Powerful Benefit Solutions

2024 Benefit Guide





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This guide provides an overview of the benefits program. It is not intended to be a complete description of the benefits or official summary plan descriptions for these programs. If there is a conflict between this guide and the official plan documents, the plan documents will govern. Roper Technologies reserves the right to modify or terminate any of the described benefits at any time and for any reason. The descriptions of these benefits are not a guarantee of current or future employment or benefits. For information about the specific plans available to you, please contact Human Resources.

Benefits Overview

We are proud to offer quality benefits designed to keep you healthy physically, emotionally, and financially. We value your hard work and contributions and are pleased to provide a collection of benefits options. You have access to health plans, wellness support, counseling, income protection, financial services, and much more.

We invite you to take a close look at the information provided in this guide to learn more about the benefits available. Taking the time to research your options will help you choose the plans that best meet your family's needs now and in the future.







This Guide Is Interactive

- Use the top menu to go directly to a chapter within this guide.
- Use the sub-navigation on the left to go directly to a specific page within the current chapter.
- Use the buttons in the bottom right corner to navigate or print.

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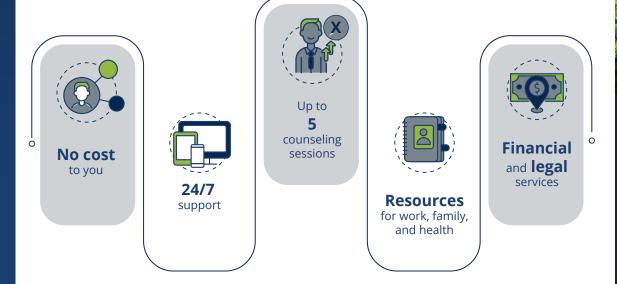
Dental

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Valuable Health & Wellness Resources

Employee Assistance Program (EAP) with TELUS

Mental health includes emotional, psychological, and social well-being. Leverage EAP services when life throws challenges your way. The Employee Assistance Program (EAP), through TELUS (formerly LifeWorks), can help you and members of your household navigate professional, health, and personal issues. This includes things such as elder care, illness, work-life balance, grief, stress, depression, financial counseling, family challenges, legal matters, and much more.





Contact the EAP 24/7/365

TELUS

Call: **866-695-6327**

Visit: **one.telushealth.com**

Download: **TELUS Health One** app

Note: Unregistered individuals will receive an invitation email from TELUS. The invitation contains your unique web registration code. Check your email for monthly reminders.

Health & Wellness Resources

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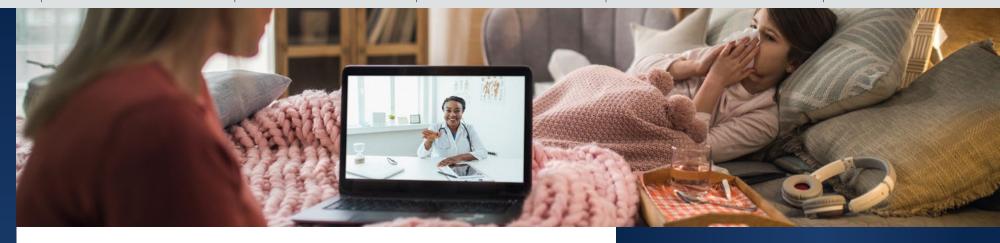
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Teladoc Virtual Visits

Skip the waiting rooms and scheduling hassles. Available with BCBS FL plans, Teladoc puts you in control of when and where you access care. You have access to:

Teladoc General Medical

Licensed physicians are available any time of the day or night for:

- Diagnosis and treatment of common medical conditions, such as colds, allergies, skin conditions, and more
- Referrals to specialists
- Prescriptions

Teladoc Mental Health

Licensed therapists and psychiatrists are available 7 days a week, 7 am - 9 pm in your local time zone to help you navigate stress, depression, marital issues, and more.

Teladoc Dermatology

Dealing with skin issues like infections, acne, or eczema? Take a picture of your skin, upload it to your Teladoc account online or on the app, and receive a treatment plan within two days!

Help Is Just a Call Away

Be prepared and register now!

Teladoc

Call: **866-789-8155**

Visit: myhealthtoolkitfl.com or teladoc.com/go

Download: **Teladoc** mobile app



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Choose the Right Place to Go for Care

Need medical attention, but it's not a true emergency? Under a BCBS FL medical plan, save time and money by using Teladoc services or visiting urgent care. Emergency room costs are expensive, and visits can take hours! Teladoc services and urgent care centers provide quality care just like the ER, and if your issue is non-life-threatening, you could save hundreds of dollars and avoid hours in a waiting room.

