

# Your Benefits at a Glance



A [Benefits](#) Administration Communication for **Non-Affiliated Exempt Salaried**  
Associates

**2025**

**Our Purpose: To care deeply about people, helping them to eat well and be happy.**

## SUMMARY OF BENEFITS FOR EXEMPT, FULL TIME NON-AFFILIATED ASSOCIATES

BENEFIT PROVIDER	COVERAGE	COST	ELIGIBILITY
<b><u>Aetna Choice POS II - Plan</u></b>  In Network       Out of Network       <b><u>Or</u></b>  <b><u>Aetna Choice POS II-BASIC PLAN</u></b>  In Network       Out of Network	<p>\$30 office visit PCP co-pay, \$35 Specialist office visits co-pay. \$150 co-pay for emergency room services. \$500 per individual deductible, \$1,000 per family. After satisfying deductible, reimbursement is at <b>70%</b> of the Usual and Customary charge. \$150 co-pay for emergency room services. Wellness covered at 100%.</p> <p>\$1,000 per individual deductible, \$2,000 per family. After satisfying deductible, reimbursement is at 70% of the Usual and customary charge. \$150 co-pay for emergency room services.</p> <p>Following \$2,500 individual deductible, \$5,000 per family. \$30 PCP co-pay after deductible, \$45 Specialist co-pay after deductible. No referral for Specialist. \$150 co-pay for emergency room services. Wellness covered at 100%.</p> <p>Following \$7,000 individual deductible, \$14,000 family deductible coinsurance is 50% of the Usual and Customary charge. \$150 co-pay for emergency room services.</p>	<p>SRS and Participant pays weekly contribution via payroll and any co-pays or deductibles where stated</p> <p>SRS and Participant pays weekly contribution via payroll and any co-pays or deductibles where stated</p>	<p>1<sup>st</sup> of the Month following 30-days of employment</p> <p>1<sup>st</sup> of the Month following 30-days of employment</p>
<b>TELADOC (Aetna)</b>  <b>Call to register:</b> 1-855-835-2362	<p>Telemedicine company that uses telephone and videoconferencing technology to provide on-demand remote medical care via mobile devices, the internet video and phone appointments. Self-registration.</p> <p>\$5 co-pay per visit</p>	<p>SRS and co-pay paid by Participant.</p>	<p>1<sup>st</sup> of the Month following 30-days of employment</p>
<b>PRESCRIPTION (Aetna)</b> <ul style="list-style-type: none"> <li><b>Aetna Choice POS II - Plan</b></li> <li><b>Aetna Choice POS II-BASIC PLAN</b></li> </ul>	<p>Mandatory Generic \$5 co-pay Generic Drugs, \$25 co-pay Preferred Brand, \$40 co-pay Non-Preferred Brand. Generic Maintenance medication are available at ShopRite RX fillable for one co-pay for 90-day supply.</p> <p><b><u>Specialty Drug PrudentRX program:</u></b> requires all eligible specialty to go through CVS Specialty. If a member agrees to enroll in the PrudentRX program they would pay \$0 copay. If a member decides not to enroll in the PrudentRX program, they still have to use CVS Specialty and their copay will be 30%.</p> <p>There are very few drugs not on the Prudent list and for those a member could still use ShopRite or another provider and then the \$150 or \$100 copay would apply</p> <p>Generic 20% coinsurance after 30% co-pay. Preferred Brand 20% coinsurance after 30% co-pay</p>	<p>SRS and co-pay paid by Participant.</p>	<p>1<sup>st</sup> of the Month following 30-days of employment</p>

