to improve the most. Visit [join.personifyhealth.com/spectrumbrands](https://join.personifyhealth.com/spectrumbrands) or scan the QR code below.



# EMPLOYEE DISCOUNT PROGRAM



Scan the QR code to access PerkSpot discounts on the go!

## Get Discounts On:

Appliances  
Concert Tickets  
Cell phone plans  
Car Rentals  
Clothing  
Shoes  
Electronics  
Furniture  
Pet Insurance  
And Much More!

## Discounts are available through PerkSpot!

### Perks Near You

See all the discounts near you, wherever you are! Discounts can be filtered by category and distance.

### Personalized Savings

Let us know what you're interested in and we'll show you more of the perks you'll most enjoy on the Home Page.

### Brands Fit For Every Lifestyle

The Brands page is an easy and quick way to search for discounts on the brands you like.

### Suggest a Business

Don't see what you're looking for? Head to the Suggest a Business page to suggest your favorite brands and local spots be added to your Discount Program.

### Dedicated Customer Support

PerkSpot's customer support team is here to help with any questions. We've included important information regarding our availability should you need assistance!

Hours: Monday – Friday 8:00am – 6:00pm CST

Phone: (866) 606-6057

Email: [cs@perkspot.com](mailto:cs@perkspot.com)

Help Center: [support.perkspot.com](mailto:support.perkspot.com)

## Pet Insurance Available through PerkSpot:

Liberty Mutual  
MetLife  
Nationwide  
PetsBest  
Lemonade  
Wagmo and more!

You choose the carrier and coverage you want for your pet all with significant savings. Just login to PerkSpot and search "pet insurance".

## Ready to save with PerkSpot?

Head to [spectrumbrands.perkspot.com](http://spectrumbrands.perkspot.com), click on "Create Your Account" and sign up with Access Code "SPB"!

# TIME AWAY FROM WORK



Spectrum Brands offers 12 paid holidays per year. The holiday schedule can be viewed on [My Benefits Life](#).

Vacation			
Hours Worked	Accumulation	Hours Per Month	Hours Per Year
20/week but less than 115/month	½ day/month	4	48
115 hours or more per month	1 ¼ days/month	10	120

Sick Days			
Hours Worked	Accumulation	Hours Per Month	Hours Per Year
20/week but less than 115/month	½ day/month	4	48
115 hours or more per month	1 day/month	8	96

Bereavement Leave	
Family Relationship	Number of Days
Spouse or Domestic Partner, Parent, Child, Sibling	Up to 5
Grandparent, Grandchild	Up to 3
In-Law Family (parent, child, sibling)	Up to 3
All other family	Up to 1

Parental Leave	
Paid parental leave provided at 100% of pay of up to 4 weeks to be used in 1-week increments within 6 months of birth, adoption or placement. This benefit is gender neutral (either parent can take Parental Leave)	

# SERVICE AWARDS & TUITION REIMBURSEMENT

## Service Awards

Spectrum Brands values your commitment and contribution and shows that recognition with service awards for employees who have met significant milestones in their career with Spectrum Brands.

When celebrating a milestone of 1, 3, 5, 10, 15, 20 and so on years of service, employees will receive a framed certificate with a message from our CEO, David Maura. In addition to the framed certificate, employees celebrating 5+ years of service will receive a booklet with instructions on how to redeem a gift. Gift amounts have been approved by the tax department, so this program will not require any income reporting.

Awards Program administered by OC Tanner



## Tuition Reimbursement

Spectrum Brands offers tuition reimbursement for degree and certification programs.

Employees with 6 months or more of employment are eligible to apply for Tuition Reimbursement Program. Planning and approvals for this needs to be done in advance of beginning education. More information can be located on [My Benefits Life](#) or by contacting your HR partner.



