



2018 BENEFITS FREQUENTLY ASKED QUESTIONS
VIRGINIAN-PILOT

Table of Contents

BENEFIT ENROLLMENT.....	3
DEPENDENT ELIGIBILITY.....	4
MEDICAL AND PRESCRIPTION DRUG INFORMATION	5
SAVINGS, SPENDING AND COMMUTER ACCOUNTS.....	8
DENTAL AND VISION	10
LIFE INSURANCE AND AD&D.....	11
LEAVES OF ABSENCE AND DISABILITY.....	11
401(k) INFORMATION	12
LEGACY LANDMARK 401(k) PLAN	12
TRONC 401(k) PLAN	14

BENEFIT ENROLLMENT

1. When is the enrollment period?

Tronc's enrollment period for the Virginian-Pilot ("The Pilot") employees will be held from August 13 – September 12, 2018. In order to receive benefit coverage in the Tronc Health and Welfare plans effective August 25, 2018, you MUST actively enroll during this period. Your current benefits with Landmark end on 8/24/2018.

2. How do I enroll in benefits for Tronc?

Empyrean is the enrollment website and administrative platform where employees can elect their 2018 benefits.

The website is www.troncbenefits.com

If you would rather enroll telephonically or have questions about the enrollment process, please call the Tronc Benefits Center, administered by Empyrean, at 1-844-548-7662, Monday through Friday 9:00 a.m. – 7:00 p.m. CT. When you dial in, you will be asked a series of security questions for authentication purposes.

3. When will the Empyrean site be active?

The Empyrean link will be accessible when open enrollment begins on August 13, 2018. Empyrean will not be able to answer any of your questions before this date.

4. Why is this enrollment an active enrollment?

As a result of the The Pilot purchase transaction, your current The Pilot Health and Welfare benefits will end on 8/24/2018 (except for Pilot Health FSA which will be explained later). Since the benefit options under Tronc are different from your current Pilot benefits, employees will need to make an informed decision about their healthcare needs. Employees will also be required to re-enter all of their dependent information via the www.troncbenefits.com website.

5. What happens if I do not enroll?

If you do not actively enroll during the enrollment period, you will default to **NO COVERAGE**. You will not have benefits outside of the company-provided life insurance and short-term disability in 2018. Your next opportunity to enroll in benefits will be during open-enrollment in November 2018 for 2019 benefits.

You may only make changes during the year if you experience one of the following life events:

- Marriage, divorce, legal separation or annulment
- Registration/Dissolution of Domestic Partnership
- Birth, adoption, placement for adoption, or legal guardianship of a child
- Change in employment (commencement, termination or full-time/part-time status) that affects eligibility under another plan
- Spouse/Domestic Partner or dependent enrolls in or ends coverage in Medicare or Medicaid

6. Who do I contact if I have benefits questions?

The Tronc Service Center, administered through Empyrean, is staffed by specially trained benefits counselors who can assist with enrollment, claims issues, or answer any questions you may have regarding your 2018 Tronc benefits. The Tronc Service Center is available to assist you Monday through Friday from 9:00am – 7:00pm CT at 1-844-548-7662 beginning August 13, 2018.

If you have questions about your current benefits under the legacy Landmark benefits, please continue to direct them to the Landmark.

7. Can I make changes to my elections during the enrollment period?

You can make as many changes as you want to your benefit elections between August 13 and September 12. After September 12, your benefit elections will be final for 2018; you will not be able to make any changes, unless you have a qualified family status change.

DEPENDENT ELIGIBILITY

8. How do I know if my dependents are eligible for coverage?

An eligible dependent is considered to be one of the following:

- Your spouse to whom you are legally married
- Your domestic partner
- You or your spouse's or domestic partner's natural child, stepchild, legally adopted child, a child placed for adoption or a child for whom you or your spouse are the legal guardian, up to age 26, regardless of the child's student or marital status, and who is not otherwise eligible for group health care coverage offered by his or her own employer.
- An unmarried child of any age who is or becomes disabled and a dependent upon you.
- A child for whom health care coverage is required through a Qualified Medical Child Support Order (QMCSO). Generally, a QMCSO is issued as part of a paternity, divorce, or other child support settlement.

