

# Be a Moment Maker

AT PINNACLE ENTERTAINMENT



2018

## Benefits Enrollment Guide

*Pinnacle*  
Entertainment®

*my* benefits



# — BE THE BEST HEALTHY YOU —

## IT'S TIME TO ENROLL IN YOUR BENEFITS

**At Pinnacle Entertainment, we are committed to supporting you both personally and professionally.** An important part of that is offering benefits that meet the needs of you and your family through flexible, affordable choices. We want you to feel healthy and at your best each day to **Be The Best Healthy You!**

Whether you're enrolling for the first time as a newly-hired team member or you're taking a fresh look at your benefit options for the new year, this Enrollment Guide has the details you need to make informed decisions about your health care needs for 2018.

### BE SURE TO TAKE THESE STEPS:

- **Review this Enrollment Guide** carefully.
- **Log into the Self Service Kiosk** at [mypnkonline.com](http://mypnkonline.com) to confirm that your email address, home address and zip code are accurate.
- **Consider the options** available as well as your needs and those of your family.
- **Compare the features** of each plan option.
- **Prepare any documentation you'll need** for adding dependents to your coverage.
- **Complete your enrollment online** at [www.mypnkbenefits.com](http://www.mypnkbenefits.com). Your initial online access will require your team member ID, last four digits of your social security number, zip code, and date of birth. In addition, you will be prompted to create a username and password if you have not logged in before.
- **Submit your benefit elections by the enrollment deadline:**

During **Open Enrollment**, you have until **11:59 PM ET on November 10** to enroll. **Note: While your 2017 benefit elections will roll over to 2018, you MUST re-elect any HSA or FSA contribution amounts.**

If you are electing benefits as a newly-hired team member, see page 2 for your enrollment deadlines.

**Keep in mind, your elections are in effect for a full calendar year: January 1 - December 31, 2018.**

**It's important that you carefully consider your options and make the right choices for you and your family.** You cannot make changes during the year unless you have a Qualifying Life Event. *See page 3 for details.*





Pinnacle Entertainment, Inc. is pleased to offer a comprehensive and flexible selection of health and welfare benefits for you and your family.

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## QUESTIONS?

Visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com) or call the Pinnacle Benefits Service Center at **1-800-992-8826**.

# Benefit Basics

## FAST FACTS:

Open Enrollment for the 2018 plan year is October 23 - November 10, 2017. Benefits are effective January 1 - December 31, 2018.

Newly-hired team members enrolling for the first time are eligible for most benefits as follows:

**Salaried:** On the 1st day of the month following date of hire.

**Eligible hourly:** On the 1st day of the month following 60 days of active employment.

If you do not enroll during your New Hire eligibility time frame, you will not have health benefits. You will have to wait until the next Open Enrollment period to enroll unless you experience a Qualifying Life Event (such as marriage or the birth of a child).

## QUESTIONS?

- Visit: [www.myPNKbenefits.com](http://www.myPNKbenefits.com)
- Call the Pinnacle Benefits Service Center: 1-800-992-8826

## 2018 Open Enrollment

Open Enrollment for the 2018 plan year will be held from October 23 - November 10, 2017. During this time, you have the opportunity to make your benefit elections that will be in effect for one full plan year – January 1 - December 31, 2018. You will not be able to make any mid-year changes unless you have a Qualifying Life Event.

**Note: The lowest cost carrier in some markets will be changing for the 2018 plan year. It is very important for you to go through the *mybenefits* website to ensure that you are aware of any upcoming cost changes.**

## 2018 New Hire Enrollment

	You must enroll:	Your benefit coverage begins:
<b>Medical, Pharmacy, HSA, FSA, Dental, Vision, Supplemental Medical, Life and AD&amp;D</b>		
<b>Salaried team member</b>	Within your initial eligibility period	On the 1st day of the month following date of hire
<b>Eligible hourly team member</b>	Within your initial eligibility period	On the 1st day of the month following 60 days of active employment
<b>Short-Term and Long-Term Disability</b>		
<b>Salaried team member</b>	Within your initial eligibility period	On the 1st day of the month following date of hire
<b>Eligible hourly team member</b>	Within your initial eligibility period	On the 1st day of the month following completion of one year of service

*IMPORTANT: New Hires will receive a notification from *mybenefits* once your eligibility window has opened. If you do not enroll during your New Hire eligibility period, you will not have benefits in 2018 unless you have a Qualifying Life Event during the year.*

## KEEP IN MIND

The individual mandate provision of the Patient Protection and Affordable Care Act of 2010 (PPACA) requires you, your children, and anyone else that you claim as a dependent on your taxes to have health insurance in 2018 or else you will be required to pay a penalty when you file your Federal income tax return.

## Paying for Benefits

Medical, dental, vision, HSA and FSA paycheck contributions are automatically withdrawn from your paycheck on a pre-tax basis. This means your deductions occur before you pay Federal taxes (and in most cases state taxes), as well as Social Security taxes. Lower taxes mean you keep more of what you earn!

## QUALIFYING LIFE EVENTS

Unless you have a Qualifying Life Event, you may only make changes to benefit elections during Open Enrollment.

### A Qualifying Life Event includes:

- Marriage;
- Divorce;
- Birth or adoption of a child;
- Death of a spouse or child;
- Termination of your spouse's employment;
- Substantial change in your spouse's benefit coverage as a result of employment;
- Switch from part-time to full-time status (or vice versa) by you or your spouse; or
- Your child has reached the plan's age limit.

The type of benefit change allowed must be consistent with the type of Qualifying Life Event. For example, adding your spouse after you marry.

You must submit your change at [www.myPNKbenefits.com](http://www.myPNKbenefits.com) and provide supporting documentation within 31 days of the event. If you fail to submit your change and documentation within 31 days of the event, then you must wait until the next Open Enrollment period to make the change.

*Unless you have a Qualifying Life Event, Open Enrollment is the only time during the year you may change your plan options, add or remove a dependent, or cancel coverage.*

## Eligibility

### TEAM MEMBERS

You must be a full-time team member regularly scheduled to work at least 30 hours per week or the equivalent. Team members who are not classified as full-time but average more than 30 hours per week over the course of their measurement period are eligible for medical, prescription and supplemental medical benefits under the PPACA. Measurement periods occur annually and eligibility is calculated each year. *See page 21 for 401(k) eligibility details.*

### DEPENDENTS

You can enroll the following dependents in the same medical/prescription, dental, and vision plans you choose for yourself:

- Your legal spouse (including same-sex spouses);
- Your child, stepchild, legal ward, or any child required by a Qualified Medical Child Support Order (QMCSO), all of whom must be under age 26; and
- A child of any age who meets the guidelines for mental or physical incapacitation before age 26.

#### Spouse Coverage Rule

If your spouse is eligible for insurance at his/her place of employment, he/she must take that coverage as primary coverage. You may be able to enroll your spouse under a Pinnacle healthcare plan as secondary coverage. Contact the Pinnacle Benefits Service Center at **1-800-992-8826** for details.

*IMPORTANT: You must submit proof of dependency to enroll eligible family members in the healthcare plans. Verification of eligibility (such as marriage or birth certificates, etc.) will be required.*



**Q: If my spouse also works for Pinnacle, what coverage level should we select?**

- A:** If both you and your spouse work for the company and are eligible for coverage:
- Both of you may enroll for “team member only” coverage; or
  - One of you can enroll for “team member + spouse” coverage.

In addition, only one team member can cover eligible children as dependents, not both team members.



# Medical Insurance

## Your Medical Plan Options

You have four medical plan options, each available from four carriers: Aetna, Anthem Blue Cross Blue Shield, Cigna and UnitedHealthcare. Each plan comes paired with prescription drug coverage and a medical plan savings account: either a Health Reimbursement Account (HRA) or a Health Savings Account (HSA).