# GLOSSARY

AD&D Insurance	An insurance plan that pays a benefit to you or your beneficiary if you suffer from loss of a limb, speech, sight, or hearing, or if you have a fatal accident.
Allowed Amount	The maximum amount your plan will pay for a covered healthcare service.
Ambulatory Surgery Center (ASC)	A healthcare facility that specializes in same-day surgical procedures such as cataracts, colonoscopies, upper GI endoscopy, orthopedic surgery, and more.
Annual Limit	A cap on the benefits your plan will pay in a year. Limits may be placed on particular services such as prescriptions or hospitalizations. Annual limits may be placed on the dollar amount of covered services or on the number of visits that will be covered for a particular service. After an annual limit is reached, you must pay all associated health care costs for the rest of the plan year.
Balance Billing	In-network providers are not allowed to bill you for more than the plan's allowable charge, but out-of-network providers are. This is called balance billing. For example, if the provider's fee is \$100 but the plan's allowable charge is only \$70, an out-of-network provider may bill YOU for the \$30 difference (the balance). <b>Note:</b> Beginning January 1, 2022 the "No Surprises Act" provides protections against surprise billing for emergency services, air ambulance services, and certain services provided by a non-participating provider at a participating facility. For these services, the member's cost are generally limited to what the charge would have been if received in-network, leaving any balance to be settled between the insurer and the out-of-network provider. Consult your health plan documents for details.
Beneficiary	The person (or persons) that you name to be paid a benefit should you die. Beneficiaries are requested for life, AD&D, and retirement plans. You must name your beneficiary in advance.
Brand Name Drugs	A drug sold under its trademarked name. For example, Lipitor is the brand name of a common cholesterol medicine.
COBRA	A federal law that may allow you to temporarily continue healthcare coverage after your employment ends, based on certain qualifying events. If you elect COBRA (Consolidated Omnibus Budget Reconciliation Act) coverage, you pay 100% of the premiums, including any share your employer used to pay, plus a small administrative fee.
Claim	A request for payment that you or your health care provider submits to your healthcare plan after you receive services that may be covered.
Coinsurance	Your share of the cost of a healthcare visit or service. Coinsurance is expressed as a percentage and always adds up to 100%. For example, if the plan pays 70%, your coinsurance responsibility is 30% of the cost. If your plan has a deductible, you pay 100% of the cost until you meet your deductible amount.
Copayment	A flat fee you pay for some healthcare services, for example, a doctor's office visit. You pay the copayment (sometimes called a copay) at the time you receive care. In most cases, copays do not count toward the deductible.
Deductible	The amount of healthcare expenses you have to pay for with your own money before your health plan will pay. The deductible does not apply to preventive care and certain other services.
Deductible – Aggregate	Family coverage may have an aggregate or embedded deductible. Aggregate means your family must meet the entire family deductible before any individual expenses are covered.
Deductible – Embedded	Family coverage may have an aggregate or embedded deductible. Embedded means the plan begins to make payments for an individual member as soon as they reach their individual deductible.
Dental Basic Services	Services such as fillings, routine extractions and some oral surgery procedures.
Dental Diagnostic & Preventive	Generally includes routine cleanings, oral exams, X-rays, and fluoride treatments. Most plans limit preventive exams and cleanings to two times a year.
Dental Major Services	Complex or restorative dental work such as crowns, bridges, dentures, inlays and onlays.

# GLOSSARY

Generic Drug	A drug that has the same active ingredients as a brand name drug but is sold under a different name. For example, Atorvastatin is the generic name for medicines with the same formula as Lipitor.
Grandfathered	A medical plan that is exempt from certain provisions of the Affordable Care Act (ACA).
Mail Order	A feature of a medical or prescription drug plan where medicines you take routinely can be delivered by mail in a 90-day supply.
Open Enrollment	The time of year when you can change the benefit plans you are enrolled in and the dependents you cover. Open enrollment is held one time each year. Outside of open enrollment, you can only make changes if you have certain events in your life, like getting married or adding a new baby or child in the family.
Out-of-Network	Out-of-network providers (doctors, hospitals, labs, etc.) cost you more because they are not contracted with your plan and are not obligated to limit their maximum fees.
Out-of-Pocket Cost	A healthcare expense you are responsible for paying with your own money, whether from your bank account, credit card, or from a health account such as an HSA, FSA or HRA.
Out-of-Pocket Maximum	Protects you from big medical bills. Once costs "out of your own pocket" reach this amount, the plan pays 100% of most remaining eligible expenses for the rest of the plan year. Family coverage may have an aggregate or embedded maximum. Aggregate means your family must meet the entire family out-of-pocket maximum before the plan pays 100% for any member. Embedded means the plan will cover 100% for an individual member as soon as they reach their individual maximum.
Outpatient Care	Care from a hospital that doesn't require you to stay overnight.
Participating Pharmacy	A pharmacy that contracts with your medical or drug plan and will usually result in the lowest cost for prescription medications.
Plan Year	A 12-month period of benefits coverage. The 12-month period may or may not be the same as the calendar year. The Spectrum Brands plan year is a calendar year and runs from January 1 – December 31.
Preferred Drug	Each health plan has a preferred drug list that includes prescription medicines based on an evaluation of effectiveness and cost. Another name for this list is a "formulary." The plan may charge more for non- preferred drugs or for brand name drugs that have generic versions. Drugs that are not on the preferred drug list may not be covered.
Preventive Care Services	Routine healthcare visits that may include screenings, tests, check-ups, immunizations, and patient counseling to prevent illnesses, disease, or other health problems. Many preventive care services are fully covered. Check with your health plan in advance if you have questions about whether a preventive service is covered.
Primary Care Provider (PCP)	The main doctor you consult for healthcare issues. Some medical plans require members to name a specific doctor as their PCP and require care and referrals to be directed or approved by that provider.
Short Term Disability Insurance	Insurance that replaces a portion of your income if you are temporarily unable to work due to surgery and recovery time, a prolonged illness or injury, or pregnancy issues and childbirth recovery
Telehealth/Telemedicine/ Teladoc	A virtual visit to a doctor using video chat on a computer, tablet or smartphone. Telehealth visits can be used for many common, non-serious illnesses and injuries and are available 24/7. Many health plans and medical groups provide telehealth services at no cost or for much less than an office visit.
UCR (Usual, Customary, and Reasonable)	The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. The UCR amount sometimes is used to determine the allowed amount.
Urgent Care	Care for an illness, injury or condition serious enough that care is needed right away, but not so severe it requires emergency room care. Treatment at an urgent care center generally costs much less than an emergency room visit.
Vaccinations	Treatment to prevent common illnesses such as flu, pneumonia, measles, polio, meningitis, shingles, and other diseases. Also called immunizations.