9. What information will I need to provide to enroll an eligible dependent?

To enroll an eligible dependent, you will need to provide their date of birth and social security number and provide documentation that they are your legal dependent. The Tronc Service center can advise you on what is considered acceptable documentation. All documentation must be uploaded to www.troncbenefits.com.

10. What if my spouse/domestic partner and I are both employed at Tronc?

If you and your spouse or domestic partner is covered under Tronc benefits, you may each be enrolled as an employee, or be covered as a dependent of the other person, but not both. Additionally, if you and your spouse or domestic partner is covered under Tronc benefits, only one parent may enroll your child as a dependent.

11. What if I have a family status change during or after the enrollment period?

If your family status change occurs August 25, 2018 or later, please call the Tronc Service Center at 844-548-7662. You will have 30 days from the date of the event to change your elections. You must also submit documentation to support the life event to the www.troncbenefits.com website within this 30 day period.

If you have a family status change prior to August 25, 2018, please contact Landmark to process your legacy Pilot benefit elections. If you want those elections to roll over to Tronc benefits effective August 25, 2018, please also contact the Tronc Service Center to ensure your Family Status change is captured for your 2018 Tronc elections.

MEDICAL AND PRESCRIPTION DRUG INFORMATION

12. Who are the Medical carriers for Tronc?

Blue Cross Blue Shield of IL will be offered to The Pilot employees. .

Note: If you are using the “Find a Doctor” feature on the BCBSIL website, select the PPO (Participating Provider Options) network.

13. How do I know which medical plan is right for me?

You will be able to choose from a variety of medical plans that offer quality coverage at a range of costs. Empyrean will have a medical plan cost estimator which can help you decide which plan best suits your needs. If you select a high-deductible health plan, you'll have the option to contribute to an HSA account.

Need to review your claim experience for 2018? Please contact Anthem to review your current claims experience. If you have not done so, you will need to set up an online profile to access your claims information.

The following plan options will be offered for 2018:

Plans Not Eligible for a Health Savings Account

- Signature PPO

Plans Eligible for Health Savings Account*

- Premier HSA Plan
- Premium HSA Plan
- Basic HSA Plan

**One of the rules of the Pilot transaction was that if you were enrolled in the Pilot Health FSA, you will maintain eligibility in that plan for the remainder of 2018 and deductions will continue to be taken from tronc payroll. As a result of this nuance, you will not be eligible for a Health Savings Account in 2018 under the tronc plans.*

14. What is a deductible?

A deductible is what you pay before the plan begins to pay benefits. For example, if you have a \$1,500 deductible, you would be responsible for the first \$1,500 in medical expenses before the plan begins to pay benefits at the 80% coinsurance level.

15. What is coinsurance?

After you reach your deductible limit, the plan starts paying a portion of your health costs. The coinsurance amount depends on the plan you are in, and whether services are in-network or out-of-network. For example, if you are in the \$1000 deductible PPO plan, once you have paid the \$1000 deductible, the company will pay for 80% of your subsequent in-network expenses while you are responsible for 20%. Refer to the plan comparison chart for the coinsurance levels. In-network preventive care is covered by the company at 100%.

16. What is an annual out-of-pocket maximum?

Once you reach the annual out-of-pocket maximum (amounts vary depending on plan), the company pays 100% of your eligible medical expenses for the remainder of the calendar year. Please refer to the plan comparison chart for the out-of-pocket maximum levels.

17. I have satisfied my deductible or annual out-of-pocket maximums under the Legacy Landmark medical plan. Will I be required to satisfy the deductibles or out-of-pocket maximums under the Tronc plans?

As your benefits are effective August 25, 2018 your deductible and out of pocket accumulators are reset to zero. Tronc will credit any prior deductibles and out of pocket accumulators with BCBS of IL. Please be advised that it may take up to 60 days for this to be reflected in the BCBS system.