### FAST FACTS:

You have the choice of four medical plans, along with the choice of four carriers for each medical plan: Aetna, Anthem Blue Cross Blue Shield, Cigna and UnitedHealthcare.

Each plan comes paired with prescription drug benefits and either a Health Reimbursement Account (HRA) or a Health Savings Account (HSA).

You can choose coverage for yourself only, you and your spouse, you and your child(ren), or the whole family.

You and Pinnacle share in the cost of these benefits.

All four medical plans offer negotiated in-network discounts and the opportunity to receive telemedicine consultations.

In-network preventive care is 100% covered at no cost to you.

For rates, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com)

### QUESTIONS?

Contact the medical plan carriers directly. Contact information is included on the back cover.

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

## Your Medical Plan Options

You have four medical plan options, each available from four carriers: Aetna, Anthem Blue Cross Blue Shield, Cigna and UnitedHealthcare. Each plan comes paired with prescription drug coverage and a medical plan savings account: either a Health Reimbursement Account (HRA) or a Health Savings Account (HSA).

**\$25/\$35 Copay Plan with HRA** — You pay a copay for some services, like doctor visits, and for others you pay a copay and/or a percentage of the total bill after meeting your deductible. Copays do not count toward your deductible. You'll also have access to your prescription drug benefits right away without having to first satisfy your medical plan deductible. In addition:

- You can earn tax-free wellbeing dollars that will be deposited in your HRA.
- You are also eligible to participate in the Healthcare Flexible Spending Account (FSA) and the Dependent Care FSA.

Contribution

\$\$\$\$

Deductible

\$

HRA

**\$1,500 Deductible Plan with HSA** — The annual deductible must be met before the plan will pay 80% of covered in-network medical expenses and non-preventive prescription drugs. In addition:

- You can open and contribute tax-free to an HSA. You can also earn tax-free wellbeing dollars that will be deposited in your HSA.
- You are also eligible to participate in the Limited Purpose Healthcare FSA and the Dependent Care FSA.

Contribution

\$\$\$

Deductible

\$\$

HSA

**\$3,000 Deductible Plan with HSA** — The annual deductible must be met before the plan will pay 70% of covered medical expenses and non-preventive prescription drugs. In addition:

- You can open and contribute tax-free to an HSA. You can also earn tax-free wellbeing dollars that will be deposited in your HSA.
- You are also eligible to participate in the Limited Purpose Healthcare FSA and the Dependent Care FSA.

Contribution

\$\$

Deductible

\$\$\$

HSA

**\$6,000 Deductible Plan with HSA** — The annual deductible must be met before the plan will pay 100% of covered expenses and non-preventive prescription drugs. In addition:

- You can open and contribute tax-free to an HSA. You can also earn tax-free wellbeing dollars that will be deposited in your HSA.
- You are also eligible to participate in the Limited Purpose Healthcare FSA and the Dependent Care FSA.

Contribution

\$

Deductible

\$\$\$\$

HSA

*See page 11 for wellbeing program details.*

*See pages 12 - 14 for medical plan savings account details.*

*See pages 14 - 15 for flexible spending account details.*

## Key Similarities Between The Plans

With all four medical plans, you receive the benefit of:

- **FREE Preventive Care:** Your preventive screenings and tests will cost you nothing when you visit in-network providers.
- **Telemedicine:** You can call and speak to a doctor, whenever you need to!
- **Flexibility:** You can visit any provider you choose, but when you choose an in-network provider you'll receive the highest level of benefits, continuity of care, and claims will be filed for you.
- **Discounts:** When you choose an in-network provider you'll also get the benefit of negotiated rates. This means less money out of your pocket.
- **Prescription Drug Coverage:** You have the option of filling your prescription at a retail pharmacy or through the Maintenance Choice Program. *See pages 8 - 10 for details.*
- **Medical Plan Savings Account:** Each plan comes paired with a tax-advantaged account that can be used to pay for eligible expenses, tax-free. *See pages 12 - 14 for details.*

## TO SELECT THE RIGHT PLAN FOR YOU, THINK ABOUT YOUR NEEDS:

- **Consider how you use your current medical plan,** then think about your needs for the coming year.
- **Review the networks of all four carriers** to confirm which carrier networks include your doctor.
- **Compare the costs of the various plans,** reviewing key benefits like the deductible and the cost to see a physician or specialist.
- **Factor in what you can afford to spend.** For your 2018 paycheck contributions, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).



## TERMS TO KNOW

### Carrier

An insurance company that provides services and support connected to a benefit plan.

### Coinsurance

The percentage of the bill you are responsible for paying after your deductible is met.

### Copay

The flat dollar amount you pay for certain services in the \$25/\$35 Copay Plan with HRA and for generic prescription drug purchases under all plans. Copays in the \$25/\$35 Copay Plan do not count toward the deductible.

### Deductible

The amount you pay each year before the plan pays its share of the costs (excluding in-network office visits for the \$25/\$35 Copay Plan with HRA and in-network preventive care for all plans).

### In-Network

Any provider or facility participating in the network. Your out-of-pocket expenses will be lower, and you will not be responsible for filing claims.

### Out-of-Network

Any provider or facility not participating in the carrier's network. When visiting out-of-network providers, your out-of-pocket expenses will be higher and you may be responsible for filing the necessary claims. You may also be billed by providers for any charges over the allowed amount.

### Out-of-Pocket Maximum

The maximum amount you will pay out-of-pocket during the year for covered services. After you reach this maximum, the plan pays 100% of covered benefits, with the exception of plan exclusions and out-of-network provider charges deemed to be more than reasonable and customary.

# Medical Plan Comparison Chart

Use the chart below to compare popular medical plan features:

*This chart shows the portion you pay.*

	\$25/\$35 Copay Plan with HRA		\$1,500 Deductible Plan with HSA		\$3,000 Deductible Plan with HSA		\$6,000 Deductible Plan with HSA	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Annual Deductible</b>								
Individual	\$500 <sup>1</sup>	\$1,000 <sup>1</sup>	\$1,500	\$3,000	\$3,000 <sup>1</sup>	\$6,000 <sup>1</sup>	\$6,000 <sup>1</sup>	\$10,000 <sup>1</sup>
Family	\$1,000 <sup>1</sup>	\$2,000 <sup>1</sup>	\$3,000	\$6,000	\$6,000 <sup>1</sup>	\$12,000 <sup>1</sup>	\$12,000 <sup>1</sup>	\$20,000 <sup>1</sup>
<b>Annual Out-of-Pocket Maximum<sup>2</sup></b>								
Individual	\$4,500 <sup>1</sup>	n/a	\$3,000	\$6,000	\$6,000 <sup>1</sup>	\$12,000 <sup>1</sup>	\$6,000 <sup>1</sup>	\$12,000 <sup>1</sup>
Family	\$9,000 <sup>1</sup>	n/a	\$6,000	\$12,000	\$12,000 <sup>1</sup>	\$24,000 <sup>1</sup>	\$12,000 <sup>1</sup>	\$24,000 <sup>1</sup>
<b>Coinsurance</b>	20%	40%	20%	50%	30%	50%	0%	30%
<b>Lifetime Maximum</b>	Unlimited		Unlimited		Unlimited		Unlimited	
<b>FSA Eligibility</b>	Healthcare FSA and Dependent Care FSA		Limited Purpose Healthcare FSA and Dependent Care FSA		Limited Purpose Healthcare FSA and Dependent Care FSA		Limited Purpose Healthcare FSA and Dependent Care FSA	
<b>Preventive Care</b>	100% covered	n/a	100% covered	n/a	100% covered	n/a	100% covered	n/a
<b>Primary Care Visits</b>	\$25 copay	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Specialist Visits</b>	\$35 copay	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Urgent Care</b>	\$40 copay	\$40 copay <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	30% <sup>3</sup>	30% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Emergency Room<sup>4</sup></b>	\$150 copay + 20% <sup>3</sup>	\$150 copay + 20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	30% <sup>3</sup>	30% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Ambulance</b>	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	30% <sup>3</sup>	30% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Hospital Care</b>	20% <sup>3</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Outpatient Surgery</b>	20% <sup>3</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Diagnostic X-ray and Lab, PET Scans, Nuclear Medicine</b>	20% <sup>3,5</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>CT Scans, MRI, SPECT</b>	20% <sup>3</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
<b>Mental Health and Substance Abuse</b>								
Inpatient	20% <sup>3</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>
Outpatient	\$25 / 20% <sup>6</sup>	40% <sup>3</sup>	20% <sup>3</sup>	50% <sup>3</sup>	30% <sup>3</sup>	50% <sup>3</sup>	0% <sup>3</sup>	0% <sup>3</sup>

