



live well



Your 2011 Benefits Enrollment Guide
for all non-union associates and Territory Leads

Live Well

American Greetings understands the importance of providing associates with quality benefits at a good value. That's why we offer a variety of health, wellness, insurance and retirement savings programs designed to help you and your family live well. Review these materials, investigate your options and talk with your family so you can select the options that are right for you. It is worth investing time to find out how our programs can help you improve your health, save time and save money.

Eligibility

In general, you are eligible for certain company-sponsored health plans, insurance and other programs as described in this guide if you are a:

- » Regular full-time active associate working more than 35 hours a week on the regular payroll;
- » Regular part-time active associate working at least 20 hours but no more than 35 hours a week on the regular payroll;
- » Territory Lead (*excluding short-term disability, flexible spending accounts and retirement plans*).

Your personalized enrollment worksheet explains the plans you are eligible to choose from and your costs for coverage.

You may also enroll your eligible dependents, including:

- » Your spouse or same-sex partner;
- » Your children up to age 26 (*in medical only*);
- » Your otherwise-dependent children to the age of 19, or 23 if a full time student (*in dental and vision*).

You can find complete eligibility rules for associates and dependents for all AG benefit plans on the AGBenefits website.



Smart Tip!

Your open enrollment “to do” list should also include:

- » Updating your life insurance and Retirement Profit Sharing and Savings Plan beneficiaries, if needed.
- » Revisiting how you're saving for retirement—are you contributing at least 6% of your eligible pay to maximize the company contribution? Visit www.vanguard.com to review your account.

When Do I Need to Enroll?

You will need to make choices about which benefits you'd like to participate in during open enrollment or when life changes.

During open enrollment

- » **Enroll** in or make changes to your benefits during the open enrollment period each fall.
- » **In general, your elections or changes become effective January 1** of the following year unless you are no longer eligible for benefits. Certain benefits such as life, AD&D and disability require “actively at work” status and may require evidence of insurability for your coverage to become effective. This will be noted on your enrollment worksheet.
- » **If you do not make changes or enroll in benefits during open enrollment**, you will continue to receive your current year's elections for yourself and your covered dependents as listed on your enrollment worksheet. You *will not* participate in any flexible spending accounts (FSAs) since you must re-enroll each year to contribute to these plans. Health savings account (HSA) payroll deductions will also not continue without re-election during open enrollment.

When life changes

- » You may make certain allowable changes to your benefits only if you experience a qualifying life event or HIPAA special enrollment event, such as a marriage or birth of a child. These changes must be made within 30 days (or 60 days under CHIPRA) of the event. If you wait longer, you will not be able to make changes until the next open enrollment period.



Take Note!

Important Changes Resulting from the Patient Protection Act

From November 1–November 30, 2010, you will be able to re-enroll yourself or your adult children up to age 26 into AG medical plans if:

- » You lost eligibility when your health care costs reached the plan's lifetime limit.
- » Your adult child(ren) lost eligibility for our medical plan when they turned 19, were no longer a full-time student or when they turned 23.

See the important legal notices in your enrollment packet for more details about your rights and how to re-enroll yourself or your adult dependents.

Understanding Your Benefits

American Greetings benefit programs help keep you healthy, protect you in case of serious illness or injury and help you save for the future. Get the most out of your benefits by being a smart consumer and making smart choices—now and throughout the year. Take advantage of company wellness programs and incentives designed to improve your health and save you money. After all, your good health is good for all of us.

Your Costs for Coverage

Some of the benefits offered to you are paid for by AG, some require you to contribute and others require you to pay the full cost. Your actual costs for coverage depend on the plans you choose and the number of people you cover, such as your spouse, same-sex partner or child(ren).

Medical

All of American Greetings high-quality medical plans provide you with the preventive care you need to live well and comprehensive coverage to protect you in case of a serious accident or illness. All plans include coverage for prescription drugs. Administrators for each of the plan options may vary, depending on your location (UHC, Anthem or Medical Mutual).



Things to Consider

The plans cover many of the same services, but they differ in cost, deductibles, copays or coinsurance and delivery of care. The right fit depends on your personal situation and your budget. Here are some things to consider:

- » How many people do you need to cover? Only yourself, or you and your family?
- » Are your doctors and service providers in the plan's network?
- » Do you anticipate any major health care expenses?
- » Are you paying too much every month for insurance you're not using?
- » Do you want an option to save for future medical expenses?
- » Are you ready to save on monthly premiums and take more control over how you use your health care with one of the Consumer Plans?