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<b>Prudent RX:</b>	<p>The PrudentRx Copay Optimization program, offered by CVS Health, is an innovative specialty copay plan design that enables payors to help reduce or eliminate member cost share for specialty medications while saving the plan money. If you currently take a specialty medication, PrudentRX will be reaching out to you directly to coordinate this benefit where you can receive a \$0 copay on the specialty medication.</p> <p>PrudentRX continuously monitors and identifies members that may benefit from the program. Once identified, the member will be enrolled in the program and PrudentRX will outreach to assist with filing the Specialty Drug.</p>	SRS	<p>1<sup>st</sup> of the Month following 1- year of employment with 1,000 hours of service.</p> <p>Evaluated each year for continued eligibility.</p>
<b>Memorial Sloan Kettering (MSK) Direct</b>  <b>Phone:</b> 833-986-1757 or 646-499-2562 <b>Online:</b> mskcc.org/gs-well-being	Provide you and your family with dedicated access to exceptional cancer care, support and expert resources from the world's leading specialist at Memorial Sloan Kettering Cancer Center.	SRS	<p>1<sup>st</sup> of the Month following 1- year of employment with 1,000 hours of service.</p> <p>Evaluated each year for continued eligibility.</p>
<b>Meru Health</b>	This is a 12 -week program is clinically proven to reduce anxiety, stress, depression, and long-term burnout. In addition, you can access the entire program from the convenience of your smartphone. Visit <a href="http://meruhealth.com/aetna">meruhealth.com/aetna</a> to get started today.	SRS	<p>1<sup>st</sup> of the Month following 1- year of employment with 1,000 hours of service.</p> <p>Evaluated each year for continued eligibility.</p>
<b>AETNA DENTAL PPO PLAN</b>  Tel: 1-800-843-3661  In-Network  Out- of- Network	<p>Deductible \$25 individual, \$75 family, deductible is waived for preventative services.</p> <p>Annual Maximum Benefit \$2,000 per person.</p> <p>Preventive services 100%, Basic services 85%, Major services 65%, Orthodontia 50%. Lifetime Orthodontia Maximum for dependent children \$1,500 in-network</p> <p>Crown replacement – Must be in place at least 8 years before replacement.</p> <p>Full mouth x-ray as 1 per 5 years.</p> <p>Preventive paid at 100%, Basic services covered at 80%, Major services covered at 60%, Orthodontia 50% of services to \$1,000 maximum.</p> <p>Crown replacement – Must be in place at least 8 years before replacement.</p> <p>Full mouth x-ray 1 per 5 years.</p>	SRS and co-pay paid by Participant.	1 <sup>st</sup> of the Month following 30-days of employment
<b>VISION PROGRAM</b>  Davis Vision @ Versant Health  (In Network - need your Social Security #)  Tel: 1-800-999-5431	<p><b>In-network</b> benefits covered at 100%. Must obtain eye exam and materials from Davis Vision approved doctor. On routine eye exam per 12 months covered in full. Lenses choice between 2 pairs of spectacle or contact lenses or 1 pair of each. 2 frames per 24 months. Dependents under age 13 can receive frames every 12 months.</p> <p><b>Out of network</b> Associate must pay provider directly. One routine eye exam per 12 months. Davis Vision will provide reimbursement of eye exam as follow 100% of first \$25, 80% thereafter per calendar year. You may submit charges for maximum of one pair of eyeglasses or contact lenses. 80% of material cost to a maximum of \$300. 1 frame per 24 months.</p>	SRS and co-pay paid by Participant.	1 <sup>st</sup> of the Month following 30-days of employment