- <sup>1</sup> These plans have an embedded deductible and out-of-pocket maximum. Learn more on the following page.
- <sup>2</sup> Deductibles and coinsurance count toward your annual out-of-pocket maximum.
- <sup>3</sup> After deductible is met.
- <sup>4</sup> For true emergency. With the \$25/\$35 Copay Plan with HRA, the copay is waived if admitted.
- <sup>5</sup> Diagnostic x-rays performed in a physician's office or urgent care facility are subject to a \$25 copay.
- <sup>6</sup> \$25 copay for outpatient office visits; 20% after deductible for outpatient facility.

**IMPORTANT:** All out-of-network services are based on Reasonable and Customary charges.

**To learn more about how embedded and aggregate deductibles and out-of-pocket maximums affect family coverage,** see "Understanding How the Annual Deductible and Out-of-Pocket Maximum Work When Covering Dependents" on the next page or watch the **mybenefits** 101 educational video on **www.myPNKbenefits.com**.



## THE NETWORK DIFFERENCE

It's important that you consider the carrier networks when selecting your medical plan and carrier. All four plans are available from all four carriers. The carriers have a lot in common, but they may differ in terms of cost and in-network providers (including telemedicine). To determine which networks your preferred provider belongs to, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com) or contact the carriers directly. *See the back cover for contact information.*

### UNDERSTANDING HOW THE ANNUAL DEDUCTIBLE AND OUT-OF-POCKET MAXIMUM WORK WHEN COVERING DEPENDENTS

#### Embedded Deductible

**\$25/\$35 Copay Plan with HRA**

**\$3,000 Deductible Plan with HSA**

**\$6,000 Deductible Plan with HSA**

Each member of my family has an individual deductible amount



If any one of us meets the individual amount, the plan starts paying coinsurance for that person



If out-of-pocket deductible expenses for two or more of us reach the family deductible amount all of us are considered to have met the deductible



Then the plan begins paying coinsurance for the whole family



#### Aggregate Deductible

**\$1,500 Deductible Plan with HSA**

As a family, we have one family deductible that applies to all of us



Because we have enrolled in a coverage tier with at least one dependent, the individual deductible does not apply to our plan.

When one, or a combination, of us has expenses that meet the family deductible, the deductible is considered to be met for all of us



Then, the plan begins paying coinsurance for the whole family



## AN OUNCE OF PREVENTION

Pinnacle places a special emphasis on preventive care, offering 100% coverage when you visit in-network providers. That means no copays, no deductible, and no coinsurance for in-network wellness visits! Why is preventive care so important? Exams and tests can help identify issues early and prevent more serious concerns from developing. This can save time, money, and worry ... and most importantly, help keep you and your family feeling your best.

Preventive services typically include annual physicals; wellness exams; immunizations; preventive labs and x-rays; mammograms; cervical, prostate, and colorectal cancer screenings; type 2 diabetes screenings; and developmental and autism screenings (for children). Contact your carrier directly for a list of specific procedures covered, which are determined by your age and gender. *See the back cover for contact information.*

# Prescription Drug Insurance

## FAST FACTS:

When you enroll in a Pinnacle medical plan, you automatically receive prescription drug coverage through CVS Caremark.

The amount you pay depends on the medical plan in which you enroll, the cost and type of drug you purchase, and whether it is on the Preferred Drug List.

If you or your doctor choose a brand name medication when a generic is available, you will be responsible for the brand coinsurance, which is more expensive than the generic copay.

You can choose whether to fill your maintenance prescriptions at a retail pharmacy or through the Maintenance Choice Program.

## QUESTIONS?

Contact CVS Caremark:

- Visit: [www.caremark.com](http://www.caremark.com)
- Call: 1-888-202-1654

You can also call the Pinnacle Benefits Service Center at 800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

## Your Prescription Drug Benefits

When you enroll in a Pinnacle medical plan, you automatically receive prescription drug coverage through CVS Caremark. All four medical plans offer the same prescription benefits, along with the option to fill prescriptions at a retail pharmacy or through mail order. The plans differ in terms of when prescription benefits begin and in how their expenses interact with your medical plan. [See page 9 for details.](#)

In an effort to provide cost-effective choices, the prescription drug plan uses a three-tier pricing structure, which is based on the CVS Caremark Prescription Drug List. This list includes brand and generic prescription medications approved by the U.S. Food and Drug Administration (FDA). Medications are assigned different tiers based on their overall health value, with generic medications providing the most affordable value for you.

**Generic** — *These drugs are the most affordable way for you to get quality medications at the lowest out-of-pocket cost.* Generic drugs are just as effective as brand name drugs and meet all the same FDA standards. You will always save money when using a generic. Remember to ask your doctor if a generic is right for you.

**Preferred Brand Name** — *These are brand name drugs that are on the Preferred Drug List.* You will pay more for these medications than for generic drugs.

**Non-Preferred Brand Name** — *These are brand name drugs that are not listed on the Preferred Drug List.* If you choose a drug in this category, your out-of-pocket expense will be the highest, which still represents a savings when compared to its full retail cost.



## PRESCRIPTION DRUG BENEFITS AND THE \$25/\$35 COPAY PLAN WITH HRA

- Prescription drugs listed as preventive by the healthcare reform law are 100% covered without having to first satisfy your medical plan deductible. For non-preventive prescription drugs, you have access to your prescription drug benefits immediately without having to first satisfy your medical plan deductible.
- HSA, FSA and HRA funds can be used to pay eligible prescription drug expenses.
- Your prescription drug expenses are applied to your medical plan out-of-pocket maximum, but not your deductible.

## PRESCRIPTION DRUG BENEFITS AND THE \$1,500 DEDUCTIBLE, \$3,000 DEDUCTIBLE, AND \$6,000 DEDUCTIBLE PLANS WITH HSA

- Prescription drugs listed as preventive by the healthcare reform law are 100% covered without having to first satisfy your medical plan deductible.
- For non-preventive prescription drugs, you are responsible for the full cost of a medication (after network discounts), until you reach the medical plan deductible. After that, your prescription drug benefits will apply.
- HSA funds can be used to pay eligible prescription drug expenses.
- Your prescription drug expenses are applied to both your medical plan deductible and out-of-pocket maximum.

## AMOUNT YOU PAY FOR PRESCRIPTIONS

The chart below shows the amount you pay for prescriptions. For the \$1,500 Deductible, \$3,000 Deductible, and \$6,000 Deductible Plans with HSA, these benefits apply after the medical plan deductible is satisfied (with the exception of preventive generic prescription drugs, which are 100% covered for all plans and for which the deductible does not apply).

