



# WELCOME

to Safety-Kleen

Benefits are an important part of your Total Rewards at Safety-Kleen. As a Safety-Kleen employee, you earn more than just your paycheck. You also receive a competitive package of benefits offering flexibility, financial protection, and a foundation for future security.

Our 2010 benefit package has a lot to offer and this guide will help you determine which benefits best fit your needs. I encourage you to take time to learn about all of these plans by reviewing your New-Hire Benefits Guide within the first week of your employment.

There are always a few points to remember when completing your enrollment ...

**First**, remember that you have **31 days** from your date of hire to make your elections. Once you have made a decision on your elections, you will need fax in your enrollment form to the Benefits department and then call or email the Benefits department at 1.800.819.1012 or email [hrbenefits@safety-kleen.com](mailto:hrbenefits@safety-kleen.com) to confirm our receipt of your information. After we receive your information, a Benefits Communication Specialist will contact you to confirm your enrollment and answer any questions that you may have as it pertains to your elections.

**Second**, if you are covering a spouse and/or dependent child you will want to be aware that we have an outside auditing firm, Consova, which will ask for acceptable proof of dependent eligibility within **30 days** of your benefits becoming effective. Compliance with this process is **required** in order to cover dependents on our plans. If you do not respond, **your dependent(s) will be dropped from your coverage** back to your effective date and premiums will not be refunded. You will not be able to enroll the dependent(s) back on the coverage until open enrollment or until a qualified status change that would allow you to place a dependent on the coverage.

**Third**, as a new hire, you can elect four times your salary in voluntary life insurance coverage **without** completing an Evidence of Insurability (EOI) form. If you elect or increase your voluntary life insurance any time **after** your initial hire date you will be required to complete an EOI form. So be thoughtful on how much voluntary life insurance you would like to elect as a new hire.

Once you have completed benefits enrollment, keep your New-Hire Benefits Guide in a place that you can refer to it easily. This guide contains important information about our plans. On the back cover is a list of all plan administrators and their contact information for your reference.

If for some reason you lose your New-Hire Benefits Guide, the guide and other benefits information is available within Safety-Kleen's intranet site, SafetyNet. You may download this guide, claim forms, policies and summary plan documents any time that you may need to retrieve benefits information.

As always, feel free to contact the Benefits department at 1.800.819.1012 or [hrbenefits@safety-kleen.com](mailto:hrbenefits@safety-kleen.com) if you have any questions.

Sincerely,

*Michelle Brookes*

Benefits Manager



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  - Enrollment Form
  - 401(k) New-Hire Instructions
  - HIPPA Privacy Notice
  - SafetyNet Benefits Information

# ENROLLMENT

at Safety-Kleen

This enrollment guide tells you where to go to find claim forms, summary plan descriptions, benefit contact numbers, and other important Safety-Kleen benefits information beginning January 1, 2010.

Here are some important details that you need to consider when it comes time to enroll.

## ENROLLING TIMELY

It is very important that you enroll on time. Otherwise your benefits will be waived until the annual enrollment period or until you have a qualifying event. This could leave you and your dependents without coverage for a length of time.

- **Salaried** employees are eligible for benefits on the first day of hire and must enroll within 31 days from their eligibility date.
- **Hourly** employees are eligible for benefits after three months of employment and must enroll within 31 days from their eligibility date.

*Here is an example of the timing of enrollment for salaried and hourly employees:*

- Joe Blackwell is hired as a **salaried** employee on October 1. He has until the end of the day on October 31 to enroll.
- Janice Barton is hired as an **hourly** employee on October 1. She completes three months of employment on January 1, so she must enroll by end of the day on January 31. However, Janice can enroll anytime after she starts until January 31.

## HOW TO ENROLL IN YOUR BENEFITS

You must enroll using the *2010 Benefits Enrollment Form* enclosed in your new-hire enrollment packet. Once your form is complete you may fax it into the Benefits department at **1-847-468-6696**.

- **Review** your new-hire enrollment kit to decide which elections are best suited for you and your family's needs.
- **Gather the information** you'll need to complete your enrollment, such as your dependents' dates of birth and Social Security numbers.
- **Choose** the eligible dependents you want to cover. You can also choose different coverage categories for the Medical and Dental plans. Remember to read dependent eligibility rules on page 5.
- **Choose** the plans you want. You'll choose from healthcare plans as well as life insurance and accidental death and dismemberment (AD&D) coverage.
- **Enroll in a Flexible Spending Account (FSA).**



**REMEMBER – IF YOU MISS YOUR ENROLLMENT DEADLINE, THEN YOU WILL HAVE TO WAIT UNTIL ANNUAL ENROLLMENT OR HAVE A QUALIFIED LIFE EVENT TO ENROLL.**

## TIPS FOR A SUCCESSFUL AND TIMELY ENROLLMENT

Make sure you follow the steps below to ensure that you are enrolled correctly and timely. A Benefits Communication Specialist will need to meet with you to confirm your elections.

- 1 Fax in your enrollment, then call 1-800-819-1012 or e-mail [hrbenefits@safety-kleen.com](mailto:hrbenefits@safety-kleen.com) to make sure your enrollment was received successfully.
- 2 If you send in a fax – **keep your confirmation sheet** so that you can have: 1) a record of when you sent in your enrollment and 2) proof that your fax was successfully transmitted. This allows you to validate with the Benefits department that the enrollment was sent timely.
- 3 If you have **someone else** fax in your elections make sure that you get the fax confirmation sheet to validate the time/date it was sent in by your co-worker. It is **your responsibility** to make sure your benefit elections are submitted within the enrollment period.
- 4 A Benefits Communication Specialist will call and set up a time to review your elected benefits.

## SAFETYNET – WHERE TO GO FOR MORE INFORMATION

For information right at your fingertips, Safety-Kleen has an internal company intranet site called SafetyNet. If you're located at a branch or facility location in the field, you may use the employee computer kiosk at your location to access SafetyNet.

Just by typing SafetyNet into the address bar of your work computer's browser you will be able to view claim forms, program brochures, company holiday schedules, policies and important company information.

Summary plan descriptions for the benefit plans are located on SafetyNet as well. If you would like a hard copy of a summary plan description for a particular benefit plan, you may call us at 1-800-819-1012 and we will mail you a copy.

## EMPLOYEE BENEFITS LINK

To locate most of the information referenced, go to the SafetyNet home page and click on "Employee Benefits" located in the green bar at the top of the SafetyNet home page.

**ALL EMPLOYEES NEED TO TURN IN AN ENROLLMENT FORM TO ENROLL OR DECLINE BENEFITS.**

# MAKING BENEFIT CHANGES

during the year

## INFORMATION YOU SHOULD KNOW

If you provide false information or documents that do not provide credible support as verification of dependent eligibility when enrolling your dependents, then your dependents' **benefit claims may be denied, coverage will be terminated retroactively, and premiums will not be refunded.** In addition, if you provide false information when enrolling or verifying your dependents, you may also be subject to disciplinary action – up to and including termination.

The choices you make during your new-hire enrollment will remain in effect until December 31. You may also make changes during annual enrollment or if you have a qualified change in status (or life event).

## A QUALIFIED CHANGE IN STATUS INCLUDES:

- Marriage;
- Divorce or legal separation;
- Death of a spouse or a dependent;
- Birth, adoption, or placement for adoption of a child;
- Loss or gain of a dependent's eligibility;
- Loss or gain of a spouse's or a dependent's medical or dental coverage through another employer; and
- Change in a spouse's employment from full-time to part-time, or loss or gain of employment.

You have **31 days** from the date of the qualified change in status to make a change to your benefits. Changes must be consistent with the change in status (life event). The enrollment changes you can make in conjunction with a qualified status change are subject to IRS rules. IRS rules limit what can be a qualified status change, govern when an enrollment change can be effective, and require your change in enrollment to be consistent with the qualified status change. Unfortunately, the IRS rules that govern pre-tax benefit plans are very strict and Safety-Kleen must follow these rules completely. Any change requested after **31 days** will be returned to the employee and will **not** be processed – there are no exceptions.

**Before submitting any change that adds healthcare coverage for your spouse or dependents, please review the eligibility rules on the next page.**

Safety-Kleen will audit all life events that correspond with placing a new dependent on the coverage. **You will be contacted by Consova within 60 days after the dependent is active on coverage. If you do not provide information back to Consova in a timely manner to validate the eligibility of your dependent(s), Safety-Kleen will remove your dependent back to the qualifying event date without a refund of back premiums.**

## BENEFITS CHANGE FORM

The benefits change form is located on SafetyNet by clicking "Employee Benefits" then "Forms, Numbers and Guides." The benefits change form can be downloaded and then faxed to the Benefits department for timely processing. If your change form is **not** submitted within **31 days** of the qualified change it will not be processed.

# ELIGIBILITY

who you can cover

## ELIGIBILITY

Safety-Kleen offers benefit coverage to you and your eligible dependents. You can choose from four coverage categories:

- Employee Only;
- Employee + Spouse;
- Employee + Child(ren); and
- Employee + Family.

## WHO IS ELIGIBLE FOR COVERAGE

- You, full-time Safety-Kleen employee scheduled to work 30 hours or more a week
- Legal Spouse
- Domestic Partner\*
- Never-married children who live with you **more than half of the year** and **are primarily dependent on you for support** as defined as:
  - Biological
  - Adopted
  - Stepchildren
  - Legal Guardian
  - Under the age of 19 and living with you and not working full-time
  - Under the age of 24 if a full-time student
  - Children whom you are required to cover under terms of a Qualified Medical Child Support Order (QMCSO)
  - Children who are physically or mentally incapable of self-support as determined by the claims administrator.