Medical Plan Snapshot

Enter your costs for coverage from your personalized enrollment worksheet to see how the plans compare.

Medical Plan	Consumer Plan (formerly known as CDHP low)	Enhanced Consumer Plan (formerly known as CDHP high)	Traditional Plan (formerly known as PPO)	Network Only Plan (formerly known as EPO)*
Plan Features				
How much will I pay per month? You may also be responsible for a spousal surcharge of \$200 each month.	Monthly contribution \$_____	Monthly contribution \$_____	Monthly contribution \$_____	Monthly contribution \$_____
Do I have to use a network doctor?	No, you can use providers outside the network	No, you can use providers outside the network	No, you can use providers outside the network	Yes, you must use network providers
Is out-of-network care covered?	Yes, but you pay more	Yes, but you pay more	Yes, but you pay more	No (except in certain emergencies)
Health savings account You can use your health savings account (HSA) to pay for your eligible health care expenses including your deductible.	Yes AG contributes \$300 single/ \$600 family	Yes AG contributes \$500 single/ \$1000 family	No HSA	No HSA
What's my annual in-network deductible?	\$2,000 single/ \$4,000 family**	\$1,200 single/ \$2,400 family**	\$500 individual/ \$1,500 family	\$500 individual/ \$1,500 family
What is my in-network coinsurance after the deductible?	You pay 15%	You pay 10%	You pay 15%	You pay 15%
How is in-network preventive care covered? Preventive care is not subject to your deductible.	100% coverage	100% coverage	100% coverage	100% coverage
What's my annual out-of-pocket maximum for in-network coverage? This includes deductible, coinsurance and Rx out-of-pocket amounts.	\$2,500 single/ \$6,000 family	\$2,000 single/ \$4,000 family	\$3,750 single/ \$8,750 family	\$3,750 single/ \$8,750 family

* The Network Only Plan will be discontinued in 2012.

** When you choose family coverage under the Consumer Plans, you must meet the family deductible before the plans share costs with you. Does not include preventive care, which is covered 100%.

Key Terms

Annual deductible: The amount you must pay before the plan will begin paying for eligible expenses.

Network: A defined group of providers that supply health care services, usually at a discounted rate.

Out-of-pocket maximum: The highest or total amount your plan requires you to pay towards the cost of your health care. Once you reach your out-of-pocket maximum, the plan pays 100%.



Spend less every month by ...

Being tobacco free

- » Non-tobacco users pay 10% less for medical coverage.

Completing the confidential online health risk assessment (HRA)

- » When you do, you'll earn a **\$150 credit** (divided by pay period) toward your monthly plan contributions.
- » **NEW FOR 2011!** You can earn an **additional \$60 credit** if your enrolled spouse also completes the HRA.
- » **Complete it by December 10, 2010**, to receive the credit in your first 2011 paycheck.
- » **Take it after December 10, 2010**, and you'll receive the per pay period credit (prorated) as soon as administratively possible (generally within 30 days). Access the HRA from the AGBenefits website.

Four things you should know about the HRA

- 1 Your results are confidential.** American Greetings receives only summary data, never any reports that include individual data.
- 2 OptumHealth, our wellness/disease management vendor, receives your results** and may follow up with you to offer additional information or support. Results do not become part of your medical record and you can opt out of participation in third-party wellness programs.
- 3 Your results do not affect your plan choices or your premiums**, but participation does reduce your overall costs.
- 4 You don't have to answer every single question if you are uncomfortable.** Although your results will not be as complete, you have the option to leave some answers blank if you are uncomfortable providing certain details.

Get More from your Health Care Benefits with AG Consumer Plans

The Consumer Plan and Enhanced Consumer plan work a lot like the Traditional Plan.

You have ...

- » **Flexibility** to see any doctor and receive benefits if you use in-network or out-of-network doctors or hospitals.
- » An **annual deductible** you must meet before you and the plan share costs.
- » **Discounted rates** for service that have been negotiated with the providers—you're not paying retail.
- » **Limits** on the total amount you'll have to spend each year—your out-of-pocket maximum.

But now with the Consumer Plans, you also get ...