18. How are deductibles and out-of-pocket maximums met under each tronc plan?

Aggregate: Under the Premier HSA Plan, if you cover any family member(s) in addition to yourself:

- The entire Family Deductible must be met before benefits begin to pay out for any family member.
- The entire Family Out-of-Pocket Maximum must be met before the plan pays in full for any family member.

Example (Premier HSA) – Aggregate deductible: – If the individual deductible limit is \$1,500 and the family deductible is \$3,000 and one member of your family has a procedure that costs \$5,000, your family will be responsible for \$3,000 and the plan will pay benefits for that member for all amounts over the family deductible limit. Then any future charges for any family member the plan will begin paying benefits, so if someone in your family needs medical services the family deductible has already been met.

Embedded: For all other plans (Signature PPO, Premium HSA, Basic HSA), if you cover any family member(s) in addition to yourself:

- Once one family member meets the Single Deductible, benefits begin to be paid for that individual.
- Once one family member meets the Single Out-of-Pocket Maximum, the plan pays covered benefits in full for that individual.

Example (Premium HSA Plan): – Embedded deductible – If the individual deductible limit is \$2,850 and the family deductible is \$5,700 and one member of your family has a procedure that costs \$5,000, your family will be responsible for \$2,850 and the plan will pay benefits for that member for amounts over the deductible limit. There will also be \$2,850 left over in the family deductible, so if someone in your family needs medical services you pay the remainder of the deductible.

19. How are my medical premiums calculated? What is the calculation based upon?

Medical premiums are based on salary bands. The higher the salary band, the more an employee is required to share in the cost of the medical premiums. Below are the salary bands for the 2018 Plan Year:

- \$0 - \$35,000
- \$35,001 - \$55,000
- \$55,001 - \$75,000
- \$75,001 - \$200,000
- \$200,001+

If you are a commissioned employee, your medical premiums will be based on what is called the Annual Benefits Base Rate (“ABBR”). This is defined as your base salary + commissions earned in the 2017 Plan Year.

Your ABBR will be updated in early January for purposes of calculating your 2019 medical benefit premiums. Any changes to associated medical deductions will be updated by early February, 2019.

20. Who is the prescription drug provider for tronc?

Prescription drug coverage will be provided by Rx Benefits via Express Scripts. Rx Benefits provides a concierge level of service for navigating the prescription drug marketplace.

SAVINGS, SPENDING AND COMMUTER ACCOUNTS

21. What is a Health Savings Account (HSA)?

If you are enrolled in a high-deductible health plan, you will have the option to contribute pre-tax dollars to a Health Savings Account (HSA), administered by Benefit Strategies, LLC. You will select an annual amount which will be prorated and deducted from your pay at each pay period. You can change the deduction amount throughout the year, as long as the annual amount doesn't exceed the IRS limit (detailed in the table below). HSA funds can be used for qualified medical expenses for you and your covered dependents, such as:

- Doctor visits – deductibles, copayments, coinsurance
- Prescription medication
- Dental care (including orthodontia)
- Eyeglasses, contacts, LASIK surgery

Your account balance rolls over from year to year, and is portable – meaning that if you ever leave Tronc, your account is yours to keep.

COMPANY CONTRIBUTION: Tronc will contribute to your HSA account. The annual contribution is \$208.33 for Employee Only coverage and \$416.66 for all other coverage tiers (prorated based on your benefits eligibility date of 8/25/2018). **You must open an HSA account to receive the Tronc Employer Contribution.**

Note: The annual HSA contributions are limited by IRS guidelines. These limits include your contribution amount as well as Tribune's contribution. If you are 55 or older, you may contribute an additional \$1,000 above the IRS limit.

Coverage Level	2018 IRS Limit	Tronc Contribution	Your Maximum Contribution
Employee Only	\$3,450	\$208.33	\$3,241.67
All Other Tiers	\$6,900	\$416.66	\$6,483.34

If you are enrolled in a PPO plan, you won't be eligible to elect an HSA, but you can still contribute pre-tax dollars to a Limited Purpose Healthcare Flexible Spending Account (FSA), also administered by Benefit Strategies (*unless you are enrolled in the Pilot Health FSA and you will not be able to elect this under Tronc for 2018*).