*This chart shows the portion you pay.*

	\$25/\$35 Copay Plan with HRA		\$1,500 Deductible Plan with HSA <sup>1</sup>		\$3,000 Deductible Plan with HSA <sup>1</sup>		\$6,000 Deductible Plan with HSA <sup>1</sup>	
	30-Day Retail Supply	90-Day Maintenance Choice Supply	30-Day Retail Supply	90-Day Maintenance Choice Supply	30-Day Retail Supply	90-Day Maintenance Choice Supply	30-Day Retail Supply	90-Day Maintenance Choice Supply
<b>Preventive Generic</b>	Generic prescription drugs that are identified as preventive by the healthcare reform law are 100% covered. No deductible applies.							
<b>Generic (min./max.)</b>	\$10 copay	\$20 copay	\$10 copay	\$25 copay	\$10 copay	\$25 copay	0%	0%
<b>Preferred Brand Name (min./max.)</b>	20% (\$30/\$80)	20% (\$60/\$160)	30% (\$25/\$75)	30% (\$62.50/\$187.50)	30% (\$25/\$75)	30% (\$62.50/\$187.50)	0%	0%
<b>Non-Preferred Brand Name (min./max.)</b>	20% (\$50/\$120)	20% (\$100/\$240)	40% (\$50/\$100)	40% (\$125/\$250)	40% (\$50/\$100)	40% (\$125/\$250)	0%	0%

<sup>1</sup> For these plans, the deductible must first be satisfied before the plan will pay its share of non-preventive prescription drug costs.

**IMPORTANT:** Your prescriptions will be filled with a generic equivalent whenever available, unless your physician indicates "dispense as written" (or "DAW") on the prescription. If you or your doctor choose a brand name medication when a generic is available, you must pay the brand coinsurance PLUS the difference in cost between the brand name and generic drug.

## How to Fill Your Prescription

### RETAIL

Simply present your CVS Caremark ID card, along with your prescription, to any network pharmacy. No claim forms are necessary. If you visit a CVS or Target retail pharmacy for maintenance medications, you can fill a 90-day supply for a 60-day supply cost. To find a pharmacy near you, contact CVS Caremark at **1-888-202-1654**.

### MAINTENANCE CHOICE

The Maintenance Choice Program can save you time and money when filling (or refilling) your prescriptions. In many cases, you can receive a 90-day supply of certain maintenance medications at a lower cost using the Maintenance Choice Program.

To begin the FastStart mail order service, ask your doctor to write two prescriptions — a 30-day supply for a retail pharmacy to fill right away, and a 90-day supply prescription to send to the mail order pharmacy. Make sure to complete a Participant Profile form (available at [www.caremark.com](http://www.caremark.com)) and mail it along with your prescription. The mail order pharmacy will then send your medication and reorder instructions to your home address.

*IMPORTANT: For an added level of convenience, you may elect to have your prescriptions refilled and mailed to you automatically by enrolling in the CVS Caremark ReadyFill program. Simply sign in at [www.caremark.com](http://www.caremark.com), then visit the Manage Prescriptions page to find your eligible prescriptions and enroll.*

### MORE INFORMATION IS AVAILABLE ONLINE

You can take advantage of the information available on the CVS Caremark website, [www.caremark.com](http://www.caremark.com):

- **Review** highlights of the company's prescription drug plan and get health and wellness information;
- **Compare** brand name and generic prices;
- **Obtain** order forms and claim forms;
- **Submit** mail order refills;
- **Check** the status of mail orders; and
- **Check** and pay mail order account balances.

CVS Caremark also offers a 24-hour Online Pharmacy and Health resource. For a complete listing of CVS Caremark participating pharmacies, a copy of the Preferred Drug List, and other services, visit their website at [www.caremark.com](http://www.caremark.com), or call Customer Service at **1-888-202-1654**.



**Q: How can I find out which medications are on the Preferred Drug List?**

**A:** To download a copy of the Preferred Drug List, visit [www.caremark.com](http://www.caremark.com). (CVS Caremark updates this list regularly; please check back for updates throughout the year when looking up new medications.)

**Q: If I reach my medical plan's out-of-pocket maximum, am I still responsible for prescription drug copays/coinsurance?**

**A:** With the \$1,500 Deductible, \$3,000 Deductible, or \$6,000 Deductible Plan with HSA, the plan pays for 100% of all covered prescription drug costs once the out-of-pocket maximum is reached.

**Q: If I enroll in the \$1,500 Deductible, \$3,000 Deductible, or \$6,000 Deductible Plan with HSA, will my prescription drug costs count toward my deductible?**

**A:** Yes, prescription drug costs are treated like any other medical expense with these plans. Once you have satisfied your deductible, you pay copays or coinsurance as outlined on page 9.



## A More Rewarding Wellbeing Program

Pinnacle Entertainment partners with RedBrick Health to provide a comprehensive and rewarding wellbeing program. From providing educational support resources to offering incentives that reward you for making smart healthy choices, we want you to know that we support every step you take to improve your health.



In 2018, you and your covered spouse can earn wellbeing dollars as a reward for completing wellness activities. The wellbeing dollars you earn will be contributed to your HRA or HSA.

### HOW MUCH CAN YOU EARN?

You and your covered spouse each have the opportunity to earn wellbeing dollars to be deposited in your HRA or HSA. The amount you can earn depends on the medical plan in which you enroll:

	\$25/\$35 Copay Plan with HRA	HSA Compatible Plans
<b>Maximum incentive you and/or your covered spouse can each earn for the year:</b>	<b>\$250</b>	<b>\$750</b>
<b>Take the RedBrick Compass™</b> <i>Online Health Assessment</i>	\$50	\$200
<b>Get a Biometric Screening</b> <i>Health Screening Onsite or from your PCP</i>	\$50	\$200
<b>Choose RedBrick Journeys™</b> <i>Dollars Earned for Each Completed Milestone*</i>	\$15	\$25
<b>Choose RedBrick Phone Coaching</b> <i>Dollars Earned for Each Coaching Call</i>	\$15	\$50
<b>Chart Your Progress With RedBrick Track™</b>	\$80	\$150
<b>Participate in a Care Management Program</b> <i>One-Time Event</i>	\$100	\$200

\* Can complete up to five milestones per day.

Log on to [www.myPNKbenefits.com](http://www.myPNKbenefits.com) and connect directly to RedBrick Health online to start earning wellbeing dollars. You can complete activities at your own pace and earn your wellbeing dollars throughout the whole year in 2018.

*Confidentiality Notice: Any personal health information collected through the Health Assessment and Health Screening is kept confidential by our independent providers. Pinnacle does not have access to individual team member results.*

# Wellbeing Program

### FAST FACTS:

Pinnacle supports good health and wellbeing by offering a comprehensive wellness solution that rewards you and your covered spouse for completing healthy activities.

You and your covered spouse have the opportunity to earn wellbeing dollars for completing wellness activities.

The wellbeing dollars you earn are deposited in your HRA or HSA depending on the medical plan you enroll in for 2018.

Pinnacle pays for the cost of this program.

If it is medically inadvisable or unreasonably difficult for you to achieve the standards for rewards in the Redbrick Wellbeing Program, call the Pinnacle Benefits Service Center at **1-800-992-8826** to develop another way to qualify for the reward.

### QUESTIONS?

Contact RedBrick Health:

- Visit: [wellbeing.redbrickhealth.com](http://wellbeing.redbrickhealth.com)

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

# Medical Plan Savings Accounts

## FAST FACTS:

Each Pinnacle medical plan includes a tax-advantaged account — either a Health Reimbursement Account (HRA) or a Health Savings Account (HSA) — to help save and pay for eligible expenses. The type of account offered depends on the medical plan you select.