Teladoc Virtual Visit	Primary Care Provider (PCP)		
Cost: \$ Time: 🌑	Cost: \$\$ │ Time: ●		
Benefit:	Benefit:		
• Lower cost	In-person examination		
Speak to a doctor from anywhere	Reasonable price in-network		
 Reduced waiting room time 	Familiarity with health history		
Reasons to go:	Reasons to go:		
Minor illnesses, injuries, skin conditions, and mental health concerns	Preventive care		
 Limit exposure to contagious diseases 	Treatment of chronic illnesses		
May receive specialist referrals or prescriptions	Follow-up visits and referrals		
Urgent Care Center	Emergency Room		
Cost: \$\$\$ │ Time: ●	Cost: \$\$\$\$ Time: • •		
Benefit:	Benefit:		
Lower cost than an ER visit	Necessary for life-threatening conditions		
 Same-day visits are often available 	Always open		
Reasons to go:	Reasons to go:		
 Medical conditions that need prompt attention 	Sudden onset of severe medical condition		
Treatment of minor injuries or illnesses	Treatment of severe injuries or illnesses		
May offer lab tests and X-rays onsite	Treatment after an accident		

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My Health Toolkit

Make the most of your medical plans through the BCBS FL secure online health care site. Sign up today to have access on the go!

- Verify medical and prescription eligibility and benefits.
- · Research specific health issues.
- · Find doctors, hospitals, and pharmacies.
- Estimate medical and prescription costs.

- · Access your electronic ID card.
- No cost programs for maternity, behavioral health digital programs, and care management.
- Find discounts and perks available to members only.

My Health Novel — \$0 cost to you!

We want to make reaching your wellness goals easy and attainable. When you enroll in a BCBS FL plan, you have access to My Health Novel programs, at no cost to you!

Weight Management Program

If you're interested in starting new healthy habits or losing weight, this program is for you. It gives you access to the best nutrition, physical activity, and weight management tools, group support, and programs to help lower the risk of heart disease and Type 2 diabetes.

Musculoskeletal Health Program

If you have mobility issues, this program will help match you with a mobility solution that fits your physical and emotional needs and gets you on the fastest path to recovery. Programs available range from general mobility solutions to a clinical team with technology for Musculoskeletal (MSK) care.

Behavioral Health Program

My Health Novel's mental health network includes best-in-class mindfulness and cognitive behavioral therapy to help you have less stress, improved sleep quality, increased happiness, and decreased clinical care. This program addresses mental health conditions and matches you with a program that best fits your needs, from self-care resources to therapy/psychiatry.

My Health Toolkit

Visit: myhealthtoolkitfl.com

Download: My Health Toolkit Mobile App
Scan the QR Code:





To get started, visit **myhealthtoolkitfl.com** > **Benefits** > **My Health Novel.** Complete the assessment and get matched with resources and the best program for you.

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Which Medical Plan Is Right for You?

Our goal is to help you be the best version of yourself, and this starts with taking care of your overall health. Choosing the best plan is the first step to living your healthiest life.

When deciding which medical plan is the best fit for you and your family, it's important to consider the total cost of coverage. This includes what you pay in premiums and what you pay providers. While each medical plan covers in-network preventive screenings in full, they may vary on annual deductibles, copays, and levels of coinsurance. This means you may pay more out-of-pocket costs with one plan versus another.

Below are two examples of typical health care users. You may find some similarities to your own situation, and they may help you decide which plan to enroll in.

Tyrone

Plan Choice: HDHP

Coverage: Individual

Plan Usage: Low

Lifestyle:

Tyrone is healthy and active and does not visit the doctor often (outside of regular preventive visits). Tyrone takes ongoing maintenance medication.

This plan offers:

- ✓ Low premiums
- ✓ Company Health Savings Account (HSA) contribution to help offset costs
- ✓ Continued access to unused HSA funds



Julia

Plan Choice: PPO

Coverage: Family

Plan Usage: High

Lifestyle:

Julia is a parent of two young children, who makes frequent visits to the doctor and fills prescriptions regularly, as well as occasional urgent care and FR visits.

This plan offers:

- ✓ Predictable costs
- ✓ Lower deductibles and copays
- ✓ Low prescription drug costs



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Understanding the High Deductible Health Plan (HDHP)

The HDHP offers a variety of benefits, but it's important to understand how the plan works to determine if it's the right choice for you.

Benefits Exclusive to the HDHP

There are a variety of drugs and services that are covered 100% as preventive care. This coverage extends to many conditions, including heart disease, asthma, depression, liver disease, and more. For example, no-cost A1c testing and insulin medication may be prescribed to help manage diabetes. To view an inclusive list, go to UKG Pro > Myself > Benefits > Manage My Benefits > Documents or to roperbenefits.info.









Pay for Medical Care

You will pay 100% of the costs for medical care until you reach the deductible. You can use your Health Savings Account (HSA) dollars to pay for expenses tax-free. See page 14 for more information on the HSA.

Share the Cost

deductible, you and the plan will share the cost. The plan will cover 80% until you meet your out-of-pocket maximum.



Reach the Limit

When you reach the out-of-pocket maximum, the plan will pay 100% of eligible medical and prescription costs for the rest of the plan year.



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Medical Plan Comparison

Both plans cover the same services and use BCBS FL providers, who have agreed to charge lower, contracted rates (known as in-network rates) for services.