22. What are the eligibility rules for a Health Savings Account (HSA)?

- You must enroll in an HSA qualified plan
- You cannot be covered by another health plan that is not a high deductible plan
- You cannot be claimed as a dependent on another person's tax return
- You are not entitled to Medicare benefits due to
 - Turning age 65

- Disabled
- Your dependents (spouse, child(ren), Domestic Partner), must be your tax dependents as defined by section 152 of the Internal Revenue Code
- You have not participated in Veterans benefits in the last three months
- Neither you or your spouse can have a standard Flexible Spending Account through Tronc or another employer
 - Tronc offers the Limited Purpose FSA which covers Dental and Vision expenses

23. What is a Flexible Spending Account (FSA)?

Like a HSA, a Flexible Spending Account (FSA) allows you to set aside pre-tax dollars for qualified expenses. Your account is immediately funded with the full amount you select at the beginning of the year, and you “pay your account back” through pre-tax contributions each pay period. Unlike an HSA, your money does not roll over from year to year, so any unused funds will be forfeited.

If you are enrolled in the Signature PPO plan, you are eligible* for a General Purpose Healthcare FSA. The minimum annual contribution amount is \$260 and the maximum is \$2,600. Eligible medical expenses include:

- Doctor visits – deductibles, copayments, coinsurance
- Prescription medication
- Dental care (including orthodontia)
- Eyeglasses, contacts, LASIK surgery

**If enrolled in the Pilot Health FSA you will not be eligible for the Tronc Health FSA for 2018.*

24. What is a limited purpose FSA?

If you are in an HSA plan*, you can contribute *additional* pre-tax dollars to a Limited Purpose FSA for dental and vision care expenses only. This approach enables you to pay for vision and dental care expenses throughout the year, while saving your HSA funds for future medical needs. The minimum annual contribution amount is \$260 and the maximum is \$2,600.

**You will not be eligible for a limited purpose FSA if eligible for the Pilot Health FSA for the remainder of 2018.*

25. What is a Dependent Care FSA?

A Dependent Care FSA covers expenses such as babysitting, after-school programs, preschool and eldercare. The minimum contribution is \$260 and the maximum is \$5,000 annually.

Note: *The Dependent Care FSA is not front-loaded in the beginning of the year. Funds are available as contributions are taken from your pay at each pay period.*

26. I have an existing Health Care FSA through the Legacy Landmark welfare plans. How will this plan be impacted when we transition to Tronc benefits?

Your Flexible Spending Account (FSA) will continue through December 31, 2018 as part of the acquisition agreement between Landmark and Tronc at which point it will terminate. You will then have until March 31, 2018 to submit eligible Health Care FSA claims for expenses incurred prior to January 1, 2019. You will not be able to submit claims for expenses incurred after that date. This benefit is not eligible to be continued under COBRA.

As a result of maintaining eligibility in the legacy Landmark Health FSA, Pilot employees will not be able to open a Health Savings Account if they elect one of the High Deductible Health Plans (Premier, Premium or Basic HSA). You will also not be able to participate in the Tronc Health FSA or Limited purpose FSA for the remainder of 2018. You will be eligible for these plans beginning 1/1/2019.

27. I have an existing Dependent Care FSA through the Legacy Landmark welfare plans. How will this plan be impacted when we transition to Tronc benefits?

Participation in your Dependent Care Flexible Spending Account (FSA) will end on August 24, 2018. Please note that you will not be able to submit claims incurred after that date. Employees are not eligible to continue this benefit through COBRA.

If you sign up for the Tronc Dependent Care FSA, make sure that you account for your contributions under the Landmark FSA in 2018 as not to go over the annual maximum of \$5,000.

28. Who is the commuter benefits carrier for Tronc?

Tronc offers employees the opportunity to save money on their commuting expenses through Wageworks (www.wageworks.com). The program enables eligible employees to set aside pre-tax dollars for transit and parking expenses.

Note: If you choose to participate, you must enroll by the 10th of the month prior to the start of the benefit month (i.e. enroll by September 10th to receive the pre-tax benefit starting in October 2018).