## DEPENDENT AUDITS FOR NEW HIRES

In order for Safety-Kleen to manage healthcare costs for our employees, dependent audits are performed which require current employees and **new hires** to provide proper documentation for each dependent covered under the Safety-Kleen benefit plans. These audits will confirm that all dependents are and continue to be eligible for coverage according to the definition of an “eligible dependent”. Please refer to the section in this booklet that refers to “Eligibility – who can be covered” if you need further assistance in determining the eligibility of your dependent(s). Safety-Kleen utilizes **Consova** as our audit administrator. If you choose to cover dependent(s) on your benefits, you will be contacted by **Consova** to produce documents that validate your dependent(s) eligibility. When requested, please make sure that you submit any proof of eligibility information for your dependent(s) in a timely manner. If you fail to provide the information requested, your dependent(s) will be taken off the coverage retroactively without a refund of premiums.

## PROOF OF ELIGIBILITY

Safety-Kleen and its medical service providers reserve the right to audit dependent eligibility. For example, you may be asked to provide your marriage certificate and current tax return as proof of eligibility for a spouse. You may also be asked to provide proof of a child’s primary dependence on you for support. If you provide false information or documents that do not provide credible support as verification of dependent eligibility when enrolling your dependents, then your dependents’ benefit claims may be denied, coverage will be terminated retroactively, and premiums will not be refunded. In addition, if you provide false information when enrolling or verifying your dependents, you may also be subject to disciplinary action – up to and including termination.

\* Safety-Kleen offers Domestic Partner benefits in accord with applicable State or local laws. In order to qualify for eligibility, the Domestic Partnership must be registered in compliance with Civil Union, Domestic Partner or similar requirements in jurisdictions providing for such registration.

In jurisdictions that do not specify requirements for eligibility for Domestic Partner benefits, the following criteria must be met for purposes of Safety-Kleen benefits eligibility: (1) both Parties must be 18 years of age or older and legally competent to consent to the relationship; (2) the Parties must not be legally eligible to marry each other in their state of residence; (3) neither Party may be legally married to another person or a Partner in another Domestic Partnership; (4) the Parties must have been in an exclusive and committed relationship with each other for a period of at least 12 months and must intend to remain in the relationship indefinitely (5) the Parties must not be related more closely than would be allowed for a legal marriage under applicable state law (6) the Parties must share a common place of

residence and (7) the Parties must be able to demonstrate financial interdependence (examples joint bank account; common ownership of a vehicle; joint ownership of real property; common leasehold interest in real property, etc.).

In the event that eligibility for marriage or registration of the Domestic Partnership under State or local law does not currently exist but subsequently becomes available, in order to maintain benefits eligibility, the Parties must marry or register within ninety (90) days in order to maintain benefits eligibility.

As a reminder, the value of the benefits that Safety-Kleen offers to your domestic partner is taxable to the employee as income, unless your domestic partner qualifies as your tax dependent for federal income tax purposes. You should weigh the costs versus benefits to see if domestic partner benefits make financial sense. You may also want to consult a tax advisor. All dependents including Domestic Partners may be audited annually for eligibility by ConSova, Safety-Kleen’s audit firm.

# HEALTHCARE

background and updates for 2010

## LEGAL INFORMATION YOU SHOULD KNOW

### Reconstruction Benefits in Connection With a Mastectomy

As required by the Women's Health and Cancer Rights Act of 1998, Safety-Kleen's healthcare plans that offer mastectomy coverage must also cover certain reconstructive benefits in connection with a mastectomy (for you or your covered dependents). Coverage\* is provided for: Reconstructive surgery of the breast on which the mastectomy was performed; reconstructive surgery of the other breast to produce a symmetrical appearance; and prostheses and physical complications for all stages of mastectomies, including lymphedemas.

\*Coverage is subject to all deductible, coinsurance, and co-pay provisions of the Plan.

## HEALTHCARE COSTS FOR 2010

Safety-Kleen offers you a high quality benefits program with flexibility and choice. Think of this guide as a tool for those benefits. Your healthcare needs, family situation and budget maybe very different from those of your co-workers. This makes it very important that you learn as much as you can and choose the benefits that meet your needs.

We are working to keep your costs low. At Safety-Kleen, we are working hard to keep the company's healthcare costs as low as possible while at the same time continuing to provide valuable and competitive benefits for you and your family. Safety-Kleen continues to pay the majority of the cost of your healthcare.

Healthcare costs continue to rise. There are many reasons why. The high costs of prescription drugs, caring for an aging population, treating

the growing number of uninsured Americans, and technological advances in medicine all contribute. While you can't control these costs, you can choose to take an active role in managing your health and your healthcare costs.

When it comes to your healthcare, choice matters. As a member of the Blue Cross and Blue Shield PPO plan, you are able to choose doctors, hospitals and other providers from one of the largest networks of contracting providers in the country. When you have a question, you have access to innovative online information or you can speak with the BCBS customer service representatives who make it their priority to get you the answers you need, quickly and accurately.

USE YOUR PLAN THE RIGHT WAY TO GET THE MOST OUT OF  
YOUR HEALTHCARE DOLLARS. TAKE ADVANTAGE OF TOOLS AND  
PROGRAMS TO IDENTIFY HEALTHCARE PROBLEMS BEFORE  
THEY START.

# HEALTHCARE & INSURANCE

plans for 2010

## BENEFIT PLAN

### MEDICAL CARE PLAN

You'll have two Medical Plan choices for 2010:

- The **PPO Core Plan**; and the **PPO Plus Plan**. Each option has different coverage levels and costs. Review all information before deciding which plan is best for you.
- The **Blue Care Connection program** is offered to all health plan participants at no additional cost and includes:
  - **Wellness programs** — provides Internet tools/information and mailings to support healthy living.
  - **Blue Care Advisor** — A single point of contact who assists selected members needing assistance with navigating the healthcare system. To access a Blue Care Advisor you may call 1-866-412-8795.
  - **24/7 NurseLine** — Staffed by trained nurses for around-the-clock advice. For more information call 1-800-581-0368.
  - **Disease Management** — Program for individuals with chronic health conditions, providing disease management advice and education. For more information call 1-800-462-3275.
  - **Special Beginnings** — All first-time mothers are encouraged to participate in this insightful and free program. For more information call 1-800-462-3275.

### DENTAL CARE PLAN

The Delta Dental PPO option is available to all employees regardless of geographic location.

### VISION CARE PLAN

The Vision Service Plan covers an annual exam and either one pair of lenses or contact lenses every 12 months.

### FLEXIBLE SPENDING ACCOUNTS (FSA)

For new hires that elect a Healthcare Flexible Spending Account, the debit card is available for your convenience. The card is an option to the traditional paper reimbursement method. Annual FSA contribution limits are covered later in your enrollment kit. You also have the option to elect a Dependent Care Flexible Spending Account to help pay for dependent care expenses.

### LIFE, DEPENDENT LIFE & AD&D INSURANCE

You have the option of electing Voluntary Life insurance coverage, Voluntary Accidental Death & Dismemberment (AD&D) single or family coverage and/or Dependent life coverage. These options are in addition to the company-provided Life and AD&D coverage.

### ACCIDENT INSURANCE, CRITICAL ILLNESS INSURANCE & INTEREST BEARING WHOLE LIFE

You have the option of electing Accident Insurance, Critical Illness Insurance and Interest Bearing Whole Life for yourself and/or dependents. The options are in addition to other healthcare and insurance offerings.

# MEDICAL

care plan for 2010

## MEDICAL BENEFITS

Medical insurance represents the largest component of the Safety-Kleen Benefits program. If you want to enroll in the Medical Care Plan, you may choose from the PPO Core or PPO Plus Plan.

While both options cover the same types of medical services, each provides coverage at a different level of deductible and coinsurance (co-pays do not differ except for prescription drugs). Each plan also requires that you contribute a different amount per pay period toward the premium. By referring to the Safety-Kleen Medical Plan Comparison on page 11, you can decide which plan you would like to participate in.

## IN-NETWORK VS. OUT-OF-NETWORK

Blue Cross Blue Shield of Texas provides Safety-Kleen with in-network benefits throughout the United States. However, there are times that out-of-network coverage may apply. It is very important that you determine if your doctor is in or out of network. By using a doctor in-network you will receive preferred provider benefit levels. It is advised that you check the Blue Cross Blue Shield of Texas provider directory at [www.bcbstx.com/safetykleen](http://www.bcbstx.com/safetykleen), contact BCBS Customer Service at 1-866-834-3860 or call your doctor.

## DEDUCTIBLES & COINSURANCE

A deductible is a set amount of medical expenses a patient must pay before the benefits plan can pay. For example, deductibles can apply when you have inpatient and outpatient services.

The "Employee Only" deductible level and out-of-pocket maximum is applicable to an employee with single coverage.

The family deductible level and family out-of-pocket maximum applies to employees who cover one or more dependents.

Once the deductible is met, then a percentage of the allowed amount is paid otherwise refer to as the coinsurance.

To see what deductibles and coinsurance amounts are required for both the PPO Core and PPO Plus Plans please refer to the Safety-Kleen Medical Plan Comparison.

At Safety-Kleen normal physician office visits are typically not subject to the deductible.

## COPAYMENTS

Copayments are set amounts you pay for specific services in the plan, such as office visits and prescription drugs.

## PRE-EXISTING CONDITIONS

Safety-Kleen does have a pre-existing condition waiting period of twelve months (otherwise called the "pre-existing limitation period"). This waiting period begins on the effective date of the participant's coverage under the Plan.