An HRA will be opened on your behalf if you enroll in the \$25/\$35 Copay Plan with HRA. Wellbeing dollars earned can be used towards qualified medical and prescription expenses.

An HSA will be opened on your behalf if you enroll in the \$1,500 Deductible, \$3,000 Deductible, or \$6,000 Deductible Plan with HSA. Money in your HSA can be used for qualified medical, prescription, dental and vision expenses.

You can earn company contributions of up to \$750 (team member only coverage) or up to \$1,500 (team member + spouse coverage) to your HRA or HSA for completing wellbeing activities.

## QUESTIONS?

- Visit: [www.myPNKbenefits.com](http://www.myPNKbenefits.com)
- Call the Pinnacle Benefits Service Center: 1-800-992-8826.

## Savings Accounts with Tax Advantages

Each Pinnacle medical plan comes paired with a tax-advantaged account to help you save and pay for eligible healthcare expenses. The type of account offered depends on the medical plan you elect.

- **Health Reimbursement Account (HRA):** \$25/\$35 Copay Plan with HRA
- **Health Savings Account (HSA):** \$1,500 Deductible, \$3,000 Deductible, and \$6,000 Deductible Plans with HSA

The savings accounts differ in terms of who is eligible to contribute to the account, who retains ownership of the money in the account, tax-free investment opportunities, and the type of expenses that you can pay from your account.

Pinnacle medical plan participants and their covered spouses can earn wellbeing dollars through the Rebrick Wellbeing Program, which will be contributed directly to the team member's HRA or HSA.

## Medical Plan Savings Accounts Comparison Chart

Use the chart below to compare medical plan savings account features:

	Health Reimbursement Account (HRA)	Health Savings Account (HSA)
<b>With which medical plans are these accounts available?</b>	\$25/\$35 Copay with HRA	\$1,500 Deductible with HSA \$3,000 Deductible with HSA \$6,000 Deductible with HSA
<b>Will Pinnacle contribute to this account when I participate in wellness activities?</b>	Yes, you can earn up to \$250 in 2018	Yes, you can earn up to \$750 in 2018
<b>Will Pinnacle add wellbeing dollars to this account when my covered spouse participates in wellness activities?</b>	Yes, your covered spouse can earn up to \$250 in 2018	Yes, your covered spouse can earn up to \$750 in 2018
<b>Can I add my own money, tax-free?</b>	No	Yes, up to the IRS limit <i>See page 14 for details</i>
<b>Can I invest my balance?</b>	No	Yes, on the balance above \$1,000
<b>Will I pay federal income taxes on the money if I use it for eligible expenses?</b>	No	No
<b>What type of healthcare expenses can I spend my money on?</b>	Medical and prescription	Medical, prescription, dental, and vision
<b>Do I get to keep any balance left at the end of the year?</b>	Yes, but only if you stay enrolled in a Pinnacle copay plan	Yes, your HSA balance remains yours regardless of future plan enrollment
<b>Do I get to keep the balance if I leave Pinnacle?</b>	No	Yes

## What is a Health Savings Account?

An HSA is a tax-advantaged account that can be used to pay for eligible medical, prescription, dental, and vision expenses for you and your qualified dependents, now and in the future. Enrollment in the HSA depends on the medical plan you elect and is available only to those who enroll in the \$1,500 Deductible, \$3,000 Deductible, or \$6,000 Deductible Plan with HSA. HSA funds you earn for completing wellness activities or HSA contributions from your paycheck can be used to pay your deductible, coinsurance, and any other eligible healthcare expenses — even those not covered by your medical, dental, or vision plans. You can also choose to leave the money in your account and allow it to accumulate for use toward future expenses or in retirement. The account is yours, even if you leave the company or retire.

## Your HSA Contributions

You decide if, when, and how much to contribute to your HSA, up to the limit set by the IRS. You're in charge! During Open Enrollment, you can elect a pre-tax payroll contribution to be deducted, before taxes, from your paycheck in equal amounts during the year. You can start, stop, or change contributions at any time. Or, you can make lump sum contributions at any time (and claim a tax credit at the end of the year).

### You pay for eligible expenses, tax-free:

- You will receive a debit card to pay for eligible expenses. Funds will be deducted directly from your HSA.
- If you pay using personal funds, you can submit a claim to get reimbursed.  
*Note: The IRS occasionally requests verification of HSA expenses. You can upload and store your receipts on the benefits portal in case you ever need them.*

**Use it or save it!** Any HSA funds that remain after your 2017 eligible expenses will carry over for use in the future. You decide whether to invest it for greater potential long-term growth and use toward future expenses or in retirement. After age 65, you can withdraw funds for any purpose and without penalty. Withdrawals for ineligible expenses are treated as retirement income and are only subject to income tax.

*No Federal income or Social Security taxes will be withheld from any of your contributions. Contributions are also tax-free in all states except Alabama, California, and New Jersey.*

## TRIPLE-TAX SAVINGS

An HSA offers you three ways to save on your taxes:

- Your contributions are tax-free, which lowers your taxable income.
- Money in your HSA earns interest and investment gains, tax-free.
- Money you spend on eligible expenses is tax-free.

## HSA ELIGIBILITY

To open an HSA, you:

- Must be enrolled in an HSA-qualified plan, such as the \$1,500 Deductible, \$3,000 Deductible, or \$6,000 Deductible Plan with HSA
- Cannot be covered by a medical plan that is not HSA-qualified, including one offered by your spouse's employer
- Cannot be enrolled in Medicare
- Must not be claimed as a dependent on another person's tax return
- Must not have received Veterans Administration (VA) benefits within the past three months (*some exceptions apply — contact the Pinnacle Benefits Service Center at 1-800-992-8826 for more information*).



## FAQS

### Q: What happens to the funds in my HSA if I change employment or retire?

A: Unlike FSAs, money contributed to an HSA rolls over from year to year. You own the account, even if you change jobs or retire.

### Q: There is no money in my HSA. How do I pay for my eligible expenses?

A: It's important to be aware of your HSA balance. You are responsible for non-preventive care until your deductible is met. If the balance in your HSA is \$0, you will be responsible for paying for your portion of the expense using personal funds. You may reimburse yourself once the funds are available in your HSA.

### Q: I'm divorced and share custody of my son. Can I still enroll in the Dependent Care FSA?

A: If you are divorced or separated, provide at least partial support for your child, and have custody of your child, your child care expenses may be eligible. For information about your particular situation, you should speak with your tax advisor.

### Q: Can I use money in my FSA to pay for my spouse's eligible expenses?

A: Yes, you can use an FSA to pay the eligible expenses of any dependent — even if he/she is not covered under your medical plan.

## HSA Contribution Limits

There are limits to the total amount of money you can contribute to your HSA in a year. These are set by the IRS and adjusted annually. Contributions above the limit are subject to income tax. **It is your responsibility not to exceed the maximum HSA contribution limit.**

The 2018 HSA contribution limits (including contributions from you, wellbeing incentives from the company, and any other source combined) are:

- **\$3,450 for team member only** coverage, and
- **\$6,900 for team member + dependent(s)** coverage.

*If you are age 55 or older, you can make additional "catch-up" contributions of up to \$1,000 in 2018.*

## What is a Health Reimbursement Account?

The HRA comes with the \$25/\$35 Copay Plan. With the HRA, Pinnacle will contribute tax-free money to your account when you complete wellness activities through RedBrick Health.

- **You can't contribute your own funds to this account, nor do you have the ability to invest it,** but you can supplement this account with a Healthcare FSA if you choose.
- **The funds in your HRA can be used to pay for eligible medical and prescription expenses in 2018 and beyond.** As long as the money is used to pay for eligible medical or prescription expenses, you will not be taxed on it.