DENTAL AND VISION

29. Who is the dental carrier for Tronc?

The dental carrier for 2018 is Delta Dental of Illinois. You may choose a standard plan, or buy-up to an enhanced plan that covers child orthodontia.

Note: If you are using the “Find Your Dentist” feature on the Delta Dental website, select the PPO network for the deepest discounts. The Premier network provides lesser discounts, but it may contain a dentist that is not in the PPO network, which is a more affordable option than going out-of-network.

30. Who is the vision carrier for Tronc?

Vision insurance is offered through EyeMed. If you are using the “Provider Locator” feature on the EyeMed website, pick the “Select” network.

LIFE INSURANCE AND AD&D

31. Who is the life insurance carrier for Tronc?

Tronc will provide life insurance through MetLife. The company will provide coverage equal to 1 x salary at no cost to you. You can purchase supplemental insurance for you, your spouse/domestic partner, and children as well. You can also purchase Accidental Death & Dismemberment (AD&D) insurance in \$25,000 increments up to a maximum of \$5 million dollars.

32. Will I need to provide Evidence of Insurability (EOI) for supplemental life insurance?

The guaranteed issue amount for life insurance is the lesser of 3x your salary or \$750,000. If you exceed the guaranteed issue amount, you will be asked to provide Evidence of Insurability (EOI). You can elect up to 8x your annual earnings up to a maximum of \$4 million.

33. Will my life insurance beneficiary transfer?

No. Since your benefits will be effective August 25, 2018, you will be asked to enter your beneficiary information during your enrollment period via the Emyrean website. There are no paper enrollments for beneficiaries, so please ensure that you enter beneficiaries when you enroll.

LEAVES OF ABSENCE AND DISABILITY

34. Who is the disability and Leave of Absence vendor for tronc?

Liberty Mutual handles administration for company Short-Term Disability (STD), Long-Term Disability (LTD), and leaves under the Family and Medical Leave Act (FMLA).

Short-Term Disability – Tronc provides an employee paid benefit of 100% of your pay for the first 4 weeks, and 40% thereafter for a maximum duration of 26 weeks. You may also elect to purchase additional coverage up to 60% or 80% of your pay.

Long-Term Disability – You can purchase LTD coverage at 60% of your pay, at a maximum of \$15,000 per month. You would have enrolled in this benefit during your special enrollment period in June. Your LTD benefit starts when your STD benefit ends.

35. Will I need to provide Evidence of Insurability (EOI) for LTD coverage?

Depends. The Pilot employees, had a special enrollment in June for this benefit, and employees could have elected LTD at that time without EOI. All subsequent enrollments (including this special enrollment starting August 13 will require EOI to be submitted, if you did not enroll in LTD coverage. Liberty Mutual will also honor the continuity of coverage provision and will give credit for prior coverage (as a participant in the Landmark LTD Plan) as it applies to any pre-existing condition limitations.

36. I am currently on a leave of absence or scheduled to go on a leave of absence prior to August 25, 2018. How does this affect my Short Term Disability pay and benefit enrollment options?

If you are currently on a leave of absence or out on short-term disability, you will still have the opportunity to enroll in benefits via www.troncbenefits.com during your enrollment period. Your disability pay (if applicable) will continue to be calculated at the legacy Landmark 2018 disability pay rate for this disability period.

37. What happens if my short term disability lasts longer than six months? How is Long Term Disability managed?

If you expect to transition to long-term disability any time after August 25, 2018 and your disability benefit began before August 25, 2018, you'll need to apply for LTD with the legacy Landmark LTD provider.

38. While still on a Leave of Absence, will any of my enrollment benefit elections be affected by my current leave of absence and/or disability status?

Your life insurance and long-term disability elections will not be effective until you actively return to work from your leave of absence.

You will receive a life conversion notice from Landmark if you fall into this situation and will be able to continue your current life insurance elections via the Landmark plan portability or conversion provision. If you do not elect this option, you will be without life insurance coverage until you return to active status.