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<b>LIFE INSURANCE AND ACCIDENTAL DEATH &amp; DISMEMBERMENT</b>  MetLife Insurance Company  <b>Voluntary Optional Life Insurance</b>	A death benefit and accidental death and dismemberment equal to one and one-half times your annual base salary to a maximum of \$500,000. This benefit is provided to the associate regardless if they participate in the medical programs.  Voluntary Optional Life Insurance – Term Life available at 1, 2, 3 times your base annually salary for purchase. Additional Life Insurance available for Spouse and dependent children. Guaranteed Issuance available at initial eligibility. Later enrollment requires medical evidence or Evidence of Insurability (EOI). Age reductions have been removed for Optional Life – Associate & Optional AD&D benefits.	Paid by SRS          Participant Paid	1 <sup>st</sup> of the Month following 30-days of employment										
<b>LONG TERM DISABILITY</b>  MetLife Insurance Company	Provides up to 60% of base salary to age 65, less any statutory benefits such as State Disability and Social Security. \$5,000 maximum monthly benefit. (LTD is subject to federal tax unless benefit is paid by the associates.)  Option One: Paid by SRS – any benefit received is taxable.  Option Two: Paid by Participant weekly – any benefit received is not subject to Federal Tax, if you have paid for the benefit for a 3-year period.	Two options  Paid by SRS  Or  Participant Paid	1 <sup>st</sup> of the Month following 30-days of employment										
<b>FLEXIBLE SPENDING ACCOUNT</b>  Inspira Financial  Dependent Care Account  Health Care Account	<b>Dependent Care FSA</b> use pre-tax weekly payroll deduction to this account to cover any “plan qualified” dependent care expenses. The annual plan minimum is \$260, maximum is \$5,000 family or \$2,500 if spouse contributes through their plan.  <b>Health Care FSA</b> use pre-tax dollars to pay for qualifying out-of-pocket eligible healthcare expenses for you, your spouse and all dependents you list on federal tax return. Annual minimum is \$250, maximum is \$3,300.	Associate contributions only,      Annual Election required	1 <sup>st</sup> of the Month following 30-days of employment										
<b>EMPLOYEE ASSISTANCE PROGRAM “EAP”</b>  <a href="http://www.AetnaEAP.com">www.AetnaEAP.com</a> <b>Company ID: SHOPRITE</b> Phone #: 1-888-238-6232	Confidential resource center provides guidance and counseling for SRS associates and family members. Service available 24-hours per day. Topics covered include everyday issues, Legal & Financial issues, Parenting & Childcare, Disability Accessibility, Education and Schooling.	Paid by SRS	Anytime during employment period										
<b>SALARY CONTINUATION</b>  EXEMPT ASSOCIATES ONLY	Benefit for exempt associates full weekly base salary for up to 24 weeks during a two (2) calendar year period (refers to look back period”), depending upon length of service. Medical evidence required. Additionally, <b>must file</b> for disability or workers compensation SRS receives those payments until your eligible benefit expires:  <table><tr><th><u>Years of Service</u></th><th><u>Maximum Benefit</u></th></tr><tr><td>1 - 2 years’ service</td><td>30-days</td></tr><tr><td>3 - 4 years’ service</td><td>60-days</td></tr><tr><td>5 - 9 years’ service</td><td>90-days</td></tr><tr><td>10 + years’ service</td><td>120-days</td></tr></table>	<u>Years of Service</u>	<u>Maximum Benefit</u>	1 - 2 years’ service	30-days	3 - 4 years’ service	60-days	5 - 9 years’ service	90-days	10 + years’ service	120-days	Paid by SRS	Eligible after completing one-year of continuous service.
<u>Years of Service</u>	<u>Maximum Benefit</u>												
1 - 2 years’ service	30-days												
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<b>401 (k) SAVINGS PLAN</b> Plan: 772811-01  Empower  participant.empower-retirement.com 844-465-4455	Employee pre-tax deferred contributions 1% to 15%  Matching: 40% of the Participant's Basic Elective Deferral Contributions not in excess of 3% of the Participant's Salary, plus 20% of the Participant's Basic Elective Deferral Contributions in excess of 3% of the Participant's Salary but not in excess of 6% of the Participant's Salary. Thus, in no event shall Matching Contributions exceed 1.8% of such Participant's Salary.	Participant Payroll Contribution, Company Match paid by SRS	1 <sup>st</sup> Quarter following 12 months of service.  1000 hours of service and age 21. Entry into the Plan is quarterly, January, April, July and October.
<b>PENSION PLAN</b>  Empower  participant.empower-retirement.com  844-465-4455 <b>Rollover Assistance:</b> 888-737-4480	Safe Harbor Non-elective Employer contributions  Employer shall contribute to each Participant a Safe Harbor Non-elective Contribution of 3% of the Participant's Salary. This Safe Harbor Contributions are vested at 100% once participant is eligible to participant in the Plan.	Paid by SRS	1 <sup>st</sup> Quarter following 12 months of service.  1000 hours of service and age 21. Entry into the Plan is quarterly, January, April, July and October
<b>Tuition Reimbursement</b>	Reimbursement of Tuition costs that enhance associates job skills and supermarket career goals through further education. Courses must pertain to job duties at ShopRite. Reimbursement covers tuition, books and fee costs. Maximum of \$2,000 per calendar year, course must be part of curriculum of an institution of higher learning. Application and approval required before taking class. Reimbursement following achievement of "C" or better or Pass on other courses. No more than two courses per semester.	Reimbursement by SRS	Eligible to apply following three months of service, reimbursement payable following one year of service with continuous service
<b>VACATION BENEFIT</b>  All vacation time is on the "Accrual Basis", unused vacation time does not accumulate and there is no pay for unused days or carryover. Associate out on leave of absence do not earn or accrue vacation time while on a leave.	Beginning the associate's 7 <sup>th</sup> month through the 5 <sup>th</sup> year of employment associates earn 833 days for each full month employed for a maximum of 10-days' vacation per year.  After the 5 <sup>th</sup> year of employment the accrual rate is 1.25 days of vacation pay for each full month employed for a maximum of 15 days of vacation pay per year.  After the 10 <sup>th</sup> year of employment the accrual rate is 1.667 days of vacation pay for each full month employed for a maximum of 20 days of vacation pay per year.  After the 20 <sup>th</sup> year of employment the accrual rate is 2.085 days of vacation pay for each full month employed for a maximum of 25 days of vacation pay per year.	Paid by SRS	Following 6 months of service
<b>PERSONAL DAYS</b>	First calendar year personal days are prorated basis of 1 day for every 2 months to a maximum of 6 personal days per calendar year.  Thereafter eligible for 6 days per calendar year. Unused days are forfeited each year.	Paid by SRS	1 <sup>st</sup> of the month following 60-days of continuous service
<b>HOLIDAYS</b>  Holiday Notice sent once a year to: 1. Store Team 2. Store Support Center	Approved Annually, Recognized paid holidays:  <div style="display: flex; justify-content: space-between;"> <div> New Year's Day  Memorial Day  Independence Day  Martin Luther King Day </div> <div> Labor Day  Thanksgiving Day  Christmas Day </div> </div> Plus three (3) floating holidays. (Subject to department coverage for Holidays when stores are open.)	Paid by SRS	1 <sup>st</sup> of the month following 30-days of continuous service