- To find in-network providers, visit myhealthtoolkitfl.com > Find Care > Enter network.
 - **Networks:** Georgia residents (RTK Blue Open Access POS), Florida residents (RTL Network Blue), All other states (RTC BlueChoice PPO)

Questions?

If you have questions when planning your enrollment, call BCBS Pre-Enrollment at **877-705-5429**.

Plan Fastures	BCBS HDHP	BCBS PPO In-Network	
Plan Features	In-Network		
Annual Deductible Individual/Family	\$2,500 / \$5,000	\$800 / \$1,600	
Annual Out-of-Pocket Maximum (OOPM) Individual/Family	\$5,500 / \$11,000	\$4,000 / \$8,000	
Company HSA Contribution Individual/Family	\$175/quarter (\$700/year) \$300/quarter (\$1,200/year)	N/A	
	You pay:	You pay:	
Preventive Care Visit	Covered in full (includes certain chronic condition services, see page 8)	Covered in full	
Teladoc Medical Dermatology Mental Health	\$55 (or 20% after deductible, up to OOPM) \$85 (or 20% after deductible, up to OOPM) \$90 therapist-\$220 initial psych (or 20% after deductible)	\$10 copay \$40 copay \$25 copay	
Primary Care Visit	20% after deductible, up to OOPM	\$25 copay	
Specialist Visit	20% after deductible, up to OOPM	\$40 copay	
Lab & X-ray	20% after deductible, up to OOPM	20% after deductible, up to OOPM	
Urgent Care	20% after deductible, up to OOPM	\$50 copay	
Emergency Room	20% after deductible, up to OOPM	\$200 copay (waived if admitted)	
Outpatient & Inpatient Hospital Services	20% after deductible, up to OOPM	20% after deductible, up to OOPM	
Outpatient Mental Health Services	20% after deductible, up to OOPM	20% after deductible, up to OOPM	

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Generic Incentive Program

Save money by using generic prescriptions over brand name medications. Generic drugs contain the same active ingredients as brand name drugs, but typically cost much less. If you or your doctor request a brand-name drug when a generic equivalent is available, you will pay the brand copay or coinsurance (depending on your plan), plus the difference in cost between the generic drug and the brand drug. You will never pay more than the actual cost of the brand drug.

Prescription Drugs

BCBS FL medical plans have an integrated pharmacy benefit with OptumRx. View drug lists at myhealthtoolkitfl.com, click on Prescription Drugs.

Plan Features	BCBS HDHP	BCBS PPO
Plan reatures	In-Network	In-Network
Generic		\$10 copay (31-day supply - retail) \$20 copay (90-day supply - retail or mail order)
Preferred Brand	20% after deductible, up to OOPM* (Certain chronic condition prescriptions are covered in full. See page 8)	\$35 copay (31-day supply - retail) \$70 copay (90-day supply - retail or mail order)
Non-Preferred Brand		\$60 copay (31-day supply - retail) \$120 copay (90-day supply - retail or mail order)
Specialty		20% up to \$300/prescription (31-day supply - retail)

^{*}OOPM stands for Out-of-Pocket Maximum.

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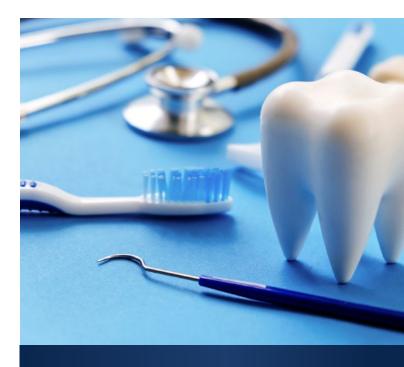
Dental Coverage

Did you know that good dental care improves your overall health? We've partnered with Delta Dental to help you maintain a healthy smile through regular preventive dental care and coverage for any services you need.

- You may visit any dentist, but you'll receive the highest level of coverage when you visit in-network providers.
- If you visit an out-of-network provider, you will not benefit from discounted rates and will pay more for services.
- You may pay an annual deductible for select services.
- ID cards are not issued but can be accessed from the Delta Dental website.

Plan Features	Delta Dental PPO Plan	
Plan Features	In-Network*	
Annual Deductible (Individual/Family)	\$50 / \$150	
Calendar Year Benefit Maximum	\$2,500	
	You pay:	
Diagnostic & Preventive Services (e.g., x-rays, cleanings, exams)	\$0, no deductible	
Basic & Restorative Services (e.g., fillings, extractions, root canals)	20% after deductible	
Major Services (e.g., dentures, crowns, bridges)	50% after deductible	
Orthodontia	50% up to \$2,500 lifetime maximum; no deductible	
	·	

^{*}For out-of-network services, members pay applicable coinsurance plus any amount that exceeds the usual, customary, and reasonable charge.