- » **Lower monthly contributions.** The Consumer Plans cost you less per month—period. On the flip side, you'll assume a little more responsibility for out-of-pocket costs in the form of your annual deductible and coinsurance, up to the out-of-pocket maximum.
- » **Help building a nest egg** for health care expenses. When you choose one of the consumer plans, you can open a tax-advantaged health savings account (HSA), administered by OptumHealthBank. Use it to pay for eligible health care expenses that count toward meeting your deductible. Contribute to the account with pretax payroll contributions up to IRS limits: \$3,050 for single coverage and \$6,150 for family coverage (includes company contribution). If you are age 55 or older and not covered by Medicare, you may be eligible to make an additional catch-up contribution of up to \$1,000 for 2011.
- » **Free money from AG.** The company contributes to the account, too. You receive between \$300 and \$1,000, deposited in full in January (see medical plan snapshot on page 3). That means you have access to the funds right away.
- » **Help paying for preventive drugs.** Starting in 2011, preventive drugs are not subject to your annual deductible, so the plan will share the cost of these drugs immediately. Preventive drugs include those for treating high blood pressure, high cholesterol, heart disease, diabetes and other conditions. Get the complete list on the AGBenefits website.



Smart Tip!

Save money on prescription drugs when you ...

- » Go to an in-network pharmacy to get the best price. Find pharmacies through your plan's website or by calling Member Services.
- » Buy generic drugs when available—the copays for generic drugs are always lower.
- » Use the mail-order service for maintenance prescriptions.



What's a health savings account?

Health savings accounts (HSAs) are like checking accounts that allow you to pay for health care expenses now or save for future health care expenses with pretax dollars. You own the account—you even take it with you if you leave AG.

Unlike a flexible spending account, your balance rolls over from year to year earning interest, which can help your money grow over time. It's also triple tax advantaged. Not only are your contributions into the account pretax and your payments out of the account not taxed, but your earned interest on the account grows tax free. You pay for expenses with a convenient debit card. Be sure to keep your receipts—the IRS may request that you show proof of how you used your tax-free money.

Important!

- 1 **You must open the account yourself.** If you don't, you'll miss out on the contribution from AG. Log on to the AGBenefits website and click the "Open an HSA" link to open your account after you enroll in one of the Consumer Plans.
- 2 **Use your balance just for eligible expenses.** You can't take a loan from your HSA. If you use the money in your account to pay for non-eligible expenses, those funds will be subject to income tax and may also be subject to a 20% penalty tax. You can find the list of qualified expenses at www.irs.gov.

How do the Consumer Plans and the HSA work together when I need to pay for services?

Preventive Care

The plan pays 100% in-network, without having to satisfy a deductible. You pay nothing when you receive eligible preventive care services from in-network providers.

1

Deductible

You pay 100% until bills total the deductible amount.

2

Cost Sharing

After meeting your deductible, you pay 10–15% of your bills for doctors, surgeries, lab tests, x-rays, etc. The plan picks up the rest.

3

Full Coverage

The plan pays 100% of your costs, once your portion of your annual medical bills adds up to the out-of-pocket maximum.

Health Savings Account

You can save tax free and use the money toward your eligible expenses, including your deductible and cost sharing. Or let it grow for the future. You also get FREE money from AG, deposited in January.



Vision

American Greetings offers vision coverage through EyeMed Vision Care to help you save money on eye exams and eyewear, like glasses and contact lenses. Your rates for coverage are included in your personalized enrollment worksheet and you pay the full cost of this coverage. The dental/vision plan comparison chart in your enrollment packet and on the AGBenefits website provides a full view of covered services, copays or coinsurance and plan contact information.



Did You Know?

People who brush their teeth at least twice per day are 30% less likely to develop heart disease.*

** British Medical Journal*

Good dental health is a cornerstone of your total health. So be sure to get your annual cleanings and checkups!

Dental

You have two dental options available to you that cover routine checkups and other types of dental care. Your rates for coverage are included in your personalized enrollment worksheet and you pay the full cost of this coverage.

Highlights

- » Your dental elections are effective for two years. For example, any elections you make during the 2011 open enrollment period will be effective in 2011 and 2012.
- » The preferred provider organization (PPO) option through MetLife gives you the freedom to select any dentist and you can receive benefits in-network and out-of-network. You receive higher benefits when you choose in-network providers.
- » The dental maintenance organization (DMO) option through Aetna is designed for in-network coverage with only nominal out-of-network coverage on select services. If you choose to go to a dentist who is not in the network, you may not receive benefits from the plan and may be responsible for the full cost of the service.

The dental/vision plan comparison chart in your enrollment packet and on the AGBenefits website provides a full view of covered services, copays or coinsurance and plan contact information.