If you stay enrolled in a Pinnacle copay plan from year to year, any balance in your HRA rolls over to the next year. However, if you leave Pinnacle or choose a different type of medical plan in a future year, you will forfeit any funds in your HRA.

## FLEXIBLE SPENDING ACCOUNTS AND THE HSA

**You cannot enroll in and contribute to an HSA and the traditional Healthcare FSA at the same time; instead you may enroll in the Limited Purpose Healthcare FSA (for dental and vision expenses only).** The Dependent Care FSA is available to all full-time eligible team members, regardless of medical plan enrollment.

The Healthcare FSA is available to team members who enroll in the \$25/\$35 Copay Plan with HRA (or who waive medical coverage altogether), and can be used for eligible medical, prescription drug, dental, and vision expenses. The Limited Purpose Healthcare FSA is available only to team members who enroll in the \$1,500 Deductible, \$3,000 Deductible, and \$6,000 Deductible Plan with HSA and can only be used for reimbursement of eligible dental and vision expenses.



## How the Flexible Spending Accounts Work

Pinnacle offers three different Flexible Spending Accounts (FSAs):

	Dependent Care FSA	Healthcare FSA	Limited Purpose Healthcare FSA
Medical Plan Availability	All medical plans	\$25/\$35 Copay Plan with HRA	\$1,500 Deductible, \$3,000 Deductible, and \$6,000 Deductible Plans with HSA
Eligible Expenses	Child and elderly dependent care expenses	Eligible medical, prescription, dental, and vision expenses	Eligible dental and vision expenses only
Payment of Expenses	Reimbursement	FSA pays first and then HRA pays after FSA funds are used	FSA pays first and then HSA pays after FSA funds are used
Contribution Limits	\$150 - \$5,000 (\$2,500 if married filing separate tax returns)	\$150 - \$2,600	\$150 - \$2,600

**1 You contribute to the account(s) with pre-tax dollars deducted from your paycheck.** *That means federal income tax, Social Security tax, and most states' taxes will not be withheld.*

- **Healthcare FSA and Limited Purpose Healthcare FSA:** Your full annual contribution is available at the start of the year. When you submit a claim, you'll be reimbursed for the total amount of eligible expenses submitted, or your elected account maximum (if less).
- **Dependent Care FSA:** You can only be reimbursed if funds are available in the account.

**2 You pay for eligible expenses using your Via Benefits debit card.**

**Healthcare FSA and Limited Purpose Healthcare FSA:** You have the option of using a debit card associated with your HRA or HSA to pay for eligible expenses at the time of service, instead of using personal funds.

**3 You submit a claim form, along with the appropriate documentation, to be reimbursed for eligible expenses.**

- **Healthcare FSA and Limited Purpose Healthcare FSA:** When using your debit card, you must substantiate your debit card transactions with supporting documentation in accordance with IRS regulation.
- **Dependent Care FSA:** To receive reimbursement, you'll need to submit a signed claim form from your provider. You can also enroll in direct deposit to have your claim reimbursement automatically deposited each month.

*Note: The FSAs are separate accounts. You cannot transfer money between them or use money from one to pay claims against another.*

# Flexible Spending Accounts

## FAST FACTS:

Your Flexible Spending Account (FSA) eligibility depends on the medical plan you enroll in. All team members are eligible to enroll in the Dependent Care FSA, regardless of medical plan selection.

When you elect an FSA, you will need to decide the amount you want to contribute for the year. Estimate your expenses carefully. **Unused FSA funds will be forfeited at the end of the year, as required by the IRS.**

FSA contributions are withdrawn from paychecks in equal amounts over the course of the year.

FSA elections must be made each year in order to participate.

## QUESTIONS?

- Visit: [www.myPNKbenefits.com](http://www.myPNKbenefits.com)
- Call the Pinnacle Benefits Service Center: 1-800-992-8826.

# Dental Insurance

## FAST FACTS:

Pinnacle offers you the opportunity to enroll yourself and your eligible dependents in one of two dental plans from Delta Dental: The \$1,500 Max with Orthodontia Plan and the \$2,500 Max with Orthodontia Plan.

With both plans, you may seek care from any licensed dental provider you choose, but you will save money if you choose a provider in the Delta Dental network.

Preventive care services including oral exams, cleanings, and x-rays are typically provided at no cost to you.

You and Pinnacle share in the cost of these benefits.

For rates, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com)

## QUESTIONS?

Contact Delta Dental:

- Visit: [www.deltadentalins.com](http://www.deltadentalins.com)
- Call: 1-866-808-9995

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

## Your Dental Plan Options

To help you maintain good dental health, preventive care is 100% covered, with no deductible to meet. For other dental services, you must pay an annual deductible before the plan begins to pay a percentage of the charges. Once the calendar year maximum is met, the plan does not pay any other benefits for the remainder of the plan year.

## THE NETWORK ADVANTAGE

You have the option to visit any provider of your choice, but there are advantages to seeing providers in the Delta Dental PPO network. When you visit providers who are out-of-network, your costs may be higher and you will be responsible for any expenses that are above the plan's Reasonable and Customary (R&C) limits, which are determined by a review of charges for similar services within a geographic area. To check your dentist's network status, visit [www.deltadentalins.com](http://www.deltadentalins.com).

Plan Features	\$1,500 Max with Orthodontia		\$2,500 Max with Orthodontia	
	In-Network	Out-of-Network*	In-Network	Out-of-Network*
<b>Calendar Year Maximum Benefit</b>	\$1,500		\$2,500	
<b>Annual Deductible</b>	\$50 per individual or \$150 with a dependent		\$50 per individual or \$150 with a dependent	
<b>Preventive Care</b> (Oral exams, cleanings, x-rays, space maintainers, fluoride, sealants)	100% covered		100% covered	
<b>Basic Care</b> (Fillings, extractions, root canals and pulp therapy, treatment of gum and mouth tissue disease)	20% after deductible		10% after deductible	
<b>Major Care</b> (Inlays, crowns, fixed/removable bridges, full or partial dentures)	50% after deductible		40% after deductible	
<b>Orthodontia</b>	Child(ren) only: 50%, up to \$1,500 lifetime maximum benefit, per covered person**		Child(ren) and adults: 50%, up to \$2,500 lifetime maximum benefit, per covered person**	

\* Out-of-network charges are subject to R&C rates. If you select a provider who charges more than the R&C, you will be responsible for any amount over the R&C. Out-of-area benefits are also subject to R&C rates.

\*\* Deductible does not apply.

## BEFORE YOU HAVE DENTAL WORK DONE

If you plan to have dental work that exceeds \$300, consider asking your dentist for a "predetermination of benefits" so you'll know ahead of time what your treatment will cost and how much the dental plan will pay.

## Your Vision Plan

The Pinnacle vision plan through Davis Vision provides both in-network and out-of-network benefits. If you choose an in-network provider, you'll receive a higher level of benefits and claims will be filed on your behalf. The following vision services are covered once per calendar year:

*Here's what the plan pays:*

	Davis Vision Exclusive Collection	In-Network	Out-of-Network
<b>Exam</b>	100% covered		Up to \$40
<b>Frames</b>	Fashion or Designer Selection: 100% covered	Up to \$130 (\$180 at Visionworks locations), then 20% discount	Up to \$40
<b>Eyeglass Lenses</b>	Single/bifocal/trifocal lenses and scratch coating: 100% covered		\$25 - \$60 (depending on the type of lens)
<b>Contact Lenses</b> <i>(In lieu of eyeglasses)</i>	100% covered for 4-box planned replacement or 8-box disposable. Evaluation, fit, and follow-up included.	\$130 lens allowance and \$60 allowance for evaluation, fit, and follow-up + 15% off remaining balance	Up to \$75 for elective contact lenses

### ADDITIONAL SAVINGS WITH VISIONWORKS

When you make your vision plan purchases at Visionworks, you'll enjoy additional savings:

- \$180 frame allowance
- 50% off additional pairs of eyewear

Visit [www.visionworks.com](http://www.visionworks.com) to find a location near you. For a complete list of current offers and coupons, visit [www.visionworks.com/deals](http://www.visionworks.com/deals).