Tools & Resources

Visit deltadentalins.com to:

- Find an in-network dentist
- View benefit details and claims
- Plan ahead and estimate costs
- Access ID cards

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Vision Coverage

Keep your vision clear and your eyes in good health with regular eye exams. The VSP vision plan offers an extensive network of optometrists and vision care specialists. Don't forget, you'll save money by visiting in-network providers.

	VSP PPO
Plan Features	In-Network
	You pay:
Exam every 12 months	\$15 copay
Primary EyeCare services	\$20 copay
Frames every 24 months	\$150 allowance
Lenses every 12 months	
Single, Bifocal & Trifocal	\$25 copay
Standard Progressives	Covered in full
Anti-reflective eyeglass lens coating	\$30 copay
Contact Lenses every 12 months	
Contact lenses	\$130 allowance
Exam & fitting	Up to \$60 copay



Tools & Resources

Visit **vsp.com** to:

- Find a provider in the VSP **Signature** network near you
- View benefit details
- Explore exclusive VSP member extras and special offers
- Access ID cards

Cost

Your Cost for Coverage



Your Cost for Coverage

Your monthly payroll deductions for medical, dental, and vision are shown below.

Benefit Plan	Employee Only	Employee + Spouse / Domestic Partner*	Employee + Child(ren)	Employee + Family*
Medical				
BCBS HDHP	\$95	\$355	\$175	\$412
BCBS PPO	\$190	\$575	\$335	\$692
Dental				
Delta Dental	\$23	\$47	\$40	\$75
Vision				
VSP	\$8	\$13	\$13	\$19

^{*}When covering a domestic partner, the employee/dependent child portion of the premium is deducted pre-tax, the domestic partner portion is deducted post-tax, and the domestic partner portion paid by the company is included in the gross income of the employee for tax purposes. This may increase your federal and state taxes.

Working Spouse Medical Coverage Surcharge

If medical insurance is offered to your spouse or domestic partner through their employer, but you choose to insure them through your medical plan instead, you will pay a working spouse medical coverage surcharge of an additional \$100 per month, pre-tax. Certain exceptions apply.

See **UKG Pro > Myself > Benefits > Manage My Benefits** for details.

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How the Health Savings Account (HSA) Works

How Contributions Are Made

When you enroll in the BCBS FL HDHP, you are eligible for an HSA through HSA Bank to help pay for health care expenses not covered by your medical, dental, or vision plan. An HSA also makes it easy to save toward medical expenses in retirement, or invest with tax-free earnings.

You can contribute pre-tax dollars from your pay, up to the annual IRS maximum, to use for eligible health care expenses. When you enroll in the HSA, you will receive an HSA Bank debit card. You can also submit claims online through your personal account at **hsabank.com**. The company will contribute to your HSA each quarter if you are enrolled in the HDHP and maintain an open HSA.

Coverage Type	2024 IRS Maximum Contribution	2024 Company Contribution*	2024 Maximum Employee Contribution	Age 55+ Catch-Up Contribution
Employee Only Coverage	\$4,150	\$700	\$3,450	Additional #1 000
Family Coverage	\$8,300	\$1,200	\$7,100	Additional \$1,000

Company HS	Company HSA Contribution Funding Schedule**				
Open Enroll Jan 1	Feb 15	Apr 30	Jul 31	Oct 31	
New Enroll Jan 2 – Jan 31	Mar 15	Apr 30	Jul 31	Oct 31	
New Enroll Feb 1 – Mar 31	N/A	Apr 30	Jul 31	Oct 31	
New Enroll Apr 1 – Jun 30	N/A	N/A	Jul 31	Oct 31	
New Enroll Jul - Sep 30	N/A	N/A	N/A	Oct 31	

^{*}The annual company contribution will be funded on a prorated, quarterly basis throughout the year (February/March, April, July, and October or as soon as administratively feasible thereafter).

^{**}Funded on listed dates or as soon as administratively feasible thereafter.



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How to Use Your HSA

Contribute funds

\$4,150 individual maximum \$8,300 family maximum

Get free money

- Employee only: \$700/year (\$175 prorated)
- If you cover others: \$1,200/year (\$300 prorated)
- Prorated and deposited quarterly

Use the funds

- Pay your deductibles
- Pay for qualified medical, dental, & vision expenses
- Pay for anything after you're age 65, and then only pay taxes – like a 401(k)

Let it grow

- Unused funds remain in your account
- Invest your balance to potentially earn more
- Your account goes with you even if you leave the company

Enjoy the savings*

- No tax on the money you contribute
- No tax on the cost of eligible expenses
- No tax on the interest you earn

What About the Fine Print?

- You must be enrolled in the qualified BCBS FL HDHP.
- You cannot be covered under another non-qualified health plan, including your spouse's Health Care Flexible Spending Account.
- You cannot be enrolled in Medicare or Tricare.
- You cannot be claimed as a dependent on someone else's tax return.
- You must have a valid Social Security or tax ID number and physical US address in UKG Pro to establish your HSA.

Questions? Refer to **IRS Publication 969** for a complete list of eligible expenses and HSA rules.