Flexible Spending Accounts

Save money tax free and use it to pay for health care and dependent care expenses by participating in either or both of the flexible spending accounts (FSAs), administered by ADP. You contribute money into these accounts on a pretax basis and receive reimbursement for eligible out-of-pocket costs. If you are enrolled in a health savings account (HSA), you are eligible to enroll only in the "limited purpose" health FSA (that does not cover medical or prescription expenses). Opening an HSA does not affect your eligibility to open a dependent care FSA.

card from ADP to pay for eligible health care expenses at the point of service. **If you use the debit card, you must retain receipts and submit copies to ADP or the card will be frozen.**

- » Contribute up to \$5,000 each year to your dependent care FSA to pay for eligible daycare. You'll pay for these services yourself and submit a claim for reimbursement.

More details

- » Get more information about how the FSAs work at www.americangreetingsbenefits.com.
- » Get a complete list of eligible expenses for the health care or dependent care FSA on the IRS website at www.irs.gov.
- » Manage your account online at www.flexdirect.adp.com.

Highlights

- » Contribute up to \$3,500 each year to your health care FSA and use the balance to pay for eligible expenses that are not covered by another medical, dental or vision plan. You'll receive a debit

Important FSA Rules

- » You must re-enroll each year to participate. Your FSA elections do not carry over.
- » Plan your contribution amount carefully! You may not change your elected amount after the open enrollment period and the IRS requires that you forfeit any money left in your accounts after all eligible expenses have been reimbursed.
- » Over-the-counter drugs are not eligible for reimbursement from your health care FSA beginning January 1, 2011, unless prescribed by a doctor.
- » Expenses must be incurred between January 1, 2011 (or the date that you are first enrolled in the plan), and December 31, 2011, to be eligible. Claims for reimbursement from your 2011 account balance must be filed no later than March 31, 2012.



Life, Accidental Death and Dismemberment (AD&D) and Disability

Life and AD&D Insurance

Eligible full-time employees are automatically covered in basic life and AD&D for \$25,000 (part-time for \$8,500). American Greetings pays the full cost. Life insurance and AD&D insurance provide financial protection for you and your family. You may purchase additional coverage under the optional life and AD&D insurance plans of up to five times your eligible pay. The maximum combined basic life and optional life coverage is \$1 million. The maximum combined basic and optional AD&D coverage is \$1 million.

When you purchase optional life insurance coverage, you will be required to provide evidence of insurability (EOI), sometimes called proof of good health, for:

- » Coverage in excess of \$500,000;
- » Coverage greater than three times your eligible pay;
- » Increases of more than one level (for example, from one times salary to three times salary) during open enrollment or upon a qualified life event.

The online enrollment system will prompt you to complete the EOI form when applying. Coverage becomes effective after approval by the carrier and you are actively at work.

You may also purchase dependent coverage:

- » Dependent life—for your spouse up to \$25,000 and children up to \$10,000;
- » Optional accident coverage for your spouse and children.

Disability

Short-Term Disability

Short-term disability (STD) is provided for eligible full-time and part-time associates. Short-term disability provides a percentage of your pay depending on your years of service and length of disability. STD ranges from three weeks to 26 weeks.

Long-Term Disability

- » *For full-time exempt associates:* You receive company-paid basic LTD coverage of 50% of your eligible pay, up to a maximum benefit of \$7,500 per month. You may purchase additional LTD coverage of 66 2/3% of your eligible pay, up to a maximum benefit of \$10,000 per month.
- » *For full-time and part-time nonexempt, part-time exempt associates and Territory Leads:* You may purchase coverage for yourself of 50% or 60% of your eligible pay, up to a maximum of \$3,000 per month. You pay the full cost of the coverage.

An EOI form is required when you enroll or if you request optional coverage outside of your initial eligibility. The online enrollment system will prompt you to complete the EOI when applying. Coverage becomes effective after approval by the carrier and you are actively at work.