A pre-existing condition is an injury or sickness or related injury or sickness, for which you or your dependent has consulted with a physician, or for which advice, treatment, or diagnosis was received or recommended within a six

month period immediately preceding the effective date of your coverage under the Plan.

On Safety-Kleen's Plan, pregnancy, newborn or adopted children and prescription drugs are not subject to the pre-existing condition limitation.

In order to receive credit for your previous coverage, you will need to submit a Certificate of Creditable Coverage from your previous coverage to Blue Cross Blue Shield of Texas. Once this information is submitted the pre-existing condition limitation period could be reduced or eliminated depending upon information received.

If you have **not had medical coverage for 63 days or more** prior to when your coverage goes into effect with Safety-Kleen, you will be subject to the plan's full pre-existing condition limitation (12 months) and you will therefore not be able to receive coverage for expenses associated with your specific pre-existing condition during your first 12 months of coverage under the plan.

## SAFETY-KLEEN MEDICAL PLAN COMPARISON

Plan Feature	PPO CORE PLAN		PPO PLUS PLAN	
	Preferred Provider	All Other Providers	Preferred Provider	All Other Providers
Annual Deductible	\$375/employee only \$750/employee with dependents	\$1,125/employee only \$2,250/employee with dependents	\$325/employee only \$650/employee with dependents	\$975/employee only \$1,950/employee with dependents
Annual Out-of-Pocket* Maximum Co-insurance	\$2,500/employee only \$5,000/employee with dependents	\$4,000/employee only \$8,000/employee with dependents	\$2,000/employee only \$4,000/employee with dependents	\$3,000/employee only \$6,000/employee with dependents
Physician's Office Visits	100% after \$25 PCP co-pay or \$35 specialist co-pay	50% after deductible	100% after \$25 PCP co-pay or \$35 specialist co-pay	60% after deductible
Inpatient Hospital Charges	80% after deductible	50% after \$200 per-admission co-pay and annual deductible	90% after deductible	60% after \$200 per-admission co-pay and annual deductible
Outpatient Hospital Charges	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Emergency Room Charges	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Inpatient/Outpatient Physician Charges	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Outpatient Hospital Lab & X-Rays	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Obstetrical Services	\$25 co-pay for initial visit, then global fee applies (sonogram not included)	50% after deductible	\$25 co-pay for initial visit, then global fee applies (sonogram not included)	60% after deductible
Ambulance Service	100%	100%	100%	100%
Annual Routine Mammograms	100%	50% after deductible	100%	60% after deductible
Routine Pap Smears	100%	50% after deductible	100%	60% after deductible
Colonoscopy	100%	50% after deductible	100%	60% after deductible
Preventive Care (Routine Physicals, Well Baby Care, Immunizations, and Hearing Exams)	100% after \$25 co-pay \$35 specialist co-pay	50% after deductible	100% after \$25 co-pay \$35 specialist co-pay	60% after deductible
Routine Prostate Screening	100%	50% after deductible	100%	60% after deductible
Chiropractic Treatment (\$1,000 annual maximum)	100% after \$35 co-pay	50% after deductible	100% after \$35 co-pay	60% after deductible
TMJ Lifetime Maximum (\$10,000 per individual)	80% after deductible	50% after deductible	90% after deductible	60% after deductible

\* Annual out-of-pocket maximum does not include cost associated with deductible, drugs or co-pays. Only applies towards co-insurance costs.

# EMPLOYEE

## Assistance Program

The Employee Assistance Program (EAP) is paid for by Safety-Kleen. The EAP is designed to help you, and your family, take control of complex situations before they take control of you. When personal and family problems occur, you and your family may call 24-hours a day for free confidential assessment and crisis counseling.

### ELIGIBILITY

If you are a part-time or full-time employee, you are eligible for EAP your first day of employment. However, you must be enrolled in the medical care coverage to receive mental health coverage.

### HOW TO GET STARTED

If you want to ask a question or request a service, just call 1-866-638-5709. You will immediately be connected to an experienced

employee assistance specialist. EAP will provide five free face-to-face counseling sessions per issue. LifeEra will also coordinate any care required outside the scope of the EAP. If you are currently in outpatient treatment or require inpatient services, contact BCBS of Texas at 1-800-528-7264 for pre-certification of care.

### WHAT OTHER SERVICES DOES EAP PROVIDE

- Expert Counseling
- Legal Assistance
- Financial Services
- Mediation for a wide range of issues
- [Liveandworkwell.com](http://Liveandworkwell.com) – a Web site where you can work with interactive learning programs, search for community resource, download health and wellness articles, and more.



**WHEN PERSONAL AND FAMILY PROBLEMS OCCUR, YOU AND YOUR FAMILY MAY CALL 24-HOURS A DAY FOR FREE CONFIDENTIAL ASSESSMENT AND CRISIS COUNSELING.**

# MENTAL HEALTH

## care plan for 2010

The Mental Healthcare Plan can help if you or a covered family member suffers from an emotional or substance abuse problem. When you need assistance, call the Employee Assistance Program (EAP) provided by LifeEra (1-866-638-5709). The EAP provides five free face-to-face counseling visits per problem. LifeEra will also coordinate any care required outside the scope of the EAP. If you are currently in outpatient treatment or require inpatient services, contact BCBS at 1-800-528-7264 for pre-certification of care.

Plan Feature	PPO CORE PLAN		PPO PLUS PLAN	
	Preferred Provider	All Other Providers	Preferred Provider	All Other Providers
<b>Mental Health/Serious Mental Illness</b> (Care must be pre-certified)				
<b>Inpatient Services</b>				
Hospital Services (facility)	80% after deductible	50% after per-admission and annual deductible	90% after deductible	60% after per-admission and annual deductible
Physician Services	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Inpatient Visits	covered by plan		covered by plan	
<b>Outpatient Services</b>				
Services Performed in Physician Office (non-surgical)	100% after \$25 co-pay	50% after deductible	100% after \$25 co-pay	60% after deductible
Facility Charges	80% after deductible; co-pay waived if admitted	50% after deductible; co-pay waived if admitted	90% after deductible; co-pay waived if admitted	60% after deductible; co-pay waived if admitted
Professional Provider	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Outpatient Visits	covered by plan		covered by plan	
<b>Chemical Dependency</b> (Care must be pre-certified)				
<b>Inpatient Services</b>				
Per-Admission Deductible	no deductible	\$200	no deductible	\$200
Hospital Services (facility)	80% after deductible	50% after chemical dependency per-admission deductible	90% after deductible	60% after chemical dependency per-admission deductible
Physician Services	80% after deductible	50% after deductible	90% after deductible	60% after deductible
<b>Outpatient Services</b>				
Services Performed in Physician Office (non-surgical)	100% after \$25 co-pay	50% after deductible	100% after \$25 co-pay	60% after deductible
Facility Charges	80% after deductible; co-pay waived if admitted	50% after deductible; co-pay waived if admitted	90% after deductible; co-pay waived if admitted	60% after deductible; co-pay waived if admitted
Professional Provider	80% after deductible	50% after deductible	90% after deductible	60% after deductible
Outpatient Visits	covered by plan		covered by plan	

**REMEMBER – WHEN YOU ENROLL IN THE MEDICAL CARE PLAN, YOU’LL AUTOMATICALLY RECEIVE PRESCRIPTION DRUG AND MENTAL HEALTH COVERAGE.**

# VISION

care plan for 2010

VSP provides vision benefits through a network of doctors who offer eye care and eyewear materials. The plan pays benefits for eye examinations and vision expenses, including eyeglasses or contact lenses. When visiting a participating VSP doctor, the claim will be submitted at the time of service. If your doctor does not file at the time of service, it will be considered out-of-network and you will have to file the claim directly with VSP.

For a listing of VSP-participating providers in your area, go to [www.vsp.com](http://www.vsp.com) or call **1-800-877-7195**.

## VISION CARE PLAN SUMMARY

BENEFIT/FEATURE	VSP PROVIDER	NON-MEMBER PROVIDER
Vision Exam (once every 12 months)	Co-pay \$10	Up to \$45
Lenses* (once every 12 months)	Covered 100% after \$15 materials co-pay Polycarbonate for children covered in full	
Single Vision		Covered up to \$45 after co-pay
Lined Bifocal		Covered up to \$65 after co-pay
Lined Trifocal		Covered up to \$85 after co-pay
Lenticular		Covered up to \$125 after co-pay
Frames** (once every 12 months)	Covered up to \$150 after \$15 materials co-pay applied. 20% discount on overages.	Covered up to \$47 after co-pay
Contact Lenses — Elective In lieu of glasses	Covered in full up to \$150 for exam, fitting, follow up and contacts. 15% discount given on professional fees.	Covered up to \$105
Contact Lenses — Medically Necessary (once every 12 months) If following cataract surgery, to correct extreme visual acuity that cannot be corrected with standard lenses and frames, or in case of certain conditions of anisometropia or keratoconus.	Covered in full after \$15 co-pay	Covered up to \$210 after co-pay

\* Additional charges will apply for items such as UV protective coatings, scratch-resistant coatings, etc.

\*\* The patient may choose from a large selection of quality frames. If requested, the provider will show the patient frames that are covered in full. Patients who choose a frame that exceeds the allowance will pay a controlled amount that is monitored by VSP and based on the wholesale price of the selected frame. VSP covers the majority of frames currently manufactured; however, a small percentage of frames do not meet VSP's guidelines and standards. Should a patient select such a frame, he or she would be reimbursed a set allowance toward the retail cost rather than on the cost-controlled wholesale price.

### HELPFUL TIP!

If you're thinking of contributing money to a Healthcare FSA to cover LASIK eye surgery or any other elective procedure, make sure you are a candidate for the procedure prior to making an election to contribute to the account.