HSA Highlights

- You must be enrolled in the HDHP with HSA to be eligible to participate.
- Take advantage of company funding to help pay your annual deductible.
- Contributions, qualified expenses, and earnings are tax-free.
- Personal contributions help lower your taxable income.
- Funds never expire, and the account goes with you, even into retirement.

^{*}State taxes may still apply in CA and NJ. For detailed tax implications of an HSA, please contact your professional tax advisor.

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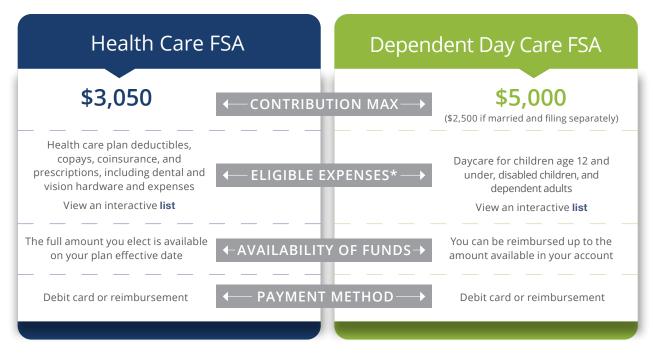
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How the Flexible Spending Accounts (FSAs) Work

Flexible Spending Accounts (FSAs), administered by WEX, offer a smart way to stretch your dollars by setting aside pre-tax money to pay for eligible health care and dependent day care expenses. Each year, you must elect an annual amount to contribute. Your contributions will be deducted pre-tax from your pay, which helps reduce your taxable income.



Fine Print

- FSAs have a strict "use it or lose it" rule. Unused funds at the end of the plan year (December 31) will be forfeited, per IRS regulations.
- You have until March 31 of the following year to submit claims for reimbursement.
- You may not have a Health Care FSA and an HSA at the same time.
- If your spouse is enrolled in a Health Care FSA through their employer, you are automatically eligible for that FSA, making you ineligible for an HSA.
- The Dependent Day Care FSA is available if you and your spouse (if married) work or attend school full-time. Expenses must be incurred and paid to a vendor, and vendor's tax ID or SSN must be provided on the claim submitted.

^{*}Refer to IRS Publication 502 and 503 for a complete list of eligible expenses. You can also view an interactive list at: https://www.wexinc.com/insights/benefits-toolkit/eligible-expenses/

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Commuter Benefit Plan

Set aside tax-free funds for your commute to and from work. Eligible expenses include transit passes, tokens, fare cards, ticket books, vanpool costs, and parking costs near your place of work or near public transportation.

The maximum monthly contribution limit is set by the IRS for transit and parking expenses. If funds are not used during one month, they are rolled over to the next month. You can change your contribution level on a month-to-month basis in **UKG Pro > Myself > Benefits > Manage My Benefits**.

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Life and AD&D Insurance

Basic Life and AD&D Insurance

Life and Accidental Death and Dismemberment (AD&D) insurance, through Lincoln Financial Group, provide financial security to you and your family if you pass away or become seriously injured. As an eligible employee, you receive Basic Life and AD&D insurance at **no cost to you**.

- **Life insurance** protects your family by paying a benefit if you die from an illness, accident, or any other cause.
- **AD&D insurance** pays you or your family a benefit if you are killed or injured due to an accident. If a covered accident causes your death, your beneficiary receives a benefit from the plan. If a covered accident causes you to lose a body part or the ability to hear, see, or speak, you receive a benefit from the plan.

Choosing a Beneficiary

You may choose anyone to be the beneficiary of your Life and AD&D policy in the event of your death or serious injury. Review your beneficiary designation periodically to ensure it reflects your current wishes. You may change your beneficiary at any time.

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Voluntary Life and AD&D Insurance

For even more coverage, you may buy Voluntary Life and AD&D for yourself, your spouse/domestic partner, and your dependent child(ren).

Voluntary Life and AD&D Options		
You	\$10,000 increments up to the lesser of 5x salary or \$750,000* (New hires can elect up to \$300,000 guarantee issue without EOI)	
Spouse or	\$5,000 increments up to 100% of your benefit, not to exceed \$250,000*	
Domestic Partner	(New hires can elect up to \$50,000 guarantee issue without EOI)	
Dependent Children	\$10,000 for each dependent child	

^{*}Evidence of Insurability (EOI) will be required within 30 days of enrollment.

Note: On January 1, after you turn age 65, the elected amount of Basic and Voluntary Life and AD&D benefits will reduce. See summary plan description for additional plan details.

How Much Voluntary Life and AD&D Insurance Should I Buy?

When deciding how much Voluntary Life and AD&D coverage to buy, consider the following:

- **1.** How much will your dependents need to pay debts, such as a mortgage, car loan, or credit card balances?
- 2. How much do your dependents need to maintain their current standard of living?
- **3.** What kind of future would you like to provide for your dependents or others who depend on you for financial support?