Retirement Profit Sharing and Savings Plan

Participating in the American Greetings Retirement Profit Sharing and Savings Plan, administered by Vanguard, is one of the best things eligible associates can do to save for the future. It's easy with pretax payroll deductions. You are automatically enrolled when you become eligible to participate at a pretax contribution of 3% of your eligible pay unless you contact Vanguard. *(Note: Merchandisers, Territory Leads, leased associates, independent contractors and certain union associates are ineligible.)*

Highlights

- » **You choose how much to contribute.** You can contribute from 2% to 50% of your pay on a pretax basis up to the IRS limits.
- » **Company contributions.** When AG achieves certain financial goals, it may match 40% of your contribution up to 6% of your eligible earnings. AG may also make a profit sharing contribution to your account. The match is contributed to your account annually during the second quarter of the following plan year. You must have worked 1,000 hours during the year and you must be employed by AG on the last day of the plan year (December 31) to qualify for the company matching contribution and profit sharing contribution, if made.
- » **Lower taxes.** Your contributions come out of your paycheck before federal and state taxes are taken out. This reduces your taxable income so you pay less in taxes.
- » **Convenient payroll deductions.** You decide how much of your pay you want to contribute to the plan, and the deduction is taken out automatically each pay period.
- » **Broad investment choices.** The plan offers a variety of professionally managed funds and you choose how your contributions are invested. Log on to Vanguard's website or call Vanguard to speak with a representative for more details.
- » **Portable benefit.** If you leave AG, you can roll over your balance into another company-sponsored retirement savings or tax-qualified retirement plan.

More details

- » See plan highlights and more detailed information about the plan on the AGBenefits website.
- » Manage your account, make changes to how your money is invested and update your beneficiaries by contacting Vanguard at www.vanguard.com or 1-800-523-1188.



Did You Know?

To replace 75% to 85% of your current salary in retirement, you'll need to save 10% to 20% of your income annually.

**Are you saving enough for retirement?
It's time to review your contributions.**





Other Programs

In addition to your health and insurance benefits, you can participate in these valuable programs at any time during the year.

Employee Assistance Program (EAP)

The employee assistance program (EAP) provides free assistance and information to all benefits-eligible associates, including referrals and short-term counseling for personal issues affecting work or personal life. Referrals are available for childcare services, legal consultations, older adult services and career management.

Contact the EAP at 1-800-397-9249 or log on to www.liveandworkwell.com (access code = amgreetings). A Spanish-language version is available by clicking “Español” from the website.

Other Group Programs

Group Legal. Low-cost insurance plan through MetLife Group Legal that provides access to experienced attorneys for help with a wide range of services such as preparation of wills, living wills, living trusts, the sale or purchase of your primary residence, civil litigation defense, debt collection defense and identity theft defense.

Group Discount Auto and Homeowners. Insurance coverage for your home, auto, rental properties, boat and more at discounted group rates, along with a choice of payment options to suit your needs. Contact MetLife Auto & Home for more information at 1-800-438-6388.

Wellness Programs

American Greetings wellness programs provide you with tools and resources for general health education and to help you take steps toward disease prevention and early detection. They are also designed to help you manage a condition you may already have.

Confidential health risk assessment (HRA). An online assessment administered by OptumHealth to help you understand the current state of your health and identify risks that require your action. Access it from the AGBenefits website.

Disease Management. Partners with your physician(s) to help you manage chronic and acute health situations such as diabetes, asthma, lower back pain, weight complications and heart disease. Administered by OptumHealth.

Online tools and resources. A wide variety of information, tools and resources to help you learn about and manage your health. Log on to www.myoptumhealth.com.

Enrollment: What You Need to Do

Getting Ready to Enroll

Each of us must become smart shoppers when we “buy” health care coverage and services. That means doing our homework, comparing options and buying based on quality and price. It also means thinking ahead to the future and making sure personal information is up to date. As you get ready to make important health and insurance decisions, be sure you:

- 1 **Use available tools to help you understand and compare your options:**
 - » *The personalized enrollment worksheet and medical/prescription drug and dental/vision comparison charts* included in this packet—see your costs for coverage and the plans you are eligible for.
 - » *The AGBenefits website*—learn more about flexible spending accounts, the health savings account and all of the other plans and programs available to you.
 - » *The open enrollment video* included in this packet—get an overview of the plans and HSA, along with instructions on how to enroll.
 - » *Plan provider websites*—find a doctor in your medical plan and access other tools and resources.
- 2 **Verify (and update) your personal information. Make any necessary corrections to your birth date or home address:**
 - » Plant associates should contact their local HR Manager or Coordinator.
 - » All other employees should submit a request to AG Shared Services via Outlook.



How Do I Enroll?