**Q: How do I find a doctor in the network?**

**A:** To locate a Davis Vision in-network provider, visit [www.davisvision.com](http://www.davisvision.com) and enter client control code **7650** or call **1-800-999-5431**. Team members with hearing or speech disabilities may access TTY services by calling **1-800-523-2847**.

# Vision Insurance

### FAST FACTS:

Pinnacle offers you the choice to enroll yourself and your eligible dependents in a vision plan from Davis Vision.

When you need frames, consider going to Visionworks, where you'll enjoy a larger allowance than if you visited another Davis Vision in-network provider.

You and Pinnacle share in the cost of these benefits.

For rates, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com)

### QUESTIONS?

Contact Davis Vision:

- Visit: [www.davisvision.com](http://www.davisvision.com) (Enter client control code 7650)
- Call: 1-800-999-5431 (EST, Monday through Friday 8AM - 11PM; Saturday 9AM - 4PM; Sunday Noon - 4PM)
- TTY Call: 1-800-523-2847 (EST, Monday through Friday 8AM - 11PM; Saturday 9AM - 4PM; Sunday Noon - 4PM)

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

## Supplemental Insurance

Pinnacle is committed to supporting team members in living their best healthy life. Through supplemental insurance options, team members can select the benefits that are best for them and their covered dependents. You may choose to elect additional insurance including Accident, Critical Illness and Hospital Indemnity.

### Accident Insurance

Accident Insurance pays cash benefits based off a schedule of benefits associated with accidental injuries and pays in addition to medical or other benefits you may receive.

- Benefits are paid if you have covered emergency treatment, physician visits, fractures / dislocations, x-rays, physical therapy, hospitalization and more.
- Use the money for out-of-pocket medical expenses, mortgage, transportation or any other purpose.

	Low Plan	High Plan
<b>Initial Doctor Visit</b>	\$50	\$75
<b>Emergency Room</b>	\$150	\$200
<b>Ambulance</b>	\$100	\$150
<b>Hospital Admission</b>	\$500	\$1,000
<b>Hospital Confinement Daily Benefit</b>	\$100	\$200
<b>ICU Admission</b>	\$1,000	\$2,000

### Critical Illness

Critical Illness Insurance can help protect you and your family against financial strains associated with a critical illness, allowing you to focus on recovery.

- A lump sum benefit is paid directly to you upon diagnosis of a covered condition such as a Heart Attack, Stroke, Cancer and more.
- Use the money for out-of-pocket medical expenses, mortgage, transportation or any other purpose.
- Includes an annual \$50 wellness reimbursement.

	\$10,000	\$20,000
<b>Annual Health Screening</b>	\$50	\$50
<b>Coronary Artery Bypass</b>	25%	25%
<b>Stroke</b>	100%	100%
<b>Heart Attack</b>	100%	100%

### Hospital Indemnity

Hospital Indemnity insurance pays benefits when you are admitted to the hospital as a patient:

- Benefits are paid directly to you in addition to medical or other benefits you may receive.
- Use the money for out-of-pocket medical expenses, mortgage, transportation or any other purpose.

	Low Plan	High Plan
<b>Hospital Admission</b>	\$500	\$1000
<b>Hospital Admission limits</b>	1 per person per year	1 per person per year
<b>Hospital Daily Confinement</b>	\$100	\$200
<b>Maximum # of days per confinement</b>	10	10

## Life and AD&D Insurance

It's important to give serious thought to the expenses your family would have if something happened to you. Life insurance pays your beneficiary(ies) in the case of your death; AD&D pays in the event of certain accidents and/or death. Basic life and AD&D insurance is provided at no cost to you. To suit your personal needs, you also have the flexibility to increase your coverage — and your peace of mind — by purchasing additional coverage for yourself and for your family.

Coverage options	Salaried Team Members	Eligible Hourly Team Members
<b>Employer-Paid Team Member Life and AD&amp;D</b>	1x annual pay (rounded to next higher \$1,000) up to \$250,000 max	1x annual pay (rounded to next higher \$1,000) up to \$50,000 max
<b>Supplemental Team Member Life and AD&amp;D</b>	\$10,000 increments up to \$500,000 (or 5x annual pay, if less)	\$10,000 increments up to \$200,000 (or 5x annual pay, if less)
<b>Spouse Life</b>	\$5,000 up to 50% of team member's combined amount of basic and supplemental or \$50,000 (whichever is less)	
<b>Child(ren) Life</b>	\$5,000 or \$10,000 per child	

*NOTE: Life and AD&D benefits are subject to reductions due to age. Evidence of insurability may be required. For life and AD&D, your annual pay is based on annualized base pay only and does not include tips or totes.*

## Disability Insurance

Disability benefits protect you and your family from financial hardship when a serious illness or injury prevents you from working — whether it's for a short time or for years.

- **Short-Term Disability (STD) Insurance** replaces a portion of your income if a non-work related disability or injury prevents you from working more than 14 days. This coverage is provided at no cost, and you may elect to purchase supplemental STD coverage. Your STD benefits continue until you recover, or up to 26 weeks.
- **Long-Term Disability (LTD) Insurance** begins after you have been absent from work for 180 days and continues for as long as you are disabled, up to age 65 or Social Security Retirement Age. Eligible hourly team members may purchase LTD coverage at discounted group rates. Salaried team members receive basic LTD coverage at no cost and may choose to purchase supplemental LTD coverage.

Coverage options	Salaried Team Members	Eligible Hourly Team Members
<b>Short-Term Disability</b>	50% of earnings up to \$1,150/week	50% of earnings up to \$300/week
<b>Supplemental STD</b>	66⅔% of earnings up to \$2,500/week	66⅔% of earnings up to \$1,000/week
<b>Long-Term Disability</b>	Provided: 50% of monthly earnings up to \$5,000/month Supplemental: 66⅔% of monthly earnings up to \$15,000/month	50% of monthly earnings up to \$5,000/month

*NOTE: For disability benefits, your monthly pay includes base pay plus declared tips/totes and commissions. It does not include bonuses, overtime, or extra compensation.*

# Life, AD&D and Disability Insurance

## FAST FACTS:

Life and AD&D insurance benefits your beneficiary(ies) in the event of death and/or certain accidents.

Pinnacle offers life and AD&D insurance to team members at no cost. You may elect to increase your coverage or cover your spouse and/or child(ren) for a cost.

Disability insurance protects you and your family if you suffer a serious illness or an injury that prevents you from working.

Eligible hourly team members receive short-term disability at no cost, and for an additional cost may elect to increase that coverage and/or add long-term disability coverage.

Salaried team members receive short-term and long-term disability insurance at no cost, and for an additional cost may elect to increase their short-term and/or long-term disability coverage.

## QUESTIONS?

Contact Sun Life Financial:

- Visit: [www.sunlife-usa.com](http://www.sunlife-usa.com)
- Call: 1-800-247-6875

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

### FAST FACTS:

The *myhealth* can help with a variety of work/life issues through confidential, short-term counseling, and referral services.

Pinnacle partners with Beacon Health to offer this program to you and any members of your household — at no cost to you.

You do not need to be enrolled in a Pinnacle medical plan to be eligible for these services. However, team members who are enrolled in a Pinnacle medical plan have access to additional services beyond the standard *myhealth* services.

All full-time and part-time team members are eligible for this program upon hire.