401(k) INFORMATION

LEGACY LANDMARK 401(k) PLAN

39. What is going to happen to the existing Landmark 401(k) Plan?

If you have an account with the legacy Landmark plan, you are considered terminated from the Landmark plan and you have options.

You can:

- Keep your money in the Landmark Plan
- Roll the money over to the tronc 401(k) Plan
- Roll the money to an individual IRA

40. What are the rules regarding outstanding loans from the Landmark 401(k) Plan?

The Pilot employees who have loans outstanding in the legacy Landmark 401(k) Plan had the option to have their loans “rolled over” to the tronc 401(k) Plan. If you elected this option, your entire balance will automatically roll over to the tronc 401(k) Plan. The target date for this transaction is in early September.

41. What happens to my salary deferral and investment elections under the Landmark Plan?

Your salary deferrals under the The Landmark 401(k) Plan will end on August 24, 2018

Your salary deferral elections will not transfer to the tronc 401(k) Plan. Starting now (as of August 10, 2018), you will be able to make new salary deferral elections and investment elections in the tronc 401(k) Plan. The investment options in the tronc 401(k) are different to the current investment options in the The Landmark 401(k) Plan. You may update your salary deferral and/or investment elections now. You may call or enroll online with Vanguard at www.vanguard.com or 1-800-523-1188 starting now and the plan number is 094098. Remember that you will need to make a new beneficiary election in the tronc 401(k) plan.

42. What if I decide not to make any salary deferrals under the tronc 401(k) Plan?

You will need to go into Vanguard and elect a 0% contribution. The tronc 401(k) Plan has an automatic enrollment feature, where if you do not make an active election under the 401(k) Plan, you will be defaulted to a 3% pre-tax contribution after 30 days. For purposes of Pilot employees, the 30 days will start from August 1, 2018.

43. What if I currently have a new loan that is being processed under the The Landmark 401(k) Plan and I have not received the loan proceeds?

If you have elected to take a loan from the The Landmark Plan, you will receive the loan proceeds when the loan has been processed.

44. When loans are rolled over to the tronc 401(k) plan, will my loan repayments remain the same or will they change?

Your loan repayment amounts should remain the same. Your loans under the Landmark 401(k) Plan were taken under Landmark payroll through 8/31. Loan payments will restart on the 9/14 tronc paycheck. If for some reason there is an issue and the loan deduction does not start on the 9/14 check, it will be reamortized and started as soon as administratively possible.

45. How many loans are allowed under the tronc 401(k) Plan?

The tronc 401(k) plan allows for two outstanding loans at a given time.

TRONC 401(k) PLAN

46. Who is the plan record-keeper for the tronc 401(k) Plans? What investment options will be available under the 401(k) Plan?

Vanguard is the record-keeper for the tronc 401(k) Plan. Investment options under the tronc 401(k) Plan will be similar in scope to those provided under the The Landmark 401(k) Plan

47. Does tronc provide a 401(k) match?

Yes. Tronc offers an employer match of 100% of the first 2% of your contributions, and 50% of the next 4% of your contributions. To take advantage of the full employer match, you will need to contribute 6% of your salary to receive the full 4% match.

Your Contribution	Company Match
1%	1%
2%	2%
3%	2.50%
4%	3%
5%	3.50%
6%	4%
Over 6%	4%

48. What are the rules for withdrawals and loans from the Tronc 401(k) Plan?

The rules for withdrawals are listed below. Generally, you will be eligible to take a withdrawal from the Tronc 401(k) Plan if you:

- have reached age 55
- terminate employment;
- become disabled; or
- are performing qualified military service.

In some cases, you may withdraw certain of your rollover contributions and you may also take a hardship withdrawal if you meet the relevant criteria.

If eligible, you may also take up to a maximum of two loans from the tronc 401(k) Plan subject to the plan's terms, policies and procedures.

49. Who can I reach out to if I have questions?

If you have any questions regarding record keeping matters, including plan loans and plan distributions, please contact Vanguard at www.vanguard.com or 1-800-523-1188 for the tronc 401(k) Plan.

If you have any questions regarding your balances in the The Landmark 401(k) Plan, please also contact Vanguard at the same number.