To enroll online:

Go to the AGBenefits website accessible from imAGine (click AGBenefits) or from any computer at

www.americangreetingsbenefits.com

- 1 Click “2011 Open Enrollment.”
- 2 Click “Take My Health Risk Assessment” and when you’re done, return to the AGBenefits website.
- 3 Click the “AGBenefits Solution Center Online” link to access the online enrollment system.
- 4 Log in with your user name and password:
 - » Your user name is “e00” followed by your five-digit associate ID number. Example e0012345. You’ll find your associate ID number on your pay stub.
 - » Your password will be reset on November 1, 2010, to your two-digit birth month and the last two digits of your birth year. For example, if your birth date is December 16, 1972, your password will be 1272.
- 5 Follow the instructions on the left side of the screen for details on how to enroll in benefits and confirm your elections. Once you log out you will not be able to re-enter the system to make changes. To make changes to your initial open enrollment election within the open enrollment period, call the AGBenefits Solution Center.
- 6 Print a copy of your confirmation statement for your records.
- 7 Click “Open HSA” (if you enroll in one of the Consumer Plans).

Trouble accessing the system? Want to enroll by phone?

Call the AGBenefits Solution Center at 1-877-213-6240. Representatives are available to assist you Monday through Friday from 8 a.m. to 6 p.m. EST. During open enrollment (November 1–12, 2010) the AGBenefits Solution Center will be available Monday through Friday from 6 a.m. to 9 p.m. EST and Saturday (November 6) through Sunday (November 7) from 11 a.m. to 4 p.m. EST.

Enrolling dependents?

If you’re enrolling dependents, be sure to have their names, birth dates and Social Security numbers handy before you start the process. After the close of open enrollment, you will receive a letter requesting proof of eligible dependent status. If you don’t submit adequate documentation within the required timeframe, coverage for the associated dependents will not become effective.

What to Expect after Enrollment

- » **Review your confirmation statement.** Print a copy from the enrollment system. A statement from ADP will be mailed to your home around the end of November. If any information is incorrect or you have questions, contact the AGBenefits Solution Center. Keep your confirmation statement in case you need to use it as proof of coverage. If you do not enroll or make changes, you will still receive a confirmation statement.
- » **Open your health savings account (HSA).** If you enroll in either of the Consumer Plans, you must open a health savings account (HSA) in order to receive the company contribution from American Greetings—\$300 to \$1,000.
- » **Watch for ID cards.** You’ll receive new medical ID cards if you enroll for the first time in medical coverage, change medical plans or add dependents. If you don’t receive your new ID cards as expected, call your medical plan provider directly. If you need to see a doctor before your ID card arrives, use your confirmation statement as proof of coverage. You may also be able to print a copy of your ID card from your plan’s website. You will not receive an ID card for dental or vision coverage. You will not receive a new Caremark ID card unless you are a new enrollee.



Your Benefits Resources

Want details about the plans or want to use tools to help you compare and choose your plans?

Visit the AGBenefits website from imAGine (click AGBenefits) or from any computer at www.americangreetingsbenefits.com

Ready to enroll?

Open enrollment is November 1 through November 12. Go to www.americangreetingsbenefits.com to access the online enrollment system or call 1-877-213-6240. During open enrollment (November 1–12, 2010), the AGBenefits Solution Center will be available Monday through Friday from 6 a.m. to 9 p.m. ET and Saturday (November 6) through Sunday (November 7) from 11 a.m. to 4 p.m. ET.

Want to find information or access resources to manage and improve your health?

Go to www.myoptumhealth.com

Want to manage your Retirement Profit Sharing and Savings account?

Go to www.vanguard.com, plan #091997

Want to open or manage your health savings account (HSA)?

Go to www.optumhealthbank.com (use AG group #199947 when you open your account)

Want to manage your flexible spending account (FSA)?

Go to www.flexdirect.adp.com

Need other benefit web addresses and phone numbers?

Go to www.americangreetingsbenefits.com

ABOUT THIS GUIDE

This Benefits Guide briefly describes your benefit choices and your options to enroll. The guide is not intended to be a complete description of the company's benefit plans and it is not a summary plan description or plan document. In the event of any conflict or discrepancy between this guide and the plan documents, the plan documents will govern. Get more detailed information about your benefits and see copies of legal notices on the AGBenefits website. You can request paper copies of legal notices by calling the AGBenefits Solution Center.

All benefits and your eligibility for benefits are subject to the terms and conditions of the benefit plans, including group insurance contracts. American Greetings reserves the right to modify or terminate any of the described benefits at any time and for any reason. This guide is not a guarantee of current or future employment or benefits.