Voluntary Life and AD&D Insurance Premiums

Employee/ Spouse Age	Life Rate/\$1,000 of Coverage	AD&D Rate/\$1,000 of Coverage
<25	\$0.05	\$0.02
25 -29	\$0.06	\$0.02
30-34	\$0.08	\$0.02
35-39	\$0.09	\$0.02
40-44	\$0.110	\$0.02
45-49	\$0.173	\$0.02
50-54	\$0.310	\$0.02
55-59	\$0.495	\$0.02
60-64	\$0.775	\$0.02
65-69	\$1.375	\$0.02
70-74	\$2.210	\$0.02
75+	\$2.648	\$0.02
Child	\$0.09	\$0.02



What Is EOI?

Evidence of Insurability (EOI) is the process of providing health information to qualify for certain types of insurance coverage. If you elect or increase Voluntary Life coverage, you may be required to submit a health questionnaire within 30 days. Your questionnaire will be reviewed by the carrier, and you will be notified of their decision directly. Visit **MyLincolnPortal.com** (company code: ROPER) to complete the online EOI form.

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Disability Coverage

To assist you financially, you are automatically enrolled in disability coverage through Lincoln Financial Group, which provides partial income replacement if an accident or illness prevents you from working.

Short-Term Disability (STD)

STD coverage provides you with a portion of your earnings if you are unable to work due to a non-work-related illness or injury. You are automatically enrolled in STD coverage at **no cost to you**. If you're unable to work due to illness or injury, contact Lincoln Financial Group. Once the claim is approved, your disability benefits begin the day you are injured or after a 7-day waiting period for illness.

Short-Term Disability (STD)		
Percent of Earnings 60%		
Elimination Period	Period 0 days injury, or 7 days illness	
Maximum Duration	180 days	

Long-Term Disability (LTD)

LTD pays you a portion of your earnings if you cannot work for an extended period due to a disabling illness or injury. You are automatically enrolled in LTD coverage at **no cost to you**. The benefit you receive is considered taxable income.

Long-Term Disability (LTD)			
Percent of Earnings	60%		
Monthly Maximum	\$11,000		
Elimination Period	180 days		
Maximum Duration	ration Up to Social Security Normal Retirement Age		

Note: Benefits may be reduced by other sources of disability income you may qualify for such as state disability programs, Social Security, Workers' Compensation, etc.

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Wealth Building Benefits

Being retirement-ready is an important part of financial wellness. The key to success is to start saving now.

401(k) Retirement Plan

A 401(k) is a retirement savings vehicle that allows you to defer pre-tax income up to the IRS limit per year. The 401(k) Plan, administered by Vanguard, offers a variety of saving and investment options to reach long-term financial goals.

Eligibility

All active US employees age 18 and older are eligible for the 401(k) Plan (provided you do not meet excluded employee qualifications).

Find more information about Plan eligibility and features in the Vanguard 401(k) enrollment brochure provided to you at hire and view the summary plan description in the **Vanguard website** (under **Explore > Plan Details > Plan Communication**).

Log in to your account at vanguard.com/retirementplans to:

- Elect/change traditional 401(k), Roth 401(k), and/or catch-up contributions
- Review plan features, benefits, and the summary plan description
- · View/change investments
- · View/change communication preferences
- Start a rollover from a former employer's plan or IRA
- Designate beneficiaries

Remember: 401(k) plans have annual IRS contribution limits. If enrolling in the 401(k) mid-year, consider how much you have already contributed in the current calendar year when making deferral elections. If you over contribute, you may be required to pay a penalty and taxes on the excess amount. Speak to a tax advisor with any questions.



Helpful Tips on Saving for Retirement

- Start saving as soon as possible to grow your retirement account.
- Begin with small contributions, if necessary, and increase contributions over time.
- Make setting aside money for retirement a habit.
- Understand investment returns may fluctuate.
- Let it sit. Avoid penalties by leaving funds in your 401(k) until retirement.
- If you change jobs, you can roll over your retirement account.

HSA

FSAs

Commuter

Life and AD&D

Disability

Retirement

ESPP

Employee Stock Purchase Plan (ESPP)

Through the Roper Technologies Employee Stock Purchase Plan (ESPP), eligible employees can conveniently purchase shares of Roper Technologies common stock at a **10% discount*** off the fair market value with payroll deductions.

Eligibility

- **1.** You must work more than 20 hours per week and have at least 5 months of work during any calendar year.
- 2. You must regularly have payroll taxes withheld.

How to Purchase

You contribute to the plan through payroll deductions, which build up between the offering date and the purchase date. At the purchase date, the accumulated funds are used to buy stock at a 10% discount (off the lower of the closing price on the first day of the offering period or last day of offering period). You can contribute 1-10% of your salary post-tax, at a maximum of \$25,000 of the fair market value per calendar year.

Enroll or make changes to your contribution percentage during the four enrollment periods below.