# PRESCRIPTION

drug coverage for 2010

## PRESCRIPTION DRUG PROGRAM

When you enroll into the PPO Core or Plus Plan, you'll also receive prescription drug benefits through CVS Caremark. The prescription drug plan offers three ways for you and your dependents to obtain medications. The chart below outlines specific plan information.

## HOW CAN YOU BETTER MANAGE PRESCRIPTION DRUG COSTS:

Here are some steps you can take to make sure you're getting the most for your prescription drug dollars.

- Use the **Healthcare FSA** to cover prescription drug co-insurance amounts if you enroll in one of the medical PPO options. See page 18 for an explanation of how to use the FSA.
- Use the **mail order service** for maintenance prescriptions to receive a 90-day supply of maintenance drugs.
- **Talk to your pharmacist.** Pharmacists are qualified to answer many questions about your medications and are often aware of alternative treatments available for your condition that may not include prescription drugs. If that is the case, you can talk to your physician about the alternative.

- Determine if your prescription is on the new CVS Caremark preferred drug list. The preferred drug list contains brand-name drugs that are most commonly prescribed. These drugs are included on the list based on their comparable safety, effectiveness, and value. If your doctor prescribes a drug that has no generic equivalent, check to see if the prescription is on the list. Remember, the list is subject to change. The preferred drug list is available at [www.caremark.com](http://www.caremark.com).
- **Work with your doctor** to make sure you're getting medication that provides the most value – and the right dosage

## CHOOSING GENERIC VS. NAME-BRAND

When generic is available and you choose a brand-name drug, you will be responsible for the difference in cost between the generic and brand-name drug and the higher co-pay.

## PRESCRIPTION DRUG PLAN CHART

	PPO CORE PLAN	PPO PLUS PLAN
<b>31-day Supply – Retail Pharmacy</b>		
Generic	25% or minimum \$10 co-pay	\$10 co-pay
Preferred Brand Name*	30% or minimum \$25 co-pay	\$25 co-pay
Non-Preferred Brand Name*	35% or minimum \$40 co-pay	\$40 co-pay
\$100 out-of-pocket maximum per prescription		
<b>90-day Supply – Retail Pharmacy</b>		
Generic	25% or minimum \$25 co-pay	\$25 co-pay
Preferred Brand Name*	30% or minimum \$62 co-pay	\$62 co-pay
Non-Preferred Brand Name*	35% or minimum \$100 co-pay	\$100 co-pay
\$250 out-of-pocket maximum per prescription		
<b>90-day Supply – Mail Order Pharmacy</b>		
Generic	25% or minimum \$25 co-pay	\$25 co-pay
Preferred Brand Name*	30% or minimum \$62 co-pay	\$62 co-pay
Non-Preferred Brand Name*	35% or minimum \$100 co-pay	\$100 co-pay
\$250 out-of-pocket maximum per prescription		

\* When generic is available and you choose a brand-name drug, you will be responsible for the difference in cost between the generic and brand-name drug and the higher co-pay.

# DENTAL

care plan for 2010

## HEALTH AND TREATMENT OPTIONS

When you visit the dentist, be sure to share your dental and medical history and any prior complications. Dentists can identify signs of more serious health conditions and should be made aware of health information that may be critical to your dental care. Your hygienist is a great resource for dental health information to help you guard against tooth decay and gum disease. Ask your dentist to explain the pros and cons of each dental treatment option, including the future costs or consequences of postponing or avoiding treatment.

## DENTAL CARE PLANS

The Delta Dental PPO program allows you the freedom to visit any licensed dentist. To **better understand** how claims will be paid in 2010, please refer to the chart below. It is very important that you verify with your dentist if s/he is a **Delta Dental Premier, Delta Dental Preferred, or Non-Delta Dental** dentist so that you understand how your claims will be processed and the discounts you will receive.

Delta Dental PPO provides access to a network of dentist locations nationwide. You may locate a Delta Dental provider by going to [www.deltadentalins.com](http://www.deltadentalins.com). Click on "dentist directory" then click on "all states" beneath Delta Dental PPO, then enter the criteria for your search.

We always recommend that you **verify** your current dentist's participation in the Delta Dental PPO network. Simply asking if a dentist "accepts Delta Dental" does not guarantee he or she is a PPO dentist. Make sure you specifically ask if he or she is a Delta Dental PPO dentist. We also recommend that you verify your dentist's participation before each dental appointment.

## CHECK YOUR ELIGIBILITY AND BENEFITS ONLINE

If you are visiting Delta Dental's Web site for the first time, you will need to complete a one-time registration to log in and verify your eligibility, check your benefits for covered services, and view maximums and deductible information. You may also print an ID card, although it is not required to receive services. You may simply provide the dental office with your group number and the enrollee ID number.

## CLAIM SUBMISSION

Delta Dental dentists will submit claims for you. If you visit a non-Delta Dental dentist, you may need to submit your own claim. You can download a form from the Delta Dental or SafetyNet Web site.

## EXAMPLE OF HOW YOUR CLAIMS WILL BE PAID DEPENDING ON YOUR DENTIST'S PARTICIPATION WITH DELTA DENTAL

DELTA DENTAL PPO (PREFERRED) DENTISTS	DELTA DENTAL PREMIER® DENTISTS	NON-DELTA DENTAL DENTISTS
Claims paid according to negotiated rates	Claims paid according to traditional fee-for-service program	Claims paid according to reasonable and customary
Best discounts (PPO)	Discounts offered but not as good as PPO	No discounts
No balance billing	No balance billing	Dentist can bill for amount over reasonable and customary
Fewer providers	More providers	Includes all licensed dentists

Below is an overview of your Safety-Kleen Dental Plan options:

DENTAL CARE PLAN SUMMARY	
Who's Eligible	Primary enrollee, spouse and eligible dependent children to age 19 or up to age 24 if full-time student
Deductibles	\$50 per person, \$100 per family, per calendar year
Deductible Waived for Diagnostic and Preventive	Yes
Annual Maximum	The maximum benefit paid per calendar year is \$1,500 per person covered. Annual maximum is waived for diagnostic and preventative care.

BENEFITS AND COVERED SERVICES*	IN-PPO NETWORK**	OUT-OF-PPO NETWORK**
<b>DIAGNOSTIC &amp; PREVENTIVE BENEFITS*</b> Oral examinations, routine cleanings, x-rays, fluoride treatment, space maintainers, additional benefits if pregnant	90%	90%
<b>BASIC BENEFITS*</b> Fillings, sealants, denture repairs	80%	80%
<b>MAJOR BENEFITS*</b> Crowns, inlays, onlays, cast restorations, dentures and implants	50%	50%
<b>ENDODONTICS*</b> (root canals) Covered under Basic	80%	80%
<b>PERIODONTICS*</b> (gum treatment) Covered under Basic	80%	80%
<b>ORAL SURGERY*</b> Incisions, excisions, surgical removal of tooth, Covered under Basic	80%	80%
<b>ORTHODONTIC BENEFITS*</b> Adult and children	50%	50%
<b>ORTHODONTIC MAXIMUMS*</b>	\$ 1,500 Lifetime	\$ 1,500 Lifetime

\* Limitations or waiting periods may apply for some benefits; some services may be excluded. Please refer to your Evidence of Coverage or Summary Plan Description for waiting periods and a list of benefit limitations and exclusions.

\*\* Fees are based on PPO fees for in-network dentists and the MPA (maximum plan allowance) for out-of-network dentists. Reimbursement is paid on Delta Dental contract allowances and not necessarily each dentist's actual fees.

# FSA

## Flexible Spending Accounts

### HEALTHCARE FSA DEBIT CARD

The card is accepted at most pharmacies nationwide and is used just like any other credit card, except that you're spending the pre-tax dollars you've contributed to your FSA account. It's important to remember to save all your receipts so you can submit them to Conexis when audited. If you participate in an FSA, you'll receive both a confirmation statement and your debit card from Conexis.

### ANNUAL FSA CONTRIBUTION LIMITS FOR 2010

#### Healthcare FSA

- \$100 Minimum
- \$3,500 Maximum

#### Dependent Care FSA

- \$100 Minimum
- \$5,000 Maximum  
(or \$2,500 if married filing separate tax returns)

### REMEMBER

The annual amount you elect will be deducted over the remaining pay periods so be careful to calculate your annual election amount. *For example:* You elect \$1,000 and there are 15 pay periods left in the year.  $\$1,000/15 = \$66.66$  deducted from the remaining pay periods of that year.

### FLEXIBLE SPENDING ACCOUNTS

FSAs are a great way to save money in taxes, by providing a tax-free way to pay for eligible healthcare and dependent day care expenses. The current medical coverage and prescription drug coverage make the Healthcare FSA more valuable than ever – because you can use it to reimburse yourself for your out-of-pocket expenses such as deductibles, co-payments, and co-insurance amounts. Certain over-the-counter medications are also eligible for reimbursement. Remember that you are not able to change your contribution during the year unless you have a qualified change in status or life event. Even then, the change must be consistent with the life event.

### HEALTHCARE FSA

The Healthcare FSA is a great way to help manage health plan cost increases. You can contribute up to \$3,500 per year in pre-tax dollars to pay for eligible healthcare expenses that are not covered or fully paid by a health-care plan. You may use this account to pay for expenses for yourself or anyone who qualifies as a dependent on your income tax return — even someone who isn't covered under the Safety-Kleen plan, such as a spouse, child, or elderly relative.