### QUESTIONS?

Access the *myhealth* program:

- Visit: [www.mypnkhealth.com](http://www.mypnkhealth.com)
- Call: 1-866-375-4308

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

All full and part-time team members are eligible to participate in the *myhealth* upon hire date at no cost. Similar to how medical insurance is designed to address your physical health, the *myhealth* supports your overall health and wellness including emotionally, mentally, and financially. These services help ensure you can get the help, guidance, and support when you need it.

### HOW IT WORKS

Getting help is simple. If you have a concern or problem that is interfering with your work or your home life, follow these steps:

- **Step 1:** Call **1-866-375-4308**, 24 hours a day, 7 days a week.
- **Step 2:** You will be connected to a licensed clinician who will talk with you about your concern.
- **Step 3:** Depending on your needs, the licensed clinician may refer you to a qualified network professional in your area for you to consult with in person.

Your care is provided by a staff of certified health professionals, counselors, psychologists, social workers, and medical doctors.



**The *myhealth* program provides professional counseling and referral services for a wide variety of work-related and personal difficulties, including:**

- Dependency or abuse
- Marital or family concerns
- Elder care issues
- Mental health and stress
- Financial problems
- Problem gambling
- Legal questions
- Many others

**NEW! You can now receive up to 6 visits per year, per issue.**

### RESOURCES AT YOUR FINGERTIPS

The *myhealth* program offers a wide variety of articles, videos, quizzes, and audio resources online at [www.mypnkhealth.com](http://www.mypnkhealth.com).

- Child Care Services
- Community Services
- Elder Care Services
- Legal & Financial
- Schools and Camps
- Many more!

## 401(k) Investment Plan

The Pinnacle Entertainment, Inc. 401(k) Investment Plan helps you meet your financial needs when you retire. Your contribution is deducted from your eligible wages before taxes, which means that while you're saving for retirement you're also saving on current income taxes. All full and part-time team members are eligible to participate the first of the month after 90 days of employment. All other team members can participate the first of the month after one year of employment, assuming they worked at least 1,000 hours within that year. For information regarding the company match, visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com). For more information, contact Wells Fargo at **1-800-728-3123**.

## Identity Theft Protection

It's usually after the fact that people learn their personal or financial data has been compromised. Be proactive in protecting your identity through PrivacyArmor from InfoArmor. PrivacyArmor is available in two packages: PrivacyArmor Essential and PrivacyArmor Plus. Both products include:

- Identity and credit monitoring, including an annual credit report and monthly credit score tracking
- Social media reputation monitoring
- Full-service identity restoration
- \$1,000,000 identity theft insurance policy
- Password management solution
- A digital exposure report

## Pre-Paid Legal Plan

With the Hyatt Legal Plan (a MetLife company), you and your dependents have access to two legal plans from a nationwide network of more than 11,000 highly-experienced attorneys. You can get advice on a wide range of legal issues, including estate planning, family law, immigration, real estate, traffic offenses, identity theft, debt collection, and more. If you use an out-of-network attorney, you pay any difference between the actual cost of service and the maximum fee the plan allows.

## Discounted Home and Auto Insurance

Understanding that no one solution is right for everyone, the MetLife Auto & Home® Choice Program makes it easy for you to compare coverage and find the right products at the right price. Sign up for discounted rates of up to 15% off MetLife's standard rates. MetLife will bill the insurance directly to you.

## Discounted Pet Insurance

Protecting your pet is easy and affordable with a variety of plans to cover dogs, cats, birds, and exotic pets in case of thousands of medical issues and conditions related to accidents, poisoning, emergencies, and illness. Coverage is accepted by all licensed veterinarians. Contact Nationwide to sign up today and have them bill the insurance directly to you.

# Other Benefits

## FAST FACTS:

Make saving for retirement a priority with the Pinnacle Entertainment, Inc. 401(k) Investment Plan.

Protect yourself with identity theft, pre-paid legal, and home and auto insurance.

Protect your pets against injury and illness with coverage available through Nationwide.

## QUESTIONS?

Contact Wells Fargo:

- Visit: [www.wellsfargo.com/retirementplan](http://www.wellsfargo.com/retirementplan)
- Call: 1-800-728-3123

Contact PrivacyArmor:

- Visit: [www.myprivacyarmor.com](http://www.myprivacyarmor.com)
- Call: 1-800-789-2720

Contact Hyatt:

- Visit: [www.legalplans.com](http://www.legalplans.com)
- Call: 1-800-821-6400

Contact MetLife:

- Visit: <https://mybenefits.metlife.com>
- Call: 1-800-GETMET8 (1-800-438-6388)

Contact Nationwide:

- Visit: [www.petinsurance.com](http://www.petinsurance.com)
- Call: 1-800-540-2017

You can also call the Pinnacle Benefits Service Center at 1-800-992-8826 or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).

# — BE THE BEST HEALTHY YOU —

## 2018 CONTACT INFORMATION

	Provider Name	Phone	Website
<b>Customer Service, Benefits Enrollment, HSA, HRA, FSAs and myhealth Wellness Program</b>	Pinnacle Benefits Service Center	1-800-992-8826	<a href="http://www.myPNKbenefits.com">www.myPNKbenefits.com</a>
<b>Medical Insurance</b>	Aetna	1-800-296-9045	<a href="http://www.aetna.com">www.aetna.com</a>
	Anthem Blue Cross Blue Shield	1-855-368-8240	<a href="http://www.anthem.com">www.anthem.com</a>
	Cigna	1-855-881-7925	<a href="http://www.mycigna.com">www.mycigna.com</a>
	UnitedHealthcare	1-844-298-8230	<a href="http://www.myuhc.com">www.myuhc.com</a>
<b>Prescription Drug Insurance</b>	CVS Caremark	<i>Customer Service: 1-888-202-1654 Mail Order: 1-800-875-0867</i>	<a href="http://www.caremark.com">www.caremark.com</a>
<b>Dental Insurance</b>	Delta Dental	1-866-808-9995	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
<b>Vision Insurance</b>	Davis Vision	1-800-999-5431 TTY: 1-800-523-2847	<a href="http://www.davisvision.com">www.davisvision.com</a> (Enter client control code 7650)
<b>Life, AD&amp;D, Short-Term and Long-Term Disability Insurance</b>	Sun Life Financial	1-800-247-6875	<a href="http://www.sunlife-usa.com">www.sunlife-usa.com</a>
<b>myhealth Program</b>	Beacon Health	1-866-375-4308	<a href="http://www.mypnkhealth.com">www.mypnkhealth.com</a>
<b>401(k) Investment Plan</b>	Wells Fargo	1-800-728-3123	<a href="http://www.wellsfargo.com/retirementplan">www.wellsfargo.com/ retirementplan</a>
<b>Identity Theft Protection</b>	InfoArmor	1-800-789-2720	<a href="http://www.myprivacyarmor.com">www.myprivacyarmor.com</a>
<b>Pre-Paid Legal Plan</b>	Hyatt	1-800-821-6400	<a href="http://www.legalplans.com">www.legalplans.com</a>
<b>Discounted Home and Auto Insurance</b>	MetLife	1-800-GETMET8 (1-800-438-6388)	<a href="http://www.mybenefits.metlife.com">www.mybenefits.metlife.com</a>
<b>Discounted Pet Insurance</b>	Nationwide	1-800-540-2016	<a href="http://www.petinsurance.com">www.petinsurance.com</a>
<b>Voluntary Benefits</b>	Allstate	1-800-521-3535	<a href="http://www.allstatebenefits.com/Pinnacle">www.allstatebenefits.com/ Pinnacle</a>

### QUESTIONS?

Contact the Pinnacle Benefits Service Center at **1-800-992-8826** or visit [www.myPNKbenefits.com](http://www.myPNKbenefits.com).