2024 ESPP Enrollment Window Open	2024 ESPP Enrollment Window Close	
02/26/2024	03/28/2024	
05/27/2024	06/14/2024	
08/26/2024	09/13/2024	
11/25/2024	12/13/2024	

Log in to netbenefits.com or call 800-544-9354 to:

- · Enroll or change elections
- Review your account and view the number of shares purchased
- \cdot Sell or transfer your shares after the 15 month restriction period expires

Get more ESPP details in **UKG Pro** or **roperbenefits.info**, by reviewing the plan document. Please read the plan document to familiarize yourself with Plan provisions.



^{*}Subject to Plan restrictions and limitations.

Enrollment

Eligibility

Enroll & Make Changes

How to Enroll

Health & Welfare Eligibility

Employees

Regular full-time employees working at least 30 hours per week are eligible for all company health and welfare benefits, and automatically receive company sponsored life insurance, accident coverage, disability insurance, and more.

Temporary full-time employees and regular part-time employees that averaged at least 30 hours per week in ACA measurement period (11/1 prior year to 10/31 current year) are eligible for medical coverage, commuter, and EAP only.

All active employees are eligible for commuter and EAP.

Dependents

You may enroll your eligible dependents in many of the same plans you choose for yourself. Eligible dependents include:

- Your legal spouse or domestic partner*
- Your child, your spouse's/domestic partner's child, adopted child, or stepchild up to age 26
- · Children over age 26 if they are dependent on you for financial support and maintenance as the result of a total disability

Dependent Exceptions

- Dependents must live in the United States.
- Employees with a spouse, domestic partner, or child dependent that are also employed by a Roper company and receive employer-sponsored medical, dental, or vision insurance cannot be insured twice by being added as a dependent on your insurance.
- If both parents of a dependent child work at a Roper company, only one can claim the child as a dependent for health care benefits.

Enrollment & Dependents

When enrolling dependents, you will be asked to certify that they meet the dependent eligibility requirements. The company may perform random audits to verify qualifying life events and dependent eligibility. If requested, you must provide supporting documents within 30 days to prove their eligibility. Documents may include a marriage license, birth certificates, tax return, offer letters, affidavits, or a coverage termination notice. For a full list of documents, refer to UKG Pro.

^{*}A domestic partner is defined as someone who has shared a primary residence with you for the preceding consecutive 12 months, is at least 18 years of age, and plans to continue the relationship indefinitely, or with whom you have registered the relationship with any state or local government domestic partner registry.

Enrollment

Eligibility

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How to Enroll

Enrolling & Making Changes

The choices you make when you first become eligible are in effect for the remainder of the plan year. It's important to review your benefit options and choose the best coverage for you and your family.

When Do You Enroll?

1. Initial Eligibility Date

Enroll within 30 days of your eligibility date.

2. Open Enrollment

Each year, you can make changes to your benefits during Open Enrollment in the fall. The choices you make become effective on January 1 of the next year.

3. Qualified Change in Family Status

You have 30 days to make changes after a qualifying life event, such as:

- · Marriage, divorce, or legal separation
- · Birth or adoption of a child
- · Death of a dependent
- Loss or gain of other health coverage for you and/or your dependents
- · Change in employment status
- · Change in Medicaid/Medicare eligibility for you or a dependent
- Receipt of a Qualified Medical Child Support Order

Submit your benefit election changes in **UKG Pro** within 30 days; otherwise, you'll have to wait until the next Open Enrollment period.



If Your Employment Ends

If your employment with a Roper company ends, your health care benefits will end the last day of the month in which your employment ends. You may have options to extend your coverage through COBRA. WEX will mail more information to your home address after your coverage ends.

Life and disability benefits end immediately. Lincoln Financial Group will send a mailing to your home address on file with instructions to port or convert life insurance.

Enrollment

Eligibility

Enroll & Make Changes

How to Enroll

How to Enroll

1.

Evaluate Your Needs

- Who should I cover?
- How much did I spend on health care last year?
- Will I need more, or less, health coverage?
- If enrolling mid-year, have
 I met all or a portion of the
 annual HSA or Dependent Day
 Care IRS limit that may reduce
 the amount able to contribute
 for the remainder of the year?

2.

Review Your Options

- Explore your benefit resource site **roperbenefits.info**.
- Review this benefit guide to compare your options.
- Find more benefit details, summary plan descriptions, certificate booklets, and more in UKG Pro.

3

Enroll Online Through UKG Pro

- · Visit e41.ultipro.com.
- Enter your username, typically last name followed by the first initial of first name. (E.g., The username for "Robert Smith" would be "SmithR". In some cases, the username may be followed by a number).
- Enter your password. (If defaulted, it will be your 8-digit date of birth (mm/dd/yyyy).
- Once logged in, click Myself > Benefits > Manage My Benefits.

4.

Confirm Your Elections

- Choose and review your choices carefully, then click "Check Out". Print or download your confirmation page.
- You will see the following message when enrollment is complete: "Congratulations! You successfully submitted your benefit elections!"