### ELIGIBLE HEALTHCARE EXPENSES INCLUDE:

Over-the-counter drugs and medications for the treatment of a medical condition; charges in excess of reasonable and customary; medical plan deductibles; medical coinsurance; dental plan deductibles; dental coinsurance; and any other healthcare expense not covered by a health plan (other than premiums for health-care coverage) that would be allowable as an IRS itemized deduction. You can obtain a complete list by going to [www.conexis.org](http://www.conexis.org) — click "Employees" (at top), click "Healthcare FSA", then click on the word "Healthcare" in first paragraph or contact the Conexis Customer Service department at 1-866-279-8385.

### DEPENDENT CARE FSA

Covers child and elder daycare expenses. You can contribute up to \$5,000 (or \$2,500 if you're married and filing separate tax returns) per year to pay for dependent care expenses so that you (and your spouse, if you're married) can work. You may use this account to pay for dependent care expenses such as a day care center for your dependents who are under age 13 or for dependents of any age who live with you and are unable to care for themselves. You can obtain a complete list of dependent care expenses by going to [www.conexis.org](http://www.conexis.org) — click "Employees" (at top), click "Dependent Care FSA", then click on the words "Dependent Care" in first paragraph or contact the Conexis Customer Service department at 1-866-279-8385.

### LOWER YOUR TAXES WITH THE FSAs

The FSAs can actually help you **lower** your costs — by saving you money in taxes on your eligible healthcare and dependent day care expenses. For example, say your annual salary is \$30,000. You decide not to participate in the FSA because you think the savings are just not worth it. Let's assume that your taxable income is \$30,000, and that you will owe \$8,100 in taxes. On the other hand, say you decide to contribute \$1,000 to one of the FSAs. This reduces your \$30,000 taxable income to \$29,000 a year, leaving you (in this example) owing only \$7,830 in taxes. This is a **\$270** cost savings — money you get to keep, rather than give to the IRS.

### USE IT OR LOSE IT!

By law, if you don't use all your FSA money you contribute by **December 31**, the remaining balance is forfeited. However, you have until **March 31** of the next plan year to file a claim for eligible expenses you incurred during the current plan year.

# NEW-HIRE

## Employee Contributions for Medical, Dental and Vision

### BI-WEEKLY CONTRIBUTIONS (for employees hired on or after January 1, 2010)

Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
<b>Medical</b>				
PPO Core Plan	\$34.02	\$140.63	\$109.51	\$189.16
PPO Plus Plan	\$52.66	\$184.90	\$144.15	\$248.83
<b>Dental</b>				
Dental PPO	\$7.20	\$13.56	\$12.35	\$20.10
<b>Vision</b>				
Vision Service Plan	\$2.52	\$5.04	\$5.04	\$7.56

**Note:** As a new employee, you pay more to cover your dependents during your first calendar year of employment. Then in 2011, Safety-Kleen will subsidize more of the cost for dependent coverage and you'll pay the same biweekly contributions as other employees for dependent coverage.



### PRE-TAX PREMIUMS SAVE YOU MONEY

You pay for most of your Safety-Kleen benefits with pre-tax dollars, which means most premiums are deducted from your paycheck before federal income taxes and social security taxes are taken out. This means you save money in taxes on the money you spend for your benefits.

# LIFE INSURANCE

options for 2010

Safety-Kleen provides you with Basic Life and Basic AD&D insurance. However, you may purchase additional Voluntary Life, Employee/Family AD&D, and Dependent Life insurance. Outlined below is what is available to you.

## VOLUNTARY LIFE INSURANCE

Company-paid life insurance will be provided at 100% of your salary to all full-time employees. In addition, you may elect 1, 2, 3 or 4 times your annual salary through the Voluntary Life Insurance program offered through UNUM. If you elect to participate in the Voluntary Life Insurance Program, as a new hire you may normally elect up to 4 times coverage without an Evidence of Insurability (EOI) Form. This election can be completed through your enrollment form. **If you decide to wait until annual enrollment or a future life event to elect or increase coverage**

### you will be asked to complete an EOI form.

The EOI form is available to be downloaded off the SafetyNet intranet site. Once the EOI form is completed, you may send it into UNUM directly (address is on the EOI form). Once your EOI form is approved by UNUM, the Benefits department will increase/begin your life insurance coverage and start increased benefit deductions. Rates are age based and listed in the chart on the left. Again, an increase in premiums deducted from your paycheck will only occur after we receive confirmation that your coverage increase has

been approved by UNUM. Voluntary Life Insurance premiums are subject to change with an increase in age and/or increase of salary.

### How to calculate:

Annual Salary\* = 40K

Elect 2X = 80 units

Age = 37

80 units x .060 = \$4.80 per paycheck cost

\$4.80 x 26 pay periods = \$124.80 annual cost

## AYCO SURVIVORSUPPORT® FINANCIAL COUNSELING SERVICE

The *SurvivorSupport*® Financial Counseling Service is provided by The Ayco Company, L.P., a Goldman Sachs Company, as an enhancement to your life insurance coverage with UNUM. This benefit is extended at no additional cost to the surviving families and beneficiaries of insured employees and their insured dependent spouse/domestic partner.

Services that will be offered are a comprehensive one-on-one teleconference with a trained Ayco counselor. Ayco's financial counselor will address the surviving participant's estate-related and financial questions and concerns. Then the participant will receive an Ayco's *SurvivorSupport*® Reference Guide, which is meant to assist participants in getting organized and also acts as a valuable reference in the many areas of financial planning. Then shortly after the phone consultation, the Ayco financial counselor will mail a personalized financial plan to the participant.

Following the initial telephone counseling session, the participant has 12 months of toll-free access to Ayco's financial counselors to address questions and concerns as they arise.

### SAFETY-KLEEN VOLUNTARY LIFE RATES PER \$1000

payroll rates are based on 26 pay periods per year

age band	bi-weekly payroll rates
<30	\$ 0.042
30-34	\$ 0.051
35-39	\$ 0.060
40-44	\$ 0.092
45-49	\$ 0.143
50-54	\$ 0.212
55-59	\$ 0.346
60-64	\$ 0.508
65-69	\$ 1.038
70-74	\$ 1.435
75+	\$ 2.552

\* Note: If you are paid commissions, your coverage will normally be based on the targeted earnings for your job. In the event of your death, the insurance carrier would consider your actual base pay and commissions when determining the amount of benefit paid to your beneficiaries.

## EMPLOYEE VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT

Accident insurance benefits offer you and your family financial protection if you die or are injured as the result of an accident. Company-paid AD&D insurance will be provided at 100% of your salary. In addition, you may choose Voluntary AD&D for yourself, your spouse/domestic partner, and your eligible dependents when you are hired, if you have a qualifying event, or during open enrollment. Safety-Kleen provides voluntary AD&D insurance coverage that you may elect 1, 2, 3 or 4 times your annual salary to a maximum of \$500,000 of coverage. Voluntary AD&D family coverage provides a 60% benefit for your spouse and a 20% benefit for each eligible child (up to \$50K maximum). This benefit amount is based on your annual salary.

This election can be completed through your new-hire enrollment. No additional paperwork is required to make an election or change. The **bi-weekly Single Coverage Premium** is \$0.0102 per \$1,000 of coverage and the **Family Coverage Premium** is \$0.018 per \$1,000 of coverage.

### How to calculate **single** coverage:

Annual Salary\* – 40K  
Elect 4X – 160 units  
 $160 \text{ units} \times .0102 = \$1.63$  per paycheck cost  
 $\$1.63 \times 26 \text{ pay periods} = \$42.43$  annual cost

### How to calculate **family** coverage:

Annual Salary\* – 40K  
Elect 4X – 160 units  
 $160 \text{ units} \times .018 = \$2.88$  per paycheck cost  
 $\$2.88 \times 26 \text{ pay periods} = \$74.88$  annual cost

*\* Note: If you are paid commissions, your coverage will normally be based on the targeted earnings for your job. In the event of your death, the insurance carrier would consider your actual base pay and commissions when determining the amount of benefit paid to your beneficiaries.*

## VOLUNTARY DEPENDENT LIFE INSURANCE

You may elect a flat coverage amount for your spouse in the amount of \$10,000 and a flat \$2,000 per child and \$500 per child age birth to six months. This election can be completed through your enrollment form. No additional paperwork is required to make an election change.

### Coverage Amount:

- Spouse/domestic partner = \$10,000
- Child (each) = \$2,000 (\$500 birth to six months)

### Bi-weekly Premium:

- \$1.38, this premium is the same regardless if spouse/domestic partner only, one child only, or spouse/domestic partner and child(ren).

## CHOOSING A BENEFICIARY

If you die, it is necessary to have an accurate record of which beneficiaries should receive payments from your Life Insurance Plans. You may designate anyone you wish as a beneficiary, including one or more individuals.

When completing your new-hire benefits enrollment form there is a section for beneficiary designation. If you indicate more than one primary (or more than one contingent) beneficiary, each will share equally unless otherwise stated.

If you have not named a beneficiary, or if all named beneficiaries do not survive you, or if your named beneficiary is disqualified, your death benefit will be paid to your estate. UNUM has the right to make payment to the first surviving family members of the employee in the order listed, i.e. spouse/domestic partner, child or children, mother or father, or sisters or brothers.



# VOLUNTARY BENEFITS

whole life, accident and critical illness insurance options

## REMEMBER

The policy is owned by you. You can keep your coverage even when you retire or change jobs, as long as you continue the payment of premiums. Your rates and benefits are guaranteed to never increase, and benefits can never decrease!

## ACCIDENT INSURANCE

This insurance can help you recoup some of the costs incurred for non work related accidents. The voluntary accident insurance is designed to supplement employer-sponsored health coverage and will pay specific benefit amounts for expenses resulting from non-work related injuries or accidents.