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<b>Wakefern Credit Union</b>	Applications submitted with \$6.00 fee. Services include savings accounts, free checking accounts, direct deposit, automatic payroll deduction, MAC cards, auto, motorcycle, boat, mortgage loans, amusement park discounts, 24/7 telephone access via audio response system, access to low cost insurance.	Participant Payroll Deductions	Immediately
<b>Scholarship Programs</b>	Children and grandchildren of full time, non-affiliated Wakefern/ShopRite Associates are eligible to compete for Scholarship Programs awards annually. (Watch for emails and postings for programs available each year from Wakefern and ShopRite.)	Paid by Wakefern & ShopRite Supermarkets, Inc.	1 year of service as of the due date of application
<b>Verizon Wireless Discount</b>	Save 22% discount on your Primary Monthly Plan (All ShopRite Employees)	Corporate Discount	All Employees Eligible with proof of employment
<b>AT &amp; T Discount</b>	Save 22% on Primary monthly Plan (All ShopRite Employees)	Corporate Discount	All Employees Eligible with proof of employment
<b>The Buyer's Edge</b>	A discount purchasing program covering many items such as auto, audio equipment, TV's, Jewelry, etc.	Corporate Discount	All Employees Eligible
<b>VOLUNTARY BENEFITS (METLIFE)</b>  Client Service Center: 800-821-6400 Contact at: <a href="http://www.members.legalplans.com">www.members.legalplans.com</a>	<p><b>AUTO, HOME AND PET INSURANCE</b> – You can enroll at any time throughout the year for those insurance products. Payment is facilitated via a weekly payroll deduction.</p> <p><b>LEGAL PLAN</b> – Provides access to Legal Expertise for both expected and Unexpected events such as buying or selling a home, starting a family dealing with identity theft, caring for aging parents, and much more. Contact MetLife.</p> <p><b>Identity Theft &amp; Fraud Protection</b> - Current Identity Theft &amp; Fraud Protection coverage is a part of Legal Plan and it's administered by MetLife + Aura Identity &amp; Fraud Protection starting from 10/01/23.</p>	Associate contributions only          Annual Election required	1 <sup>st</sup> of the Month following 30-days of employment
<b>Aetna Support Services</b>	<p><b>Transform Diabetes</b> – Customized care, comprehensive clinical support Convenient care delivery and support</p> <p><b>Transform Oncology</b> – Elevated standard of care. Improving outcomes for our members through personal care at every step of their cancer journey</p>	Paid by SRS	1 <sup>st</sup> of the Month following 30-days of employment

This is a brief summary of the benefits provided for your information. It is not a full description of plan coverages' or restrictions. Contact your Benefits Department for additional information.