# IMPORTANT PLAN INFORMATION

## HEALTH PLAN NOTICES

These notices must be provided to plan participants on an annual basis and are available in the Annual Notices document, located on [My Benefits Life](#):

- **Medicare Part D Notice:** Describes options to access prescription drug coverage for Medicare eligible individuals
- **Women's Health and Cancer Rights Act:** Describes benefits available to those that will or have undergone a mastectomy
- **Newborns' and Mothers' Health Protection Act:** Describes the rights of mother and newborn to stay in the hospital 48-96 hours after delivery
- **HIPAA Notice of Special Enrollment Rights:** Describes when you can enroll yourself and/or dependents in health coverage outside of open enrollment
- **HIPAA Notice of Privacy Practices:** Describes how health information about you may be used and disclosed
- **Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP):** Describes availability of premium assistance for Medicaid eligible dependents.
- **Notice of Availability of Alternative Standard for Wellness Plans:** Describes right to alternatives ways of participating in employer's wellness program

## COBRA CONTINUATION COVERAGE

You and/or your dependents may have the right to continue coverage after you lose eligibility under the terms of our health plan. Upon enrollment, you and your dependents receive a COBRA Initial Notice that outlines the circumstances under which continued coverage is available and your obligations to notify the plan when you or your dependents experience a qualifying event. Please review this notice carefully to make sure you understand your rights and obligations.

## DEADLINE FOR FILING LAWSUIT UNDER ERISA AFTER EXHAUSTION OF ALL CLAIMS PROCEDURES

Any lawsuit must be filed within 36 months of the final decision on the claim. Exhaustion of all claims and appeals procedure is required prior to filing suit. Please refer to the WRAP Summary Plan Description for the plan specific statute of limitations.

# PLAN DOCUMENTS

Important documents for our health plan and retirement plan are available via [My Benefits Life](#). Paper copies of these documents and notices are available if requested. If you would like a paper copy, please contact the Spectrum Brands' Benefits Team at [benefits@spectrumbrands.com](mailto:benefits@spectrumbrands.com) or (800) 881-2562.

## SUMMARY PLAN DESCRIPTIONS (SPD)

The legal document for describing benefits provided under the plan as well as plan rights and obligations to participants and beneficiaries. SPD documents are available via [My Benefits Life](#).

## SUMMARY OF BENEFITS AND COVERAGE (SBC)

A document required by the Affordable Care Act (ACA) that presents benefit plan features in a standardized format. SBC documents are available via [My Benefits Life](#).

Scan or click the QR code to visit the online benefits bookshelf.



## SUMMARY OF MATERIAL MODIFICATIONS

This enrollment guide constitutes a Summary of Material Modifications (SMM) to the . It is meant to supplement and/or replace certain information in the SPD, so retain it for future reference along with your SPD. Please share these materials with your covered family members.

# CARRIER CONTACT INFORMATION

BENEFIT PLAN	VENDOR	WEB ADDRESS	PHONE
Medical & Dental	<b>Triple S</b> Group Number: SP0000641	<a href="http://salud.grupotriples.com/en/">salud.grupotriples.com/en/</a>	(787) 774-6060
Tobacco Cessation	<b>UBreathe</b> (through SupprtLinc)	<a href="mailto:coaching@mywellportal.com">coaching@mywellportal.com</a>	(888)-882-5462
Vision	<b>VSP</b> Group Number: 12298041	<a href="http://www.vsp.com">www.vsp.com</a>	(800) 877-7195
COBRA	<b>Optum Financial</b>	<a href="http://www.optum.com/financial-services.html">www.optum.com/financial-services.html</a>	(855) 687-2021
Life Insurance	<b>New York Life</b>	<a href="http://www.mynylgs.com">www.mynylgs.com</a>	(888) 842-4462
Leave & Disability	<b>New York Life</b>	<a href="http://www.mynylgs.com">www.mynylgs.com</a>	(888) 842-4462
401(k)	<b>Vanguard</b>	<a href="http://vanguard.com/retirementplans">vanguard.com/retirementplans</a>	(800) 523-1188
Employee Assistance Program	<b>SupportLinc</b>	<a href="http://www.supportlinc.com">www.supportlinc.com</a> Group code: spb	(888) 881-5462
Wellness	<b>Personify Health</b>	<a href="http://join.personifyhealth.com/spectrumbrands">join.personifyhealth.com/ spectrumbrands</a>	(888) 671-9395



October 23, 2025