Emergency room, physical therapy, intensive care, transportation and lodging are some of the out-of-pocket expenses that this accident insurance could cover. You do not have to be enrolled in the employer-sponsored medical plan to enroll in this benefit.

Accident coverage is available for the employee, their spouse and/or their child(ren). An optional rider may also be added which provides additional coverage for hospital confinement due to a covered sickness.

## CRITICAL ILLNESS INSURANCE

To assure your financial stability in times when an unplanned catastrophic life event occurs in your family, Safety-Kleen offers critical illness insurance.

Critical Illness insurance can help supplement major medical coverage by helping employees pay the direct and indirect costs associated with a critical illness or event. Conditions

covered under this program include: cancer, heart attack, stroke, major organ transplant, kidney failure and paralysis (due to accident). Benefits are paid tax-free in a lump sum ranging from \$10,000 - \$50,000 to be used at the claimant's discretion.

Additionally, the coverage also includes an annual health screening benefit.

## INTEREST BEARING WHOLE LIFE INSURANCE

Safety-Kleen offers protection for your family with a living and/or death benefits through an interest bearing whole life insurance policy.

The interest-bearing life insurance is more than death benefit to your beneficiaries, your premiums paid to the policies build up cash value that you can access for emergencies while living.

At an affordable premium, you can have the added financial protection you and your family may need during times of uncertainty. Additionally, coverage can be secured without a physical exam.

Coverage options are available for you, your spouse and/or your child(ren) and grand-child(ren).

**YOU CAN ENROLL IN ONE OF THE THREE VOLUNTARY PROGRAMS NOW. JUST CONTACT THE SAFETY-KLEEN BENEFITS DEPARTMENT AND A BENEFIT COMMUNICATION SPECIALIST WILL BE ABLE TO ASSIST YOU: 1-800-819-1012 OR EMAIL [hrbenefits@safety-kleen.com](mailto:hrbenefits@safety-kleen.com).**

# DISABILITY BENEFITS

short-term disability and long-term disability details

## SHORT-TERM DISABILITY

Your short-term disability (STD) benefits are a company-paid benefit designed to provide you continuing income if you cannot work because of accident, injury, illness that is not work-related or pregnancy.

You are considered disabled under this plan if you are unable to perform all of the material and essential duties of your own job. If you have a work-related disability, Workers' Compensation benefits will be primary.

### ABSENCES: ILLNESS OR INJURY

An eligible employee who expects to have an absence exceeding seven calendar days due to an illness or injury must submit to the Benefits department a disability application completed by the employee and their attending physician. There is a seven calendar-day waiting period before short-term disability wages begin. Employees must use unused sick days or accrued vacation days during the waiting period. Eligible employees will receive short-term

disability wages beginning on the eighth day. More in-depth procedures/policies in regards to short-term disability are located on the SafetyNet intranet site.

### PAYMENT AMOUNTS FOR SHORT-TERM DISABILITY

Short-term disability benefits are calculated from base pay and commissions (last three months average). If an employee is salaried, STD benefits are dependent on the employee's length of service. See below chart that reflects percentage of base pay based on length of service.

### PERCENTAGE OF BASE PAY INFORMATION

For hourly employees, STD is based on 60% of base pay earnings. For salaried employees, STD benefits are based on length of service with Safety-Kleen. Where applicable, any short-term disability payment(s) made by Safety-Kleen will be offset by the state disability plan. (View detailed chart below.)

QUALIFYING LENGTH OF SERVICE	SALARIED*	HOURLY*
Less than 3 months	80% of base pay for 1 week	Not eligible
	66 2/3% of base pay for 24 weeks	
More than 3 months, less than 1 year	80% of base pay for 1 week	60% of base pay
	66 2/3% of base pay for 24 weeks	
More than 1 year, less than 3 years	80% of base pay for 2 weeks	60% of base pay
	66 2/3% of base pay for 23 weeks	
More than 3 years, less than 5 years	80% of base pay for 4 weeks	60% of base pay
	66 2/3% of base pay for 21 weeks	
More than 5 years, less than 10 years	80% of base pay for 8 weeks	60% of base pay
	66 2/3% of base pay for 17 weeks	
More than 10 years of service	80% of base pay for 16 weeks	60% of base pay
	66 2/3% of base pay for 9 weeks	

\*There is a seven calendar-day waiting period before short-term disability wages begin. Employees must use unused sick days or accrued vacation days during the waiting period.

## LONG-TERM DISABILITY

If you are eligible for long-term disability, benefits under the LTD plan may be approved and begin if you are still totally disabled after 26 weeks of STD. Safety-Kleen automatically provides you with LTD coverage of 60% of your monthly earnings to age 65 up to a monthly benefit maximum of \$8,000. This benefit is paid entirely by Safety-Kleen.

### ELIGIBILITY

Hourly employees are eligible for LTD upon the completion of 3 months of employment. Salaried employees are eligible for LTD upon date of hire.

# 401(k)

## Savings Plan

### WHEN DOES MY FIRST 401(k) DEDUCTION COME OUT OF MY PAYCHECK?

*Below is an example:*

- Sept. 15 – hire date
- Dec. 1 – first of the month following 60 days (plan entry date).
- There is a three-week period after Dec. 1 in which employees can actively elect (more than/less than the automatic 4% deferral) or decline enrollment into the plan.
- Jan. 1 is the first of the month following the three-week period. The first paycheck in January should reflect the first 401(k) contribution.

### CAPTRUST

CAPTRUST is the investment consultant for the Safety-Kleen 401(k) plan. You may contact CAPTRUST at 1-800-967-9948 for additional information on the investment options.

For more information about the investment options available through your plan, call 1-800-562-8838 for a free prospectus that contains this and other information about the funds. Read the prospectus carefully before investing.

### ENROLLMENT IN 401(k) PLAN

As a part-time or full-time new hire you are eligible to enter the Safety-Kleen 401(k) plan the first of the month following your completion of 60 days of employment (otherwise known as your plan entry date). There will then be a three-week enrollment period following your plan entry date. You may enroll by going to [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement) or via phone through the Interactive Voice Response (IVR) by calling 1-800-562-8838. If you do not **actively enroll** or **decline** to enroll within the three-week enrollment period you will be **automatically** enrolled at a 4% deferral rate.

### DECLINING ENROLLMENT IN 401(k) PLAN

**If you wish to decline enrollment, you must call Prudential Retirement at 1-800-562-8838 during the three-week enrollment period** and identify yourself as a Safety-Kleen employee who would like to decline enrollment in the plan. You will need to provide your Social Security number and your date of birth to the representative. You may also go to the Web site [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement) to decline enrollment. You may do this anytime between your plan entry date and the end of the three-week enrollment period as described above.

You will also receive “Your Retirement Workbook” approximately 15 days prior to your plan entry date. This workbook will provide you with lots of information about the 401(k) plan and will also explain the default enrollment process as well as how to decline enrollment. It will be mailed to your home. Participant Services representatives are available Monday through Friday between 8 a.m. - 9 p.m. EST at 1-800-562-8838.

### MAKE YOUR OWN CHOICES

Take advantage of the opportunity to choose

your investments, select a beneficiary, and determine a deferral rate that’s appropriate for you. Read the Retirement Workbook delivered to your home and learn how the Safety-Kleen 401(k) Savings Planning can help you save for retirement. Your workbook also contains fund profiles that can help you decide which funds are right for you. If you do not make these plan choices, you are losing an important opportunity to structure your account according to your personal needs. By taking a few minutes to learn more about your plan and investments, you’ll be one step closer to meeting your retirement goals.

### BENEFICIARY DESIGNATION

Be sure to name your beneficiary designation. This will ensure that the beneficiary you have selected will receive the benefits from your plan in the event of your death. If no beneficiary is designated, then your account balance will go to your estate. In most cases the beneficiary designation may be established by calling Prudential. Or you may go online to [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement). Login in using your user ID and password. Click “view details” and under “other links” click “personal information”. In the middle of the screen there is a box that has a tab titled Beneficiary Information. This is where you may elect or change your beneficiary at any time.

### BENEFITS OF PARTICIPATING IN THE SAFETY-KLEEN 401(k) SAVINGS PLAN

It’s a great plan that offers many benefits — all designed to make saving for retirement easier than ever!

Features include:

- **Convenient payroll deductions.** Your contributions come out of each paycheck automatically and are deposited into your account.
- **Pre-tax savings means a tax-deferred advantage.** You defer paying taxes on

your contributions and earnings until you withdraw money from your account — usually at retirement.

Safety-Kleen has a discretionary matching contribution that has been suspended since 2009.

## VESTING

You will be vested in the Safety-Kleen matching contributions based on your years of service. After one year you will be 33% vested, after two years: 67%, and after three years: 100% vested.

## A VARIETY OF INVESTMENT OPTIONS

There are 13 investment options that range from conservative to aggressive.

You decide where your contributions are invested, which should be based on your investment requirements and personal tolerance for risk. You may also choose the GoalMaker portfolio. GoalMaker allows you to choose a pre-established model investment portfolio that's appropriate for your investor type and retirement time horizon. In addition, GoalMaker includes automatic rebalancing of your investments. Remember, if you do not want to participate in the 401(k) plan at all, you MUST take action. You may call 1-800-562-8838 or use the Web site [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement) to decline enrollment.

## REHIRED EMPLOYEES

If you are a rehired Safety-Kleen employee, you will need to enroll in the plan, as the "automatic enrollment" feature will not be applicable to you due to your rehire status. You may call 1-800-562-8838 or go to [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement) to enroll. You will receive a Retirement Planning Guide within a month of your rehire date. It will be mailed to your home.