Dual Enrollment in November or December

If you are a new hire or if you will experience a qualifying event in November or December, you MUST complete two steps to receive benefits.



- **1.** Enroll in New Hire benefits or make qualifying life event changes for the current year.
- **2.** Complete Open Enrollment elections for benefits for 2024.

IMPORTANT!

If step 2 is not completed, you will not have any of your elected benefits for the next year.

Reach out to Roper Employee Benefit Services at **888-481-3284** if you need assistance!

Perks & Discounts

Roper Perks & Benefit Discounts



Roper Perks & Benefit Discounts*

Did you know that you may have access to additional resources and discounts via related sites and even your insurance coverage? Review the perks and discounts for more information. **Find more information at roperbenefits.info > click on Resources.**

BCBS FL

Go to **myhealthtoolkitfl.com** > **click on See Plan Perks**, to view discounts for allergy relief, hearing aids, vision services, and much more under Blue365!

Benefit Hub

The Roper Benefit Hub provides exciting deals on travel, tickets, auto, electronics, food, and more! Go to **roper.benefithub.com**, use referral code **Y8WSEM**, enter email address, and create an account.

Ouestions? Call 866-664-4621 or email customercare@benefithub.com.

Medicare Easier for You

My Benefit Advisor can help you sort through the complexities and tough Medicare decisions to find the solution that is right for you. Licensed advisors can provide Medicare education, review plan options and price, and simplify enrollment.

Go to **roperbenefits.info > Resources** for more information.

Roper Employee Benefit Services - Can Help You!

Contact the Roper Employee Benefit Service team with any health and welfare questions. They can assist with general questions or if you need help enrolling in the portal. If you have a more complicated issue and have already contacted insurance carrier (i.e. BCBS, Delta Dental, etc) but still need more assistance, contact this team. Please know that more complex cases may be referred to an associated benefit resource center team with USI for one-on-one direct support.

More Roper Perks & Discounts >

^{*}Above are associated discounts and perks available and do not represent insurance plans nor any coverage guarantees.

Perks & Discounts

Roper Perks & Benefit Discounts

Roper Perks & Discounts*(continued)

Delta Dental

Navigate to **www1.deltadentalins.com** > **click on Members** > **Member perks**, to view discounts on toothbrushes, Lasik, hearing aids, variety of discounts via LifePerks, and more!

VSP

Explore discounts at **vsp.com > Members > Offers**, to view many member extras such as savings on Lasik, contacts, hearing aids, travel and entertainment, and more additional special offers!

EAP

Login to **one.telushealth.com** > **click on Exclusive Offers**, to view discounts on various topics including entertainment, various retailers, auto insurance, technology, fitness, and more!

Vanguard

Login to **vanguard.com/retirementplans** > **click on My financial wellness**, to help you understand what financial wellness looks like for you, why it is important, and how to achieve financial wellness. Take an assessment for suggestions on next steps.

Prescription Savings & Tips

The medical plans cover prescription drugs but may not cover every medication or the cost could still be outside your budget. Compare prices under your medical/prescription plan versus what you could pay out-of-pocket using discounts or manufacturer coupons. You can leverage sites like **GoodRx.com** to find prices and coupons and compare costs under the medical plan to help you save money and become a better health care consumer.

Note: Medications purchased through GoodRx will not apply to your medical/prescription plan (deductibles or out of-pocket maximums).



^{*}Above are associated discounts and perks available and do not represent insurance plans nor any coverage guarantees.

Your Benefit Contacts

Coverage	Provider	Phone	Website/Email
Medical & Prescription	Blue Cross and Blue Shield of Florida and OptumRx	Pre-Enroll Help Line: 877-705-5429 Customer Service 855-212-4674	myhealthtoolkitfl.com To find a provider, enter network: Georgia residents (RTK - Blue Open Access POS), Florida residents (RTL - Network Blue), All other states (RTC - BlueChoice PPO)
Telemedicine	Teladoc	866-789-8155	myhealthtoolkitfl.com teladoc.com/go
HSA	HSA Bank	800-357-6246	hsabank.com
Dental	Delta Dental	800-521-2651	deltadentalins.com
Vision	VSP	800-877-7195	vsp.com
EAP	TELUS Health (formerly LifeWorks)	866-695-6327	one.telushealth.com
FSAs, Commuter, & COBRA	WEX	866-451-3399	wexinc.com/login/benefits-login
Life, AD&D, STD, LTD, & FMLA	Lincoln Financial Group	855-286-1351	mylincolnportal.com Company code: ROPER
401(k)	Vanguard	800-523-1188	vanguard.com/retirementplans
ESPP	Fidelity	800-544-9354	netbenefits.com
Roper Employee Benefit Services	Roper health and welfare benefit support	888-481-3284	roper.benefits@assuredpartners.com

Find Out More!

Reading this guide is just the beginning. Scan the QR code or go to **roperbenefits.info** to access more information, including plan summaries, legal notices, and more. You can also find more detailed information in **UKG Pro > Myself > Benefits > Manage My Benefits**.