**If you:** Were rehired and had not fulfilled the 60-day eligibility requirement during your prior employment period with Safety-Kleen, you will become eligible on the first of the month following 60 days after your rehire date. If you were rehired and had fulfilled the eligibility requirement before your previous separation of service from Safety-Kleen, you may immediately begin contributing.\*

If you currently maintain a Safety-Kleen 401(k) Savings Plan account (through Prudential Retirement), you may immediately begin contributing. If you have previously maintained a Safety-Kleen 401(k) Savings Plan account (through Prudential Retirement), even if you have taken a distribution, you may begin contributing immediately.\*

*\* If your gap in service is bridged then you will be eligible for the match after your combined service time (prior to rehire and after rehire) equals one year. If your gap in service is not bridged, then after one year of service, Safety-Kleen will add a matching contribution.*

**REMEMBER — ENROLLMENT IS AUTOMATIC FOR ALL NEW HIRES.  
IF YOU WISH TO DECLINE ENROLLMENT YOU MUST CALL  
PRUDENTIAL AT 1-800-562-8838.**

# VACATION

policy

## CALIFORNIA EMPLOYEES ONLY

In accordance with state law, California employees may carry over earned vacation time up to the amount of annual accrued vacation for which they are eligible. After an employee reaches his or her maximum accrual, he or she will no longer accrue vacation until previous accrued vacation has been used. Please refer to the California Vacation Policy on SafetyNet for more details.

## VACATION – USE IT OR LOSE IT

With the exception of California above, vacation must be scheduled and used during the calendar year when earned. There is no carry over of vacation to the next year and no year-end payment for unused days.

Safety-Kleen provides eligible employees time away from work in recognition of length of service. Regular, full-time employees are eligible for paid vacation days, and vacation time-off is based on a calendar year, which begins January 1 and ends December 31.

During an employee’s first calendar year of service, vacation allowance is accrued based upon the month of hire (see chart to the right).

HIRE DATE	VACATION ACCRUED
Jan. – June	40 hours
July	32 hours
August	24 hours
September	16 hours
October	8 hours
Nov. – Dec.	0 hours

The accrual of vacation is based on an eligible employee’s calendar years of service, and the allowance schedule is as follows (vacation is accrued January through October):

CALENDAR YEAR OF SERVICE	MAXIMUM VACATION ACCRUAL	ACCRUAL RATE PER MONTH OF SERVICE*
2 to 5 years	80 hours	8 hours to a max of 80 hours
6 to 10 years	120 hours	12 hours to a max of 120 hours
11 or more years	160 hours	16 hours to a max of 160 hours

For a more detailed description of the vacation policy please refer to Safety-Kleen’s intranet site SafetyNet. You may locate this policy by going to the SafetyNet site. As a new hire you will want to refer to this policy within your first month of employment.

\* Depending on service, employees accrue annual vacation at 8, 12, or 16 hours per month for the first 10 months of the year January through October.

# SICK TIME

policy

Safety-Kleen provides sick days on a calendar year basis to regular, full-time hourly and salaried employees. Sick time may be utilized for an employee’s personal illness as well as care for an immediate family member (who lives in the employee’s household). Sick time accrues at a rate of four hours per completed month of service up to an annual maximum of

40 hours per calendar year. Sick time may not be carried over from one year to the next, and payment in lieu of sick time is not allowed. Sick time taken in excess of five days will not be paid unless the employee chooses to take the time off as a vacation day and if the vacation day is available.

# U.S. HOLIDAYS

for 2010

Safety-Kleen offers nine paid holidays and one personal holiday to all full-time employees. Part-time employees (scheduled to work less than 30 hours per week) or temporary employees are not eligible. For a more detailed description of the paid holiday and personal holiday policies, please refer to Safety-Kleen's intranet site SafetyNet.

## 2010 HOLIDAY SCHEDULE FOR U.S. EMPLOYEES

New Year's Day	Friday, January 1
Memorial Day	Monday, May 31
Independence Day	Friday, July 5
(actual holiday falls on Sunday)	
Labor Day	Monday, September 6
Thanksgiving Day	Thursday, November 25
Day After Thanksgiving	Friday, November 26
Christmas Eve	Thursday, December 23
(actual holiday falls on Friday)	
Christmas Day	Friday, December 24
(actual holiday falls on Saturday)	

2 Personal Holidays\*                      used at employee's discretion (*scheduled/approved with management*). *Employees hired after July 1 are not eligible for a personal holiday during that calendar year.*

*\* Note for California Employees: Employees are encouraged to use the personal holiday in the year in which it is earned. California employees may carry over two personal holidays per year which is the allowable maximum personal holiday accrual. After you reach the maximum accrual, you will no longer accrue any additional personal holidays.*

### NOTE

Field management may designate an alternative holiday date to meet operating or business needs.

# FAQ

## Frequently Asked Questions

Below is a list of benefit questions from Safety-Kleen employees that are most commonly asked by new hires during their enrollment period. If you have other questions specific to your benefit situation please call the Benefits department at 1-800-819-1012 or e-mail [hrbenefits@safety-kleen.com](mailto:hrbenefits@safety-kleen.com).

**If my spouse has coverage available through his/her employer and we are covered under that plan as well as Safety-Kleen's healthcare plan how do the benefits coordinate?**

Coordination of Benefits (COB) rules under both the Safety-Kleen and other employer's plan determine which plan pays benefits first. Safety-Kleen's plan shall not be reduced when our plan determines its benefits before another plan, but may be reduced when another plan determines its benefits first (i.e., there is non-duplication of benefits).

**If I or my spouse is covered by Medicare which plan is the primary coverage?**

Medicare-eligible employees have special rules apply when they are covered by the Safety-Kleen plan and by Medicare. Generally the Safety-Kleen plan is a primary plan if you are an active employee, and Medicare is a primary plan if you are a retired employee.

**Safety-Kleen has a pre-existing exclusion in its healthcare plan. What does that mean?**

As long as you have been continuously covered for a period of 12 months under Creditable Coverage this time will be

counted against your pre-existing exclusion period. Pregnancy, conditions resulting from domestic violence, and genetic information without a diagnosis shall not be considered pre-existing conditions.

**When will I get my insurance cards?**

You will receive both medical and dental ID cards if you are participating in these programs. Typically, you can expect your card(s) approximately 2-3 weeks after your eligibility date. If you have not received your cards four weeks after your eligibility date, you will need to contact the provider directly to request new, replacement or additional cards. Refer to the back cover for the provider contact phone numbers.

**How can I request additional/replacement medical ID cards?**

Additional medical ID cards or replacement ID cards may be requested by logging on to the Blue Cross and Blue Shield Web site for Safety-Kleen [www.bcbstx.com/safetykleen](http://www.bcbstx.com/safetykleen) and then accessing the link for BAM (Blue Access for Members). Additional ID cards may also be requested by calling BCBS Customer Service at 1-866-834-3860.

**How can I request additional/replacement dental ID cards?**

Additional dental ID cards or replacement ID cards may be requested by logging on to the Delta Dental Web site [www.deltadentalins.com](http://www.deltadentalins.com) or by calling Delta Dental Customer Service at 1-800-521-2651.

**How can I request additional/replacement prescription ID cards?**

Additional prescription ID cards or replacement ID cards may be requested by logging on to the Caremark Web site [www.caremark.com](http://www.caremark.com) or by calling CVS Caremark at 1-866-329-3057.

**Where are the claim forms for Medical, Prescription, Dental and Vision located?**

All claim forms for Medical, Dental and Vision are located on Safety-Kleen's intranet site <http://safetynet>; click on "Employee Benefits" on the home page.

Instructions how to use this site are included in your new-hire materials.

Vision does not require a claim form if you go to a participating VSP provider.

If you do not go to a participating provider you must file a claim form yourself as an out-of-network provider.



# EMPLOYEE

## Discount Programs

Safety-Kleen offers the following programs and services at a discount for all of our employees:

PROGRAM NAME	DESCRIPTION	CONTACT INFORMATION
Campus Door	Campus Door provides undergraduate, graduate, and career loans, as well as financial-aid tools such as scholarship searches, practice ACT/SAT tests, college research tools, and financial aid advice.	Obtain information online at <a href="http://www.campusdoor.com">www.campusdoor.com</a> or by calling 1-877-205-0006.
Global Fit	Global Fit is a nationally recognized firm that allows you and your family to join fitness clubs at substantially discounted rates without long-term contracts. (All memberships are month-to-month.)	Enroll online at <a href="http://www.globalfit.com">www.globalfit.com</a> or by calling the toll-free Health Club Help Line at 1-800-294-1500.
Ford Supplier Recognition Program	The Supplier Recognition Program offers the ability to purchase or lease eligible vehicles at the Ford Motor Company X-Plan price.	Obtain more information online at <a href="http://www.fordpartner.com">www.fordpartner.com</a> or by calling 1-877-975-2600 and referencing our Supplier Code N2ESQ.
GM Supplier Partner Recognition Program	Since our company is an eligible GM supplier, it's easier than ever to enjoy extraordinary values on eligible new and unused models. Your participating GM dealer can provide exact pricing for the vehicles that interest you.	Obtain more information online at <a href="http://www.gmsupplierdiscount.com">www.gmsupplierdiscount.com</a> or by calling 1-800-960-3375 and referencing our Supplier Code 824614.
GMAC Mortgage	GMAC offers moving assistance, mortgage programs, home equity loans and lines of credit, and real estate services.	Obtain more information online at <a href="http://www.greatmovesbygmac.com">www.greatmovesbygmac.com</a> or by calling 1-877-844-GMAC.
Chrysler Affiliate Rewards Program	As a supplier to the Chrysler Group, all Safety-Kleen U.S. employees are eligible to purchase or lease select new Chrysler, Jeep, or Dodge vehicles at the Preferred Price (1% below factory invoice).	Obtain more information online at <a href="http://www.chrysleraffiliates.com">www.chrysleraffiliates.com</a> or by calling 1-888-444-4321 and reference our Supplier Code S88447.
MetLife Auto and Homeowners Insurance	U.S. part-time and full-time Safety-Kleen employees have available to them group auto and home insurance from MetLife Auto & Home®. This voluntary program allows each employee to apply to purchase quality group auto and home insurance at special group rates.	Obtain more information by calling 1-800-GET-MET8 (1-800-438-6388).
VIP Discount Membership Club (Tire Kingdom, NTB, Merchant's)	This program offers EXTRA savings off low prices at any of their 600 locations.	VIP Discount Cards are available through your facility management.
Brinks Home Security	This program offers \$49 standard installation, free second keypad installation, and a \$25 Target gift card for home security.	Obtain more information by calling 1-800-236-1954.
Dell Employee Purchase Program	Safety-Kleen has teamed up with Dell to bring Safety-Kleen employees great deals on Dell products.	Obtain information online at <a href="http://www.dell.com/eppbuy">www.dell.com/eppbuy</a> or by calling 1-800-695-8133 reference member code PS14730433.
Ameriprise Financial	Employees have available to them a workplace financial program through Ameriprise Financial.	Obtain information by calling 972-244-5818.
Recreation Connection	This program offers discount tickets to a variety of theme parks, movie theaters, water parks, plays and other entertainment attractions.	Obtain information online at <a href="http://www.recreationconnection.com">www.recreationconnection.com</a> or by calling 1-818-349-9820 and press 1.

# IMPORTANT NOTICE

about prescription drug coverage and Medicare



Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Safety-Kleen and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

**If neither you nor any of your covered dependents are eligible for or have Medicare, this notice does not apply to you or the dependents, as the case may be. However, you should still keep a copy of this notice in the event you or a dependent should qualify for coverage under Medicare in the future. Please note, however, that later notices might supersede this notice.**

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- Safety-Kleen has determined that the prescription drug coverage offered by the ("Plan") is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is considered "creditable" prescription drug coverage. This is important for the reasons described next.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to enroll in a Medicare drug plan, as long as you later enroll within specific time periods.

## ENROLLING IN MEDICARE - GENERAL RULES

As some background, you can join a Medicare drug plan when you first become eligible for Medicare. If you qualify for Medicare due to age, you may enroll in a Medicare drug plan during a seven-month initial enrollment period. That period begins three months prior to your 65th birthday, includes the month you turn 65, and continues for the ensuing three months.

If you qualify for Medicare due to disability or end-stage renal disease, your initial Medicare Part D enrollment period depends on the date your disability or treatment began. For more information you should contact Medicare at the telephone number or web address listed at the end of this notice.

## LATE ENROLLMENT AND THE LATE ENROLLMENT PENALTY

If you decide to *wait* to enroll in a Medicare drug plan, you may enroll later, during Medicare Part D's annual enrollment period, which runs each year from November 15 through December 31. But as a general rule, if you delay your enrollment in Medicare Part D, after first becoming eligible to enroll, you may have to pay a higher premium (a penalty).

If after your initial Medicare Part D enrollment period you go **63 continuous days or**

### **longer without “creditable” prescription drug coverage**

(that is, prescription drug coverage that’s at least as good as Medicare’s prescription drug coverage), your monthly Part D premium may go up by at least 1% of the premium you would have paid had you enrolled in a timely fashion, for every month that you did not have creditable coverage.

For example, if after your Medicare Part D initial enrollment period you go 19 months without coverage, your premium may be at least 19% higher than the premium you otherwise would have paid. You may have to pay this higher premium for as long as you have Medicare prescription drug coverage. *However, there are some important exceptions to the late enrollment penalty.*

### **SPECIAL ENROLLMENT PERIOD EXCEPTIONS TO THE LATE ENROLLMENT PENALTY**

There are “special enrollment periods” that allow you to add Medicare Part D coverage months or even years after you first became eligible to do so, without a penalty. For example, if after your Medicare Part D initial enrollment period you lose or decide to leave employer-sponsored or union-sponsored health coverage that includes “creditable” prescription drug coverage, you will be eligible to join a Medicare drug plan at that time.

In addition, if you otherwise lose other creditable prescription drug coverage (such as under an individual policy) through no fault of your own, you will be able to join a Medicare drug plan, again without penalty. These special enrollment periods end two months after the month in which your other coverage ends.

### **COMPARE COVERAGE**

You should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. See the Plan’s summary plan description for a summary of the Plan’s prescription drug coverage. If you don’t have a copy, you can get one by contacting us at the telephone number or address listed at the end of this notice.

### **COORDINATING OTHER COVERAGE WITH MEDICARE PART D**

Generally speaking, if you decide to join a Medicare drug plan while covered under the Safety-Kleen Plan due to your employment (or someone else’s employment, such as a spouse or parent), your coverage under the Safety-Kleen Plan will not be affected. For most persons covered under the Plan, the Plan will pay prescription drug benefits first, and Medicare will determine its payments second. For more information about this issue of what program pays first and what program pays second, see the Plan’s summary plan description or contact Medicare at the telephone number or web address listed at the end of this notice.

If you do decide to join a Medicare drug plan and drop your Safety-Kleen prescription drug coverage, be aware that you and your dependents may not be able to get this coverage back. To regain coverage you would have to re-enroll in the Plan, pursuant to the Plan’s eligibility and enrollment rules. You should review the Plan’s summary plan description to determine if and when you are allowed to add coverage.



# IMPORTANT NOTICE

about prescription drug coverage and Medicare

## REMEMBER!

Keep this Medicare Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and whether or not you are required to pay a higher premium (a penalty).

## FOR MORE INFORMATION ABOUT THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE

Contact the department listed below for further information. Or call the Safety-Kleen Benefits Department at 1-800-819-1012. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Safety-Kleen changes. You also may request a copy.

## FOR MORE INFORMATION ABOUT YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. If you are eligible for Medicare, you'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

## FOR MORE INFORMATION ABOUT MEDICARE PRESCRIPTION DRUG COVERAGE

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227)  
TTY users should call 1-877-486-2048

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call 1-800-772-1213 (TTY 1-800-325-0778).

Date: 09/15/2010

Name of Entity/Sender: Safety-Kleen

Contact-Position/Office: Safety-Kleen Benefits

Address: 5360 Legacy Drive

Building 2, Suite 100

Plano, Texas 75024

Phone Number: 1-800-819-1012

**Nothing in this notice gives you or your dependents a right to coverage under the Plan. Your (or your dependents') eligibility for coverage under the Plan is determined solely under the terms of the Plan.**

# IMPORTANT

## contact information

### PHONE NUMBERS AND WEB ADDRESSES

PLAN	ADMINISTRATOR	PHONE NUMBER	WEB ADDRESS
Medical Care Plan <ul style="list-style-type: none"> <li>◦ Blue Care Connection</li> <li>◦ 24-Hour NurseLine</li> <li>◦ Disease Management</li> <li>◦ Special Beginnings</li> </ul>	Blue Cross and Blue Shield of Texas	1-866-834-3860 1-800-462-3275 1-888-581-0368 1-800-462-3275 1-800-462-3275	<a href="http://www.bcbstx.com/safetykleen">www.bcbstx.com/safetykleen</a>
Vision Care Plan	Vision Service Plan	1-800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
Dental Choice (Dental PPO)	Delta Dental	1-800-521-2651	<a href="http://www.deltadentalins.com">www.deltadentalins.com</a>
Prescription Drug Plan	CVS Caremark	1-866-329-3057	<a href="http://www.caremark.com">www.caremark.com</a>
Prescription Drug Mail-Order Program	CVS Caremark	1-866-329-3057	<a href="http://www.caremark.com">www.caremark.com</a>
Mental Health Care Plan	Blue Cross and Blue Shield of Texas	1-800-528-7264	<a href="http://www.bcbstx.com/safetykleen">www.bcbstx.com/safetykleen</a>
Flexible Spending Accounts	Conexis	1-866-279-8385	<a href="http://www.conexis.org">www.conexis.org</a>
Employee Assistance Program	LifeEra	1-866-638-5709 (TDD: 1-866-216-9926)	<a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a>
COBRA	Conexis	1-877-722-2667	<a href="http://www.conexis.org">www.conexis.org</a>
401(k)	Prudential Financial	1-800-562-8838	<a href="http://www.prudential.com">www.prudential.com</a>
Support for investment information as it relates to 401(k)	CAPTRUST	1-800-967-9948	
Dependent Audits	Consova	1-866-797-2055 Fax: 303-951-3404	
Employee Discount Programs* * more programs can be found on SafetyNet <ul style="list-style-type: none"> <li>◦ Advancial Credit Union</li> <li>◦ GlobalFit</li> <li>◦ Recreation Connection</li> </ul>	Safety-Kleen	1-800-819-1012	E-mail: <a href="mailto:hrbenefits@safety-kleen.com">hrbenefits@safety-kleen.com</a>
Benefits Department	Safety-Kleen	1-800-819-1012	E-mail: <a href="mailto:hrbenefits@safety-kleen.com">hrbenefits@safety-kleen.com</a>

This New-Hire Enrollment Guide presents a summary of the Safety-Kleen benefit plans. If there are any discrepancies between this document and the official plan documents upon which the Plans are based, the Plan documents will govern. Safety-Kleen reserves the right, at anytime without notice, in the company's sole discretion, to change, amend, modify, or terminate the plans and benefits mentioned in this guide.

